

## See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



**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)

OMB No 1545-0047

Dep	partment of	the Treasury ue Service	•	cept black lung be on may have to use a co	•		•	nents		to Publi pection	ic .
Ā			year, or tax year begi		<del></del>	2, and endin	<del></del>		, 2013	3	<u> </u>
В	Check if a	ess change R F C	ICH MOUNTAIN COUNDATION	OMMUNITY COL	· · · · · · · · · · · · · · · · · · ·	<u> </u>	9 07	D Employer I	dentification N		
	Term		100 COLLEGE DR ENA, AR 71953	IVE				(479)	394-76	838,4	<u></u>
		SA	Name and address of princip					a group return fo affiliates include attach a list (se		Yes Yes	X No
늣	Webs		501(c)(3) 501(c) (	) ◀ (insert no	o.) 4947(a)(1)	or 527					
ĸ			RMCC . EDU  Corporation   Trust	Association Oth				exemption numb		. 70	
	irt I	Summary	Corporation   Trust	Association Oth	er	Year of Format	ion 1983	3   W State	of legal domic	ale AR	
Activities & Governance		riefly describe t	the organization's missi UNTAIN COMMUNI	Sion or most signification or most signification of the continued its						<u>CILIT</u> 	IES
Ĝ	3 No		members of the gove			posed of mo	re man 23	o% or its net	assets		16
ಳ	4 N		endent voting member			ne 1b)		- 2			$\frac{10}{15}$
ë.	<b>5</b> To		ındıvıduals employed ı		12 (Part V, line 2	la)		5	<del>,</del>		0
쿭	6 To	otal number of	volunteers (estimate if	f necessary)	RECEI	\ <u>/</u> [D	7		į.		0
Ă		otal unrelated b	ousiness revenue from	Part VIII, column (	C), line 420 [	VED.			'a		0.
	D NE	et unrelated bu	siness taxable income	from Form 990-1.	line 34		<u>}</u>		b		0.
\U fievenue ⊂			d assarbs (Daut VIII I.u.s	. 16	FEB 1 4	2014	S Pr	ior Year		rent Yea	
			d grants (Part VIII, line revenue (Part VIII, line	÷ 10)	1	2014	<u> </u>	80,077		252,6	
el.	10 Inv	vestment incom	ne (Part VIII, column (	e zy) Δ\ lines 3 4 and	7d) OCDEN		-	16,346		18,1	
Rei	11 Ot	her revenue (P	Part VIII, column (A), li	nes 5 6d 8c 9c		i, U i	⊩—	74,345		92,6	216.
2			add lines 8 through 11			line 12)	Ĭ <del></del>	19,184 189,952		363,4	160
-			ar amounts paid (Part				1	59,474		60,4	
		enefits paid to d			33,414	-	00,4	113.			
			ompensation, employe		•	s 5-10)	32,52			20,1	103
ses			draising fees (Part IX,			3 3 10,				20,1	193.
Expenses			<del>-</del>	• • •	•			3,	,,		
ă		-	expenses (Part IX, co	• • •		9,027.	4 4	<del></del>	1	- '- / -	<del> </del>
			(Part IX, column (A), li		•			50,975		41,6	
			Add lines 13-17 (must	•	mn (A), line 25)			142,970		122,2	
8 8	<b>19</b> Re	venue less exp	penses Subtract line 1	18 from line 12 ,	• •	·	1	46,982		241,2	
Net Assets or Fund Balance	<b>20</b> To	tal assets (Pari	t V. lino 16)					of Current Ye		of Year	
		tal liabilities (P	•				3,	021,429		, 255, <u>2</u>	
žĔ		,	•	01 f		•	<u> </u>	9,395			<u> 560.</u>
			d balances Subtract I	ine 21 from line 20			] 3,	012,034	. 3,	254,6	<u> 597.</u>
		Signature B of perjury, I declare ration of preparer (o	that I have examined this reti other than officer) is based on	urn, including accompany all information of which p	ring schedules and state	ements, and to the	ne best of my	knowledge and	belief, it is true	. correct, ar	nd
		1-26-1	P. 1 0 -		<u> </u>	· · · · · · · · · · · · · · · · · · ·		2-11-	<del>  U</del>	<del></del>	
Sig	n	Signature of c	officer		<del></del> -	<del> </del>	Date	- 11-			
Hei			P WILSON name and title				TREAS	URER			
		Print/Type prepare	er's name	Preparer's signature	1 /	Date	Tr	Check If	PTIN		
oai	Ч	JOHN A. I	PRATT, CPA	Mici	11 mil	2/7/		self-employed	P00709	5265	
	u parer		CRASS & SMIT	H, P.A. CPA'	S	<u> </u>	-	opiojeu	11 00 / 0.	,205	
	Only		► 835 CENTRAL	<del></del>				firm's EIN ► 7	1-06156	65	
	•		HOT SPRINGS,	AR 71901	<u> </u>					-1333	
/lav	the IRS	discuss this re	turn with the preparer		e instructions)			()	X Ye		No

BAA For Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2012)

TEEA0113L 12/18/12

Par	t III	—	Service Accomplishments		
			a response to any question in this Part III		
1		ly describe the organization's m			
	<u>SU</u>	PPORT THE OPERATIONS	AND FACILITIES OF RICH MOUNTAIN COMMUNITY COLLEGE.		
	Did t	ne organization undertake any sign	nificant program services during the year which were not listed on the prior		
-		990 or 990-EZ?		Yes X	No
		es,' describe these new services			***
3	Did f	he organization cease conductir	ng, or make significant changes in how it conducts, any program services?	Yes X	No
	If 'Ye	es,' describe these changes on \$	Schedule O	ب	
4	Desc	ribe the organization's program	service accomplishments for each of its three largest program services, as measured	by expe	ıses
	othe	on 501(c)(3) and 501(c)(4) organizes, the total expenses, and rever	cations and section 4947(a)(1) trusts are required to report the amount of grants and allocat nue, if any, for each program service reported	ons to	
			,,		
4 a	(Cod	e ) (Expenses \$	43,510. including grants of \$ 43,510.) (Revenue \$		
	SCF	OLARSHIPS			
4 h	(Cod	e: ) (Expenses \$	19,532. including grants of \$ 19,532.) (Revenue \$		
		PORT OF FACILITIES A			
	= =-				
		- <b> </b>			
			~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		
		·			
4 c	(Code	: ) (Expenses \$	including grants of \$ ) (Revenue \$	<del></del>	
	,	, (Capenedo 4	) (Novellac 4		′
					. – – –
					· – <b>–</b> –
					· <b></b>
					· – – –
4 d (	Other	program services (Describe in	Schedule O)	<del></del>	
. • (	Ехре	nses \$	including grants of \$ ) (Revenue \$	)	
4 e	Total	program service expenses	including grants of \$ ) (Revenue \$ 63,042.		
ΔΔ		,		000 mrs	(0010)

