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Form **990**

Return of Organization Exempt From Income Tax

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

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OMB No 1545-0047

Open to Public Inspection

benefit trust or private foundation) Department of the Treasury Internal Revenue Service ▶ The organization may have to use a copy of this return to satisfy state reporting requirements. For the 2012 calendar year, or tax year beginning 2012, and ending October 1 September 29 Check if applicable C Name of organization D Employer identification number

	Address	dress change Doing Business As U.S. Space & Rocket Center Foundation 63-1265839											
	Name c	hange	Number and street (or P O box if mail is not delivered to street address) Room/si	E Telepho	ne number								
	Initial re	turn	One Tranquility Base			256-460-6702							
	Termina	ted	City, town or post office, state, and ZIP code										
	Amende	d return	Huntsville, AL 35805-3371		G Gross re	eceipts \$ 2,022,595							
	Applicat	ion pending	F Name and address of principal officer Dr. Deborah Barnhart	H(a) is the	s a group return								
			Same as C above	1		ncluded? Yes No							
	Tax-exe	mpt status	√ 501(c)(3) □ 501(c) () (insert no) □ 4947(a)(1) or □ 527			list (see instructions)							
J	Website		cecamp.com	H(c) Gro	up exemption	number ►							
ĸ	Form of		✓ Corporation Trust Association Other ► L Year of forma		 	of legal domicile AL							
P	art I	Summ											
_	1		scribe the organization's mission or most significant activities: The m	ission of th	s organiza	tion is to support							
)			undraising, the education programs of the U.S. Space & Rocket Center- inc										
ှဋ			AMP, SPACE ACADEMY for Educators, Museum Exhibits, and other educa										
ığ.		JI AOL O	Ami 131 AGE AGADEM 101 Educators, maseum Exhibits, and other educa	idoliai evelii	s ailu biog	1 01113.							
Governance	2	Check th	is box ▶☐ If the organization discontinued its operations or disposed	of more the	n 25% of	ite nat accate							
: පී	3				1 1								
∞	4		of independent voting members of the governing body (Part VI, line 1b)			10							
Activities	5		nber of individuals employed in calendar year 2012 (Part V, line 2a)	,	5	10							
į	6												
OCTURE N	7a				6								
S S			elated business revenue from Part VIII, column (C), line 12		. 7a								
<u>б</u> —	b	Met unite	ated business taxable income from Form 990-T, line 34	· · · · · Prior `	. 7b	Current Year							
		Contribut	trong and grants (Part) (III line 1h)										
e	8		tions and grants (Part VIII, line 1h)		2,385,721	2,016,506							
Revenue	9	Program	service revenue (Part VIII, line 2g)		. 0	<u> </u>							
Be	10	investme	nt income (Part VIII, column (A) lines 8,4, and du		4398	6,089							
	11		enue (Part VIII, column (A) lines 5,6d, 8c, 9c, 10c, and 11e)		0								
_	12		enue—add lines 8 through 1 (must equal Part VIII) column (A), line 12)		2,390,119	2,022,595							
	13		nd similar amounts paid (Part IX, column (A) Jines 1-3)).		2,253,267	2,120,724							
	14		paid to or for members (Part IX, collumn (A), (Ine 4)										
ės	15		other compensation, employee benefits (Partix, column (A), lines 5-10)										
Expenses	16a		nal fundraising fees (PartyX, column A), line 11e)										
Ď	b		draising expenses (Part IX, column (D), line 25) 4,520										
ш	17		oenses (Part IX, column (A), lines 11a-11d, 11f-24e)		18,417	22,986							
	18		enses. Add lines 13–17 (must equal Part IX, column (A), line 25) .		2,271,685	2,143,710							
	19	Revenue	less expenses Subtract line 18 from line 12		118,435	(121,115							
Assets or				Beginning of C	Current Year	End of Year							
Sets	20	Total ass	ets (Part X, line 16)		462,174	340,413							
	- 1	Total liab	ılıtıes (Part X, lıne 26)		225,794	225,148							
2,	22	Net asset	ts or fund balances. Subtract line 21 from line 20		236,380	115,265							
P	art II	Signat	ure Block			<u> </u>							
Ur	nder pena	Ities of perju	ryI.declare that I have examined this return, including accompanying schedules and state	ements, and to	the best of r	ny knowledge and belief, it is							
trı	ie, correc	t, and eompl	ete Declaration of preparer (other than office) is based on all information of which prepare	er has any kno	wledge								
			- Commental Rott - 1		2	-110-14							
Si	gn	Sign	ature of officer		Date	, /							
He	ere		Jennyter (Korder ykec	utive	Dir	e vol							
		Туре	or print name and title										
p.	aid	Print/Ty	pe preparer's name Preparer's signature D	ate	Check	T if PTIN							
	epare				self-em								
	se Onl	1	ame •	Fi	rm's ElN ▶	<u> </u>							
Ų:	- UIII		ddress ▶		none no								
Ma	y the IF		s this return with the preparer shown above? (see instructions)			· · Yes No							

