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Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047 Open to Public

▶ The organization may have to use a copy of this return to satisfy state reporting requirements Inspection A For the 2012 calendar year, or tax year beginning SEP 2012 and ending AUG 31, 2013 C Name of organization D Employer identification number Mission Ridge Ski Education Foundation 23-7057008 Doing Business As Initial Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Termin-25 N. Wenatchee Avenue 112 (509)669-3641 Amended City, town, or post office, state, and ZIP code 588,643. G Gross receipts \$ Applica-Wenatchee, WA 98801 H(a) Is this a group return F Name and address of principal officer. Jeff Sanborn for affiliates? JYes LX No same as C above H(b) Are all affiliates included? _ Yes ↓ I Tax-exempt status: ■ 501(c)(3) ■ 501(c) ((insert no.) 4947(a)(1) or 527 If "No," attach a list. (see instructions) J Website: ▶ http://www.mrst.us H(c) Group exemption number K Form of organization: X Corporation Association Other > Year of formation: 2006 M State of legal domicile: WA Part I | Summary Briefly describe the organization's mission or most significant activities. To maintain an educational Governance program devoted to skiers in an effort to promote physical fitness, 2 Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets 3 Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b) 7 Activities & 33 Total number of individuals employed in calendar year 2012 (Part V, line 2a) 5 475 Total number of volunteers (estimate if necessary) 6 7 a Total unrelated business revenue from Part VIII, column (C), line 12 0. b Net unrelated business taxable income from Form 990-T, line 34 3 CUM 16 **Prior Year Current Year** 8 Contributions and grants (Part VIII, line 1h) 172,721 77,245. Program service revenue (Part VIII, line 2g) 247,482 393,869. 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) <818. <<u>3,506.</u>> 95,288 82,915**.** 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) <u>550,523.</u> Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) <u>514,673</u> Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0. 1,828. 14 Benefits paid to or for members (Part IX, column (A), line 4) 0. 222,600. 255,518. 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 0. 16a Professional fundraising fees (Part IX, column (A), line 11e) <u>52,135</u>. 0. b Total fundraising expenses (Part IX, column (D), line 25) 267,687. 265,184. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 542,422. 522,530. <27,749. 27,993. Revenue less expenses. Subtract line 18 from line 12 Beginning of Current Year End of Year 163,441. 162,167. 20 Total assets (Part X, line 16) 65,755. 21 Total liabilities (Part X, line 26) 39,036. 96,412. 12<u>4,405.</u> Net assets or fund balances. Subtract line 21 from line 20 Signature Block Under-penalties of perjury, Edeclare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. 100 Date Sig∯⊵ Jeff Sanborn, President Heres Type or print name and title Check Preparer's signature Print/Type preparer's name Paid; P00367871 <u>Kristine Loomis, CPA</u> sett-employed Preparer Firm's name Cordell, Neher & Company, Firm's EIN 91-0950793 Firm's address ▶ P.O. Box 3068 Use Only Wenatchee, WA 98807-3068 Phone no. 509-663-1661

232001 12-10-12 LHA For Paperwork Reduction Act Notice, see the separate instructions.

May the IRS discuss this return with the preparer shown above? (see instructions)

X Yes

	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response to any question in this Part III
1	Briefly describe the organization's mission:
•	To establish, administer, and promote an educational program devoted
	to the development and training of skiers. To promote fitness and
	interest in competitive skiing.
2	Did the organization undertake any significant program services during the year which were not listed on
	the prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
	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 by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
4a	revenue, if any, for each program service reported. (Code) (Expenses \$
44	(Code) (Expenses \$
4b	(Code) (Expenses \$
40	(Code) (Expenses \$ including grants of \$) (Revenue \$)
4c	(Code) (Expenses \$ including grants of \$) (Revenue \$)
4d	Other program services (Describe in Schedule O)
	(Expenses \$ including grants of \$) (Revenue \$
4-	Total program social expenses A72 607

	990 (2012) Mission Ridge Ski Education Foundation 23-7057	<u>008</u>	P:	<u>аде 3</u>
Par	t IV Checklist of Required Schedules			
			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	
	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			<u></u>
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
_	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	-		x
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		^
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	0		
•	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	ļ	X
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.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,	1	}	}
	Part VI	<u>11a</u>	X	ļ
þ	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	11b		X
C	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	}	ļ	
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	<u> </u>	X
þ	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			1
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	 	X
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
T	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	444		x
120	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	11f	 	1
124	Schedule D, Parts XI and XII	12a		x
h	Was the organization included in consolidated, independent audited financial statements for the tax year?		 	
~	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a		14a		X
b	The state of the s			
	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		X
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	ļ	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	<u> </u>	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	-	X
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	1

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

19

20a

19

complete Schedule G, Part III

	L. C.		Yes	<u>No</u>
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the			
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		<u> </u>
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 27 If "Yes," complete Schedule I, Parts I and III	22		<u> </u>
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		<u>X</u>
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			••
	Schedule K If "No", go to line 25	24a		<u>X</u>
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		_
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a	05-		v
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		<u>X</u>
D	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and		i	
	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
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified	250		
20	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		1	
	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):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		_X_
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
	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		X
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	<u> </u>	X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	ļ		
	Schedule N, Part II	32	<u> </u>	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	<u> </u>	<u> X</u>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and		Ì	
	Part V, line 1	34	 	X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	├	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			v
	If "Yes," complete Schedule R, Part V, line 2	36	}	X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization		ł	
20	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	 -	X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	38	X	
	Note. All Form 990 filers are required to complete Schedule O			(2012)

