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Form **990** 

Revenue Procedure 2014-11, Retroactive Reinstate ment omb No 1545-0047

**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)

Department of the Treasury Internal Revenue Service

▶ The organization may have to use a copy of this return to satisfy state reporting requirements. - 07/01, 2012, and ending

Open to Public Inspection

	A F	or the	2012 calendar year, or tax year beginning 07/01, 2012, and er	nding		06/30,2	0 1 3		
			C Name of organization		D Employer ide	ntification nur	nber		
2018	Всь	eck if applic			45-4199	978			
		Address							
4	$\vdash$	change	Number and street (or D.O. hours mail to not delivered to street address). Posmicu	ıte.	E Telephone nu	mber			
<b>=</b>	-	Name ch	140E AMIL AVE CH		(319) 352-2087 EXT 162				
JAN	<u></u>	Initial ret			(319) 332	2007 E	5K1 102		
7,	ļ	Terminat	•		,		101 020		
سي	-	Amended	WINTERELLY III SOOT.		G Gross receipts		191,039.		
CATE CATE	X	Applicati pending	· Name and address of principles and a large and a lar		H(a) is this a group affiliates?	return for	Yes X No		
52			1207 PARK AVE NW WAVERLY, IA 50677		H(b) Are all affiliate	L	Yes No		
2 S	<u> </u> 1	Гах-ехел	npt status: X   501(c)(3)   501(c) ( ) ◀ (insert no )   4947(a)(1) or	527	If "No," attach	a list (see instru	ictions)		
ENVELOP STHIARK	J	Nebsite:	: ▶ N/A		H(c) Group exempt				
S	K	orm of	organization X Corporation Trust Association Other ▶ L Ye	ear of format	ion 2012 M s	State of legal d	omicile IA		
\$E.F	Pai	rt I	Summary						
	$\neg$	<b>1</b> B	Briefly describe the organization's mission or most significant activities						
		Т	TO PROMOTE AND SUPPORT THE GROWTH AND DEVELOPMENT OF	ics					
	2	Ā	AND STUDENT ATHLETES IN THE WAVERLY-SHELL ROCK COMMUN	VITY					
	E	s	SCHOOL DISTRICT.						
	Activities & Governance	_	Check this box  if the organization discontinued its operations or disposed of more	e than 25%	of its net assets	- <b></b>			
	Ö		lumber of voting members of the governing body (Part VI, line 1a)		,	3	31.		
	S.		lumber of independent voting members of the governing body (Part VI, line 1b)		<del>.  </del>	4	31.		
	₩		otal number of individuals employed in calendar year 2012 (Part V, line 2a)			5	0		
	딇				<sub>!</sub> -	6	200.		
	٩		Total number of volunteers (estimate if necessary)		<del></del>				
			otal unrelated business revenue from Part VIII, column (C), line 12		,	7a			
-		b N	Net unrelated business taxable income from Form 990-T, line 34	<del>· · · · ·</del>	Prior Year	7b	rrent Year		
	ł				75,85		65,980.		
	9		Contributions and grants (Part VIII, line 1h)		15,65	<u> </u>	03,900.		
	Revenue		Program service revenue (Part VIII, line 2g)		20	<del>_</del>			
	Ş.		nvestment income (Part VIII, column (A), lines 3, 4, and 7d)	• •	28		160.		
	- [		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		37,78		27,823.		
		12 T	otal revenue - add lines 8 through 11 (must equal Part VIII, celumn (A), line 12)		113,92		93,963.		
	- 1	<b>13</b> G	Grants and similar amounts paid (Part IX, column (A) lines 123)		75,93	9.	83,591.		
		14 B	Benefits paid to or for members (Part IX, column (A), line 4)			0	0		
	ģ	<b>15</b> S	Salaries, other compensation, employee benefits Part (XA column (A), lines 5-19)			0	0		
	Si	16a P	Professional fundraising fees (Part IX, column A) Ine 11e)	L		0	0		
	Expenses	bТ	Total fundraising expenses (Part IX, column (D), line 20)	[			<u> </u>		
	ŭ)		Other expenses (Part IX, column (A), lines 11a 11d 11d 11f-24e)		18,57		29,265.		
	)		Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		94,51	8.	112,856.		
	1		Revenue less expenses Subtract line 18 from line 12		19,40	2.	-18,893.		
	P 89				ning of Current Yo	ear En	d of Year		
Œ	sets	<b>20</b> T	Total assets (Part X, line 16)		86,93	9.	68,046.		
2015	Ass d Bal		Total liabilities (Part X, line 26)			0	0		
GC.	Fund		Net assets or fund balances Subtract line 21 from line 20		86,93	9.	68,046.		
© ≓			Signature Block	··-	<del></del>		<del></del>		
	Line	or none		tatements a	and to the best of	my knowledge	and belief it is		
00 11. 11.	true	, correct	alties of perjury. I declare that I have examined this return, including accompanying schedules and s t, and complete Declaration of preparer (other than officer) is based on all information of which prepare	er has any k	nowledge				
L1.		1	$\mathcal{L}$			615			
	Sig	n	Signature of officer		Date	1113			
	Her		Dave Litterer Director						
	-		Type or print name and title				<del></del>		
£.			Print/Type preparer's name Preparer's signature Date		<del></del>	, PTIN			
SCANNIST	Paid		1.1.	سی.ا،	Check	"	089678		
		arer	ROBERT H NEUHAUS	1/12	self-employe				
	-	Only	Firm's name ► GOSLING & COMPANY PC	·	1 11111 2 2 1 1	12-12778			
			Firm's address ► 109 E BREMER AVE WAVERLY, IA 50677		Phone no.	319-352-			
	<u>_</u>		S discuss this return with the preparer shown above? (see instructions)	<del></del>	<u> </u>	X   Y			
	<b>-</b>	0	work Reduction Act Notice, see the senarate instructions			For	m 990 (2012)		

Form 990 (2012)

Par	Checklist of Required Schedules			
			Yes	Ŋο
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to		1	
	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,	-		I I
	assessments, or similar amounts as defined in Revenue Procedure 98-197 If "Yes," complete Schedule C,	_		
_	Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors	[ ]		
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			Х
-	"Yes," complete Schedule D, Part I	6	<del></del>	
7	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	<u> </u>		
Ü	complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a	<u> </u>		
•	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,	福		
	VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a	X	
b	Did the organization report an amount for investments-other securities in Part X, line 12 that is 5% or more		, ,	v
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		<u> </u>
С	Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more			Х
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	11c		
ď	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets	114		Х
_	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d 11e		X
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	110	-	
•	the organization's separate of consolidated financial statements for the tax year include a roothete that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		Х
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes,"			
	complete Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if			
	the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school 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		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate	l !	1	37
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		<u> </u>
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any	45		х
40	organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance	16		Х
17	to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	-"-		<del>-:</del> -
• • •	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	l	х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	}	Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19		X
20 a		20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization			
	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	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	ł		
	employees? If "Yes," complete Schedule J	23		X
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than	·		
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b	İ		
	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		
ď	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25 a		} ;		
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior	ļ '		
	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> X</u>
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or	<b>,</b>		
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II.	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			,
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		<u>X</u>
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,	·		. 47
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):	<u>ئے ۔</u>	ستيب	ت سا X
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete	28b		Х
	Schedule L, Part IV	200		
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		х
20	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	<del></del>	X
29 30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified		<del></del>	
30	conservation contributions? If "Yes," complete Schedule M	30	1	Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
<b>J</b> 1	Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,	1	}	
	or IV, and Part V, line 1	34		X
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a	1		
	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	1		
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,	1		
	Part VI	37	<u> </u>	<u> </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	<u> </u>