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 11282Y

Form **990** (2012)

Form 99	90 (2012) Page 2
Part	· ·
	Check if Schedule O contains a response to any question in this Part III
1	Briefly describe the organization's mission:
	The U.S. Space & Rocket Center Foundation is a 501(c)(3) organization, which supports the educational programs of the U.S. Space
	& Rocket Center and SPACE CAMP, through grants, fundraising, scholarships, and corporate sponsorships.
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?
4	If "Yes," describe these changes on Schedule O. 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 revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$
-	Through the fundraising efforts of the Foundation, donations are made and allocated to the U.S. Space & Rocket Center for
	scholarships to attend Space Camp and other educational museum programs. Space Camp and affiliated programs provid hands
	on learning of Science, Technology, Engineering, and Math (STEM) in an immersive setting using Space Exploration as the theme
	and backdrop. This same technique is applied in our educator programs and not only teaches our educators but provides learning
	tools and inspirationthat they can take back to the classroom. In FY13 228 teachers received scholarships to attend Space Academy
	for Educators, and 527 students were scholarship recipients. Based on restrictions from donors, travel, expenses are often covered
	by the scholarship funds in addition to lodging and meals throughout the program. More information about the programs of the U. S. Space & Rocket Center can be found at www.spacecamp.com.
	U. S. Space & Rocket Center Can be found at www.spacecamp.com.
41-	(O-d
4b	(Code:) (Expenses \$ including grants of \$ 567,898.00) (Revenue \$)
	The Foundation granted funds to the U. S. Space & Rocket Center to fund additional museum exhibitions. During the fiscal year the museum hosted two traveling exhibits. The first was and Evergreen exhibit titled MathAlive. The second, an ASTC exhibit titled Black
	Holes: Space Warps and Time Twists. The museum also completed a permanent exhibit titled Carrying out the Mission. This exhibit is
	located in the Saturn V Hall where the story of the Saturn/Apollo program is told in great detail using a variety of exhibits and
	mediums. Carrying out the Mission focuses on the life of astronauts and the training involved in preparing for lunar missions. The
	exhibit has two authentic training simulators that were actually used by the astronauts. Another addition to the visitor experience was
	the arrival of the T-38 Talon. The supersonic jet plane was used by astronauts to train for shuttle missions. Funds were granted for the
	structural work for the aircraft and also for design and structural work for the A-12 Blackbird that will be displayed ornamentally.
	·
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
	The Foundation solicited funds from corporate and private donors to sponsor several major events throughout the year. The following
	events were supported by these funds: July 4th Fireworks, Apollo 17 Anniversary Celebration, Be-Ready Camp, the annual Explorers
	Ball, the NASA Great Moon Buggy Races, the Pass the Torch series of speakers which is open and free to the public, and finally the annual Space Exploration Celebration. All of the aforementioned events were hosted by the U.S. Space & Rocket Center but
	underwritten by funds raised by the Foundation. These events support the missions of the Foundation and keep the community at
	large engaged and up to date on what is current in the museum.
4d	Other program services (Describe in Schedule O.)
+u	(Expenses \$ including grants of \$ 110,199.00) (Revenue \$)
4e	Total program service expenses ▶ 2,136,492,00

