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Department of the Treasury

CHANGE OF ACCOUNTING PERIOD

Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung

benefit trust or private foundation)

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

A	For the 2	012 calendar year, or tax year beginning $JAN 1$, 2013 and en	nding A	UG 31, 2013					
В	Check If	C Name of organization		D Employer identifica	ation number				
_	applicable								
	Address change	RUN WILD MISSOULA INC							
	Name change	Doing Business As		20-57	94114				
L	Initial return	1 ' 1	oom/suite	E Telephone number					
<u>L</u>	Termin- ated	PO BOX 1573		406-544-3150					
<u>L</u>	Amended	City, town, or post office, state, and zir code	G Gross receipts \$ 471,400.						
L.	Applica- tion pending	MISSOULA, MT 59806		H(a) Is this a group return					
F Name and address of principal officer EVA P. DUNN-FROEBIG for affiliates?									
	.	PO BOX 1573, MISSOULA, MT 59806		H(b) Are all affiliates inclu					
		pt status: X 501(c)(3) 501(c) () (Insert no.) 4947(a)(1) or	527	1	st. (see instructions)				
		► WWW.RUNWILDMISSOULA.ORG	7. 7.	H(c) Group exemption					
	_	ganization: X Corporation Trust Association Other	L Year	of formation: 2006 M	State of legal domicile: MT				
LF	, ,	ummary	TID M	TCCOIII A DDOM	OMEC AND				
çe		lefly describe the organization's mission or most significant activities RUN W. UPPORTS RUNNING AND WALKING AS SPORTS FOI							
nan									
Ver	i .	neck this box if the organization discontinued its operations or disposed imber of voting members of the governing body (Part VI, line 1a)	a or more	3					
ဗ္ဗ	1	imber of voting members of the governing body (Part VI, line 1a)		4	8				
Activities & Governance		tal number of individuals employed in calendar year 2012 (Part V, line 2a)		5	0				
itie	1	tal number of volunteers (estimate if necessary)		6	1600				
ςį	1	tal unrelated business revenue from Part VIII, column (C), line 12		7a	0.				
ď		at unrelated business taxable income from Form 990-T, line 34		7b	0.				
				Prior Year	Current Year				
a	8 Cc	ontributions and grants (Part VIII, line 1h)		87,790.	79,869.				
ğ	9 Pr	ogram service revenue (Part VIII, line 2g)		532,304.	366,779.				
Revenue	10 Inv	vestment income (Part VIII, column (A), lines 3, 4, and 7d)		529.	<u> </u>				
щ	11 Ot	her revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	<u> </u>	9,599.	12,322.				
	12 To	tal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	ļ	630,222.	459,270.				
	13 Gr	ants and similar amounts paid (Part IX, column (A), lines 1-3)		14,773.	9,520.				
	14 Be	enefits paid to or for members (Part IX, column (A), line 4)	<u> </u>	0.	0.				
ės	15 Sa	alaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	<u> </u>	81,922.	52,754.				
Expenses	16a Pr	ofessional fundraising fees (Part IX, column (A), line 11e)	<u> </u>	0.	0.				
Ϋ́	b To		0.	435 341	437 300				
_	11/ Ut	her expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	~) 	435,241.	437,200.				
		otal expenses. Add lines 13-17 (must equal Part IX, column (A) (100 25)		531,936.	499,474.				
<u> </u>		evenue less expenses Subtract line 18 from line 12	1 - 1	98,286.	<40,204.>				
Net Assets or E	20 To	otal assets (Part X, line 16)	4 21	ginning of Current Year 312,393.	End of Year 272, 448.				
ASSIGN	20 To	otal liabilities (Part X, line 16)	—J ≝ 	1,656.	1,683.				
Net	22 Ne	et assets or fund balances. Subtract line 21 from line 20 OGDEM U	jT H	310,737.	270,765.				
		Signature Block			27077034				
_		es of perjury, I declare that I have examined this return, including accompanying schedules a	and statem	ents, and to the best of my	knowledge and belief, it is				
		and complete. Declaration of preparer (other than officer) is based on all information of whic		· · · · · · · · · · · · · · · · · · ·	,				
		v 9va Dun-twebs		x 2-14	1-2014				
Sig	ın J	Signature of officer		'Date					
He	re 📗	EVA P. DUNN-FROEBIG, EXECUTIVE DIRECTOR	R						
		Type or print name and title							
		rınt/Type preparer's name Preparer's signature		Date Check	PTIN				
Pai			CPA 0	1/30/14 self-employed					
Preparer Firm's name ► ANDERSON ZURMUEHLEN & CO., P.C. Firm's EIN ► 81-038									
Use Only Firm's address P.O. BOX 2368									
_		MISSOULA, MT 59806		Phone no. (4	106) 721-7800				
Ma	y the IRS	discuss this return with the preparer shown above? (see instructions)			X Yes No				

	990 (2042) 2013 RUN WILD MISSOULA INC 20-5	794114 Page 2
Pai	rt III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response to any question in this Part III	X
1	Briefly describe the organization's mission:	
•	RUN WILD MISSOULA PROMOTES AND SUPPORTS RUNNING AND WALKING	7 C CDUDEC
		
	FOR PEOPLE OF ALL AGES AND ABILITIES. RUN WILD MISSOULA PRO	
		SEMINARS
	AND MORE.	
2	Did the organization undertake any significant program services during the year which were not listed on	
	the prior Form 990 or 990-EZ?	Yes X No
	If "Yes," describe these new services on Schedule O	
_		Yes X No
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	LYes LANo
	If "Yes," describe these changes on Schedule O	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured	d by expenses
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the to	tal expenses, and
	revenue, if any, for each program service reported	•
4-		283,596.)
4a	(Code) (Expenses \$ 348,247. including grants of \$ 6,850.) (Revenue \$	
	MISSOULA MARATHON - IN EXCESS OF 6,300 PARTICIPANTS. THE ORG	
	MAIN PURPOSE IS TO PROMOTE AND FURTHER RUNNING AND WALKING I	<u>N WESTERN</u>
	MONTANA.	
4b	(Code) (Expenses \$33,086. including grants of \$2,670.) (Revenue \$	<u>57,099.</u>)
	ALL OTHER EVENTS AND ACTIVITIES THROUGHOUT THE YEAR: RACES A	ND OTHER
	RUNNING AND WALKING EVENTS PROVIDE OPPORTUNITIES FOR PERSONS	OF ALL
	AGES AND ABILITIES, INCLUDING CHILDREN AND DISABLED INDIVIDU	
	PARTICIPATE IN REGULAR EXERCISE ACTIVITIES, THEREBY PROMOTIN	
	AND HEALTHY LIFESTYLE. RWM PROVIDES SUPPORT AND MOTIVATION T	HROUGH
	GROUP RUNS, TRACK WORKOUTS, SEMINARS AND MORE.	
4c	(Code) (Expenses \$ 11,833 • including grants of \$) (Revenue \$	26.084.)
4c	·	26,084.)
4c	PUBLICATIONS AND CLASSES. THROUGH ITS REGULAR PUBLICATION,	
4c	PUBLICATIONS AND CLASSES. THROUGH ITS REGULAR PUBLICATION, COMMUNICATIONS, CLASSES AND CLINICS, RWM OFFERS ITS MEMBERS	AND THE
4c	PUBLICATIONS AND CLASSES. THROUGH ITS REGULAR PUBLICATION, COMMUNICATIONS, CLASSES AND CLINICS, RWM OFFERS ITS MEMBERS PUBLIC AT LARGE EXPERT ADVICE ON SUBJECTS SUCH AS RUNNING, W	AND THE ALKING,
4c	PUBLICATIONS AND CLASSES. THROUGH ITS REGULAR PUBLICATION, COMMUNICATIONS, CLASSES AND CLINICS, RWM OFFERS ITS MEMBERS	AND THE ALKING,
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4c	PUBLICATIONS AND CLASSES. THROUGH ITS REGULAR PUBLICATION, COMMUNICATIONS, CLASSES AND CLINICS, RWM OFFERS ITS MEMBERS PUBLIC AT LARGE EXPERT ADVICE ON SUBJECTS SUCH AS RUNNING, W NUTRITION, MARATHON PREPARATION, AND OTHER BENEFICIAL ACTIVI ENABLE THEM TO IMPROVE THEIR HEALTH AND FITNESS. Other program services (Describe in Schedule O)	AND THE ALKING, TIES TO
	PUBLICATIONS AND CLASSES. THROUGH ITS REGULAR PUBLICATION, COMMUNICATIONS, CLASSES AND CLINICS, RWM OFFERS ITS MEMBERS PUBLIC AT LARGE EXPERT ADVICE ON SUBJECTS SUCH AS RUNNING, W NUTRITION, MARATHON PREPARATION, AND OTHER BENEFICIAL ACTIVI ENABLE THEM TO IMPROVE THEIR HEALTH AND FITNESS.	AND THE ALKING, TIES TO
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4d	PUBLICATIONS AND CLASSES. THROUGH ITS REGULAR PUBLICATION, COMMUNICATIONS, CLASSES AND CLINICS, RWM OFFERS ITS MEMBERS PUBLIC AT LARGE EXPERT ADVICE ON SUBJECTS SUCH AS RUNNING, W NUTRITION, MARATHON PREPARATION, AND OTHER BENEFICIAL ACTIVI ENABLE THEM TO IMPROVE THEIR HEALTH AND FITNESS. Other program services (Describe in Schedule O) (Expenses \$ including grants of \$) (Revenue \$ 12,3	AND THE ALKING, TIES TO