Check if Schedule O Contains a response to any question in this Part V.  Is Enter the number reported in Box 3 of Form 1096. Enter 0-if not applicable.  Is Enter the number of Forms W-2G included in line 1s. Enter 0-if not applicable.  Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?  2 Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax  Statements, field for the calendar year ending with or within the year covered by this return  Statements, field for the calendar year ending with or within the year covered by this return  Statements, field for the calendar year ending with or within the year covered by this return  Statements, field for the calendar year ending with or within the year covered by this return  Statements, field for the calendar year ending with or within the year covered by this return  Note, if the sum of lines 1s and 2s is greater than 250, you may be required to e-five (see instructions).  3 Did the organization have unrelated business gross ancine of S1,000 or more during the year?  3 At any time during the calendar year, did the organization have an interest in, or a synature or other authority over, a financial property over, a financial year, did the organization than an interest in, or a synature or other authority over, a financial year, did the organization for greater than 3 financial year.  Sa I was the organization for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts.  Sa I was the organization and party to a prohibited tax shelter transaction?  If I'ves' in line 5 a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction?  If I'ves' in line 5 a or 5b, did the organization for form 30 and	_	990 (2012)			age
a Enter the number reported in Box 3 of Form 1096, Enter-0-if not applicable.    Tall   Discription	Par				_
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-26 included in line 1a. Enter-0-if not applicable.   1b   0   c Did the organization comply with backing withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?   1c   2a   0   2a Enter the number of employees reported on Form W-3. Transmittal of Wage and Tax   2a   0   5 If at least one is reported on line 2a, did the organization file all required federal employment tax returns?   2b   0   6 If at least one is reported on line 2a, did the organization file all required federal employment tax returns?   2b   0   8 If at least one is reported on line 2a, did the organization file all required federal employment tax returns?   2b   0   0   9 If at least one is reported on line 2a, did the organization have an interest in or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?   2a   2a   2a   2a   2a   2a   2a   2		Check it Schedule o contains a response to any question in this rare vicinity.	• • •		·
b Enter the number of Forms W-26 included in line 1s. Enter-0- if not applicable				res	No
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaining (gaimbling) winnings to prize winners?  2a Enter the number of employees reported on form W.3. Transmittal of Wege and Tax Sterements, filed for the calendar year ending with or within the year covered by this return 2 bit in the sum of inners 1a and 2a is greater than 250, you may be required to e-file (see instructions).  3a Did the organization have unrelated business gross income of \$1,000 or more during the year?  3a Did the organization have unrelated business gross income of \$1,000 or more during the year?  3a Life the organization have unrelated business gross income of \$1,000 or more during the year?  3b If "Yes," has it field a Form 990-T for the year? If "No," provide an explanation in Schodule 0.  3b Life and A and the during the calendar year, did the organization have an interest in. or a signature or other suthority over, a financial secount; in a foreign country (such as a bank account, securities account, or other financial secount; 2b Life and the organization than the organization than the second of the organization of the organization than the second organization as a party to a prohibited tax shelter transaction of it "Yes" in the 5a of 5b, did the organization file Form 8868-T?  5a Was the organization have annual gross receipts that are normally greater than \$100,000, and did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions and express statement that such contributions or gifts were not tax deductible or organization for the value of the goods or services provided?  5b If "Yes," did the organization inclived with every solicitation an express statement that such contributions or gifts were not tax deductible organization self-entropy to great parts or the programization self-entropy to great part					
reportable gaming (gambling) winnings to prize winners?.  2 Effort the number of employees reported on form W.3, Transmittal of Wage and Tax  Statements, filed for the calendar year ending with or within the year covered by this return.  2 b if at least one is reported on line ve.2, did the organization file all required federal employment tax returns?  Note, if the sum of lines it and 2 is greater than 250, you may be required to e-file (see instructions).  3a Did the organization have unrelated business gross income of \$1,000 or more during the year?  3a Did the organization have unrelated business gross income of \$1,000 or more during the year?  3a Lines at least any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foregin country (such as a bank account, securities account, or other financial accountry)  5a Was the organization as party to a prohibited tax sheller transaction at any time during the tax year?  5a Was the organization as party to a prohibited tax sheller transaction at any time during the tax year?  5a Was the organization as party to a prohibited tax sheller transaction at any time during the tax year?  5a Was the organization as party to a prohibited tax sheller transaction at any time during the tax year?  5b Did any taxable party notify the organization that it was or is a party to a prohibited tax sheller transaction at any time during the tax year?  5a Was the organization solicit any contributions that were not tax deductible as charitable contributions?  5b If "Yes," for did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  6b If "Yes," for did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7c Organizations that may receive deductible contributions under section 170(c).  8b If "Yes," inclinate the number of Forms 8282 filed during the year					,
2a Enter the number of employees reported on Form W-3, Transmittel of Wage and Tax Statements, field for the calendar year ending with or within the year covered by this return 2 b f at least one is reported on line 2a, did the organization file all required foderal employment tax returns?  3a Did the organization have unrelated business gross income of \$1,000 or more during the year?  3a Did the organization have unrelated business gross income of \$1,000 or more during the year?  3a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account?  3b If "Yes," has at field a Form 990-T for this year? If "No," provide an explanation in Schedule 0.  3c At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account?  3b If "Yes," enter the name of the foregin country (such as a bank account, securities account, or other financial account?  5c Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  5a Was the organization as party to a prohibited tax shelter transaction at any time during the tax year?  5a Was the organization have annual gross receipts that are normally greater than \$100,000, and did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization sheet amount of the deductible as charitable contributions?  5c If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible or this very solicitation and express provided?  6c Did the organization stat may receive deductible contributions under section 170(c).  7c Did the organization state any taxable contributions under section 170(c).  8 Did the organization section and the section of the value of the goods or services provided?  9 If "Yes," indicate the number of Forms 8282 filed during the year?  9 Did the organization section a	¢		40		
Statements, fled for the calendar year ending with or within the year covered by this return   2a	_		10		
b if at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note, if the sum of lines 1s and 2a is greater than 250, you may be required to e-file (see instructions).  3a Did the organization have unrelated business gross income of \$1,000 or more during the year?  3a Did the organization have unrelated business gross income of \$1,000 or more during the year?  3a At any time during the calendary year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?  5b if Yes, enter the name of the foreign country (such as a bank account, securities account, or other financial account)?  5c See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts.  5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  5b If Yes, did the organization life Form 886F-7?  6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organizations olicit any contributions that were not tax deductible as charatible contributions?  6c abose the organization have annual gross receipts that are normally greater than \$100,000, and did the organizations solicit any contributions that were not tax deductible as charatible contributions?  6c abose the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7 Organizations that may receive deductible contributions under section 170(c).  8 b If Yes, did the organization notify the donor of the value of the goods or services provided?  7 b If the organization receive a payment in excess of \$75 made parity as a contribution and partly for goods and services provided?  7 b If the organization receive a payment in excess of \$75 made parity as a contribution of the services from \$100 to the parity of th	2a				
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).  3			2h		
3a Did the organization have unrelated business gross income of \$1,000 or more during the yea?  3b bif Yes, has I fided a Form 1990-To finity year? If Yes, 'provide an expleanation in Schedule O.  3b At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account; in a foreign country   ✓  3country	D		20		
b If Yes, 'has it field a Form 990-T for this year?' If Wo,' provide an explanation in Schedule O.  4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, other financial account).  5b If Yes,' enter the name of the foreign country ▶  See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.  5a Was the organization a party to a prohibited tax shelter transaction at any time during the taxyear'.  5a Was the organization aparty to a prohibited tax shelter transaction at any time during the taxyear'.  5b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  5c If Yes' to line 5a or 5b, did the organization file form 8886-T?  6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as chartable contributions?  6b If Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  6c Did the organization start may receive deductible contributions under section 170(c).  6d If Yes,' did the organization notify the donor of the value of the goods or services provided?  7a X  7b If Yes,' did the organization notify the donor of the value of the goods or services provided?  7b If Yes, and the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  7b If Yes, and the organization received a contribution of qualified intellectual property, did the organization file a form 8282?  7c If Did the organization received a contribution of qualified intellectual property, did the organization file a form 8282?  7c If Did the organization received a contribution of cars, boats, analysis, directly or indirectly, o	2 -		32		
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organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?  9 Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? b Did the organization make a distribution to a donor, donor advisor, or related person?  9 b Did the organization make a distribution to a donor, donor advisor, or related person? 9 b Did the organization make a distribution to a donor, donor advisor, or related person? 9 b Did the organization make a distribution to a donor, donor advisor, or related person? 9 b Did the organization make a distribution to a donor, donor advisor, or related person? 9 b Did the organization make a distribution to a donor, donor advisor, or related person? 9 b Did the organization make a distribution to a donor, donor advisor, or related person? 9 b Did the organization fulled on Part VIII, line 12 10 a Did the organization to from 990, Part VIII, line 12, for public use of club facilities 10 b Did	h		7 <u>h</u>	ļ	<del> </del>
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9 Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? b Did the organization make a distribution to a donor, donor advisor, or related person?  9 Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 11 Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13b 13c 14a  X			<del></del>		
a Did the organization make any taxable distributions under section 4966? b Did the organization make a distribution to a donor, donor advisor, or related person?  10 Section 501(c)(7) organizations. Enter a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  10 Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)  12 a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year  13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand  14 Did the organization receive any payments for indoor tanning services during the tax year?  14			8		
b Did the organization make a distribution to a donor, donor advisor, or related person?  Section 501(c)(7) organizations. Enter  Initiation fees and capital contributions included on Part VIII, line 12  Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  Section 501(c)(12) organizations. Enter:  Gross income from members or shareholders  Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)  12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  If "Yes," enter the amount of tax-exempt interest received or accrued during the year  Section 501(c)(29) qualified nonprofit health insurance issuers.  Is the organization licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O.  Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans  Enter the amount of reserves on hand  C Enter the amount of reserves on hand  Jab  Tab  Tab  Tab  Tab  Tab  Tab  Tab					
10 Section 501(c)(7) organizations. Enter a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 11 Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13b 13c 14a  X					-
a Initiation fees and capital contributions included on Part VIII, line 12			90	,	<del> </del>
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			, E.	, ,	
a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)  12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year			- <del>2</del> -	-	- ,
a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)  12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year  13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13b 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a  15a				"	
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).  12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  b If "Yes," enter the amount of tax-exempt interest received or accrued during the year		[44]	7"		
against amounts due or received from them)					ĺ
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  b If "Yes," enter the amount of tax-exempt interest received or accrued during the year	•		i		
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12 a	- 3	12a		
13 Section 501(c)(29) qualified nonprofit health insurance issuers.  a Is the organization licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O.  b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans  c Enter the amount of reserves on hand  13b  13c  14a  X					
a Is the organization licensed to issue qualified health plans in more than one state?  Note. See the instructions for additional information the organization must report on Schedule O.  b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans  c Enter the amount of reserves on hand  13c  14a  X		• • • • • • • • • • • • • • • • • • • •			
Note. See the instructions for additional information the organization must report on Schedule O.  b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans  c Enter the amount of reserves on hand			13a		
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans  c Enter the amount of reserves on hand	-				
the organization is licensed to issue qualified health plans	b				
c Enter the amount of reserves on hand	-				
14a Did the organization receive any payments for indoor tanning services during the tax year?	С	1 1			
			14a		X
			14b		