Form 990 (2012)
Part V Sta 012) Mission Ridge Ski Education Foundation
Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V					لبل		
			- r		Yes	No		
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1 <u>a</u>	3					
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0			ļ		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and re	porta	ble gaming					
	(gambling) winnings to prize winners?		1	1c	X			
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,		2.3		'	1		
	filed for the calendar year ending with or within the year covered by this return 2a 33							
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	i)				1		
	Did the organization have unrelated business gross income of \$1,000 or more during the year?			_3a_		X		
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	41		3b_		 		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a		-	4.		x		
_	financial account in a foreign country (such as a bank account, securities account, or other financial at the lives if a page of the foreign country.	accou	nt) ?	<u>4a</u>		^		
D	If "Yes," enter the name of the foreign country:	1000	nte					
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial A	40000	nts.	E.		x		
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa	ction	,	5a 5b	 	X		
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	CLIOIT	•	5c		<u> </u>		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	ne oro	anization solicit	<u> </u>	 	 		
Va	any contributions that were not tax deductible as charitable contributions?	10 O. g	amedion solicit	6a		x		
ь	If "Yes," did the organization include with every solicitation an express statement that such contribut	ions d	or aifts	<u> </u>		 -		
	were not tax deductible?		,, go	6b		1		
7	Organizations that may receive deductible contributions under section 170(c).			<u> </u>				
·	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and set	rvices	provided to the payor?	7a	ĺ	X		
ь	If "Yes," did the organization notify the donor of the value of the goods or services provided?		F	7b				
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w	as red	uired					
_	to file Form 8282?			7c_	Ĺ	X		
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d						
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of	ontra	ct?	7e	<u> </u>	X		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit cont	ract?		7 1		X		
g	If the organization received a contribution of qualified intellectual property, did the organization file F	orm 8	899 as required?	7 g	<u> </u>	<u> </u>		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization	ation	file a Form 1098-C?	7h	1	 		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. D					1		
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at	any ti	me during the year?	8	 	 		
9	Sponsoring organizations maintaining donor advised funds.			ļ				
а	Did the organization make any taxable distributions under section 4966?			9a		∔		
þ	Did the organization make a distribution to a donor, donor advisor, or related person?			9b	↓			
10	Section 501(c)(7) organizations. Enter:	1	1	l				
а	Initiation fees and capital contributions included on Part VIII, line 12	10a		┨				
ь	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	1	-				
11	Section 501(c)(12) organizations. Enter:	مدا	1	ł	1	1		
a	Gross income from members or shareholders	11a	 	1	İ			
b	Gross income from other sources (Do not net amounts due or paid to other sources against		}		}			
40	amounts due or received from them)	11b		10-		1		
12a		1		12a	┼	╁──		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	<u> </u>	1	1			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			120	+	+-		
а	·			13a	+-	+-		
L	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	.1					
_	Enter the amount of reserves on hand	130		1	ļ			
	The state of the s	130		14a	+	X		
14a	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedu	le O		14b		1		
0	ii 199, has it lied a form (20 to report these paymonts (ii No, provide an explanation in Schedu	<u>,,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,,</u>				1/2012		

Form 990 (2012) Mission Ridge Ski Education Foundation 23-7057008 Page 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					X		
Sect	ion A. Governing Body and Management							
			1		Yes	No		
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	7		i			
	If there are material differences in voting rights among members of the governing body, or if the governing							
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.	-						
b	Enter the number of voting members included in line 1a, above, who are independent	1b	7					
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationsh	ip with	any other		l			
	officer, director, trustee, or key employee?			2		<u>X</u>		
3	Did the organization delegate control over management duties customarily performed by or under the	ne direc	ct supervision					
	of officers, directors, or trustees, or key employees to a management company or other person?							
4	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 as	sets?		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 a	appoint	one or					
	more members of the governing body?			7a		X		
ь	Are any governance decisions of the organization reserved to (or subject to approval by) members,	stockh	olders, 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	ear by th	ne fallowina:					
_	The governing body?		g.	8a	Х			
	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 re	ached	at the	-				
3	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	4004	ao	9		X_		
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal I	Pavanu	e Code I					
000	tion B. 1 onotes (this Section B requests information about policies not required by the internal r	ic verio	0 0000.)		Yes	No		
100	Did the organization have local chapters, branches, or affiliates?			10a	103	X		
	•	chante	re affiliates	100				
D	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?							
440	Has the organization provided a complete copy of this Form 990 to all members of its governing bo	dv hefe	ore filing the form?	10b	X			
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	u , u	oro ming the room	1.0				
	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 ris	ea to co	nflicte2	12b	X			
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "			120				
C	in Schedule O how this was done	763, 6	iescribe	12c	х			
42	•			13		X		
13	Did the organization have a written whistleblower policy?			14		X		
14	Did the organization have a written document retention and destruction policy?	val by	ndanandant	1-9				
15	Did the process for determining compensation of the following persons include a review and appro	_	ndebendent					
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision	ſf		45-		Х		
a	The organization's CEO, Executive Director, or top management official	•		15a		X		
b	Other officers or key employees of the organization			15b	 -	 ^-		
40	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	omest:	wath a					
าซล	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ament,	will d	40-	1	v		
_	taxable entity during the year?			16a	 -	X		
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate the second of the organization of the second of t							
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the org	anızatı	on's					
_	exempt status with respect to such arrangements?			16b	<u> </u>	1		
	tion C. Disclosure							
17	List the states with which a copy of this Form 990 is required to be filed None	T (0	Alan 504/-1/01					
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990	FI (Sec	tion 501(c)(3)s only)	availat)I C			
	for public inspection. Indicate how you made these available. Check all that apply	_						
	Own website Another's website X Upon request Other (expla		•					
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents,	conflict	of interest policy, a	nd finai	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 re	cords of the organization	ation.	-			
	Thomas Janisch							
2000	23 South Wenatchee Avenue, STE 122, Wenatchee, WA	<u>. 91</u>	3801					