10120130 792194 170541

Form 990 (2612) 2013 RUN WILD MISSOULA INC Part IV Checklist of Required Schedules

1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
If "Yes," complete Schedule A	1_	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
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 effection of the section 501(c) and the section 501(d) organizations.			v
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, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	-	 	Λ_
provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part	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
B 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		X
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, VII, VIII, IX, or X			
as applicable			
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,		,,	
Part VI	11a	X	
b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	445		v
assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	11b	1	X
assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
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	110	<u> </u>	- 11
Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	}	х
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
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	11f		Х
12a 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	ļ	X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a Did the organization maintain an office, employees, or agents outside of the United States?b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	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 foreign investments valued at \$100,000	1		
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	140		
or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		х
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	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	<u> </u>	X
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	<u> </u>	Х
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	 	Х
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	990	(2245)

·		Yes	No
Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the			
	21	_X	
			3.5
	22		<u> </u>
· · · · · · · · · · · · · · · · · · ·			
			v
	23		<u> X</u>
· · · · · · · · · · · · · · · · · · ·			
	242		X _
	-		
	240		
	24c		
disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
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		X
Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified			
person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		<u>X</u>
	27		<u> </u>
	200	v	
		^	Х
	200		
	28c	x	
	29		X
Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
contributions? If "Yes," complete Schedule M	30		X
Did the organization liquidate, terminate, or dissolve and cease operations?			
If "Yes," complete Schedule N, Part I	31		_X_
Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
Schedule N, Part II	32		<u> </u>
, , , , , , , , , , , , , , , , , , , ,			
	33		<u> </u>
			v
			X
	ა ე a		X
	35h		
-	33D		
, , , , , , , , , , , , , , , , , , , ,	36		Х
	37		х
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	
	Form	990 ((2012)
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II 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 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, frustees, key employees, and highest compensated employees? If "Yes," complete Schedule J. Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25 Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 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 is the organization awaver 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-E2? If "Yes," complete Schedule L, Part II 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 tay year? If "Yes," complete Schedule L, Part II Was the organization provide a grant or other assistance to an officer, director, trustee, we persone outstanding as of the end of the organization's tay year? If "Yes," complete Schedule L, Part IV A tarnely member of a current of former officer, director, trustee, or key employee? If "Yes," complete	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II 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 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officiers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule I II and the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization martian an escrow account other than a refunding escrow at any time during the year? Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person on a prior year, and that the transaction has not been reported on any of the organization or prome 990 or 990-E27 If "Yes," complete Schedule I., Part I I I I I I I I I I I I I I I I I I I	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 12 // "Yes," complete Schedule I, Parts I and III 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 27 // "Yes," complete Schedule I, Parts I and III Did the organization answer "Yes" to Part IVI, 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 I Parts I and III Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule II "No", y or line 25 Did the organization marks any proceeds of tax exempt bonds beyond a temporary period exception? Did the organization marks any proceeds of tax exempt bonds beyond a temporary period exception? Did the organization marks any proceeds of tax exempt bonds beyond a temporary period exception? Did the organization marks any proceeds of tax exempt bonds beyond a temporary period exception? Did the organization marks any proceeds of tax exempt bonds outstanding at any time during the year? 24d Did the organization marks and the reganization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule I, Part II Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person outstanding as of the end of the organizations tax year? If "Yes," complete Schedule I, Part IV Este disqualified person during the year? If "Yes," complete Schedule I, Part IV As the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contribution or emp

Form 990 2012) 2013 RUN WILD MISSOULA INC
Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V									
			Yes	No						
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	0								
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	0								
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming									
	(gambling) winnings to prize winners?	1c	X							
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			i.						
	filed for the calendar year ending with or within the year covered by this return 2a	0								
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X							
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)									
За										
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	<u>3b</u>	 	 						
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, or other financial account)?	4a	-	<u> </u>						
b	<u> </u>	-								
E۵	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		x						
5a b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	\dagger	X						
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c	1							
6a	The state of the s		1	_						
	any contributions that were not tax deductible as charitable contributions?	6a		х						
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts									
	were not tax deductible?	6b								
7	Organizations that may receive deductible contributions under section 170(c).									
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the pa	yor? 7a		X						
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	<u> </u>	<u> </u>						
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			,,						
	to file Form 8282?	7c	-	X						
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			_x_						
e 4	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	. <u>7e</u>		X						
f g	If the organization, during the year, pay premiums, directly of indirectly, on a personal behalf contract? If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		 	X						
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098		 	X						
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	? 8		х						
9	Sponsoring organizations maintaining donor advised funds.									
а	Did the organization make any taxable distributions under section 4966?	9a		X						
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	<u> </u>	X						
10	Section 501(c)(7) organizations. Enter									
а	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									
11	Section 501(c)(12) organizations. Enter:		1							
a	Gross income from members or shareholders Gross income from other sources (Do not net amounts due or paid to other sources against	\dashv								
b	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?	12a								
	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.									
	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.	1								
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									
С	Enter the amount of reserves on hand		 	<u> </u>						
14a		14a	$\overline{}$	X						
<u>_b</u>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		(02.12)						
		For	ո 990	(2012)						

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

	Check if Schedule O contains a response to any question in this Part VI			\mathbf{x}						
Sec	tion A. Governing Body and Management									
			Yes	No						
1a	Enter the number of voting members of the governing body at the end of the tax year 8									
	If there are material differences in voting rights among members of the governing body, or if the governing	1								
	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 8									
2	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		X						
3	Did the organization delegate control over management duties customanly performed by or under the direct supervision									
	of officers, directors, or trustees, or key employees to a management company or other person?									
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?									
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		X						
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or									
	more members of the governing body?	7a		_X_						
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or									
	persons other than the governing body?	7b		_X_						
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:									
а	The governing body?	8a	X							
b	Each committee with authority to act on behalf of the governing body?	8b	X							
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the									
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		_ <u>x</u> _						
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)									
			Yes	_No_						
10a	Did the organization have local chapters, branches, or affiliates?	10a		<u>X</u>						
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,									
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	•							
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X							
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		37							
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X							
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X							
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	40-	х							
40	In Schedule O how this was done	12c	X							
13	Did the organization have a written whistleblower policy?	13	X							
14	Did the organization have a written document retention and destruction policy?	14	Λ							
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?									
_	The organization's CEO, Executive Director, or top management official	15a	х							
a	Other officers or key employees of the organization	15b	- 21	x						
U	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	130								
162	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a									
	taxable entity during the year?	16a		x						
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			<u></u> -						
_	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's									
	exempt status with respect to such arrangements?	16b								
Sec	tion C. Disclosure		•							
17	List the states with which a copy of this Form 990 is required to be filed ▶ NONE									
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990 T (Section 501(c)(3)s only)	avaılab	le							
	for public inspection. Indicate how you made these available. Check all that apply.									
	Own website X Another's website X Upon request Other (explain in Schedule O)									
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, an	d finar	ncial							
	statements available to the public during the tax year									
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization	tion 🕨	_							
	MEGAN TIFFIN - 406-721-7800									
	PO BOX 2368, MISSOULA, MT 59806-2368									
23200 12-10	6 -12	Forn	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