Pari				"No"
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See in			(V)
	Check if Schedule O contains a response to any question in this Part VI	<u>· · · ·  </u>	<u> </u>	<u> </u>
Sect	ion A. Governing Body and Management			<del></del>
	Table the number of out as marked of the assessment had not the and of the townsor.		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1	i	
	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			}
b	Enter the number of voting members included in line 1a, above, who are independent	1		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with		Х	1
	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	1		x
_	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	5		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	6		X
6	Did the organization have members or stockholders?	-		<del></del> -
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint	7-		x
	one or more members of the governing body?	7a		<del> </del>
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	7b		$ _{\mathbf{X}}$
	stockholders, or persons other than the governing body?			
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			1 1
_	the year by the following:	8a	Х	
a	The governing body? Each committee with authority to act on behalf of the governing body?	8b	X	<del> </del>
ь 9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
9	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Х
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Revenue		)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		Х
	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		
11a		11a		X
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			T.S
12a	- · · · · · · · · · · · · · · · · · · ·	12a	X	
b				1
	rise to conflicts?	12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	]		ļ
	describe in Schedule O how this was done	12c	X	<u> </u>
13	Did the organization have a written whistleblower policy?	13		<u>X</u> _
14	Did the organization have a written document retention and destruction policy?	14		X_
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?			
а	The organization's CEO, Executive Director, or top management official	15a		<u> </u>
þ	Other officers or key employees of the organization	15b		<u> </u>
	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			Į,
	with a taxable entity during the year?	<u>16a</u>		<u>X</u>
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			
Saat	organization's exempt status with respect to such arrangements?	16b		<u> </u>
	ion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed NONE  Section 6104 sequires on accounting to make its Forms 1023 (or 1024 if applicable), 900, and 900 T. (Section 6	01/-1/		
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 5 available for public inspection. Indicate how you made these available. Check all that apply.	U I (C)(	ച്യട o	nıy)
	Own website Another's website X Upon request Other (explain in Schedule O)			
40		F ,_+-	oc.	٠ام
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of and financial statements available to the public during the tax year	inter	esi þ	olicy,
20	State the name, physical address, and telephone number of the person who possesses the books and records of the	10		
~ 0		. 472		

	-,							
Part VII	Compensation of Offi	icers, Directors,	Trustees,	Key Employees,	Highest	Compensated	Employees,	and
	Independent Contract	ors						

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 employees."
- 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.

X Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.											
(A) Name and Title	(B) Average hours per week (list any hours for related	<del></del>					one an ee)	(D) Reportable compensation from the organization	(E)  Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the	
	organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	y employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2/1033-MICO)	organization and related organizations	
(1) JENNIFER PESCHANG	1.00	İ									
DIRECTOR		X						<u> </u>	0	0	
(2) DAVE LITTERER	1.00					ĺ	1	}	1	· · · · · · · · · · · · · · · · · · ·	
DIRECTOR	<u> </u>	Х			<u> </u>		<u></u>	C	0	0	
(3) DAVE & CATHY WYLAM	1.00	}			l	l	ł	1			
DIRECTOR		X						C	0	0	
(4) LEANN BIRD	1.00	)				]			ļ		
DIRECTOR	ļ	X			<u></u>			<u> </u>	0	0	
(5) JAMIE STENSLAND	1.00					ļ			_		
DIRECTOR	ļ	X			<u> </u>			c	0	0	
(6) KRISTI DEMUTH	1.00	[				1		_		_	
DIRECTOR	<u> </u>	X		_	<u> </u>		_	C	0	0	
(7) KEITH & MARY ANNA DENTON DIRECTOR	1.00	x			)   			c	o	0	
(8) JJ & HEATHER ROBSON	1.00										
DIRECTOR	T	X			_	]	L.	c	0	0	
(9) KURT BOLTE	1.00										
DIRECTOR		X			<u> </u>	Í	L _	c	<u> </u>	0	
(10)ROXANNE MILLS	1.00										
DIRECTOR		X			· !	<u> </u>	L _	<u> </u>	0	0	
(11)DAVE & BARB BATES	1.00						Π				
DIRECTOR	T	X						C	0	0	
(12)DIANE GRAY	1.00										
DIRECTOR		_ X						0	0	0	
(13)TINA GRAVEN	1.00									<del></del>	
DIRECTOR		Х						0	0	0	
(14)LARRY & ANGIE SCRIBNER DIRECTOR	1.00	х						0	o	0	
DIVIDCION		_ ^		oxdot				<u></u>	<u></u>		

Part VII Section A. Officers, Directors, Tr	ustees, Ke	y En	plo	ye	es,	and I	Hig	hest Compensat	ed Emplo	yees (c	continued)
(A)	(B) (C)							(D)		(F)	
Name and title	Average	(do	nat a		noitie	e than o	200	Reportable		Reportable mpensation from	Estimated amount of
	hours per week (list any					ıs both			relate		other
	hours for		er an	dad	irec	tor/trus		the	organiza		compensation from the
	related organizations	r dir	ıstıtı	ffice	өу ө	mple	Forme	organization (W-2/1099-MISC)	(W-2/1099	-MISC)	organization
	below dotted	Individual to or director	l g	Officer	Key employee	st co	۳	(***-2/1033-1/1130)		j	and related
•	line)	trustee	i ii		уее	mg				ľ	organizations
		100	uste			Highest compensated employee	•	1		ļ	
			L	_	<u> </u>	e e	_			!	
15) RENEA & TRAVIS KRUEGER	1.00	4	ł			ł					•
DIRECTOR	1.00	X	├-	├	<u> </u>	<del> </del>	├	ļ			0
16) JOYCE KURTZ DIRECTOR	f	X	}		1		1		j	ď	o
17) KURT & CHRISTI STEIERT	1.00	<del> </del>	<del> </del>	}	├-	<del> </del>	├	ļ			
PRESIDENT		1	}	x		1	1	1	}	٥	0
18) BRENDA PONTO	1.00		├		┢	├	├─	<del> </del>		<del></del>	<u> </u>
TREASURER		1	l	x		1		0		O <sup>l</sup>	0
19) PAUL & NANCY WRIGHT	1.00		├-		1	<del> </del>		<del>                                     </del>			
VICE PRESIDENT		1		x		İ	1	( c		d	0
20) PHIL & SALLY KITTLESON	1.00	<del></del>	<del> </del>		<del>                                     </del>		╁╌	<del> </del>			
SECRETARY	†	1	}	x			1	) c		o	0
21) NED & TRACY RUCKER	1.00	T	<del>                                     </del>								
VICE PRESIDENT	<b> </b>	1	ł	X			ł	) c	ł	o	0
					_	<u> </u>	<u>L</u>	<u> </u>			
				[	1	1	ĺ			l	
	ļ	<u> </u>	<u> </u>		<u> </u>				ļ		
	ļ	1		ĺ		ļ	ł			ļ	
	<u> </u>	<del> </del>	<del> </del>	<b>↓</b> _	↓	<del> </del>	<b>├</b> _	<del> </del>	<del></del>		
	<del> </del>	┨	ł	1	1	1	1	1		1	
Ab Cub Astal	<u> </u>	1	<u> </u>	Щ.	<u> </u>	L	<u></u>	<del>                                     </del>	<del> </del>		
1b Sub-total											0
d Total (add lines 1b and 1c)										0	0
2 Total number of individuals (including but not							o re	eceived more than	\$100,000	of	<del></del>
reportable compensation from the organizatio				-							
									-		Yes No
3 Did the organization list any former office											
employee on line 1a? If "Yes," complete Sched	lule J for su	ch ınd	lıvid	ual							3 X
4 For any individual listed on line 1a, is the	sum of rep	oortat	ole (	com	per	nsatio	n a	nd other compen-	sation from	ı the	
organization and related organizations gr											4 X
ındıvidual											
5 Did any person listed on line 1a receive or for services rendered to the organization? If "Y											5 X
Section B. Independent Contractors	es, compre	10 001	1000	210 0	, 101	30011	per	3011	<del>· · · · · · · · · · · · · · · · · · · </del>	···	<u> </u>
Complete this table for your five highest com	nensated i	nden	-nde		con	tracto	ors t	that received more	than \$10	0.000 c	
compensation from the organization. Report of											
year.										<del>,</del>	
(A)	<b></b>							(B)		_	(C)
Name and business add	aress						+	Description of se	ervices		compensation
							┿			<del> </del>	
							+			<del> </del>	
							$\dagger$			<del> </del>	
	<del></del>						+				<del></del>
2 Total number of independent contractors (iii	ncluding bi	ut no	t lin	nite	d to	thos	se I	isted above) who	received	`g	The state of the s
more than \$100,000 in compensation from th						0					