Form 990 (2012)		Ridge :	<u>Ski E</u>	Education	Foundation_
5	4 4 41		_		

23-7057008

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

Check if Schedule	O contains	a response	to any	auestion in	this Part VII
CHECK II SCHEUUIE	O CUITAII IS	a 162001126	to arry	uuestion in	uus ran vo

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) Position						(D)	(E)	(F)
Name and Title	Average hours per	(do	(do not check more than one box, unless person is both an officer and a director/trustee)		Reportable compensation	Reportable compensation	Estimated amount of			
	week	offic			from	from related	other			
	(list any	혍						the	organizations	compensation
	hours for	- - 5	83			ated	ı	organization	(W-2/1099-MISC)	from the
	related organizations	ustee	E SS		8	ngen		(W-2/1099-MISC)		organization and related
	below	Individual trustee or director	Institutional trustee	_	m glo	stco	25			organizations
	line)	를	insti	Officer	кеу етрюуее	Highest compensated employee	Рог тег	_		
(1) Jeff Sanborn	1.00							_	_	_
President		X	ļ	X		ļ		0.	0.	0.
(2) Tom Janisch	1.00	1		'						_
Treasurer	 	X	<u> </u>	X	_	<u> </u>		0.	0.	0,
(3) Mark Milliette	1.00	 		ĺ		ĺ				
Secretary	1	X	-	X	<u> </u>	├	<u> </u>	0.	0.	0.
(4) Jerry Barkley	1.00	١							0.	_
Board Member	1 00	X	-	├—	\vdash	-	-	0.	0.	0
(5) Brad Selland	1.00	┤						0.	0.	0
Board Member	1.00	X	╁	╁	-	-	├	<u> </u>	0.	<u> </u>
(6) Mike Taylor	1.00	x			ļ			0.	0.	0
Board Member	1.00	^	╁	\vdash	-	╁╌	-	 	0.	0.
(7) Karen Rutherford	1.00	┨	1					0.	0.	0
Board Member	 	┼	+-	╁	\vdash	-	\vdash		0.	
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Mission Ridge Ski Education Foundation

23-7057008

Page 8

Part VIII Statement of Revenue Check if Schedule O contains a response to any question in this Part VIII (D) Revenue excluded from tax under sections 512, 513, or 514 (B) (C) Total revenue Related or Unrelated exempt function business revenue revenue Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns 1a **b** Membership dues 1b 9,850. c Fundraising events 1c d Related organizations 1d e Government grants (contributions) 1e f All other contributions, gifts, grants, and 67,395. similar amounts not included above g Noncash contributions included in lines 1a-1f \$_ 77,245 h Total. Add lines 1a-1f **Business Code** 393,869. 2 a Racing & Teaching 711210 393,869. Program Service f All other program service revenue 393,869 g Total. Add lines 2a-2f Investment income (including dividends, interest, and 280 280. other similar amounts) Income from investment of tax-exempt bond proceeds 4 Royalties 5 (i) Real (ii) Personal 6 a Gross rents b Less rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of (i) Securities (ii) Other assets other than inventory 2,259 b Less: cost or other basis 6,045 and sales expenses <3,786.> c Gain or (loss) <3,786.> <3,786. d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ 9,850. of contributions reported on line 1c) See a 114,990. Part IV, line 18 32,075. **b** Less direct expenses 82,915 82,915. c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 **b** Less direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory Business Code Miscellaneous Revenue 11 a d All other revenue e Total. Add lines 11a-11d

550,523.

390,083.

0.

83,195.

Form 990 (2012)

Total revenue. See instructions.