Form 990 (2012) RICH MOUNTAIN COMMUNITY COLLEGE

71-0596885

Page 2

-			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	X	100
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Х	1
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		Х
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		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II.	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' 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 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	Х	
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VIII, IX, or X as applicable		,	5
	a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a	Х	
	b Did the organization report an amount for investments — other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII	11 b		Х
	c Did the organization report an amount for investments — program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII	11 c		X
	d 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	11 d		<u> </u>
	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e		X_
	f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X	11 f		<u> </u>
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	12 b		<u>x</u>
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		X
	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		<u>X</u>
ı	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 foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions)	17		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		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	19		X
	a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20		X
t	olf 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 b		

Form 990 (2012) RICH MOUNTAIN COMMUNITY COLLEGE

Part IV | Checklist of Required Schedules (continued)

<u> </u>	17.17	T	Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21	х	
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	х	
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
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, and 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		х
	<b>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	c 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		
	<b>d</b> Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25	a 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		х
	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		Х
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		х
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		х
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).			. Y . , \
:	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		X
1	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		Х
	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
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		Х
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 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, IV, and V, line 1	34	x	
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
t	olf '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	35ь		
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		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?  Note. All Form 990 filers are required to complete Schedule O	38	Х	
BAA		Form	990 (2	2012)

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Check if Schedule O contains a response to any question in this Part V			
		Yes	No
1 a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1 a	0	,	3 -
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	0	1, 1	١.
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	. 1 c		'.'
2a Enter 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	0	<u> </u>	-
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2 b		1
<b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)		<del> </del>	<del>                                     </del>
3 a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a	ľ	Х
<b>b</b> If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O	3 b	<del> </del>	
4 a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4 a		Х
b If 'Yes,' enter the name of the foreign country ▶	,	-	
See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	1.,2	. ?	1
5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a		X
<b>b</b> Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		Х
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5 c		
6 a 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 charitable contributions?	6 a		Х
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b		
7 Organizations that may receive deductible contributions under section 170(c).	7:,	()	
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and	<b>\</b>		
services provided to the payor?	_ 7 a	<u> </u>	X
<b>b</b> If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 b		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file	_		v
Form 8282?	7 c		Х
d if 'Yes,' indicate the number of Forms 8282 filed during the year . 7d	' '	14	, ; ;
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e		X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		_^
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7 h		
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	e 8		Х
9 Sponsoring organizations maintaining donor advised funds.			,
a Did the organization make any taxable distributions under section 4966?	9 a		·
<b>b</b> Did the organization make a distribution to a donor, donor advisor, or related person?	9 b		
10 Section 501(c)(7) organizations. Enter		· .	
a Initiation fees and capital contributions included on Part VIII, line 12 10a		,	•'-
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
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.)  11 b		·	-
12a Section 4947(a)(1) non - exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12 a		
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b		· / [	
13 Section 501(c)(29) qualified nonprofit health insurance issuers.	) `` {	- ' }	
a Is the organization licensed to issue qualified health plans in more than one state?	13a		
Note. See the instructions for additional information the organization must report on Schedule O.			
b Enter the amount of reserves the organization is required to maintain by the states in		- [	`
which the organization is licensed to issue qualified health plans  13b	İ		
c Enter the amount of reserves on hand  13c			X
14a Did the organization receive any payments for indoor tanning services during the tax year?  b If 'Vos' has it filed a Form 720 to report these payments? If 'No ' provide an explanation in Schodule O.	14a 14b		
<b>b</b> If 'Yes,' has it filed a Form 720 to report these payments? <i>If 'No,' provide an explanation in Schedule O</i>	140	ſ	

Pa	rt VI   Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b below, and f a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or chan Schedule O. See instructions.	or ges i	ın	
	Check if Schedule O contains a response to any question in this Part VI			X
Sec	ction A. Governing Body and Management			
			Yes	No
1	a 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		, ,	
	b Enter the number of voting members included in line 1a, above, who are independent 1b 15	l÷.	, .	15. 12
	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee or key employee?	2	n	X
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		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		Х
7	a 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?	7 a		Х
١	<b>b</b> Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or other persons other than the governing body?	7 b		х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following	2 2 2	,	f - '
	a The governing body?	8 a	Х	ļ.,.
	b Each committee with authority to act on behalf of the governing body?	8ь		Х
9	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O	9	Ĺ	х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue C	<u>;oae.</u>	) Yes	l No.
10:	a Did the organization have local chapters, branches, or affiliates?	10 a	162	No X
	b if 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their	-10 4		<del>  "</del>
•	operations are consistent with the organization's exempt purposes?	10 b		ł
11 a	a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11 a		Х
	b Describe in Schedule O the process, if any, used by the organization to review this Form 990 SEE SCHEDULE O	. ; ; ;		,,,
	a Did the organization have a written conflict of interest policy? If 'No,' go to line 13	12 a	Х	
	Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	х	ļ
13	c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done SEE SCHEDULE Q  Did the organization have a written whistleblower policy?	12 c	X	
14	Did the organization have a written document retention and destruction policy?	13	$-\hat{\mathbf{x}}$	<del> </del>
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	-		
a	The organization's CEO, Executive Director, or top management official	15a		X
	Other officers of key employees of the organization	15 b	$\neg \neg$	X
	If 'Yes' to line 15a or 15b, describe the process in Schedule O (See instructions.)	<del></del>	• •	
16 a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16 a	Х	
t	o 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 taken steps to safeguard the organization's exempt status with respect to such arrangements?	16 b	X	'
	tion C. Disclosure			
17 18	List the states with which a copy of this Form 990 is required to be filed AR  Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) av	allabl	 e for p	– – – public
	Inspection Indicate how you make these available Check all that apply  Own website  Another's website  X Upon request  Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available the public during the tax year SEE SCHEDULE O	ble to		
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization			
BAA	PATRICIA HALL 1100 COLLEGE DRIVE MENA AR 71953 (479) 394-7622 TEEA0106L 08/08/12	Form	990 (	2012)