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

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

(A)	(B)	(C)						(D)	(E)	(F)
Name and Title	Average		Position (do not check more than one			than		Reportable	Reportable	Estimated
	hours per	box, unless person is both an officer and a director/trustee)			is bot or/trus	han tee)	compensation	compensation	amount of	
	week (list any						Ė	from the	from related organizations	other compensation
	(list any hours for related organizations below line)	direc				2		organization	(W-2/1099-MISC)	from the
	related	tee or	ustee			ensat		(W-2/1099-MISC)	,	organization
	organizations	at trus	Institutional trustee		Key emptoyee	Highest compensated employee				and related
	below	Ividu	ğ	Officer	Ē	ploye	Former			organizations
	line)	2	프	8		물통	훈			
(1) KEVIN TWIDWELL	3.00			i						
SECRETARY		X	_	-	<u> </u>	ļ <u>.</u>	<u> </u>	0.	0.	0.
(2) MEGAN TIFFIN	2.00									
TREASURER	1 00	X	-			<u> </u>		0.	0.	0.
(3) DARR TUCKNOTT	1.00					1	ı			
PRESIDENT	0.50	X		-	<u> </u>	ļ	<u> </u>	0.	0.	0.
(4) JEN VON SEHLEN	0.50			1						
MEMBER	4 50	X				┝	ļ	0.	0.	0.
(5) PAT CROSS	1.50]		ŀ						
VICE-PRESIDENT	+	X		<u> </u>		<u> </u>	<u> </u>	0.	0.	0.
(6) TORREY HOLMQUIST	1.50									
MEMBER	1 22	X	-	⊢		-	<u> </u>	0.	0.	0.
(7) RYAN SNYDER	1.00	l								
MEMBER		X				<u> </u>	_	0.	0.	0.
(8) CAROL LIPP	2.00	- ₋								
SECRETARY	40.00	X	-	-			_	0.	_0.	0.
(9) EVA P. DUNN-FROEBIG	40.00	┨		١						
EXECUTIVE DIRECTOR			-	X	⊢	├—	-	0.	0.	0.
		┨								
		\vdash		-	├	-		•		
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		1	1	1						

Form **990** (2012)

10120130 792194 170541

Form 990 (2012) RUN WILD MISSOULA INC

[Part VIII | Statement of Revenue

	•	Check if Schedule O cont	ains a response	to any question i	n this Part VIII			
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ts ts	1 a	Federated campaigns	1a					
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues	1b	23,301.				İ
P, G	С	Fundraising events	1c					
Sift ar l	d	Related organizations	1d					
is,	е	Government grants (contribut	ions) 1e					
tion S	f	All other contributions, gifts, gran	ts, and					
ig g		similar amounts not included above	ve 1f	56,568.				
10 d	g	Noncash contributions included in lines	1a-1f \$	10,435.				
<u>8</u> €	h	Total. Add lines 1a-1f		•	79,869.			
				Business Code				
8	2 a	MARATHON INCOME		711300	283,596.	283,596.		
او چَ	b	RACE INCOME		711300	57,099.	57,099.		
Program Service Revenue	С	TRAINING & CLAS	SES INC	711300	26,084.	26,084.		
ě a	d							
<u></u>	е							
ਕ	f	All other program service reve	enue					
\blacksquare	g	Total. Add lines 2a-2f		>	366,779.			
	3	Investment income (including	dividends, intere	est, and				
		other similar amounts)		▶	300.			300.
	4	Income from investment of tax	x-exempt bond p	proceeds -				
	5	Royalties		▶				
			(i) Real	(II) Personal				
	6 a		200.					
	b	Less ⁻ rental expenses	0.					
	C	Rental income or (loss)	200.		200	200		
		Net rental income or (loss)		•	200.	200.		
	7 a	Gross amount from sales of	(i) Securities	(II) Other				
İ		assets other than inventory	ļ					
	b	Less cost or other basis						
		and sales expenses		-				
	C	• •				:		
	d	• , ,						-
<u>a</u>	в а	Gross income from fundraising						
Other Reven		including \$	of					
&		contributions reported on line Part IV, line 18	·					
ě	L		a b					
ಠ		Less direct expenses Net income or (loss) from fund	_					
ļ		Gross income from gaming ac						
	эа	Part IV, line 19						
	.	Less direct expenses	a b					
		Net income or (loss) from gam						
		Gross sales of inventory, less	_					
	10 4	and allowances	а	22,216.				
	h	Less: cost of goods sold	b	1 40 400				
		Net income or (loss) from sale		D	10,086.	10,086.		
		Miscellaneous Revenu		Business Code				
	11 a	A		711300	2,036.	2,036.		
	b b	· · · · · · · · · · · · · · · · · · ·					•	
	c							
	d	All other revenue	•					
	e	Total. Add lines 11a-11d		•	2,036.			
	12	Total revenue. See instructions.		>	459,270.	379,101.	0	. 300.
23200	9.							Form 990 (2012)

	Check if Schedule O contains a respons		s Part IX (B)	(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	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	9,520.	9,520.		
2	Grants and other assistance to individuals in				
	the United States. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	24 022		24 022	
	trustees, and key employees	24,033.		24,033.	
3	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)	23,903.	20,237.	3,666.	
7	Other salaries and wages	43,303.	40,437.	3,000.	
3	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
_	· · · · · · · · · · · · · · · · · · ·	· · ·	-		
9	Other employee benefits Payroll taxes	4,818.	2,034.	2,784.	* 100 100 100 100 100 100 100 100 100 10
•	Fees for services (non-employees)	4,010.	2,034.	2,704.	
1					
_		1,617.	273.	1,344.	
b	,	5,520.	475.	5,520.	
c d	Ť	3,320.		3,320.	
e	Professional fundraising services. See Part IV, line 17				·
f	Investment management fees			· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·
g					
9	column (A) amount, list line 11g expenses on Sch O.)	12,175.	3,305.	8,870.	
2	Advertising and promotion	41,372.	26,113.	15,259.	
3	Office expenses	3,313.	887.	2,426.	
4	Information technology	3/3230			
5	Royalties				
6	Occupancy	6,200.		6,200.	
7	Travel	5,778.	1,913.	3,865.	
8	Payments of travel or entertainment expenses				
_	for any federal, state, or local public officials				
9	Conferences, conventions, and meetings		-		
0	Interest				
1	Payments to affiliates				
2	Depreciation, depletion, and amortization	4,840.	4,137.	703.	
3	Insurance	1,906.		1,906.	
4	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а	DAGE EVENTORS	300,970.	298,936.	2,034.	
b	TOT INTEREST BURENOE	12,016.	9,162.	2,854.	
c	MDATATAIC OF ACCIDE AND DE	11,407.	10,778.	629.	
d	CDUDIE CARD BEEC	10,958.	455.	10,503.	
	All other expenses	19,128.	5,416.	13,712.	
5	Total functional expenses Add lines 1 through 24e	499,474.	393,166.	106,308.	
<u>-</u> 6	Joint costs. Complete this line only if the organization				
_	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.			İ	
	Check here if following SOP 98-2 (ASC 958-720)				