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) Check if Schedule O contains a response to any question in this Part IX (D) Fundraising (A) Total expenses (B) Do not include amounts reported on lines 6b. Management and Program service 7b, 8b, 9b, and 10b of Part VIII. general expenses expenses expenses Grants and other assistance to governments and 1 organizations in the United States. See Part IV, line 21 Grants and other assistance to individuals in 1,828. 1,828. the United States See Part IV, line 22 Grants and other assistance to governments. 3 organizations, and individuals outside the United States, See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 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) 226,382. 226,382 Other salaries and wages Pension plan accruals and contributions (include 1.944 1,944 section 401(k) and 403(b) employer contributions) 9 Other employee benefits 27,192 27,192 10 Payroll taxes Fees for services (non-employees): Management b Legai 9,351 5,151. 4,200 c Accounting d Lobbying e Professional fundraising services. See Part IV, line 17 Investment management fees Other (If line 11g amount exceeds 10% of line 25, 3,060. 3,060. column (A) amount, list line 11g expenses on Sch O.) 12,745. 12,745. Advertising and promotion 12 4,703 11,789. 7,086. 13 Office expenses Information technology 14 15 Royalties 1,265. 13,649. 12,384. Occupancy 16 66,079. 66,079. Travel 17 Payments of travel or entertainment expenses 18 for any federal, state, or local public officials Conferences, conventions, and meetings 19 Interest 20 21 Payments to affiliates Depreciation, depletion, and amortization 33,005. 22 2,531 2,531 Insurance 23 Other expenses, Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) 78,402. 78,402 Race Expenses 11,616. 11,616. ь Uniforms 7,264. 11,483. 4,219. c Auto Expenses 9,141. 9,141. d Bank Charges 2,333. 2,333. All other expenses 16,918 522,530. 472,607. 0. Total functional expenses Add lines 1 through 24e 25 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)

Par	ŢX	Balance Sheet			
		Check if Schedule O contains a response to any question in this Part X	· · · · · · · · · · · · · · · · · · ·		
			(A) Beginning of year		(B) End of year
l	1	Cash · non-interest-bearing	22,640.	1	48,597.
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
- }	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees. Complete			
		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 4958(c)(3)(B), and contributing			
- 1		employers and sponsoring organizations of section 501(c)(9) voluntary		1	
		employees' beneficiary organizations (see instr). Complete Part II of Sch L	· · · · · · · · · · · · · · · · · · ·	6	
Assets	7	Notes and loans receivable, net	·	7	·
Ass	8	Inventories for sale or use	· · · · · · · · · · · · · · · · · · ·	8	
	9	Prepaid expenses and deferred charges	1,000.	9	
	10a			li	
		basis. Complete Part VI of Schedule D 10a 225, 395.			
	þ	Less accumulated depreciation 10b 110,551.	138,527.	10c	114,844.
	11	Investments - publicly traded securities		11	
	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 line 34)	162,167.	16	163,441.
	17	Accounts payable and accrued expenses	356.	17	887.
	18	Grants payable		18	
	19	Deferred revenue		19_	
	20	Tax-exempt bond liabilities		20	
es	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
Liabilities	22	Loans and other payables to current and former officers, directors, trustees,			
i.	ļ	key employees, highest compensated employees, and disqualified persons.			
_		Complete Part II of Schedule L	65 000	22	30 110
	23	Secured mortgages and notes payable to unrelated third parties	65,399.	23	38,149.
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24) Complete Part X of		l	
		Schedule D	CE 755	25	30.036
	26	Total liabilities, Add lines 17 through 25	65,755.	26	39,036.
		Organizations that follow SFAS 117 (ASC 958), check here ▶ ☐ and		}	
ces		complete lines 27 through 29, and lines 33 and 34.			
<u>a</u>	27	Unrestricted net assets		27	
Ва	28	Temporarily restricted net assets		28	
Fund Balances	29	Permanently restricted net assets		29	
Ę		Organizations that do not follow SFAS 117 (ASC 958), check here		1	
Ō	200	and complete lines 30 through 34.	0.	200	
set	30	Capital stock or trust principal, or current funds	0.		0.
Net Assets or	31	Paid-in or capital surplus, or land, building, or equipment fund	96,412		124,405.
Ne.	32	Retained earnings, endowment, accumulated income, or other funds	96,412.		124,405.
_	33	Total net assets or fund balances	162,167		163,441.
	34	Total liabilities and net assets/fund balances	104,10/	34	103,441.

	990 (2012) Mission Ridge Ski Education Foundation	<u>23-7057</u>	7008	Pag	₁₀ 12
Par	t XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI				
	,	1			
1	Total revenue (must equal Part VIII, column (A), line 12)	1),5	
2	Total expenses (must equal Part IX, column (A), line 25)	2			<u>30.</u>
3	Revenue less expenses Subtract line 2 from line 1	3			93.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	9	5,4	<u>12.</u>
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			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	12	4,4	05.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				
			1	Yes	No
1	Accounting method used to prepare the Form 990. X Cash Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Ο.	1 1		
2a			2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	l on a			
	separate basis, consolidated basis, or both:		1 1		
	Separate basis Consolidated basis Both consolidated and separate basis		1 1		
þ	Were the organization's financial statements audited by an independent accountant?		2b		X_
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,			
	consolidated basis, or both.		}		i
	Separate basis Consolidated basis Both consolidated and separate basis		1 1		}
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of th	e audit,	1 1		
	review, or compilation of its financial statements and selection of an independent accountant?		2c		İ
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si				
	Act and OMB Circular A-133?		3a		X
ь	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired audit			
_	or audite, explain why in Schedule O and describe any stans taken to undergo such audits		35		1

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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