Par	rt VII	Statement of Revenue Check if Schedule O contains a response to a	any aues	tion in this Part VIII			x
	-			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
S 8		Tan Tan Tan Tan Tan Tan Tan Tan Tan Tan		1_	,		
ant	1a	Federated campaigns 1a	45 005				=
ည် ဋိ	b	Membership dues 1b	45,825.				!
ξŽ	С	Fundraising events 1c					
2 =	d	Related organizations 1d		-			
ns,	e	Government grants (contributions) 1e		-		~	1
er	f	All other contributions, giffs, grants,		}			) .
ē.		and similar amounts not included above . 1f	20,155.	'			}
Contributions, Gifts, Grants and Other Similar Amounts	g	Noncash contributions included in lines 1a-1f \$					į
		Total. Add lines 1a-1f	<b>.</b>	65,980.			
ne			ess Code				
Ven	2a						
8	b						
<u> </u>	"						
Service Revenue	C						<del> </del>
S L	d						<del>                                     </del>
īa	е					<del></del>	<del> </del>
Program	f	All other program service revenue		0		<del></del>	<del> </del>
<u> </u>	g	Total. Add lines 2a-2f					<del> </del>
	3	Investment income (including dividends, interest, and	_				
	]	other similar amounts). ATTACHMENT 1	🏲	160.			160
	4	Income from investment of tax-exempt bond proceeds		0	<del></del>	·	ļ <u>.</u>
	5	Royalties		0		<del></del>	<del> </del>
	ļ	(I) Real (II) P	ersonal	, ,	_		-
	6a	Gross rents			,		-
	ь	Less rental expenses			-		
	c	Rental income or (loss)					
	d	Net rental income or (loss)	▶	0			
	i _	(i) Securities (ii)	Other	<u>;</u> 1			
	/ a	Gross amount from sales of assets other than inventory		· .	, ,	,	
	ь	Less cost or other basis			,		
	"	and sales expenses		ĺ	-	_	
	1 _			ļ <u>-</u>			
	C d	Gain or (loss)		0			
	1			,		<del></del>	<u> </u>
ž	Ва	Gross income from fundraising		' - 1			
ě	İ	events (not including \$		,			l
è	1	of contributions reported on line 1c)					į
_	İ	See Part IV, line 18 a		1 :	r.	ı	-
Other Revenue	ı	Less direct expenses b		0		<del></del>	
Ö	C	Net income or (loss) from fundraising events	· · · · · · · · · · · · · · · · · · ·	<del> </del>			
	9a	Gross income from gaming activities					Ì
	Ì	See Part IV, line 19		-			1
	Ь	Less. direct expenses b	<del> </del>			<del></del>	<del> </del>
	C	Net income or (loss) from gaming activities	<u> ▶</u>	0			<del> </del>
	10a	Gross sales of inventory, less		1			1
	İ		124,899.				1
	ь	Less cost of goods sold ATCH . 2 . b	97,076.			 	<del>                                     </del>
	С	Net income or (loss) from sales of inventory		27,823.			27,823
	L	Miscellaneous Revenue Busine	ess Code				
	11a						
	ь						L
	c						
	d	All other revenue					
	e	Total. Add lines 11a-11d	>	0			
	12	Total revenue. See instructions					27,983

Part IX Statement of Functional Expenses
Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

	Check if Schedule O contains a resp				<u> </u>
				(C)	·····
	not include amounts reported on lines 6b, 7b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the United States See Part IV, line 21 .	83,591.	83,591.		<u> </u>
2	Grants and other assistance to individuals in				
-	the United States See Part IV, line 22	O			
3	Grants and other assistance to governments,				
,	organizations, and individuals outside the				
	United States See Part IV, lines 15 and 16.	O			-
4	Benefits paid to or for members	0		<del></del>	† · · -
5	Compensation of current officers, directors,				<del></del>
3	•	ol			ł
_	trustees, and key employees			· · · · · · · · · · · · · · · · · · ·	<del></del>
6	Compensation not included above, to disqualified				).
	persons (as defined under section 4958(f)(1)) and	o			
_	persons described in section 4958(c)(3)(B)	<del></del>			<del> </del>
7	Other salaries and wages	<del></del>			<del></del>
8	Pension plan accruals and contributions (include section	0			
	401(k) and 403(b) employer contributions)	<u> </u>			<del> </del>
9	Other employee benefits	<u> </u>			<del> </del>
10	Payroll taxes	<del></del>			ļ
11	Fees for services (non-employees)				
а	Management	9			
b	Legal	<u> </u>			
С	Accounting	0			<del></del>
d	Lobbying	0			<del> </del>
	Professional fundraising services See Part IV, line 17	0			<del> </del>
f	Investment management fees	0			<del></del>
9	Other (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O)	0			ļ
12	Advertising and promotion	0			<u> </u>
13	Office expenses	0			
14	Information technology	0			
15	Royalties	0		·	
16	Occupancy	0			<u> </u>
17	Travel	0			
18	Payments of travel or entertainment expenses		ĺ		
	for any federal, state, or local public officials	0			<u> </u>
19	Conferences, conventions, and meetings	0			
20	Interest	0			
21	Payments to affiliates	0		·	\
22	Depreciation, depletion, and amortization	0			
23	Insurance	0			
24	Other expenses Itemize expenses not covered				
	above (List miscellaneous expenses in line 24e. If	<b>'</b>			
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O)				
а	SUPPLIES & MISCELLANEOUS	29,265.	29,265.		
b					
c					
d					
e	All other expenses			<u> </u>	
25	Total functional expenses. Add lines 1 through 24e	112,856.	112,856.		T
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				1
	following SOP 98-2 (ASC 958-720)	0			] _

Form 990 (2012) Balance Sheet

Par	t X	Balance Sheet			
		Check if Schedule O contains a response to any question in this Par		•••	
			(A) Beginning of year		(B) End of year
$\Box$	1	Cash - non-interest-bearing	45,439.		54,296.
	2	Savings and temporary cash investments	25,000.	2	(
	3	Diodoco and granta recovable, not	q	3	(
- }	4	Accounts receivable, net	q	4	(
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees			
(0)	6	Complete Part II of Schedule L  Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L	C C	5 6	(
ie t	7	Notes and loans receivable, net	q	7	(
Assets	8	Inventories for sale or use	q	8	(
	9	Prepaid expenses and deferred charges	q	9	C
İ	10 a	Land, buildings, and equipment. cost or			
Ì		other basis. Complete Part VI of Schedule D 19, 250.			•
ĺ	b	Less accumulated depreciation	16,500.		13,750.
	11	Investments - publicly traded securities	q	11	(
ĺ	12	Investments other accombine Con Deat IV line 44	q	12	(
]	13	Investments - program-related. See Part IV, line 11		13	(
]	14	Intangible assets	q	14	(
	15	Other assets See Part IV, line 11	q	15	(
	16	Total assets. Add lines 1 through 15 (must equal line 34)			68,046
	17	Accounts payable and accrued expenses	O O	17	(
-	18	Grants payable	<u> </u>	18	(
	19	Deferred revenue		19	(
-	20	Tax-exempt bond liabilities	<u> </u>	20	(
Sa	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	(
Ě	22	Loans and other payables to current and former officers, directors,	3 1 (2)	-	<b>*</b> * *
Liabilities		trustees, key employees, highest compensated employees, and		,* · !	Carlot of the
7		disqualified persons. Complete Part II of Schedule L	q	22	(
1	23	Secured mortgages and notes payable to unrelated third parties	q	23	(
1	24	Unsecured notes and loans payable to unrelated third parties	O O	24	(
1	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X	إ	-	'
1		of Schedule D	0	25	<u> </u>
_	26_	Total liabilities. Add lines 17 through 25	<u> </u>	26	
Ses		Organizations that follow SFAS 117 (ASC 958), check here X and complete lines 27 through 29, and lines 33 and 34.		!	•
au	27	Unrestricted net assets	86,939.	27	68,046
ш 1	28	Temporarily restricted net assets	q	28	(
2	29	Permanently restricted net assets	q	29	
or Fu		Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34.			
ts	30	Capital stock or trust principal, or current funds		30	
SSE	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Net Assets or	32	Retained earnings, endowment, accumulated income, or other funds		32	
S	33	Total net assets or fund balances	86,939.	33	68,046.
- 1	34	Total liabilities and net assets/fund balances	86,939.	34	68,046.
					Form <b>990</b> (2012)