## 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

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

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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(C)									[	
(A) Name and Title	(B) Average hours per week (list	one bo	ox, un	not	check	k more t in is bot or/truste	h an l	(D) Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of other compensation
SEE SCHEDULE O	any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	from the organization and related organizations
(1) CHRISTY PLUNKETT DIRECTOR	1							0.	0.	0.
(2) DAVID ALLEY CHAIRMAN	1	Х		Х				0.	0.	0.
(3) HECTOR COSTAMANGA DIRECTOR	1	Х						0.	0.	0.
(4) TAWANA GILBERT VICE CHAIR	1	Х		Х				0.	0.	0.
(5) DARRYL SMITH VICE CHAIRMAN	10	Х						0.	0.	0.
(6) CHAD FIELDS DIRECTOR	1	Х						0.1	0.	0.
(7) BILL BEAM DIRECTOR	10	Х						0.	0.	0.
(8) BARBARA BLASBERG DIRECTOR	1	Х						0.	0.	0.
(9) BEN FINLEY DIRECTOR	10	X						0.	0.	0.
(10) LINDA ROWE DIRECTOR	10	X						0.	0.	0.
(11) DONNA MONTGOMERY DIRECTOR	1	х						0.	0.	0.
(12) LAWRENCE PHILPOT DIRECTOR	1	X	7	1	$\dashv$			0.	0.	0.
(13) ANDY RINER DIRECTOR	0							0.	0.	
(14) VICKEY STANLEY SECRETARY	0 - <u>1</u> -	X	$\dashv$	x			+	0.	0.	0.

	(B)			((	>)							
(A) Name and title	Average hours per week	box	, unle	check ess pe	erson	e than is bot or/trus	h an stee)	(D)  Reportable compensation from	(E)  Reportable compensation from	amı	(F) Estimate ount of c	other
	(list any hours for related organiza tions below dotted line)	or director	Institutional fustee	Officer	Key employee	employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	or a	mpensal from the ganizati nd relate ganizatio	ed ed
(15) PHILLIP WILSON TREASURER	$-\frac{1}{40}$	X		х				0.	149,400.	-		0.
(16) GAR EISELE	$-\frac{1}{0}$	х						0.	0.			0.
(17)												
(18)												
(19)												
(20)												
(21)												
(22)												
(23)										<del></del>		
(24)												
(25)												
1 b Sub-total c Total from continuation sheets to Part VII, Section d Total (add lines 1b and 1c)					ء ما،		<b>A A</b>	0. 0. 0.	149,400. 0. 149,400.			0. 0. 0.
2 Total number of individuals (including but not limited to from the organization ► 0	tnose II	stea	abov	/e) w	no i	ecen	vea	more than \$100,00	or reportable comp	ensatio		<del></del>
3 Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such	r or trus <i>ındıvıdu</i> a	tee, al	key	emp	oloy	ee, c	or hi	ghest compensate	ed employee	3	Yes	No X
4 For any individual listed on line 1a, is the sum of rethe organization and related organizations greater such individual	eportabl than \$1!	e co: 50,00	mpe )07	nsat If 'Y	ion es'	and com	oth olet	er compensation f e Schedule J for	rom	4	-	х
5 Did any person listed on line 1a receive or accrue of for services rendered to the organization? If 'Yes,'	compen:	satio le Sc	n fro	om a ule .	any J foi	unre r <i>suc</i>	late h p	d organization or erson	individual	5		х
Section B. Independent Contractors  1 Complete this table for your five highest compensa	tod unde	000	dont		trac	tore	tha	t recoved more th	222 \$100 000 of			
compensation from the organization Report compensa	tion for t	he ca	alend	dar y	ear	endı	ng w	with or within the org	ganization's tax year			
Name and business addres	ss							Description o	f services	Compe	C) ensatio	on
				·····				· · · · · · · · · · · · · · · · · · ·		<del></del>		
2 Total number of independent contractors (including but \$100,000 in compensation from the organization ▶		ted to	tho	se li	sted	abo	ve) v	who received more	than			
BAA	_ <u> </u>	TT AD	1001	01/2							000	(2012)

		Check if Schedule O	contains a respo	nse to any quest	tion in this Part VIII		,	<u>,                                     </u>
	,			,	(A) Total revenue	( <b>B</b> ) Related or exempt function	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections
RANTS	1 a	Federated campaigns Membership dues	1 a			revenue		512, 513, or 514
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	6	Fundraising events Related organizations	1 c 1 d					
RIBUTIONS OTHER SII	f	Government grants (contribut All other contributions, gifts, similar amounts not included	·	252,679.	<b>1</b>	,		
		Noncash contributions include Total. Add lines 1a-1f	ed in Ins 1a-1f. \$	•	252,679.			
PROGRAM SERVICE REVENUE	2a RENT INCOME FROM RMCC 531120				18,165.	18,165.		
SRAM SER	e							
8	'	All other program servi Total, Add lines 2a-2f	ce revenue		18,165.	3 3 "	7 - 7	
	3	Investment income (incother similar amounts)		•	94,296.			94,296.
	4 5	Income from investment Royalties			•			
		Gross rents Less: rental expenses	(i) Real	(II) Personal				
		Rental income or (foss)  Net rental income or (fo		•				1.4
		Gross amount from sales of assets other than inventory	(i) Securities 473,320.	(II) Other				
		Less; cost or other basis and sales expenses Gain or (loss)	475,000. -1,680.				tues of the second	
ш		Net gain or (loss) Gross income from fund		-	-1,680.	-1,680.		
OTHER REVENU		(not including \$	d on line 1c)			-	'	
OTHER		Less: direct expenses Net income or (loss) fro	b	ents ►				
		Gross income from gan See Part IV, line 19	ning activities a b				· · · · · · · · · · · · · · · · · · ·	
		Less direct expenses  Net income or (loss) fro	~[	es	-			,
		Gross sales of inventory and allowances	a					, , . 2
		Less cost of goods sole Net income or (loss) fro	· · · · · · · · · · · · · · · · · · ·	lorv				
		Miscellaneous Reven		Business Code				
	11 a							
,	d							
		Total. Add lines 11a-11 Total revenue. See inst		•	L	16,485.	0.	94,296.
BAA		2.2		TEE	A0109L 12/17/12	10,405.		Form <b>990</b> (2012