<u>Part</u>	X	Balance Sheet				
		Check if Schedule O contains a response to any qu	estion in this Part X			
				(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		73,187.	1	30,392
-	2	Savings and temporary cash investments		235,933.	2	236,233
İ	3	Pledges and grants receivable, net	1		3	
İ	4	Accounts receivable, net			4	
	5	Loans and other receivables from current and forme	er officers, directors,			
1		trustees, key employees, and highest compensated				
		Part II of Schedule L			5	
	6	Loans and other receivables from other disqualified	persons (as defined under			
		section 4958(f)(1)), persons described in section 49	l l			
		employers and sponsoring organizations of section				
		employees' beneficiary organizations (see instr) Co			6	
ets	7	Notes and loans receivable, net	·		7	
Assets	8	Inventories for sale or use	Γ		8	
`	9	Prepaid expenses and deferred charges			9	
- .	10a	Land, buildings, and equipment cost or other				· · · · · · · · · · · · · · · · · · ·
		basis Complete Part VI of Schedule D	11,931.			
	b	Less accumulated depreciation 10		3,273.	10c	5,823
.	11	Investments - publicly traded securities			11	
1.	12	Investments other securities See Part IV, line 11			12	
.	13	Investments · program-related. See Part IV, line 11			13	
.	14	Intangible assets			14	
.	15	Other assets. See Part IV, line 11		15		
	16	Total assets. Add lines 1 through 15 (must equal lin	312,393.	16	272,448	
	17	Accounts payable and accrued expenses		17		
-	18	Grants payable			18	
-	19	Deferred revenue			19	
:	20	Tax-exempt bond liabilities	<u> </u>		20	
န္မ ဒ	21	Escrow or custodial account liability. Complete Part	IV of Schedule D		21	
Liabilities	22	Loans and other payables to current and former offi	cers, directors, trustees,			
<u>a</u>		key employees, highest compensated employees, a	nd disqualified persons.			
┛ ┃		Complete Part II of Schedule L	,		22	
1	23	Secured mortgages and notes payable to unrelated	third parties		23	
:	24	Unsecured notes and loans payable to unrelated th	rd parties		24	
:	25	Other liabilities (including federal income tax, payab	es to related third			
		parties, and other liabilities not included on lines 17	24). Complete Part X of			
		Schedule D	-	1,656.	25	1,683
	<u> 26</u>	Total liabilities. Add lines 17 through 25	· [mail	1,656.	26	1,683
į		Organizations that follow SFAS 117 (ASC 958), c				
Net Assets or Fund Balances		complete lines 27 through 29, and lines 33 and 3	4.	240 525		050 565
<u>a</u> :	27	Unrestricted net assets	-	310,737.		270,765
Bal	28	Temporanly restricted net assets	-		28	
ב ו	29	Permanently restricted net assets	. — }		29	
로		Organizations that do not follow SFAS 117 (ASC	958), check here ▶ 📖			
õ		and complete lines 30 through 34.				
set :	30	Capital stock or trust principal, or current funds			30	
As	31 22	Paid-in or capital surplus, or land, building, or equip	ī	-	31	
ا <u>ق</u>	32	Retained earnings, endowment, accumulated incon	ie, or otner tunas	210 727	32	270 765
_ ['	33	Total net assets or fund balances	}	310,737. 312,393.	33	270,765
	34	Total liabilities and net assets/fund balances		314,333.	34	272,448. Form 990 (2012

232012 12-10-12 Form 990 (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

2012 2013

Open to Public Inspection

Employer identification number

			<u>D MISSOULA I</u>						2	<u>0-5794</u>	114	_
Part I	Reason	for Public Char	ity Status (All organiz	ations mu	st complet	e this part) See inst	ructions.				
The organ	zation is not a	private foundation I	because it is (For lines 1	through 1	11, check	only one b	ox.)					
1 🗔	A church, cor	nvention of churches	s, or association of churc	ches desc	ribed in se	ction 170	(b)(1)(A)(i)					
2	A school des	cribed in section 17	0(b)(1)(A)(ii). (Attach Sc	hedule E)								
з 🗔	A hospital or	a cooperative hospit	tal service organization o	described	n section	170(b)(1)	(A)(iii).					
4 🔲	A medical res	search organization of	operated in conjunction	with a hos	pital descr	nbed in se	ction 170	(b)(1)(A)(iii	i). Enter i	the hospital	's nam	ıe,
	city, and state	e:										
5 🔲	An organizati	on operated for the	benefit of a college or ur	niversity ov	wned or op	erated by	a governi	nental uni	describ	ed in		
	section 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).											
7	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). (Comple	te Part II.)									
в 🔲	A community	trust described in s	ection 170(b)(1)(A)(vi). ((Complete	Part II)							
9 X	An organizati	on that normally rec	eives (1) more than 33 1	1/3% of its	support f	rom contri	butions, m	nembershij	o fees, a	nd gross red	ceipts	from
	activities rela	ted to its exempt fur	nctions - subject to certa	un excepti	ons, and (2	2) no more	than 33 1	/3% of its	support	from gross	invest	ment
	income and u	inrelated business ta	axable income (less sect	ion 511 ta	x) from bu	sinesses a	acquired b	y the orga	nızatıon	after June 3	0, 197	′ 5
	See section	509(a)(2). (Complete	Part III.)									
10 🔲	An organizati	on organized and op	perated exclusively to te	st for publ	ıc safety. S	See sectio	n 509(a)(4	l).				
11 🔲	An organizati	on organized and op	perated exclusively for th	ne benefit (of, to perfo	orm the fur	nctions of,	or to carry	out the	purposes o	f one	or
			ations described in section				2) See sec	tion 509(a	a)(3). Ch	eck the box	that	
	describes the	type of supporting	organization and comple	ete lines 1	1e through	11h.						
	a Type I	-	•		nctionally i	-				n-functionall	,	
e			t the organization is not									
		•	han one or more publicly		-				9(a)(1) or	section 509	(a)(2).	
f	If the organiz	ation received a writ	ten determination from t	the IRS tha	at it is a Ty	pe I, Type	II, or Type	111				
		rganization, check th							_			
g	•		organization accepted ar			•		• •				1"
	• • •	-	irectly controls, either al	one or tog	ether with	persons o	lescribed	n (II) and (I	II) below		Yes	No
	•	• •	upported organization?							11g(ı)		
	• •	•	n described in (i) above?		. 0					11g(ii)		
_	• •	•	person described in (i) o							11g(iii)		L
h	Provide the f	ollowing information	about the supported org	ganization	(S)							
			<u> </u>	(:) In Abo		(a) Dad con		(vi) le	the			
	of supported	(ii) EIN	(iii) Type of organization (described on lines 1-9		organization sted in your		nothy the	(vi) Is organization	on in col.	(vii) Amount		netary
orga	anızatıon		above or IRC section		document?		r support?	(i) organız U.S	ea in the i	Sup	port	
			(see instructions))	Yes	No	Yes	No	Yes	No			
				1.55	1		133					
			-				· · · · · ·					
							-					
							•		i i			
				1								
										!		
							<u> </u>					
							†	<u> </u>				
Total												
	Paperwork Re	duction Act Notice	, see the Instructions f	or			-	Schedul	e A (For	m 990 or 99	O-EZ	2012

232021 12-04-12

Form 990 or 990-EZ.

Pa	rt II Support Schedule for	Organizations	Described in	Sections 170	(b)(1)(A)(iv) an	nd 170(b)(1)(A)(v	/i)
	(Complete only if you checke	d the box on line 5	i, 7, or 8 of Part I o	r if the organization	on failed to qualify	under Part III. If the	e organization
	fails to qualify under the tests	ilisted below, plea	se complete Part	III)			
Sec	ction A. Public Support			<u> </u>			
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.")						
2	Tax revenues levied for the organ-						
	ızatıon's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities	1					
	furnished by a governmental unit to	,					
	the organization without charge						
4	Total. Add lines 1 through 3						
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 shown on line 11,						
	column (f)						
	Public support. Subtract line 5 from line 4						
Sec	ction B. Total Support		·	T			
Cale	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			İ			:
	and income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the	·					
	business is regularly carried on						
10	Other income Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV)				ļ		
11	Total support. Add lines 7 through 10			l	l	ļ. ,	<u> </u>
	Gross receipts from related activities					12	
13	First five years. If the Form 990 is fo	•	s first, second, thii	d, fourth, or fifth t	ax year as a section	on 501(c)(3)	. —
50	organization, check this box and storection C. Computation of Publication		rcentage				
						Taal	
	Public support percentage for 2012 (•	•	column (1))		14	%
	Public support percentage from 201			n line 12 and line	14 10 22 1/20/ 01	15	%
168	a 33 1/3% support test - 2012. If the	•		•	14 IS 33 1/3% OF	more, check this be	ox and
	stop here. The organization qualifies	,	•		d line 15 := 00 1 (0)	1/ armara abari 4	▶ ∟
t	33 1/3% support test - 2011. If the	•		•	u ime 15 is 33 1/39	70 Or more, check to	IIIS DOX
4-	and stop here. The organization qua				o 10 16c 10b	and line 4.4 := 4.00/	P
178	a 10% -facts-and-circumstances tes	•					•
	and if the organization meets the "fact			•	•	art iv now the orga	inzation
	meets the "facts-and-circumstances"	-	•		-	17a and line 15 :-	10% 05
	 10% -facts-and-circumstances tes more, and if the organization meets t 	_					
	more, and it the organization meets t	. IO I AUGUS ALIA CITO	mistanova teat, t	HOOK WIND DOX BIN	י שנטף ווכוב. באףומו		•

Schedule A (Form 990 or 990-EZ) 2012

organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization.

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions.