Page **12** Form 990 (2012) Reconciliation of Net Assets Part XI Check if Schedule O contains a response to any question in this Part XI... 93,963. 1 112,856. 2 2 -18,893. 3 3 86,939. 4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) . . . . . 4 0 5 5 ō 6 6 0 7 7 ō 8 8 ō 9 Other changes in net assets or fund balances (explain in Schedule O)........ 9 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 10 68,046. **Financial Statements and Reporting** No Yes Accounting method used to prepare the Form 990 | X | Cash | Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. Х 2a Were the organization's financial statements compiled or reviewed by an independent accountant? 2a 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: Consolidated basis Both consolidated and separate basis Separate basis 2b b Were the organization's financial statements audited by an independent accountant? . . . . . . . . . . . . . If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight 2c of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in

required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

Form 990 (2012)

3a

3b

Schedule O.

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

Department of the Treasury

Internal Revenue Service

### **Public Charity Status and Public Support**

OMB No. 1545-0047

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

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

2012
Open to Public Inspection

Name of the organization Employer identification number GO-HAWK BOOSTER CLUB 45-4199978 Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the 4 hospital's name, city, and state. An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) 8 X An organization that normally receives: (1) more than 331/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety See section 509(a)(4). 10 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h Type II c Type III-Functionally integrated d i Type III-Non-functionally integrated Type I By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations, described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? No (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) Yes and (iii) below, the governing body of the supported organization? 11g(i) (ii) A family member of a person described in (i) above? 11g(iı) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) Provide the following information about the supported organization(s) (i) Name of supported (v) Did you notify (ii) EIN (iii) Type of organization (vii) Amount of monetary (iv) is the (vi) Is the organization in col (i) listed in (described on lines 1-9 organization in organization the organization support above or IRC section in col (i) of col (i) organized (see instructions)) your support? in the US? document? Yes No Yes No Yes (A) (B) (C) (D) (E)

Part I Support Sch

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	tion A. Public Support				· · · · · · · · · · · · · · · · · · ·	<del></del>	
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")			i 			
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf			 			
3	The value of services or facilities furnished by a governmental unit to the organization without charge	 					
4	Total. Add lines 1 through 3		ļ	·	<del> </del>	ļ	
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on		7.			1	
	line 1 that exceeds 2% of the amount						
6	shown on line 11, column (f) Public support. Subtract line 5 from line 4			<del></del>	<del>                                     </del>		<del></del>
	tion B. Total Support		<del></del>	<del></del>	<del>l</del>	<del></del>	<del> </del>
	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	I					
9	Net income from unrelated business activities, whether or not the business is regularly carried on	1					
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	<u> </u>			<u> </u>		<u></u>
12	Gross receipts from related activities, etc. (s	ee instructions) .				12	
13	First five years. If the Form 990 is forganization, check this box and stop here	or the organizat	tion's first, secon	d, third, fourth,	or fifth tax ye	ar as a section	
Sec	tion C. Computation of Public Sup					<del></del>	
14	Public support percentage for 2012 (In						%
15	Public support percentage from 2011						%
16a	331/3% support test - 2012. If the o	-					
	this box and stop here. The organization	•		~			
Þ	331/3% support test - 2011. If the ocheck this box and stop here. The organization						
172	10%-facts-and-circumstances test - 2						
114	10% or more, and if the organization	meets the "fa	cts-and-circums	ances" test, ch	neck this box a	nd <b>stop here.</b> E	Explain in
	Part IV how the organization meets t					· · · · · · · · · · · · · · · · · · ·	orbhouseg
b	organization						and line
	15 is 10% or more, and if the orga	anization meets	s the "facts-and	l-circumstances	" test, check t	his box and st	op here.
	Explain in Part IV how the organization	on meets the "	facts-and-circun	nstances" test.	The organization	on qualifies as a	a publicly
18	supported organization			. <b></b> .			▶
-	instructions						["]
		<del></del>	<u> </u>				<del></del>

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

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

Sec	tion A. Public Support				,			
Cale	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total	
1	Gifts, grants, contributions, and membership fees			ı		ł		
	received (Do not include any "unusual grants ")	0	0	0	75,856.	65,980.	141,836.	
2	Gross receipts from admissions, merchandise				(			
	sold or services performed, or facilities		1		1	.	•	
	furnished in any activity that is related to the				<b>j</b>	ļ		
	organization's tax-exempt purpose						0	
3	Gross receipts from activities that are not an		ļ			ļ		
	unrelated trade or business under section 513				141,231.	124,899.	266,130.	
4	Tax revenues levied for the				ł			
	organization's benefit and either paid				<u> </u>	' -		
	to or expended on its behalf				<u> </u>		0	
5	The value of services or facilities					(		
	furnished by a governmental unit to the		ļ					
	organization without charge						. 0	
6	Total. Add lines 1 through 5				217,087.	190,879.	407,966.	
7 a	Amounts included on lines 1, 2, and 3							
	received from disqualified persons		}			1	0	
b	Amounts included on lines 2 and 3			-				
	received from other than disqualified		į .		1			
	persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year				1		0	
_	Add lines 7a and 7b						0	
8	Public support (Subtract line 7c from	7.1			:	2		
•	line 6)						407,966.	
Sec	Section B. Total Support							
	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total	
9	Amounts from line 6				217,087.	190,879.	407,966.	
	Gross income from interest, dividends,							
	payments received on securities loans,		•		<b>j</b>	<b>,</b>		
	rents, royalties and income from similar sources		]	ļ	280.	160.	440.	
h	Unrelated business taxable income (less							
_	section 511 taxes) from businesses	}	}		<u> </u>			
	acquired after June 30, 1975			}	}	1	0	
_	Add lines 10a and 10b		<del> </del>		280.	160.	440.	
11	Net income from unrelated business							
• •	activities not included in line 10b,		ļ			Ì		
	whether or not the business is regularly		1	[			n	
	carried on	<del></del>	-		<del>                                     </del>		<u> </u>	
12	Other income Do not include gain or			1	1			
	loss from the sale of capital assets	}	1		}			
13	(Explain in Part IV)				<del> </del>			
13			\		217,367.	191,039.	408,406.	
4.4	and 12) First five years. If the Form 990 is for		n'e first second	third fourth or	<del></del>			
14	organization, check this box and stop here	•	•				· \ \	
500	tion C. Computation of Public Sur			· · · · · · · · · · · · · · · ·			••••	
15	Public support percentage for 2012 (line 8			nn (f))		15	%	
16	Public support percentage from 2011 Sche					16	<del></del>	
	tion D. Computation of Investmen			<del> </del>				
				13 column (fl)		17	%_	
17	Investment income percentage for 2012 (li					18		
18	Investment income percentage from 2011							
19 a	331/3% support tests - 2012. If the or							
	17 is not more than 331/3%, check th							
b	331/3% support tests - 2011. If the orga							
	line 18 is not more than 331/3%, check		•	=				
/11	FIVARE CONTOCUENT. IT THE UTDAMIZATION	and HOL CHECK	a nox on ine	17. 18 <b>0.</b> UL 191	Z. CHECK HIID DU	v min see 1119110.		