## Part IX Statement of Functional Expenses

Sec	tion 501(c)(3) and 501(c)(4) organizations must col			omplete column (A)	
	Check if Schedule O contains a				
Do 7b,	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	( <b>D)</b> Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	16,903.	16,903.	,	
2	Grants and other assistance to individuals in the United States See Part IV, line 22	43,510.	43,510.		
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16		43/510.		
4 5	Compensation of current officers, directors,		_	, , , , , , , , , , , , , , , , , , , ,	
6	trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0. 0.	0.
7	Other salaries and wages	20,193.	2,019.	16,155.	2,019.
8	Pension plan accruals and contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes .				
11	Fees for services (non-employees)				
ě	Management				
ı	Legal		<del></del>		
	Accounting	7,600.		7,600.	
	d Lobbying			.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	Professional fundraising services. See Part IV, line 17		, , , ,		
ſ	Investment management fees		<u></u>		
	Other (If line 11g amt exceeds 10% of line 25, col-				
	umn (A) amt, list line 11g expenses on Sch O)				
	Advertising and promotion	7,458.		450.	7,008.
13	Office expenses	24.		24.	· · · · · · · · · · · · · · · · · · ·
14	Information technology	5,836.		5,836.	·
15	Royalties				
16	Occupancy	2,620.		2,620.	
17	Travel	14.		14.	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	411.		411.	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	7,560.		7,560.	
	Insurance	858.		858.	
24	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 )				<del></del>
	TRAINING	6,348.		6,348.	<del> </del>
	PRINTING AND PUBLICATIONS	853.		853.	··
	AWARDS & RECOGNITION	675.		675.	<del></del> -
	POSTAGE AND SHIPPING	625.		625.	
	All other expenses	730.	610.	120.	···
25	Total functional expenses Add lines 1 through 24e	122,218.	63,042.	50,149.	9,027.
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)				

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 Cash - non-interest-bearing 120,130. 34.239 1 2 Savings and temporary cash investments 2 67.311 120.279 Pledges and grants receivable, net 3 3 Λ Accounts receivable, net 9.578 4 2,650. Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 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 6 Notes and loans receivable, net 7 Inventories for sale or use 8 Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10 a 178,792 10 b b Less accumulated depreciation 22,830 163,522 10 c 155,962 Investments - publicly traded securities 689,582 11 2,816,003. Investments - other securities See Part IV, line 11 57,197 12 40,233 13 Investments - program-related See Part IV, line 11 13 Intangible assets 14 Other assets See Part IV, line 11 15 15 Total assets. Add lines 1 through 15 (must equal line 34) 16 3,021,429 16 3,255,257 Accounts payable and accrued expenses 17 9. 395 17 560 18 Grants pavable 18 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 Escrow or custodial account liability Complete Part IV of Schedule D 21 21 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 Secured mortgages and notes payable to unrelated third parties 23 Unsecured notes and loans payable to unrelated third parties 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D 25 Total liabilities. Add lines 17 through 25 26 9,395 560. Organizations that follow SFAS 117 (ASC 958), check here X and complete N E T lines 27 through 29, and lines 33 and 34, Unrestricted net assets 207,540 27 170,055. Temporarily restricted net assets 900,791 28 949,090. Permanently restricted net assets 29 135, 903,703 Q R Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund 31

BAA

33

34

3, 255, 257. Form **990** (2012)

3,254,697

32

33

34

3,012,034

3,021,429

Retained earnings, endowment, accumulated income, or other funds

Total net assets or fund balances

Total liabilities and net assets/fund balances

Form 990 (2012) RICH MOUNTAIN COMMUNITY COLLEGE	71-059688	35	Page 12					
Part 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	36:	3,460.					
2 Total expenses (must equal Part IX, column (A), line 25)	2		2,218.					
3 Revenue less expenses Subtract line 2 from line 1								
4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		<u>1,242.</u> 2,034.					
5 Net unrealized gains (losses) on investments	5		1,421.					
6 Donated services and use of facilities	6		1,321.					
7 Investment expenses	7							
8 Prior period adjustments .	8	·······						
9 Other changes in net assets or fund balances (explain in Schedule O).	9		0.					
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 25/	4,697.					
Part XII   Financial Statements and Reporting	1.5	3,23	<u>:, 0                                   </u>					
Check if Schedule O contains a response to any question in this Part XII								
Check it Schedule & Contains a response to any question in this Part XII		1,4						
1 Accounting method used to prepare the Form 990. Cash XAccrual Other		<del>Y</del>	es No					
		-						
If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O								
2 a Were the organization's financial statements compiled or reviewed by an independent accountant?		2 a	X					
If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled separate basis, consolidated basis, or both	or reviewed on a	,	7.					
Separate basis Consolidated basis Both consolidated and separate basis								
<b>b</b> Were the organization's financial statements audited by an independent accountant?		2 b	X					
If 'Yes,' check a box below to indicate whether the financial statements for the year were audited or	n a separate		,					
basis, consolidated basis, or both  X 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 o review, or compilation of its financial statements and selection of an independent accountant?		2 c	x					
If the organization changed either its oversight process or selection process during the tax year, expin Schedule O		: 1.3	-					
3 a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Audit Act and OMB Circular A-133?	e Single	3 a	x					
<b>b</b> If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the re or audits, explain why in Schedule O and describe any steps taken to undergo such audits	quired audit	3 ь						
BAA	·		<b>90</b> (2012)					

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

Department of the Treasury Internal Revenue Service

Name of the organization

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

Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust.

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

OMB No 1545-0047

Open to Public Inspection

Employer identification number

RICH MOUNTAIN COMMUNITY COLLEGE FOUNDATION 71-0596885 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) 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.) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's 4 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 5 170(b)(1)(A)(iv). (Complete Part II) 6 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) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) An organization that normally receives: (1) more than 33-1/3% 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 33-1/3% 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) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or 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 c | Type III - Functionally integrated Type III - Non-functionally integrated 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 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? Yes No A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? 11 g (i) A family member of a person described in (i) above? 11 g (ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11 g (iii) Provide the following information about the supported organization(s) h (i) Name of supported (v) Did you notify the organization in column (i) of your support? (iii) Type of organization (described on lines 1-9 above or IRC section (see instructions)) (vi) is the organization in (iv) is the (vii) Amount of monetary organization organization in column (i) listed in support column (I) organized in the US? your governing document? Yes Yes Yes No No No (A) (B) (C) (D) (E) Total BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule A (Form 990 or 990-EZ) 2012

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III I f the organization fails to qualify under the tests listed below, please complete Part III)