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

	(Complete only if you checked			gariization laileu t	y quality under Fai	it ii. ii tii o organiza	IIIOII IAIIS IO
Sec	qualify under the tests listed better A. Public Support	elow, please comp	2010	2011	2012	Short Year	
	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 201 0	(d) 2 91 1	(e) 201 2	(f) Total
	Gifts, grants, contributions, and						
Ī	membership fees received. (Do not						
	include any "unusual grants ")	44,125.	96,002.	69,201.	87,790.	79,869.	376,987.
2	Gross receipts from admissions,			,			1
_	merchandise sold or services per-						
	formed, or facilities furnished in						
	any activity that is related to the organization's tax-exempt purpose	191,036.	348.734.	388,345.	553.188.	391,231.	1.872.534.
3	Gross receipts from activities that		010//010	300,010	333,2331	0,000	1,072,331,
J	are not an unrelated trade or bus-				İ		
	iness under section 513						
4	Tax revenues levied for the organ-					- "	
•	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						_
6	Total. Add lines 1 through 5	235,161.	444,736.	457,546.	640,978.	471,100.	2,249,521,
7 8	Amounts included on lines 1, 2, and						, ,
	3 received from disqualified persons						0.
b	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						0.
C	Add lines 7a and 7b						0.
	Public support (Subtract line 7c from line 6)	<u> </u>					2,249,521.
	ction B. Total Support		# > 0000				
	ndar year (or fiscal year beginning in)	(a) 2008 235,161.	(b) 2009 444,736.	(c) 2010 457, 546.	(d) 2011 640, 978.	(e) 2012 471,100.	(f) Total
_	Amounts from line 6 Gross income from interest,	233,161.	444,/30.	457,540.	040,370.	4/1,100.	2,249,521,
IU	dividends, payments received on						
	securities loans, rents, royalties and income from similar sources			404.	529.	300.	1,233.
	Unrelated business taxable income			404.	323.	300.	1,233.
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
•	Add lines 10a and 10b			404.	529.	300.	1,233.
	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 lines 9, 10c, 11, and 12)	235,161.	444,736.	457,950.	641,507.	471,400.	2,250,754.
14	First five years. If the Form 990 is for	r the organization's	s first, second, thir	d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3) organız	ation,
	check this box and stop here			_			<u> </u>
	ction C. Computation of Publ					<u> </u>	00 05
	Public support percentage for 2012 (column (f))		15	99.95 % 99.95 %
_	Public support percentage from 2011					16	99.95 %
	ction D. Computation of Invenience Investment income percentage for 20			ne 13 column (f)		17	.05 %
17 18	Investment income percentage from			ie 13, coldinir (i <i>))</i>		18	.05 %
	a 33 1/3% support tests - 2012. If the			on line 14, and line	15 is more than 3		
	more than 33 1/3%, check this box a	-					►X
ı	33 1/3% support tests - 2011. If the	•	•	•			and
	line 18 is not more than 33 1/3%, che	_					
20	Private foundation If the organization	on did not check a	hay on line 14, 19	a or 19h check th	ns hay and see ins	structions	▶ □ □

232023 12-04-12

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ▶ Attach to Form 990. ▶ See separate instructions.



Name - 4 46 a annu-1--41---

Maili	RUN_WILD MISSOULA I	NC		- Emp	20 – 5794114
Pai			her Similar Funds	or Accou	
	organization answered "Yes" to Form 990, Part IV, line 6		oa aao .	J. 7.0000	into Complete il tile
	organization anottored year to remine equity, into		advised funds	(b) Fun	ds 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				
5	Did the organization inform all donors and donor advisors in wri	ating that the ass	sets held in donor advised	d funde	
•	are the organization's property, subject to the organization's ex	•		ı idildə	Yes No
6	Did the organization inform all grantees, donors, and donor adv	_		sed only	1es110
•	for chantable purposes and not for the benefit of the donor or o	=	=	-	
	impermissible private benefit?	40,101 441.001, 01	ioi any omor parpodo ot	Jinoning	Yes No
Pai		nızatıon answere	d "Yes" to Form 990. Par	t IV. line 7.	103 110
1	Purpose(s) of conservation easements held by the organization				
•	Preservation of land for public use (e.g., recreation or edu	• —	Preservation of an histo	rically impo	ortant land area
	Protection of natural habitat		Preservation of a certific	-	
	Preservation of open space				
2	Complete lines 2a through 2d if the organization held a qualified	d conservation o	ontribution in the form of	a conserva	ation easement on the last
	day of the tax year				
	•				Held at the End of the Tax Year
а	Total number of conservation easements			2a	
b	Total acreage restricted by conservation easements			2b	
С	Number of conservation easements on a certified historic struc	ture included in	(a)	2c	
d	Number of conservation easements included in (c) acquired aft	ter 8/17/06, and	not on a historic structure	• 🗌	
	listed in the National Register			2d	
3	Number of conservation easements modified, transferred, release	ased, extinguishe	ed, or terminated by the o	rganization	during the tax
	year ▶				
4	Number of states where property subject to conservation ease	ment is located			
5	Does the organization have a written policy regarding the period	dıc monitoring, ii	nspection, handling of		
	violations, and enforcement of the conservation easements it h	olds?			Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, ar	nd enforcing con	servation easements dur	ing the yea	
7	Amount of expenses incurred in monitoring, inspecting, and en			-	\$
8	Does each conservation easement reported on line 2(d) above	satisfy the requi	rements of section 170(h))(4)(B)(i)	
	and section 170(h)(4)(B)(ıı)?				└─ Yes └─ No
9	In Part XIII, describe how the organization reports conservation		· ·		•
	include, if applicable, the text of the footnote to the organizatio	n's financial stat	ements that describes th	e organizat	ion's accounting for
Pa	conservation easements. † III Organizations Maintaining Collections of A	Art Historics	al Treasures or Oth	or Simil	ar Accate
I a	Complete if the organization answered "Yes" to Form 99				ai A55615.
10	If the organization elected, as permitted under SFAS 116 (ASC			nt and hala	ann abant waden of ad
ıa	historical treasures, or other similar assets held for public exhib				
	the text of the footnote to its financial statements that describe		or research in furtherand	e oi public	service, provide, in Part XIII,
b	If the organization elected, as permitted under SFAS 116 (ASC		n its revenue statement a	nd halance	sheet works of art, historical
	treasures, or other similar assets held for public exhibition, edu				
	relating to these items:	ioution, or rescur	on an iditalorance of publi	0 301 VICC, F	novide the following amounts
	(i) Revenues included in Form 990, Part VIII, line 1			>	*
	(ii) Assets included in Form 990, Part X				\$ \$
2	If the organization received or held works of art, historical treas	sures, or other si	milar assets for financial o	iain, provid	т <u></u>
_	the following amounts required to be reported under SFAS 116			,, p. 0 110	_
а	Revenues included in Form 990, Part VIII, line 1	,	5 :	> :	\$
b	Assets included in Form 990, Part X				\$
-	,			•	·