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

#### **SCHEDULE D** (Form 990)

# **Supplemental Financial Statements**

OMB No 1545-0047

► 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.

**Open to Public** Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

GO-	-HAWK BOOSTER CLUB		45-4199978
Pa	Organizations Maintaining Donor Advorganization answered "Yes" to Form 9	rised Funds or Other Similar Funds of 990. Part IV. line 6.	or Accounts. Complete if the
	organization answered Tes to Form C	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
<del>-</del> 5	Did the organization inform all donors and donor		n donor advised
J	funds are the organization's property, subject to th		
6	Did the organization inform all grantees, donors, a		
U	only for charitable purposes and not for the benef		
	• •		
Pa	conferring impermissible private benefit?  til Conservation Easements. Complete it	f the organization answered "Vos" to F	Form 990 Part IV line 7
1-61 1	Purpose(s) of conservation easements held by the		offit 990, Part IV, fifte 1.
•			of an invalorment to a description of
	Preservation of land for public use (e.g., recr	· I I	of an historically important land area
	Protection of natural habitat	Preservation	of a certified historic structure
_	Preservation of open space		to the form of many control
2	Complete lines 2a through 2d if the organization h	ield a qualified conservation contribution i	in the form of a conservation
	easement on the last day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		
b	Total acreage restricted by conservation easement		
C	Number of conservation easements on a certified		. 2c
d	Number of conservation easements included in (c	•	
	historic structure listed in the National Register		
3	Number of conservation easements modified, train	nsferred, released, extinguished, or termi	nated by the organization during the
	tax year ▶		
4	Number of states where property subject to conse		
5	Does the organization have a written policy regard	ding the periodic monitoring, inspection, h	nandling of
	violations, and enforcement of the conservation ea	asements it holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, i	nspecting, and enforcing conservation ea	sements during the year
	<b>&gt;</b>		
7	Amount of expenses incurred in monitoring, inspe	cting, and enforcing conservation easeme	ents during the year
	<b>&gt;</b> \$		
8	Does each conservation easement reported on lir	ne 2(d) above satisfy the requirements of s	section 170(h)(4)(B)
	(i) and section 170(h)(4)(B)(ii)?	•	Yes No
9	In Part XIII, describe how the organization reports		
•	balance sheet, and include, if applicable, the text		
	organization's accounting for conservation easeme		•
Pa	t III Organizations Maintaining Collections	s of Art, Historical Treasures, or Othe	er Similar Assets.
	Complete if the organization answered	Tyes" to Form 990, Part IV, line 8.	
1a	If the organization elected, as permitted under S	FAS 116 (ASC 958), not to report in its	revenue statement and balance sheet
	works of art, historical treasures, or other simil	lar assets held for public exhibition, ed	ucation, or research in furtherance of
	public service, provide, in Part XIII, the text of the f		
b	If the organization elected, as permitted under	SHAS 116 (ASC 958), to report in its	revenue statement and balance sheet
	works of art, historical treasures, or other simil public service, provide the following amounts relati		ucation, or research in turtherance of
	(i) Revenues included in Form 990, Part VIII, line		▶ ¢
	(ii) Assets included in Form 990, Part VIII, line		
2			
2	If the organization received or held works of a		
	following amounts required to be reported under S		
a	Revenues included in Form 990, Part VIII, line 1. Assets included in Form 990, Part X		· · · · · · · · · · • \$
1,3	ASSEIS INCHORO IN CONTRAME PAR A		

Par	Organizations Maintaining Co	llections of	f Art, F	listorical	Treasu	ıres,	or Ot	her Simi	lar Ass	ets (con	tinued)
3	Using the organization's acquisition, accellection items (check all that apply):	ession, and o	other rec	cords, chec	k any o	of the	follow	ing that a	re a sıgı	nificant us	se of its
а	Public exhibition		ď	Loan	or exch	ange	progran	ns			
b	Scholarly research		e	Other	•						
С	Preservation for future generations		-								
4	Provide a description of the organization'	s collections	and ex	plain how	they fu	rther	the org	ganization's	s exemp	t purpose	in Part
	XIII.										
5	During the year, did the organization solicit	or receive d	lonations	s of art, hist	orical ti	reasu	res, or o	other simil	ar		
	assets to be sold to raise funds rather than									Yes	No
Par										n 990, F	Part IV.
	line 9, or reported an amount or				•					•	•
	Is the organization an agent, trustee, custo included on Form 990, Part X?									Yes	☐ No
								A	mount		
	Beginning balance										
đ	Additions during the year					1d					
e	Distributions during the year										
f	Ending balance					1f					<del></del>
	Did the organization include an amount on								<u>L</u>	Yes	No
	If "Yes," explain the arrangement in Part XI									<del></del> .	<u> </u>
Par	<del></del>				<del></del>						
_	<del></del>	urrent year	(b) F	Prior year	(c) Tv	vo year	rs back	(d) Three y	ears back	(e) Four y	ears back
	Beginning of year balance				ļ						
	Contributions				ļ						
С	Net investment earnings, gains,	1			ţ		1		ļ	1	
	and losses				<b></b>						
	Grants or scholarships				<b> </b>						
e	Other expenditures for facilities	1			1		Í				
	and programs		- <del></del>		<u> </u>			<u> </u>		<u> </u>	
f	Administrative expenses				ļ					 	
g	End of year balance				<u> </u>					L	
	7										
а											
b	b Permanent endowment ► %										
С	C Temporarily restricted endowment ▶ %										
_	The percentages in lines 2a, 2b, and 2c should equal 100%										
За	Are there endowment funds not in the possession of the organization that are held and administered for the										
	organization by:										
	(i) unrelated organizations									3a(i)	
	(ii) related organizations									3a(ii)	
b	If "Yes" to 3a(ii), are the related organizatio						• • • •		• • • •	3b	
4	Describe in Part XIII the intended uses of the										<del></del>
Par	VI Land, Buildings, and Equipmen	T						· - · I			
	Description of property	(a) Cost or (			or other ba other)	asıs		umulated eciation	(c	l) Book valu	e 
	Land										
	Buildings	<del></del>									
_	Leasehold improvements										
d	Equipment				19,2	50.		5,500.		1	3,750.
	Other										
Tota	. Add lines 1a through 1e (Column (d) mus	st equal Form	990, Pa	nt X, colum	n (B), Iır	ne 10	(c).)	▶	<del></del>	1	3,750.