Inspection

Name of the organization

Employer identification number

·		<u> Mission</u>	<u>Ridge Ski E</u>	ducat:	ion Fo	ounda	<u>tion</u>		2	<u>3-7057</u>	800	
Part I	Reason f	or Public Char	ity Status (All organiza	ations mus	t complete	this part) See insti	uctions.				
The organi	zation is not a	private foundation	because it is: (For lines 1	through 1	1, check c	nly one b	ox.)					
1 🔲	A church, con	ivention of churches	s, or association of churc	hes descr	ibed in sec	ction 170(b)(1)(A)(i).					
2	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.)											
з 🗔	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 name,											
4 🔲	A medical res	earch organization o	operated in conjunction v	vith a hosp	oital descri	bed in se	ction 170(b)(1)(A)(iii	i). Enter t	the hospital	's nam	е,
	city, and state	ə									_	_
5 🗀	An organization	on operated for the	benefit of a college or un	versity ov	vned or op	erated by	a governn	nental unit	describ	ed in		
section 170(b)(1)(A)(iv). (Complete Part II.)												
6 🔲	A federal, stat	te, or local governm	ent or governmental unit	described	l in section	n 170(b)(1)(A)(v).					
7 X	An organization	on that normally rec	eives a substantial part o	of its supp	ort from a	governme	ntal unit o	r from the	general	public desc	ribed ii	n
	section 170(t	o)(1)(A)(vi). (Comple	te Part II)									
8 🗀	A community	trust described in s	ection 170(b)(1)(A)(vi). (Complete	Part II.)							
9 🔲	An organization	on that normally rec	eives: (1) more than 33 1	/3% of its	support fr	om contri	outions, m	embershij	p fees, a	nd gross re	ceipts	from
	activities relat	ted to its exempt fui	nctions - subject to certa	ın exceptio	ons, and (2) no more	than 33 1	/3% of its	support	from gross	invest	ment
	income and u	inrelated business t	axable income (less sect	on 511 ta	x) from bu	sinesses a	cquired by	y the orga	nization	after June 3	30, 197	' 5.
	See section !	509(a)(2). (Complete	Part III.)									
10 🔲	_	•	perated exclusively to tes	-	-			-				
11	An organizati	on organized and op	perated exclusively for th	e benefit d	of, to perfo	rm the fur	octions of,	or to carr	y out the	purposes o	of one	or
	•	•	ations described in section		•). See sec	tion 509(a)(3). Ch	eck the box	that	
			organization and comple									
_	a L Type I		·· ·	•	nctionally i	•	d			n-functional	, .	-
e	-	-	at the organization is not									n
		=	han one or more publicly						9(a)(1) or	section 509	}(a)(2).	
1	_		tten determination from t	he IRS tha	at it is a Ty	pe I, Type	II, or Type	111				
		ganization, check the							_			L
g			organization accepted an								<u> </u>	T
	••	· ·	lirectly controls, either al	one or tog	etner with	persons c	lescribed i	n (II) and (iii) below		Yes	No
	-	- ·	upported organization?						•	11g(i)	7	-
		·	n described in (i) above?		- 0			•		11g(ii)		
•		•	person described in (i) o			-				11g(iii	ш	L
h	Provide the to	ollowing information	about the supported org	ganization	(S).							
			T	that lo the c	organization	(u) Did you	u notify the	(vi) Is	the	I		
	of supported	(ii) EIN	(iii) Type of organization (described on lines 1-9	P .	sted in your		ion in col.	organizati	on in col.	(vii) Amoun		netary
or g	anization		above or IRC section		document?		support?	(i) organiz U.S	.?	j sul	pport	
			(see instructions))	Yes	No	Yes	No	Yes	No	1		
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Schedule A (Form 990 or 990-EZ) 2012 Mission Ridge Ski Education Foundation 23-7057008 Page 2

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total 1 Gifts, grants, contributions, and membership fees received (Do not 84,368. 135,892. 258,414. 247,482. 394,275. include any "unusual grants.") 1,120,431, 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 84,368. 258,414. 247,482. 394,275. 135,892. Total, Add lines 1 through 3 1,120,431. 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) 6 Public support, Subtract line 5 from line 4 1.120.431. Section B. Total Support (e) 2012 (c) 2010 (d) 2011 Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (f) Total 258,414 247,482. 135,892 394,275 84,368. 7 Amounts from line 4 1,120,431, 8 Gross income from interest. dividends, payments received on securities loans, rents, royalties 168 189. <818.b 280 142. <39.> 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) 11 Total support. Add lines 7 through 10 1,120,392. 12 12 Gross receipts from related activities, etc. (see instructions) First five years, If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 100.00 14 % 14 Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f)) 99.99 15 % 15 Public support percentage from 2011 Schedule A, Part II, line 14 16a 33 1/3% support test - 2012. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and $\triangleright X$ stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2011. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2012. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more. and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10% -facts-and-circumstances test - 2011. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or

more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the

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

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

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.