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Schedule D (Form 990) 2012

Sche	dule D (Form 990) 2012 2015 RUN WIL	D MISSOULA	INC				20	<u>-579411</u>	4 Page 2
Par	t III Organizations Maintaining C	ollections of A	rt, Hist	torical Tr	easures, d	or Othe	er Similar A	Assets(contr	nued)
3	Using the organization's acquisition, accessi	on, and other record	s, check	any of the	following tha	it are a s	ignificant use	of its collection	n rtems
	(check all that apply):								
а	Public exhibition	d		Loan or excl	hange progra	ams			
b	Scholarly research	е		Other					
С	Preservation for future generations								
4	Provide a description of the organization's co	ollections and explain	n how th	ey further tl	ne organizati	on's exe	mpt purpose i	n Part XIII.	
5	During the year, did the organization solicit o	r receive donations of	of art, hi	storical trea	sures, or oth	er sımıla	r assets		
	to be sold to raise funds rather than to be ma							Yes	☐ No
Par	t IV Escrow and Custodial Arrangement of Escrow and Custodial Arrangement on Form 990, Par		ete if the	organizatio	n answered	"Yes" to	Form 990, Pa	rt IV, line 9, or	
		· · · · · · · · · · · · · · · · · · ·							
1a	Is the organization an agent, trustee, custodi	an or other intermed	liary for	contribution	is or other as	sets not	included		
	on Form 990, Part X?							└── Yes	L No
b	If "Yes," explain the arrangement in Part XIII	and complete the to	llowing 1	able:			· · · · · · · · · · · · · · · · · · ·	<u> </u>	
								Amour	<u>t</u>
С	Beginning balance						1c		
d	Additions during the year						1d	 	
е	Distributions during the year				•		1e		
f	Ending balance						1f	· — .:	
	Did the organization include an amount on Fe							L Yes	No
_	If "Yes," explain the arrangement in Part XIII.								
Par	t V Endowment Funds. Complete					- 1			
	_	(a) Current year	(b) P	rior year	(c) Two year	rs back	(d) Three years	back (e) Fou	r years back
1a	Beginning of year balance								
b	Contributions								
С	Net investment earnings, gains, and losses				<u> </u>				
d	Grants or scholarships							<u> </u>	
е	Other expenditures for facilities								
	and programs		_						
f	Administrative expenses								
g	End of year balance					1			
2	Provide the estimated percentage of the curr	rent year end balanc	e (line 1	g, column (a	a)) held as.				
а	Board designated or quasi-endowment		_%						
þ	Permanent endowment	%							
C	Temporarily restricted endowment ►	%							
	The percentages in lines 2a, 2b, and 2c should	ıld equal 100%.							
За	Are there endowment funds not in the posse	ession of the organization	ation tha	at are held a	nd administe	ered for t	he organizatio	n	
	by.								Yes No
	(i) unrelated organizations .					•		3a(i)	
	(ii) related organizations							3a(ii)	
b	If "Yes" to 3a(II), are the related organizations	•						3b	<u> </u>
4	Describe in Part XIII the intended uses of the								
Pa	t VI Land, Buildings, and Equipm	nent. See Form 990), Part X	, line 10.			<u> </u>		
	Description of property	(a) Cost or o basis (investr		, ,	or other (other)		ccumulated preciation	(d) Boo	k value
1a	Land							1	
b	Buildings								
c	Leasehold improvements								
d	Equipment			1	1,931.		6,108		5,823.
	Other			-			-,		
	I. Add lines 1a through 1e. (Column (d) must e	gual Form 990, Part	X. colur	nn (B), line 1	10(c).)				5,823.

Schedule D (Form 990) 2012

232053 12-10-12

<u>che</u>	dule D	(Form 990) 2912 2015 RUN WILD MISSOULA INC		20)-5794114 Page 4
Par	t XI	Reconciliation of Revenue per Audited Financial Stateme	nts With Revenue per		
1	Total	revenue, gains, and other support per audited financial statements		1	
2		ints included on line 1 but not on Form 990, Part VIII, line 12			
		nrealized gains on investments	2a		
b		ted services and use of facilities	2b	7	
C		venes of prior year grants	2c	7	
d		(Describe in Part XIII.)	2d	7	
		nes 2a through 2d		26	.
3		act line 2e from line 1	•	3	
4		ints included on Form 990, Part VIII, line 12, but not on line 1:			
а		tment expenses not included on Form 990, Part VIII, line 7b	4a	1	
ь		(Describe in Part XIII)	4b	┨	
_		nes 4a and 4b	_ 	40	<u>,</u>
5		revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		5	
	rt XII	Reconciliation of Expenses per Audited Financial Statement	ents With Expenses pe		
1		expenses and losses per audited financial statements		1	
2		ints included on line 1 but not on Form 990, Part IX, line 25		ļ -	
		ted services and use of facilities	_{2a}		
a L		•	2b	\dashv	
b		year adjustments Tosses		┪	
C			2c 2d	┨	
d		(Describe in Part XIII)	20	┧ᇵ	
e		nes 2a through 2d		26	
3		act line 2e from line 1		3	
4		ints included on Form 990, Part IX, line 25, but not on line 1	1.1		
а		tment expenses not included on Form 990, Part VIII, line 7b	4a	\dashv	
		(Describe in Part XIII)	4b	\dashv	
		ines 4a and 4b		40	
		expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) Supplemental Information		5	<u>, </u>
		,			101 5 1111 1 5 1
		nis part to provide the descriptions required for Part II, lines 3, 5, and 9; Part II irt XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to			id 26, Part V, line 4; Part
					
					<u> </u>
					

Schedule D (Form 990) 2012

SCHEDULE I (Form 990) Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

2 Schedule I (Form 990) (2012) Employer identification number 20-5794114 (h) Purpose of grant or assistance X Yes Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any 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 (g) Description of non-cash assistance (f) Method of valuation (book, FMV, appraisal, other) (e) Amount of non-cash assistance Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States recipient that received more than \$5,000 Part II can be duplicated if additional space is needed. (d) Amount of cash grant Enter total number of section 501(c)(3) and government organizations listed in the line 1 table (c) IRC section if applicable LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Enter total number of other organizations listed in the line 1 table RUN WILD MISSOULA INC General Information on Grants and Assistance (b) EIN criteria used to award the grants or assistance? 1 (a) Name and address of organization or government Name of the organization Part Part II

Schedule I (Form 990) (2812) 2013 RUN WILD MISSOULA INC

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

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

Page 2

20-5794114

(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
		:			
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.	ide the information	required in Part I,	line 2, Part III, colum	n (b), and any other additional inf	ormation.
SCHEDULE I, PART I, LINE 2: THE ORGANIZATION PROVIDES UNRESTRICTED	RGANIZATI	ON PROVIDE	S UNRESTRI	CTED	
CONTRIBUTIONS TO OTHER TAX-EXEMPT ORGANIZATIONS WITH SIMILAR MISSIONS.	ORGANIZA	TIONS WITH	SIMILAR M	ISSIONS. NO	
GRANTS GIVEN WERE IN EXCESS OF \$5000.	.000				

232102 12-18-12

SCHEDULE L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Transactions With Interested Persons

► Complete if the organization answered
"Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

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

OMB No 1545-0047 2013

Open To Public Inspection

Name of the organization		•					Emp	loyer	ident	ificati	on nu	mber
RÜ	N WILD	MISSOULA	IN	<u>IC</u>			20	<u>-57</u>	941	14		
Part I Excess Benefi	it Transacti	ions (section 50	01(c)(3	3) and s	section 501(c)(4) org	anızatıons only).				_,		
Complete if the org	ganization ans	wered "Yes" on	Form 9	990, Pa	art IV, line 25a or 25b	o, or Form 990-EZ, P	art V, I	ine 40)b.			
1	(b) F	Relationship bety	ween o	disqual	Ified	A Decembion of tran		_		(d)	Corre	cted?
(a) Name of disqualified per	rson	person and or	rganıza	ation	,,,	c) Description of tran	ISactio	n		Y	es	No
·												
		•										
2 Enter the amount of tax inc	curred by the c	organization man	nagers	or disc	qualified persons dui	ring the year under						
section 4958							J	\$				
3 Enter the amount of tax, if	any, on line 2,	above, reimburs	sed by	the or	ganızatıon		١	\$				
Part II Loans to and/	or From In	terested Per	sons									
Complete if the org	ganization ans	wered "Yes" on	Form 9	990-EZ	, Part V, line 38a or F	Form 990, Part IV, lin	ie 26, d	or if th	ne orga	ınızatı	on	
reported an amour	-								Ū			
(a) Name of	b) Relationship	(c) Purpose		an to or		(f) Balance due	(g)	In	(h) Ap by bo	proved	(i) W	ritten
interested person	with organization	of loan		n the zation?	principal amount		defa	ult?	comm	uttee?	agree	ment?
	J		То	From			Yes	No	Yes	No	Yes	No
			1							-	-	
	- · · · · · · · · · · · · · · · · · · ·											
			<u> </u>									
			1									
Total					▶ \$	·	ì '					
Part III Grants or Ass	istance Be	nefiting Inte	reste	d Pe								
Complete if the org	ganization ans	wered "Yes" on	Form 9	990. Pa	art IV. line 27							
(a) Name of interested pe		(b) Relationship			(c) Amount of	(d) Type	of		(e) Purp	ose of	 f
(4)		interested per			assistance	assistan				assist		
		the organiza	ation									
			•									
									•			
								\neg				
								\neg				
								\neg				
								一				
LHA For Paperwork Reduction	on Act Notice.	see the Instruc	ctions	for Fo	rm 990 or 990-EZ.	Sch	edule	L (Fo	rm 996) or 9	90-EZ) 2012