Part VII	Investments - Other Securities. See F	orm 990, Part X, lin	e 12.	_
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value	
(1) Financia	al derivatives		<u>                                     </u>	
	-held equity interests	ļ		
		<del></del>		
			<del> </del>	
( <u>B</u> )			<del> </del>	
(C)			<del> </del>	
(D)			<del> </del>	
(E)		<del> </del>	<del> </del>	
(F)		<del> </del>	<del> </del>	_
(G)				_
<u>(H)</u>			<del> </del>	_
(I)	n (b) must equal Form 990, Part X, col (B) line 12)	<del></del>	<del> </del>	_,
Part VIII	Investments - Program Related. See F	orm 990 Part X Jun	ne 13	-
Fajt VIII	(a) Description of investment type	(b) Book value	(c) Method of valuation	-
	(a) Dobbington of mirodiment type	(5) 2001. 12.25	Cost or end-of-year market value	
(1)		<u> </u>	·	_
(2)		<del> </del>	<u> </u>	_
(3)		<del> </del>	<del> </del>	_
(4)		<del> </del>		—
(6)		<u> </u>	<del> </del>	-
(7)		<del> </del>	<del> </del>	_
(8)	· · · · · · · · · · · · · · · · · · ·		<del> </del>	-
(9)				-
(10)	-			_
<del></del>	n (b) must equal Form 990, Part X, col (B) line 13)		3 4	_,
Part IX	Other Assets. See Form 990, Part X, li	ne 15		_
	(a)	Description	(b) Book value	_
(1)		. <u> </u>		
(2)				
(3)				_
(4)			<del></del>	_
(5)			<del></del>	_
(6)		<del></del>	<del></del>	_
(8)			<del></del>	_
(9)				_
(10)				-
<del></del>	umn (b) must equal Form 990, Part X, col. (B) I	ine 15),		_
Part X	Other Liabilities. See Form 990, Part X	(, line, 25		_,
1.	(a) Description of liability	(b) Book valu	<u>ie</u>	ļ
	al income taxes			
(2)				-
(3)				
(4)				Ì
(5)	<del></del>	<del>   </del>		1
<u>(6)</u>				
(7)		<del></del>		
<u>(8)</u> (9)		<del></del>		Ì
(10)	<del></del>			
(11)	<del></del>			
	on (b) must equal Form 990, Part X, col (B) line 25.)	<b>•</b>		1
			organization's financial statements that reports the organization	_ 's
			footnote has been provided in Part XIII.	1
JSA 2E1270 1 000			Schedule D (Form 990) 201	2

Page 4

chedu	ie D (FOIII 930) 2012	1 age 1
Part	XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Retur	n
1	Total revenue, gains, and other support per audited financial statements	1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	
а	Net unrealized gains on investments	
b	Donated services and use of facilities 2b	}
С	Recoveries of prior year grants 2c	]
d	Other (Describe in Part XIII )	]
e	Add lines 2a through 2d	] 2e
3	Subtract line 2e from line 1	3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1.	
а	Investment expenses not included on Form 990, Part VIII, line 7b	1
b	Other (Describe in Part XIII )	1
С	Add lines 4a and 4b	4c
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5
Part		<del></del>
1	Total expenses and losses per audited financial statements	1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	
а	Donated services and use of facilities 2a	
b	Prior year adjustments 2b	1   .
C	Other losses 2c	1
d	Other (Describe in Part XIII.)	1
e	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:	
·	Investment expenses not included on Form 990, Part VIII, line 7b	1.1
b	Other (Describe in Part XIII )  4b	1 1
C	Add too 4- 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	<del></del>
Comp Part V	lete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4; Part I, line 4, Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to propation.	V, lines 1b and 2b; ovide any additional
. – – –		

Schedule D (Form 990) 2012

Part XIII Supplemental Information (continued)

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

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

2012

OMB No 1545-0047

Open to Public

Employer identification number

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

► Attach to Form 990.

g	GO-HAWK BOOSTER CLUB	45-4199978	
ቯ	Part   General Information on Grants and Assistance		
-	Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and	ssistance, and	[
	the selection criteria used to award the grants or assistance?		ž
7	Describe in Part IV the organization's procedures for mo		
è	Partil Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990	n answered "Yes" to For	m 990

	Part IV, line 21, for any recipient that received more than \$5,000 Part II can be duplicated if additional space is needed.	t received n	nore than \$5,0	100 Part II can be	duplicated if ac	Iditional space is ne	eded.	
-	(a) Name and address of organization or government	(p) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) WA	(1) WAVERLY-SHELL ROCK COMMUNITY SCHOOL DISTRIC 1415 4TH AVE SW WAVERLY, IA 50677	42-6039259	PUBLIC SCHOOL	83,591.				ATHLETICS
_(2)								
69								
(4)								
(5)	(5)					i		

9

(7)						
(8)						
(6)						
(10)						
(11)	,					
(12)						
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 3 Enter total number of other organizations listed in the line 1 table	overnment or	ganizations lis	ted in the line 1 tat	ole	<b>A A</b>	1
For Paperwork Reduction Act Notice, see the Instructions for Form 990.	structions for	Form 990.		}	Sched	Schedule I (Form 990) (2012)

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

	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
-						
7						
က						-
4						
တ						
9		-				
7						
Part IV	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.	is part to prov	ide the informat	ion required in	Part I, line 2, Part III,	solumn (b), and any other additional

THE ORGANIZATION PERIODICALLY REVIEWS PURCHASES BY DONEE ORGANIZATION TO

DETERMINE IF FUNDS WERE EXPENDED AS INTENDED.

#### SCHEDULE O

(Form 990 or 990-EZ)

## Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047 Inspection

Department of the Treasury Internal Revenue Service

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. ► Attach to Form 990 or 990-EZ.

Name of the organization

GO-HAWK BOOSTER CLUB

Employer identification number 45-4199978

PART VI, #11B

THE ORGANIZATION DISTRIBUTES A PRELIMINARY COPY OF THE FORM 990 TO THE ON-SITE DIRECTOR TO REVIEW. THE DIRECTOR THEN SIGNS THE 990. REMAINING MEMBERS OF THE BOARD GET A COPY AFTER THE 990 HAS BEEN SIGNED.

PART VI, #12C

PERIODIC REVIEWS WILL BE MADE AND AT A MINIMUM WILL INCLUDE DETERMINATIONS WHETHER PARTNERSHIPS, JOINT VENTURES, AND ARRANGEMENTS WITH MANAGEMENT ORGANIZATIONS CONFORM TO THE ORGANIZATION'S WRITTEN POLICIES, ARE PROPERLY RECORDED, REFLECT REASONABLE INVESTMENT OR PAYMENTS FOR GOODS AND SERVICES, FURTHER CHARITABLE PURPOSES AND DO NOT RESULT IN INUREMENT, IMPERMISSIBLE PRIVATE BENEFIT OR IN AN EXCESS BENEFIT TRANSACTION.

PART VI, #19

THE ORGANIZATION MAKES AVAILABLE FORMS 990 AND 1023 AS WELL AS THEIR CONFLICT OF INTEREST POLICY TO THE PUBLIC UPON REQUESTS IN PERSON OR IN WRITING.

PART VI, #2

THE BOARD HAS SEVERAL DIRECTORS WHO HAVE A HUSBAND & WIFE RELATIONSHIP.

TOTALS

160.

$\overline{\underline{A}}$	TTACHMENT 2
FORM 990, PART VIII - GROSS SALES AND COST OF GOODS SOLD	
GROSS SALES LESS RETURNS AND ALLOWANCES	124,899.
INVENTORY AT BEGINNING OF YEAR	
PURCHASES	94,326.
SALARIES AND WAGES	
OTHER COSTS	2,750.
SUBTOTAL	97,076.
MINUS ENDING INVENTORY	
COST OF GOODS SOLD	97,076.

160.