Sec	ction A. Public Support	····					
Cale beg	endar year (or fiscal year inning in) ►	(a) 2008	<b>(b)</b> 2009	<b>(c)</b> 2010	<b>(d)</b> 2011	<b>(e)</b> 2012	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants')	266,846.	102,851.	69,754.	80,077.	252,679.	772,207.
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.
3	The value of services or facilities furnished by a governmental unit to the organization without charge.						0.
4	Total. Add lines 1 through 3	266,846.	102,851.	69,754.	80,077.	252,679.	772,207.
5	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					,	
6	shown on line 11, column (f) <b>Public support.</b> Subtract line 5 from line 4		=			-	0. 772,207.
Sec	tion B. Total Support	te e de la constantina della c			<del> </del>		7,272011
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2008	<b>(b)</b> 2009	<b>(c)</b> 2010	<b>(d)</b> 2011	<b>(e)</b> 2012	(f) Total
7	Amounts from line 4	266,846.	102,851.	69,754.	80,077.	252,679.	772,207.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	104,862.	98,542.	96,535.	93,448.	94,296.	487,683.
9	Net income from unrelated business activities, whether or not the business is regularly carried on					31,233	0.
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	13,021.	16,838.	33,832.	30,350.		94,041.
11	Total support. Add lines 7 through 10		- , , ,			, , , , ,	1,353,931.
12	Gross receipts from related activ	ities, etc (see inst	ructions)			12	0.
13	organization, check this box and	stop here		rd, fourth, or fifth ta	ax year as a section	n 501(c)(3)	. ▶ 🗍
	tion C. Computation of Pul						
	Public support percentage for 20			e 11, column (f))		14	57.03%
	Public support percentage from 2	•	·			15	54.95 %
16 a	<b>33-1/3% support test</b> — <b>2012.</b> If and <b>stop here.</b> The organization	the organization of qualifies as a pub	lid not check the l licly supported or	box on line 13, an ganization	d the line 14 is 3.	3-1/3% or more, o	check this box
b	33-1/3% support test — 2011. If t and stop here. The organization	he organization di qualifies as a pub	d not check a boo dicly supported or	k on line 13 or 16a ganization	a, and line 15 is 3	33-1/3% or more,	check this box
17 a	10%-facts-and-circumstances te or more, and if the organization the organization meets the 'facts'	meets the 'facts-a	nd-circumstances	' test, check this b	oox and stop here	e. Explain in Parti	IV how
	10%-facts-and-circumstances te or more, and if the organization rorganization meets the 'facts-and Private formation life the account	meets the 'facts-a f-circumstances' t	nd-circumstances est The organiza	' test, check this b tion qualifies as a	oox and <b>stop her</b> publicly supporte	e. Explain in Part ed organization	IV how the ►
BAA	Private foundation. If the organiz	zation old not ched	ck a box on line 1	3, Iba, Ibb, I/a,			
JAA					Cah	adula A /Farm 00	0 000 E71 2012

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 yr beginning in)	(a) 2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions and membership fees		- <del>-</del> -				
	received (Do not include any 'unusual grants ')						
2	Gross receipts from admis-						·-vr. ··
	sions, merchandise sold or services performed, or facilities						
	furnished in any activity that is						
	related to the organization's tax-exempt purpose						
3	Gross receipts from activities		<del> </del>	<del>                                 </del>	<u> </u>		
Ĭ	that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and						
	either paid to or expended on						
5	its behalf The value of services or						
,	facilities furnished by a						
	governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						<del></del>
	Amounts included on lines 1,						<del></del>
	2, and 3 received from disqualified persons						
ŧ	Amounts included on lines 2						
	and 3 received from other than disqualified persons that						
	exceed the greater of \$5,000 or						
	1% of the amount on line 13 for the year					1	
(	Add lines 7a and 7b				1	<del></del>	
8	Public support (Subtract line	-1 ( b	1 2 3 4 167 1	,	1, 1, 15		<del></del>
	7c from line 6.)	; , , , ,		33 , 34 /		42 4 2 2	
	tion B. Total Support			<del></del>	<del></del>	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·
	dar year (or fiscal yr beginning in)	(a) 2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	<b>(e)</b> 2012	(f) Total
	Amounts from line 6 Gross income from interest.						
10 6	dividends, payments received						
	on securities loans, rents,						
	royalties and income from similar sources						
t	Unrelated business taxable						
	income (less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b,						
	whether or not the business is	}					
	regularly carried on					·	
12	Other income Do not include gain or loss from the sale of						
	capital assets (Explain in Part IV.)						
13	Total support. (Add ins 9, 10c, 11, and 12)						
		s for the organiza	tion's first secon	d third fourth (	or fifth tax year as	a section 501(c)(3	\ <u> </u>
	organization, check this box and	stop here		ia, tima, ioditii, t			<u>′</u> <u>►</u> ∏
	tion C. Computation of Put						
	Public support percentage for 20	•	• • •	ne 13, column (f)	)	15	
	Public support percentage from 2			· · · · · · · · · · · · · · · · · · ·		16	િ
	tion D. Computation of Inv						
	Investment income percentage for				umn (f))	17	<del></del>
	Investment income percentage fr					18	%
	33-1/3% support tests $-$ 2012. If is not more than 33-1/3%, check	the organization of this box and stop	aid not check the here. The organ	box on line 14, a ization qualifies	and line 15 is more as a publicly suppo	rted organization	<b>P</b>
D	<b>33-1/3% support tests</b> – <b>2011.</b> If line 18 is not more than 33-1/3%	the organization of the check this box as	did not check a b nd <b>stop here.</b> The	ox on line 14 or l e organization qu	line 19a, and line 1 ualifies as a publicly	6 is more than 33 y supported organ	-1/3%, and ►

	(Form 990 or 990-EZ) 2012	RICH MOUNTAIN	N COMMUNITY COLLEGE	71-0596885	Page 4
Part IV	Supplemental Informat Part II, line 17a or 17b; (See instructions).	tion. Complete thi and Part III, line	s part to provide the explant 12. Also complete this part	ations required by Part II, line for any additional information.	10;
				· <b></b>	
<del>-</del>					
		. <b></b>			
		·			

## SCHEDULE D (Form 990)

## **Supplemental Financial Statements**

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

► Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 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
Employer identification number