(a) Name of interested person			IV, line 28a, 2 en interested	(c) Amount of	(d) Description of	(e) Sha	
(4)		and the org		transaction	transaction	organiz reven	
RUNNERS EDGE	FORMER	BOARD	MEMBER	21,902	CASH PAID T		X
ANDERS BROOKER			MEMBER		SALARY PAIL		Х
					-		
Part V Supplemental Information			<u></u>	<u> </u>			
Complete this part to provide addition	-						
		<u> TIONS</u>	INVOLVI	NG INTEREST	red persons:		
(A) NAME OF PERSON: RUNNE	ERS EDGE						
(B) RELATIONSHIP BETWEEN	INTERES	TED PE	RSON AN	D ORGANIZAT	rion:		
FORMER BOARD MEMBER, ANDE	ERS BROO	KER, I	S THE C	WNER OF RUI	NNERS EDGE.		
(D) DESCRIPTION OF TRANSA	ACTION:	CASH P	AID TO	RUNNERS EDO	GE FOR	<u> </u>	
MERCHANDISE FOR RESALE, V	OLUNTEE	R GIFT	S, RACE	AND TRAIN	ING CLASS GI	FTS	
AND REIMBURSEMENTS.							
							_
(A) NAME OF PERSON: ANDER	RS BROOK	ER					-
(B) RELATIONSHIP BETWEEN	INTERES	TED PE	RSON AN	D ORGANIZA	TION:		
FORMER BOARD MEMBER, CURF	RENT EMP	LOYEE					
(D) DESCRIPTION OF TRANSA	ACTION:	SALARY	PAID T	O FORMER BO	DARD MEMBER	WHO	
IS CURRENTLY AN EMPLOYEE							
		 		·· 	··		
				 			

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Inspection

Name of the organization

Attach to Form 990 or 990-EZ.

Name of the organization RUN WILD MISSOULA INC	Employer identification number $20-5794114$
FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MIS	SION:
ABILITIES BY: EDUCATING THE GENERAL PUBLIC ABOUT THE BENE	FITS OF
RUNNING AND WALKING; SPONSORING OR SUPPORTING HEALTH AND	FITNESS
WORKSHOPS AND CLINICS; PUBLISHING A REGULAR NEWSLETTER TH	AT INCLUDES A
CALENDAR OF EVENTS, ARTICLES, AND RESULTS OF LOCAL RACES;	MAINTAINING A
WEB SITE THAT INCLUDES GENERAL RUN WILD MISSOULA INFORMAT	ION AND
RUNNING AND WALKING EVENTS.	
FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:	
MERCHANDISE SALES: THE MERCHANDISE SALES PROGRAM OFFERS R	UNNING APPAREL
AND OTHER PRODUCTS SPECIFIC TO RUNNING AND WALKING THAT P	ROMOTE THE
ORGANIZATION AND THE SPORT OF RUNNING.	
EXPENSES \$ 0. INCLUDING GRANTS OF \$ 0. REVENUE \$ 12,3	22.
FORM 990, PART VI, SECTION A, LINE 4: RUN WILD MISSOULA C	HANGED THEIR
BYLAWS TO BECOME A PUBLIC BENEFIT CORPORATION WITHOUT MEM	BERS.
FORM 990, PART VI, SECTION B, LINE 11: THE BOARD OF DIREC	TORS REVIEWS AND
APPROVES THE ORGANIZATION'S FORM 990 BEFORE IT IS FILED W	ITH THE IRS.
FORM 990, PART VI, SECTION B, LINE 12C: THE BOARD OF DIRE	CTORS ARE
REQUIRED TO SIGN A FORM DISCLOSING INTEREST THAT WOULD GI	VE RISE TO
CONFLICT.	

FORM 990, PART VI, SECTION B, LINE 15A: THE EXECUTIVE AND FINANCE

COMMITTEES ARE RESPONSIBLE FOR REVIEWING THE PERFORMANCE AND COMPENSATION LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) (2012) 232211 01-04-13

Schedule O (Form 990 or 990-EZ) (2012) 0015	Page 2
Name of the organization RUN WILD MISSOULA INC	Employer identification number 20-5794114
OF THE EXECUTIVE DIRECTOR. THEY MAKE A RECOMMENDATION TO	THE BOARD OF
DIRECTORS WHO VOTE ON FINAL APPROVAL.	
FORM 990, PART VI, SECTION C, LINE 18: THE ORGANIZATION MANAILABLE TO THE PUBLIC UPON REQUEST, AND IT IS AVAILABLE	
FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION M	AKES ITS
GOVERNING DOCUMENTS, POLICIES, AND FINANCIAL STATEMENTS A	VAILABLE TO THE
PUBLIC UPON REQUEST. THEY ARE ALSO AVAILABLE ON GUIDESTAR	COM

Department of the Treasury Internal Revenue Service (99)

Depreciation and Amortization (Including Information on Listed Property)

990

Attachment Sequence No 179

► See separate instructions. Name(s) shown on return

► Attach to your tax return.

Business or activity to which this form relates

Identifying number

RUN WILD MISSOULA INC			FOR	M 990 1	PAGE 10		20-5794114
Part Election To Expense Certain Propert	y Under Section 1	79 Note: If you have				V before yo	
1 Maximum amount (see instructions)		•		<u> </u>	· · · · · · · · · · · · · · · · · · ·	1	500,000.
2 Total cost of section 179 property place	d in service (see	instructions)			•	2	
3 Threshold cost of section 179 property i	·	•				3	2,000,000.
4 Reduction in limitation. Subtract line 3 fr						4	
5 Dollar limitation for tax year Subtract line 4 from line		•	ately see	instructions		5	
6 (a) Description of prop				ess use only)	(c) Electe	d cost	
					-		
			-			-	
	•						
7 Listed property. Enter the amount from I	ine 29			7			
8 Total elected cost of section 179 proper		s in column (c) lines	6 and		, ,	8	
9 Tentative deduction. Enter the smaller of	•	, 00.0 (0),00	, o ama	•		9	
10 Carryover of disallowed deduction from		011 Form 4562				10	
11 Business income limitation. Enter the sm	-		han zero	o) or line 5		11	
12 Section 179 expense deduction Add lin		•		•		12	
13 Carryover of disallowed deduction to 20	•			▶ 13			
Note: Do not use Part II or Part III below for							
Part II Special Depreciation Allowan	ce and Other D	epreciation (Do no	t includ	le listed prop	perty)		
14 Special depreciation allowance for qualif	•	· · · · · ·					
the tax year		p.op	J. 1,7,7 p. 1		, o ag	14	3,694.
15 Property subject to section 168(f)(1) elec	ction					15	370320
16 Other depreciation (including ACRS)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					16	
Part III MACRS Depreciation (Do not	include listed pi	operty) (See instru	ctions)		······		
	·	Section					
17 MACRS deductions for assets placed in	service in tax ve	ears beginning befo	re 2012			17	968.
18 If you are electing to group any assets placed in serving	-				▶□	ק ו ''' '	
Section B - Assets I						ation Syste	m
	(b) Month and	(c) Basis for depreci	ation	(d) Recovery		Π Τ	
(a) Classification of property	year placed in service	(business/investmen only - see instruction		period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property							
b 5-year property		3,6	596.	5 YRS	MO	200DB	178.
c 7-year property							
d 10-year property						İ	
e 15-year property			Ì				
f 20-year property							
g 25-year property		-		25 yrs		S/L	
	,			27 5 yrs.	ММ	S/L	
h Residential rental property	,			27 5 yrs.	ММ	S/L	
	,			39 yrs	MM	S/L	
 Nonresidential real property 				00 7.0	MM	S/L	
Section C - Assets PI	aced in Service	During 2012 Tax \	Year Us	ing the Alte			tem
20a Class life						S/L	
b 12-year	1			12 yrs.		S/L	
c 40-year	,			40 yrs.	MM	S/L	
Part IV Summary (See instructions.)	· · · · · · · · · · · · · · · · · · ·				1	<u>. </u>	
21 Listed property. Enter amount from line	28					21	
22 Total. Add amounts from line 12, lines 1		es 19 and 20 in col	lumn (a)	and line 21			
Enter here and on the appropriate lines						22	4,840.
23 For assets shown above and placed in s	-	•	•	10/13 300 1113	J		4,040.
portion of the basis attributable to section	•	- Janoin year, eille		23]	
216251 12-28-12 LHA For Paperwork Reduction		separate instructi	ions.				Form 4562 (2012)