2012
Open to Public Inspection

Name of the organization

Employer identification number

Da		Education Foundation	23-7057008
Par			CCOUNTS. Complete if the
	organization answered "Yes" to Form 990, Part IV, lin		
		(a) Donor advised funds (b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advised fun	ods
	are the organization's property, subject to the organization's	s exclusive legal control?	. Yes L No
6	Did the organization inform all grantees, donors, and donor	advisors in writing that grant funds can be used o	only
	for charitable purposes and not for the benefit of the donor	or donor advisor, or for any other purpose confer	· — —
	impermissible private benefit?		Yes No
Par	t II Conservation Easements. Complete if the or	rganization answered "Yes" to Form 990, Part IV,	line 7.
1	Purpose(s) of conservation easements held by the organization	tion (check all that apply).	
	Preservation of land for public use (e.g., recreation or	education) Preservation of an historical	lly important land area
	Protection of natural habitat	Preservation of a certified h	istoric structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qual	lified conservation contribution in the form of a co	onservation easement on the last
	day of the tax year		
			Held at the End of the Tax Year
а	Total number of conservation easements		
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic st	tructure included in (a)	2c
d	Number of conservation easements included in (c) acquired	l after 8/17/06, and not on a historic structure	
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re	eleased, extinguished, or terminated by the organ	nization during the tax
	year ▶	_	
4	Number of states where property subject to conservation ea		
5	Does the organization have a written policy regarding the po		— —
_	violations, and enforcement of the conservation easements		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting		_
7	Amount of expenses incurred in monitoring, inspecting, and		
8	Does each conservation easement reported on line 2(d) about	ove satisfy the requirements of section 170(h)(4)(l	
_	and section 170(h)(4)(B)(ii)?		└ Yes
9	In Part XIII, describe how the organization reports conserva		
	include, if applicable, the text of the footnote to the organization	ation's financial statements that describes the or	ganization's accounting for
Pa	t III Organizations Maintaining Collections	of Art Historical Treasures or Other	Similar Assets
1 44	Complete if the organization answered "Yes" to Form		31111111 A33013.
10	If the organization elected, as permitted under SFAS 116 (A		and halance sheet works of art
10	historical treasures, or other similar assets held for public ex	•	
	the text of the footnote to its financial statements that desc		public service, provide, in Fait Am,
	If the organization elected, as permitted under SFAS 116 (A		halance sheet works of art. historical
U	treasures, or other similar assets held for public exhibition,	·	
	·	education, or research in furtherance of public se	sivice, provide the following amounts
	relating to these items. (i) Revenues included in Form 990, Part VIII, line 1		•
	(ii) Assets included in Form 990, Part X	·	-
2		reactures, or other similar assets for financial gain	provide
2	If the organization received or held works of art, historical tr the following amounts required to be reported under SFAS		, provide
_	·	TO (ASC 330) relating to these items.	*
a	Revenues included in Form 990, Part VIII, line 1		> \$
b	Assets included in Form 990, Part X		▶ \$

		<u>Ridge Ski</u>					_			Page 2
Par	t III Organizations Maintaining C	ollections of A	rt, Hist	orical Tr	easures, c	r Other	Simila	ar Asse	ts(continu	<u>ed)</u>
3	Using the organization's acquisition, accession	on, and other record	is, check	any of the	following that	t are a sıgı	nıfıcant ı	use of its	collection	items
	(check all that apply).									
а	Public exhibition	d	ı III'	oan or exc	hange progra	ıms				
Ь	Scholarly research	е	- [](Other						
C	Preservation for future generations									
4	Provide a description of the organization's co	illections and explai	n how th	ey further tl	he organizatio	on's exem	pt purpo	ose in Pari	XIII.	
5	During the year, did the organization solicit or	receive donations	of art, his	storical trea	sures, or othe	er sımılar a	ssets		_	_
	to be sold to raise funds rather than to be ma								Yes	No_
Par	t IV Escrow and Custodial Arrang	gements. Comple	ete if the	organizatio	n answered '	'Yes" to Fo	orm 990	, Part IV, I	ine 9, or	
	reported an amount on Form 990, Par	t X, line 21.								
1a	Is the organization an agent, trustee, custodi	an or other intermed	diary for o	contribution	is or other as	sets not ir	ncluded		_	
	on Form 990, Part X?								Yes	L No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing t	able:						
									Amount	
С	Beginning balance						1c			
d	Additions during the year						1d			
е	Distributions during the year						1e			
f	Ending balance						1f			
2a	Did the organization include an amount on Fe	orm 990, Part X, line	21?						Yes	No
<u>b</u>	If "Yes," explain the arrangement in Part XIII.	Check here if the e	xplanatio	n has been	provided in l	Part XIII				
Par	t V Endowment Funds. Complete it	f the organization ar	swered	"Yes" to Fo	rm 990, Part	IV, line 10) <u>. </u>			
		(a) Current year	(b) P	rior year	(c) Two year	rs back (c	d) Three	years back	(e) Four y	years back
1a	Beginning of year balance									
þ	Contributions									
С	Net investment earnings, gains, and losses									
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs									
f	Administrative expenses									
g	End of year balance					L				
2	Provide the estimated percentage of the curr	rent year end baland	ce (line 1	g, column (a	a)) held as:					
а	Board designated or quasi-endowment		%							
b	Permanent endowment	%								
С	Temporarily restricted endowment ▶	%								
	The percentages in lines 2a, 2b, and 2c should	uld equal 100%.								
3a	Are there endowment funds not in the posse	ssion of the organiz	ation tha	at are held a	and administe	ered for the	e organı	zation	_	
	by.									Yes No
	(i) unrelated organizations								3a(i)	
	(ii) related organizations								3a(ii)	
b	If "Yes" to 3a(ii), are the related organizations	s listed as required	on Sched	dule R?					3b	
4	Describe in Part XIII the intended uses of the									
Pa	t VI Land, Buildings, and Equipm	ient. See Form 99	0, Part X	line 10						
	Description of property	(a) Cost or obasis (invest			t or other (other)		cumulat reciatior		(d) Book	value
1a	Land									
	Buildings									
	Leasehold improvements									
ď	Equipment			20	9,000.	1	07,1	50.	101	1,850.
	Other				6,395.			01.		2,994.
Tota	. Add lines 1a through 1e. (Column (d) must e	qual Form 990, Par	t X, colur	nn (B), line	10(c).)			. •	114	1,844.