	CH MOUNTAIN COMMUNITY COLLEGE UNDATION		71-0596885
Pa	rt   Organizations Maintaining Dong	or Advised Funds or Other Similar Funds or Ac	counts. Complete if
	the organization answered 'Yes'	to Form 990, Part IV, line 6.	
		(a) Donor advised funds (b) F	unds 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		
_	Dod the consequent of the consequent		I formale
5	are the organization's property, subject to the		Yes No
6	for charitable purposes and not for the benefit impermissible private benefit?	ors, and donor advisors in writing that grant funds can be us t of the donor or donor advisor, or for any other purpose co	nferring  Yes  No
Pa	t II   Conservation Easements. Comp	plete if the organization answered 'Yes' to Form	990. Part IV. line 7.
1	Purpose(s) of conservation easements held b		
	Preservation of land for public use (e.g., i		ally important land area
	Protection of natural habitat	Preservation of a certified	historic structure
	Preservation of open space		
2	· · ·	held a qualified conservation contribution in the form of a conser	vation easement on the
		, ,	Held at the End of the Tax Year
	a Total number of conservation easements .	2 a	
	b Total acreage restricted by conservation ease	ments 2b	
	Number of conservation easements on a certi	fied historic structure included in (a) 2c	
	Number of conservation easements included in	in (c) acquired after 8/17/06, and not on a historic	
	structure listed in the National Register	2 d	
3	Number of conservation easements modified, trar tax year ►	nsferred, released, extinguished, or terminated by the organization	on during the
4	Number of states where property subject to conse	ervation easement is located •	
5	Does the organization have a written policy re and enforcement of the conservation easemet	egarding the periodic monitoring, inspection, handling of vions it holds?	lations, Yes No
6	Staff and volunteer hours devoted to monitoring,	inspecting, and enforcing conservation easements during the year	ar
7	Amount of expenses incurred in monitoring, insper ►\$	ecting, and enforcing conservation easements during the year	
8	Does each conservation easement reported or and section 170(h)(4)(B)(II)?	n line 2(d) above satisfy the requirements of section 170(h)	(4)(B)(ı) Yes No
9	include, if applicable, the text of the footnote	s conservation easements in its revenue and expense statement to the organization's financial statements that describes the	, and balance sheet, and organization's accounting for
_	conservation easements	ections of Art, Historical Treasures, or Other Sin	nilar Accete
	Complete if the organization ans	wered 'Yes' to Form 990, Part IV, line 8.	
	art, historical treasures, or other similar assets he in Part XIII, the text of the footnote to its final		public service, provide,
	historical treasures, or other similar assets held following amounts relating to these items	r SFAS 116 (ASC 958), to report in its revenue statement a or public exhibition, education, or research in furtherance of pub	lic service, provide the
	(i) Revenues included in Form 990, Part VIII,	, line 1	► \$
	(ii) Assets included in Form 990, Part X		►\$
	amounts required to be reported under SFAS		
	a Revenues included in Form 990, Part VIII, line	e 1	<b>S</b>
1	Assets included in Form 990. Part X		►S

Schedule D (Form 990) 2012 RICH Part III Organizations Mainta				71-0596 ther Similar Ass		Page 2
3 Using the organization's acquisition items (check all that apply).  a Public exhibition b Scholarly research		records, check any of	<del> </del>		<del></del>	<u> </u>
<ul> <li>c Preservation for future gener</li> <li>4 Provide a description of the organiz Part XIII</li> <li>5 During the year, did the organiza to be sold to raise funds rather th</li> </ul>	ation's collections and	explain how they furth	-		Yes	□No
Part IV Escrow and Custodial Arra	angements. Complet	e if the organization				
1 a is the organization an agent, trus on Form 990, Part X? b if 'Yes,' explain the arrangement		•		. [	Yes	No
c Beginning balance d Additions during the year e Distributions during the year				1 c 1 d 1 e	Amount	
f Ending balance  2 a Did the organization include an a b If 'Yes,' explain the arrangement	ın Part XIII Check h	ere if the explantion b			Yes .	No
Part V   Endowment Funds. Co	(a) Current	(b) Prior year	(c) Two years	(d) Three years	(e) Four yea	ars
1 a Beginning of year balance	1,995,738.	1,919,476.	1,848,806.	1,641,231.		,042.
<b>b</b> Contributions	197,345.	55,378.	68,543.	198,632.		, 971.
c Net investment earnings, gains, and losses d Grants or scholarships	70,204.	62,479.	45,656.	60,438.		
e Other expenditures for facilities and programs	-37,415.	-41,595.	-43,529.	-51,495.		
f Administrative expenses	0.005.070	1 005 700	1 010 476	1 040 006	1,641	
g End of year balance [ 2 Provide the estimated percentage 2 Poord decimated as given and over	=	·	1,919,476. column (a)) held as	1,848,806.	1,641	. 231.
a Board designated or quasi-endowmen b Permanent endowment ▶ c Temporarily restricted endowmen The percentages in lines 2a, 2b, a	₹ t ► and 2c should equal		d and administered for	the		
3 a Are there endowment funds not in the organization by:	ie hossession of the or	ganization that are her	u and administered for	II IC	Yes	No
(i) unrelated organizations					3a(i)	Х
(ii) related organizations					3a(ii)	Х
<b>b</b> If 'Yes' to 3a(II), are the related o	•	•			3b	
4 Describe in Part XIII the intended	uses of the organiza	ation's endowment fur	nds			

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1 a Land .		27,600.		27,600.
<b>b</b> Buildings		151,192.	22,830.	128,362.
c Leasehold improvements				
<b>d</b> Equipment				
e Other				
Total. Add lines 1a through 1e (Column (d)	nust equal Form 990, Part X, c	olumn (B), line 10(c) )	<b>&gt;</b>	155,962.