<u>P</u>	art V Listed Propert amusement.) Note: For any v		•			ŕ		•		•			•	·	
	through (c) of S	Section A, all	of Section B	, and Sec	tion C if	applica	ble.			<u> </u>		·····		·	nns (a)
			on and Other			aution:	See the i	nstruc	tions for li	mits for p	asseng	er auton	nobiles)		-
<u>24a</u>	a Do you have evidence to s			ent use cl	aimed?_	<u> </u>	es L	_ No	24b If "Y	es," is th	e evidei	nce writt	ten?	_ Yes _	No
	(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business investmen use percenta	t o	(d) Cost or her basis	(hu	(e) sis for depre siness/inve use only	stment	(f) Recovery period		g) hod/ ention	Depre	h) eciation uction	Elec sectio	(i) cted on 179 ost
 25	Special depreciation allo	l			placed	ın servi	ce dunn	the t	ax vear an	d	Τ			-	701
	used more than 50% in	'-	-				•	•	• • • • • • • • • • • • • • • • • • • •		25				
26	Property used more that	n 50% ın a c	ualified busir	ness use											
				%											
			-	%											
				%				-							
27	Property used 50% or le	ess in a qual	ified business	suse											
				%						S/L-					
				%						S/L·				1	
				%						S/L				1	
28	Add amounts in column	(h), lines 25	through 27	Enter her	e and or	line 21	. page 1		·		28				
	Add amounts in column		_				, ,5						29		
<u> </u>	7 lad amounto m colaini	(),		Section			on Use	of Vel	hicles					l	
lf y	mplete this section for ve you provided vehicles to yose vehicles												ng this s	section fo	or
				(a)	(b)	1	(c)	(c	f)	(4	e)	(f	7)
								Veh	ıcle						
	year (do not include comr		· · · · · ·												
31	Total commuting miles of	the year					<u> </u>								
32	Total other personal (no	ncommuting	j) miles									}			
	driven					<u> </u>		<u></u>							
33	Total miles driven during	the year.													
	Add lines 30 through 32	!						<u> </u>							
34	Was the vehicle availab	le for person	nal use	Yes	No	Yes	No	Yes	s No	Yes	No	Yes	No	Yes	No
	during off-duty hours?														
35	Was the vehicle used pi	rımarıly by a	more		İ	ŀ			1						
	than 5% owner or relate	ed person?													
36	Is another vehicle availa	ble for perso	onal												
	use?														
		Section C	- Questions	for Emp	loyers V	Vho Pro	vide Vel	nicles	for Use b	y Their E	mploye	es			
An	swer these questions to	determine if	you meet an	exceptioi	n to com	pleting	Section	B for v	ehicles us	ed by en	nployee	s who a	re not m	nore than	5%
ow	ners or related persons.														
37	Do you maintain a writte	en policy sta	tement that p	rohibits a	ali perso	nal use	of vehicl	es, inc	luding cor	nmuting,	by you	r		Yes	No
	employees?									•					
38	Do you maintain a writte	en policy sta	tement that p	rohibits j	personal	use of	vehicles,	excep	ot commut	ing, by y	our				
	employees? See the ins	tructions for	r vehicles use	d by corp	oorate o	fficers, c	directors	, or 1%	6 or more	owners					<u> </u>
39	Do you treat all use of v	ehicles by ei	mployees as	personal	use?										
40	Do you provide more the	an five vehic	les to your er	nployees	, obtain	ınforma	tion from	ı your	employee	s about					1
	the use of the vehicles,	and retain th	ne information	receive	ქ?										
41	Do you meet the require	ements conc	erning qualifi	ed autom	obile de	monstra	ation use	?							
	Note: If your answer to	37, 38, 39, 4	10, or 41 is "Yo	es," do n	ot comp	lete Sec	tion B fo	r the	covered ve	hicles					
Р	art VI Amortization														
	(a)			(b)		(c)			(d)		(e)			(f)	
	Description of	f costs	Da.	te amortization begins		Amortiza amoun	ble t		Code section		Amortiza period or per		A fo	mortization or this year	
42	Amortization of costs th	at begins du	uring your 20°	12 tax ye	ar.						_				
_															
43	Amortization of costs th	at began be	fore your 201	2 tax yea	ar							43			
	Total. Add amounts in o	•	-	•		<u>o report</u>						44			
_	3252 12-28-12												F	orm 456	2 (2012)

RUN WILD MISSOULA INC

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20-5794114 Page 2

Form **8868**

(Rev January 2013)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No. 1545-1709

• If you	u are filing for an Automatic 3-Month Extension, comple	te only Pa	rt I and check this box		1	\mathbf{x}
If you	u are filing for an Additional (Not Automatic) 3-Month Ex	tension, c	complete only Part II (on page 2 of	this form)		
Do not	complete Part II unless you have already been granted a	an automa	itic 3-month extension on a previous	sly filed Fo	rm 8868.	
Electro	onic filing (e-file). You can electronically file Form 8868 if y	ou need a	a 3-month automatic extension of tir	ne to file (6	months for a co	rporation
	d to file Form 990-T), or an additional (not automatic) 3-mo		•			•
	to file any of the forms listed in Part I or Part II with the ex-		-		•	
	al Benefit Contracts, which must be sent to the IRS in pap					
	www.irs.gov/efile.and.click.on.e-file.for.Charities.& Nonprofits		,			
Part			submit original (no copies ne	eded).		
A corpo	oration required to file Form 990-T and requesting an autor	matic 6-mo	onth extension - check this box and	complete		
Part I o	nly]	▶ □
All othe	er corporations (including 1120-C filers), partnerships, REM	IICs, and t	rusts must use Form 7004 to reques	st an exten	sion of time	
to file ir	ncome tax returns					
Туре о	 Name of exempt organization or other filer, see instru 	ctions		Employe	r identification nui	mber (EIN) or
print						
	RUN WILD MISSOULA INC				20-57941	14
File by thi due date		ee instruc	tions.	Social se	curity number (SS	3N)
filing your return Se						·
instructio		oreign add	ress, see instructions.			
	MISSOULA, MT 59806					
Enter tl	ne Return code for the return that this application is for (file	e a separa	te application for each return)			0 1
				<u>-</u>		
Applica	ation	Return	Application			Return
ls For	· · · · · · · · · · · · · · · · · · ·	Code	Is For			Code
Form 9	90 or Form 990-EZ	01	Form 990-T (corporation)			07
Form 9	90-BL	02	Form 1041-A			08
Form 4	720 (ındıvıdual)	03	Form 4720			09
Form 9	90-PF	04	Form 5227			10
Form 9	90-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
Form 9	90-T (trust other than above)	06	Form 8870			12
	MEGAN TIFFIN					
The	books are in the care of ▶ PO BOX 2368 - I	MISSO	<u>ULA, MT 59806-2368</u>			
Tele	phone No ► <u>406-721-7800</u>		FAX No 🕨			
• If th	e organization does not have an office or place of business	s in the Ur	nited States, check this box	•		▶ □
If th	is is for a Group Return, enter the organization's four digit	Group Exe	emption Number (GEN)	If this is fo	r the whole group	, check this
box 🕨	If it is for part of the group, check this box	and atta	ch a list with the names and EINs o	f all memb	ers the extension	is for.
1 1	request an automatic 3-month (6 months for a corporation	required	to file Form 990-T) extension of time	until		
_	APRIL 15, 2014 , to file the exemp	t organiza	tion return for the organization nam	ed above.	The extension	
19	s for the organization's return for.					
)	calendar year or					
)	X tax year beginning JAN 1, 2013	, an	d ending <u>AUG 31, 2013</u>			
			-		_	
2 1	f the tax year entered in line 1 is for less than 12 months, o	heck reas	on: Initial return	Final retur	n	
	X Change in accounting period					
3a I	f this application is for Form 990-BL, 990-PF, 990-T, 4720,	or 6069, e	nter the tentative tax, less any			
r	onrefundable credits See instructions.		· ·	3a	\$	0.
b i	f this application is for Form 990-PF, 990-T, 4720, or 6069,	enter any	refundable credits and			
	estimated tax payments made Include any prior year overp	•		3b	s	_ 0.
_	Balance due. Subtract line 3b from line 3a. Include your pa					
	by using EFTPS (Electronic Federal Tax Payment System)	-	•	3с	s	0.
	n. If you are going to make an electronic fund withdrawal				EO for payment in	
LHA	For Privacy Act and Paperwork Reduction Act Notice,					(Rev. 1-2013)

223841 01-21-13