Schedule D (Form 990) 2012

SCHEDULE G

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

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

OMB No 1545-0047

2012

Open To Public Inspection

Name of the organization **Employer identification number** Mission Ridge Ski Education Foundation 23-7057008 Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17 Form 990-EZ filers are not Part I required to complete this part 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. Solicitation of non-government grants Mail solicitations e L_ Internet and email solicitations Solicitation of government grants b Phone solicitations Special fundraising events С d In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or Yes key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? J No b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization (iii) Did fundraiser have custody or control of contributions? (v) Amount paid (vi) Amount paid (i) Name and address of individual (iv) Gross receipts to (or retained by) to (or retained by) (ii) Activity or entity (fundraiser) from activity fundraiser organization listed in col. (i) Yes No <u>Tot</u>al List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

che Par		e G (Form 990 or 990 EZ) 2012 Mission Fundraising Events. Complete if to of fundraising event contributions and g	he organization answered	l "Yes" to Form 990, Part	IV, line 18, or reported r	nore than \$15,000
			(a) Event #1	(b) Event #2 Golf	(c) Other events	(d) Total events (add col. (a) through
- 1			Auction	Tournament	2	col (c))
او			(event type)	(event type)	(total number)	
Revenue	1	Gross receipts	76,368.	25,891.	22,581.	124,840.
	2	Less Contributions		9,850.		9,850.
	3	Gross income (line 1 minus line 2)	76,368.	16,041.	22,581.	114,990.
	4	Cash prizes				
SS	5	Noncash prizes				
Direct Expenses	6	Rent/facility costs				
Strect E	7	Food and beverages	14,127.			14,127.
١	8	Entertainment				
	9	Other direct expenses	5,129	10,638.	2,181.	17,948.
	10	Direct expense summary Add lines 4 throu	gh 9 in column (d)		>	(32,075
	11	Net income summary Combine line 3, colu	nn (d), and line 10	200 5		82,915
۲a	π	Gaming. Complete if the organization	n answered "Yes" to Forn	n 990, Part IV, line 19, or i	reported more than	
Т		\$15,000 on Form 990-EZ, line 6a		(b) Pull tabs/instant		(d) Total gaming (add
Revenue			(a) Bingo	bingo/progressive bingo	(c) Other gaming	col (a) through col. (c)
š						
ř	1	Gross revenue				
es	2	Cash prizes				
Expenses	3	Noncash prizes				
Direct	4	Rent/facility costs				
	5	Other direct expenses				
			Yes %	Yes %	Yes%	
	6	Volunteer labor	No No	No No	No	
	7	Direct expense summary Add lines 2 throu	(
	8	Net gaming income summary. Combine line	1, column d, and line 7			1
9	- -	nter the state(s) in which the organization ope	rates namina activities:			
-		the organization licensed to operate gaming	-	states?		Yes N
		"No," explain.				
	_					
		ere any of the organization's gaming licenses			year?	Yes N
	_					
					-	
	_					

SCHEDULÈ O

(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.

Attach to Form 990 or 990-EZ.

2012
Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

Mission Ridge Ski Education Foundation

Employer identification number 23-7057008

Form 990, Part I, Line 1, Description of Organization Mission:
interest in competitive skiing, and winter safety education.
Form 990, Part VI, Section B, line 11: Time permitting, the governing body
has the opportunity to review the Form 990. Historically over the last two
Form 990, Part VI, Section B, Line 12c: The Foundation regularly monitors
its conflicts of interest policy by reviewing annually for the information
and guidance of board members, and that any new board member be advised of
this policy upon entering the duties of his/her office. Any possible
conflict of interest on the part of any board member should be disclosed to
other board members and made a matter of record, either through an annual
procedure or when the interest becomes a matter of board action.
Form 990, Part VI, Section C, Line 19: The organization makes its
governing documents and financial statements available to the public upon
request.

4562

Department of the Treasury Internal Revenue Service (9)

Part IV

Depreciation and Amortization (Including Information on Listed Property)

➤ See separate instructions.
➤ Attach to your tax return.