BAA

► 155, 962. Schedule **D** (Form 990) 2012

Part VII	Investments - Other Securities. See	Form 990, Part X,	line 12. N/A
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation <sup>.</sup> Cost or end-of-year market value
	rial derivatives		
	y-held equity interests		
(3) Other			
(A) (B) (C)			
(B)			
(C)			
(D) (E)			
(E)			
(F) (G)			
(G)			
(H)			
(l)		-	
	nn (b) must equal Form 990, Part X, column (B) line 12	F 000 D+ V	
Part VIII	Investments – Program Related. See		
	(a) Description of investment type	<b>(b)</b> Book value	(c) Method of valuation Cost or end-of-year market value
(1)	· · · · · · · · · · · · · · · · · · ·		
(2)			
(3)		· · · · · · · · · · · · · · · · · · ·	
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10)			
	nn (b) must equal Form 990, Part X, column (B) line 13)		431, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1
Part IX	Other Assets. See Form 990, Part X, I	ine 15. N/A	
1 4/1/1/			
		scription	(b) Book value
(1)			
(1)			
(1) (2) (3)			
(1) (2) (3) (4)			
(1) (2) (3) (4) (5)			
(1) (2) (3) (4) (5) (6)			
(1) (2) (3) (4) (5) (6) (7)			
(1) (2) (3) (4) (5) (6) (7) (8)			
(1) (2) (3) (4) (5) (6) (7) (8) (9)			
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10)	(a) De	scription	
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) <b>Total.</b> (Co	(a) De	scription  3), line 15)	(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10)	lumn (b) must equal Form 990, Part X, column (b) Other Liabilities. See Form 990, Part X	3), line 15) X, line 25.	(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10)  Total. (Co	Jumn (b) must equal Form 990, Part X, column (b) Other Liabilities. See Form 990, Part X (a) Description of liability	scription  3), line 15)	(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10)  Total. (Co  Part X	lumn (b) must equal Form 990, Part X, column (b) Other Liabilities. See Form 990, Part X	3), line 15) X, line 25.	(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Co Part X  (1) Fede (2)	Jumn (b) must equal Form 990, Part X, column (b) Other Liabilities. See Form 990, Part X (a) Description of liability	3), line 15) X, line 25.	(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Co Part X  (1) Fede (2) (3)	Jumn (b) must equal Form 990, Part X, column (b) Other Liabilities. See Form 990, Part X (a) Description of liability	3), line 15) X, line 25.	(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Co Part X  (1) Fede (2)	Jumn (b) must equal Form 990, Part X, column (b) Other Liabilities. See Form 990, Part X (a) Description of liability	3), line 15) X, line 25.	(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Co Part X  (1) Fede (2) (3) (4)	Jumn (b) must equal Form 990, Part X, column (b) Other Liabilities. See Form 990, Part X (a) Description of liability	3), line 15) X, line 25.	(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10)  Total. (Co  Part X  (1) Fede (2) (3) (4) (5)	Jumn (b) must equal Form 990, Part X, column (b) Other Liabilities. See Form 990, Part X (a) Description of liability	3), line 15) X, line 25.	(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10)  Total. (Co  Part X  (1) Fede (2) (3) (4) (5) (6)	Jumn (b) must equal Form 990, Part X, column (b) Other Liabilities. See Form 990, Part X (a) Description of liability	3), line 15) X, line 25.	(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Co Part X  (1) Fede (2) (3) (4) (5) (6) (7)	Jumn (b) must equal Form 990, Part X, column (b) Other Liabilities. See Form 990, Part X (a) Description of liability	3), line 15) X, line 25.	(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Co Part X  (1) Fede (2) (3) (4) (5) (6) (7) (8)	Jumn (b) must equal Form 990, Part X, column (b) Other Liabilities. See Form 990, Part X (a) Description of liability	3), line 15) X, line 25.	(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Co Part X  (1) Fede (2) (3) (4) (5) (6) (7) (8) (9)	Jumn (b) must equal Form 990, Part X, column (b) Other Liabilities. See Form 990, Part X (a) Description of liability	3), line 15) X, line 25.	(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10)  Total. (Co  Part X  (1) Fede (2) (3) (4) (5) (6) (7) (8) (9) (10) (11)  Total. (Colum	(a) Description of liability ral income taxes  (b) must equal Form 990, Part X, column (b) must equal Form 990, Part X (column (b) must equal Form 990, Part X, column (b) line 25)	3), line 15 ) X, line 25. (b) Book value	(b) Book value

	-0596885	Page 4
Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Re	eturn	
1 Total revenue, gains, and other support per audited financial statements	1	364,881.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a Net unrealized gains on investments . 2a 1,421.		
b Donated services and use of facilities 2b	1	
c Recoveries of prior year grants	1	
d Other (Describe in Part XIII )	1 1	
e Add lines 2a through 2d	2 e	1,421.
3 Subtract line 2e from line 1	3	363,460.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:	• • • • • • • • • • • • • • • • • • •	303,400.
	1 [	
	<del> </del>	
b Other (Describe in Part XIII ) . 4b c Add lines 4a and 4b.		
	4 c	0.60 4.60
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	363,460.
Part XII   Reconciliation of Expenses per Audited Financial Statements With Expenses per	Return	
1 Total expenses and losses per audited financial statements	1	122,218.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25		
a Donated services and use of facilities	·	
b Prior year adjustments . 2b		
c Other losses 2c		
d Other (Describe in Part XIII )		
e Add lines 2a through 2d	2 e	
3 Subtract line 2e from line 1	3	122,218.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a 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	4 c	
5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	122,218.
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, 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	Ines 1b and 2 additional info	b, Part V, rmation
·		
	<b></b>	
300	Schedule <b>D</b> (Fo	rm 990\ 2012

# SCHEDULE 1 (Form 990)

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

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

2012

OMB No 1545-0047

Open to Public Inspection

Employer identification number Department of the Treasury Internal Revenue Service Name of the organization

RICH MOUNTAIN COMMUNITY COLLEGE	71-0596885	
Part I General Information on Grants and Assistance		
1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?	X Yes	<u>2</u>
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States	<b>.</b>	
Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered 'Yes' to	on answered 'Yes' to	
	בסבססם טו סככם	

(a) Name and address of organization     or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
RICH MOUNTAIN COMMUNITY COLLE							SUPPORT FOR COLLEGE PROGRAMS AND
(2) MENA, AR 71953	71-0596885		16, 903.	0			PROPERTY
(3)							
(4)							
(9)							
<u>ω</u>							
(8)							
<ul> <li>2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table</li> <li>3 Enter total number of other organizations listed in the line 1 table</li> </ul>	(3) and government or tions listed in the line	ganizations listed in table	n the line 1 table			<b>A A</b>	

Schedule I (Form 990) (2012)

TEEA3901L 11/30/12

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

Page 2 Schedule I (Form 990) (2012) (f) Description of non-cash assistance Grants and Other Assistance to Individuals in the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other 71-0596885 (e) Method of valuation (book, FMV, appraisal, other) FOUNDATION RECEIVES WRITTEN AND VERBAL COMMUNICATION FROM COLLEGE REGARDING (d) Amount of non-cash assistance PART I, LINE 2 - PROCEDURES FOR MONITORING USE OF GRANTS FUNDS IN U.S. 43,510 (c) Amount of cash grant RICH MOUNTAIN COMMUNITY COLLEGE 56 (b) Number of recipients UTILIZATION OF GRANT PROCEEDS. additional information. (a) Type of grant or assistance Schedule I (Form 990) (2012) SCHOLARSHIPS Part IV Part III BAA \_ ~ ന 4 ß 9

### **SCHEDULE 0** (Form 990 or 990-EZ)

## 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.

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or 990-EZ.

Open to Public Inspection

Name of the organization RICH MOUNTAIN COMMUNITY COLLEGE	Employer identification number
FOUNDATION	71-0596885
FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS	
FORM 990 REVIEWED BY COMMUNITY COLLEGE STAFF KNOWLE	DGABLE ABOUT INFORMATION
APPEARING ON RETURN AND SUPPLEMENTARY SCHEDULES.	
FORM 990, PART VI, LINE 12C - EXPLANATION OF MONITORING AN	ID ENFORCEMENT OF CONFLICTS
THE EXECUTIVE COMMITTEE REVIEWS ALL TRANSACTIONS TO	IDENTIFY POTENTIAL CONFLICTS OF
INTEREST AND INAPPROPRIATE ACTIVITIES.	
FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS	S PUBLICLY AVAILABLE
GOVERNING DOCUMENTS, POLICIES AND FINANCIAL STATEMEN	NTS ARE AVAILABLE UPON REQUEST.
FORM 990, PART VII - COMPENSATION EXPLANATION	
PHILLIP WILSON	
PROVIDES 40 HOURS PER WEEK OF SERVICE TO RICH MOUNTA	AIN COMMUNITY COLLEGE.
	·
	· · · · · · · · · · · · · · · · · · ·

(g) Sec 512(b)(13) controlled entity? ŝ Schedule R (Form 990) 2012 (f)
Direct controlling entity × Part II Identification of Related Tax-Exempt Organizations (Complete if the organization answered 'Yes' to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.) Open to Public Inspection OMB No 1545-0047 2012 Yes Employer identification number (f)
Direct controlling
entity 71-0596885 N/A (e) End-of-year assets (e)
Public charity status (if section 501(c)(3)) Part I Identification of Disregarded Entities (Complete of the organization answered 'Yes' to Form 990, Part IV, line 33.) ~ (d) Total income Complete if the organization answered 'Yes' to Form 990, Part IV, line 33, 34, 35, 36, or 37. Attach to Form 990. Fore separate instructions. Related Organizations and Unrelated Partnerships **(d)** Exempt Code section TEEA5001L 12/28/12 501 (C) (3) (c) Legal domicile (state or foreign country) (c) Legal domicile (state or foreign country) AR (b)
Primary activity COMMUNITY (b)
Primary activity BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990. RICH MOUNTAIN COMMUNITY COLLEGE FOUNDATION (a) Name, address, and EIN (if applicable) of disregarded entity RICH MOUNTAIN COMMUNITY COLLEGE 1100 COLLEGE DRIVE ARNA, AR 71953 ------(a)
Name, address, and EIN of related organization 111 Department of the Treasury Internal Revenue Service Name of the organization SCHEDULE R (Form 990) 8 Ξ (3) 8 ଫ୍ର¦ €

Schedule R (Form 990) 2012 RICH MOUNTAIN COMMUNITY COLLEGE FOUNDATION

(i) Sec 512(b)(13) controlled entity? (k) Percentage ownership ž Schedule R (Form 990) 2012 Identification of Related Organizations Taxable as a Corporation or Trust (Complete of the organization answered 'Yes' to Form 990, Part IV, line 34 because of had one or more related organizations treated as a corporation or trust during the tax year.) Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered 'Yes' to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.) Yes General or managing partner? ŝ (h)
Percentage
ownership Yes Code V-UBI amount in box 20 of Schedule K-1 (Form 1065) (g) Share of end-of-year assets (h)
Disproportionate
allocations? No Yes Share of total income  $\boldsymbol{arepsilon}$ (g) Share of end-of-year assets (e)
Type of entity
(C corp, S corp, or trust) (f) Share of total income (d)
Direct
controlling
entity TEEA5002L 12/28/12 Predominant income (related, unrelated, excluded from tax under sections 512-514) (c) Legal domicile (state or foreign country) <u>e</u> (d)
Direct
controlling
entity (b) Primary activity (c) Legal domicile (state or foreign country) (a)
Name, address, and EIN of related organization (b) Primary activity (a)
Name, address, and EIN of related organization Part III Part IV BAA  $\mathbf{\epsilon}$  $\mathbf{\epsilon}'$ ଷ୍ଟ ල ପ୍ର¦ ල

Page 3 71-0596885

Schedule R (Form 990) 2012 RICH MOUNTAIN COMMUNITY COLLEGE FOUNDATION

71-0596

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

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule				Yes	8 Z
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	d in Parts II-1V?				J
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity					×
<b>b</b> Gift, grant, or capital contribution to related organization(s)			<u>ا</u>	×	<u> </u>
c Gift, grant, or capital contribution from related organization(s)			10		×
d Loans or loan guarantees to or for related organization(s)			7	L	×
e Loans or loan guarantees by related organization(s)			1e		×
f Dividends from related organization(s)					>
			=  -	1	4
			6	4	×
n Purchase of assets from related organization(s)			=	_	×
i Exchange of assets with related organization(s)			=		×
j Lease of facilities, equipment, or other assets to related organization(s)			<u>-</u>		×
k Lease of facilities, equipment, or other assets from related organization(s)			- 4		×
l Performance of services or membership or fundraising solicitations for related organization(s)			=	_	×
m Performance of services or membership or fundraising solicitations by related organization(s)			E	<u> </u>	×
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)			-	<u> </u>	×
o Sharing of paid employees with related organization(s)			10		×
n Reimbursement haid to related ornanization(s) for exhances			,		;
			<u>-</u>		×
q Keimbursement paid by related organization(s) for expenses			-1	_	×
r Other transfer of cash or property to related organization(s).					×
s l			18	_	×
2 If the answer to any of the above is 'Yes,' see the instructions for information on who must complete this line, including covered relationships and transaction thresholds	relationships and tran-	saction thresholds			
(a) Name of other organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved	(d) deter t invol	mining
(1) RICH MOUNTAIN COMMUNITY COLLEGE	Ω	19, 532.	CASH		
(2)					
(3)					
(4)					
(5)					
BAA TEEA5003L 12/28/12		Schedu	Schedule R (Form 990) 2012	)66 m.	) 2012

71-0596885

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unre-	(e) Are all partners section 501(c)(3)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?	Code V-UBI amount in box 20 of Schedule	General or managing partner?	or Percentage ownership
			from tax under section 512-514)	Yes No	-1-		Yes No	Form (1065)	Yes	9
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Part VII	Supplemental Information Complete this part to provide additional information for responses to questions on Schedule R (see instructions).
<b></b> _	

Schedule **R** (Form 990) 2012

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2012

## SCHEDULE A, PART IV - SUPPLEMENTAL INFORMATION PAGE 5

RICH MOUNTAIN COMMUNITY COLLEGE FOUNDATION

71-0596885

PART II.	LINE	10 -	OTHER	<b>INCOME</b>
1 711 119		10-	$\circ$	HILL

NATURE AND SOURCE	2012	2	011	2010	2009	2008
SPECIAL EVENTS	TOTAL \$		\$ 30,350. 30,350.	8,050. 25,782. 33,832.	\$ 16,838. \$ 16,838.	\$ 13,021. \$ 13,021.