2012

990

Attachment Sequence No 179

OMB No 1545-0172

Name(s) shown on return Business or activity to which this form relates Identifying number Mission Ridge Ski Education Foundation Form 990 Page 10 23-7057008 Part I Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I. 500,000 1 Maximum amount (see instructions) 2 2 Total cost of section 179 property placed in service (see instructions) 2,000,000 3 3 Threshold cost of section 179 property before reduction in limitation 4 Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0-4 5 5 Dollar limitation for tax year Subtract line 4 from line 1 if zero or less, enter -0- If married filing separately, see instructions (a) Description of property (b) Cost (business use only) (c) Elected cost 7 Listed property. Enter the amount from line 29 7 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8 9 Tentative deduction Enter the smaller of line 5 or line 8 9 10 Carryover of disallowed deduction from line 13 of your 2011 Form 4562 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 11 12 12 Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11 13 Carryover of disallowed deduction to 2013. Add lines 9 and 10, less line 12 Note: Do not use Part II or Part III below for listed property. Instead, use Part V. Special Depreciation Allowance and Other Depreciation (Do not include listed property.) 14 Special depreciation allowance for qualified property (other than listed property) placed in service during 15 Property subject to section 168(f)(1) election 15 13,596 16 Other depreciation (including ACRS) 16 MACRS Depreciation (Do not include listed property) (See instructions.) Section A 8.787 17 MACRS deductions for assets placed in service in tax years beginning before 2012 17 18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B - Assets Placed in Service During 2012 Tax Year Using the General Depreciation System (b) Month and (c) Basis for depreciation (d) Recovery (e) Convention (f) Method (a) Classification of property year placed in service (business/investment use only - see instructions) (a) Depreciation deduction 19a 3-year property 5-year property h 7-year property C 10-year property d 15-year property e 20-year property f 25-year property 25 yrs S/L q 27.5 yrs. MM S/L h Residential rental property 27.5 yrs. MM S/L S/L MM 39 yrs i Nonresidential real property MM S/L Section C - Assets Placed in Service During 2012 Tax Year Using the Alternative Depreciation System 20a Class life S/L 12 yrs. S/L 12-year b 40-year 40 yrs. MM S/L

23 For assets shown above and placed in service during the current year, enter the

22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21.
Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instr

Summary (See instructions)

portion of the basis attributable to section 263A costs

21 Listed property. Enter amount from line 28

10,622.

33,005.

21

22

23

23-7057008 Page 2

Form 4562 (2012) Listed Property (Include automobiles, certain other vehicles, certain computers, and property used for entertainment, recreation, or amusement) Part V

	ction A - Depreciation	on and Other	Informat	ion (Cau	tion. Se	<u> </u>	<u>nstruc</u>	tıons for lii	mits for p	assenge	r autom	obiles.)		
24a Do you nave evid	dence to support the bu				X Ye		_	24b If "Y					Yes	_ No
(a) Type of propert (list vehicles firs	ty Date	(c) Business/ investment use percentage	oth	(d) Cost or er basis	Basis	(e) s for depre ness/inve use only	stment	(f) Recovery period	Met Conv	nod/	Depred dedu	ciation	Elec section co	n 179
25 Special depreci	ation allowance for o	qualified listed	property	placed in	service	e durin	g the t	ax year an	d					
	n 50% in a qualified b									25		i		
26 Property used r	more than 50% in a c	qualified busin	ess use:											
Van	032307	100.009	6 1	7,052		<u>17,0</u>	<u>52.</u>	5.00	200D	B-HY		222.		
Van	122811	100.009	6 3	2,700) .	32,7	00.	5.00	200D	B-HY	5,	200.		
Van		100.009		2,700).	32,7	700.	5.00	200D	B-HY	5,	200.		
27 Property used 5	50% or less in a qual	lified business	use:	-										_
			6		T				S/L·					
		 	6		1				S/L·					
		 	6					† ·····	S/L·					
20 Add amounts in	n column (b) lines 25			and on l	.no 21	0000 1		J.,	T O/ E	28	10,	622		
	n column (h), lines 25	_			ii 1 0 ∠ 1 ,	page i					10,		*	
29 Add amounts in	n column (i), line 26. l	Enter nere and	on line /	, page 1			·					29		
	Total business/investment miles driven during the			(a) Vehicle		(b) Vehicle		` '		(d)		e)	(f) Vehicle	
		•	A CI	iicie	Verificie		 '	VEINOIG	Vehicle		Torrioto		VOII	10,10
• •	lude commuting miles)						+		 					
	ng miles driven durini						 		 					
32 Total other pers	sonal (noncommutini	g) miles							·					
	en during the year.						†							
Add lines 30 th	• •		ŀ											
	e available for persoi	nal use	Yes	No	Yes	No	Ye	s No	Yes	No	Yes	No	Yes	No
during off-duty			1	- 113		,,,,,,,	1		1			,,,,		
	le used primarily by a	more					1							
	r or related person?		İ											
	cle available for pers	onal					- 				i			
55 15 and the volume	cio avaliable for pers	01141	1					Ì						
use?						l .								
use?	Section C	- Questions	for Empl	overs W	ho Prov	vide Ve	hicles	for Use b	v Their I	Employe	es	-		
	Section C	you meet an										re not m	ore than	5%
	stions to determine if											re not m	ore than	5%
Answer these ques owners or related p	stions to determine if	you meet an e	xception	to comp	leting S	Section	B for	vehicles us	sed by e	nployee	s who ar	re not m	Yes	T
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