2,136,492.00

Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A. 2 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule B., Schedule of Contributors (see instructions)? 3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to cardidates for public office? If "Yes," complete Schedule C, Part I. 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 yea? If "Yes," complete Schedule C, Part II. 5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) or 601(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 8-19 If "Yes," complete Schedule C, Part III. 5 Did the organization maintain any denor advised funds or any similar funds or accounts? If "Yes," The Part III. 6 Did the organization report an amount in Part X, line 21, for escrove or custodal account liability, serve as a custodant for amounts not Istad in Part X, line 21, for escrove or custodal account liability, serve as a custodant for amounts not Istad in Part X, line 21, for escrove or custodal account liability, serve as a custodant for amounts not Istad in Part X, line 21, for escrove or custodal account liability, serve as a custodant for amounts not Istad in Part X, line 21, for escrover or custodal account liability, serve as a custodant for amounts not Istad in Part X, line 21, for escrover or custodal account liability, serve as a custodant for amounts not Istad in Part X, line 21, for escrover or custodal account liability, serve as a custodant for amounts not Istad in Part X, line 21, for escrover or custodal account liability, serve as a custodant for amounts not Istad in Part X, line 10, for escrover or custodal account liability, serve as a custodant for amounts not Istad in Part	Part	V Checklist of Required Schedules	_		
complete Schedule A 2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 3 Did the organization engage in direct or indirect political campagn activities on behalf of or in opposition to candidates for puble officer? If "Yes," complete Schedule C, Part I . 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 . 5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) or 501(c)				Yes	No
2 Is the organization required to complete Schedule B, Schedule O Contributions (see instructions)? 10 In the organization reage in direct or indirect political campaign activities, or healt of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I. 11 Section 501(c)3 organizations. Did the organization engage in lobbying activities, or have a section 501(n) election in effect during the tax year? If "Yes," complete Schedule C, Part II. 12 Is the organization a section 501(c)(d), 501(c)(d), or 501(c)(d) organization that receives membership dies, assessments, or similar amounts as defined in Revenue Procedure 98 in 1970 "Yes," complete Schedule C, Part III. 13 Is 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 III. 15 Did the organization receive or hold a conservation essement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part III. 16 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part IV. 17 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, in er 21 for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X, in er 21 for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X, in er 21 for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X, in er 22 for escrope and accounts of the server of	1				
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4 Section 501(c)! Organizations. Did the organization engage in lobbying activities, or have a section 501(f): delection in effect during the tax year? If "Yes," complete Schedule C, Part II. 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 98-197 If "Yes," complete Schedule C, Part III. 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 II. 7 Did the organization receive or hold a consensation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part III. 9 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III. 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 counselling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part V. 10 Did the organization (fractly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quase-endowments? If "Yes," complete Schedule D, Part V. 11 If the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VII. 12 Did the organization report an amount for misestments—other securities in Part X, line 15 for the securities in Part X, line 15 for the securities in Part X, line 15 for the securities of the securities			2	✓	
election in effect during the tax year? If "Yes," complete Schedule C, Part II Is the organization a section \$51(c)(b), \$51(c)(b) or	3	candidates for public office? If "Yes," complete Schedule C, Part I	3		✓
assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III 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 I Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, histone land areas, or historic structures? If "Yes," complete Schedule D, Part II I 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 negotation services? If "Yes," complete Schedule D, Part IV II If the organization is the service of the programation of services? If "Yes," complete Schedule D, Part IV III II If the organization is applicable in the organization of a amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V III II	4		4		1
But the organization maintain any donor advised funds or any similar funds or accounts for which donors have the night to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I Dut the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historical across or historic structures? If "Yes," complete Schedule D, Part II Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part II Did the organization report an amount in Part X, Inpe 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 repart, or debt negotiation services? If "Yes," complete Schedule D, Part IV Did the organization of, directly or through a related organization, hold assets in temporally restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Part V IV, IV, IVI, IVI, N, or X as applicable Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V III V IIII V IVI, N, Or X as applicable 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 V III V IVI, IVII, IVI, IVI, IVI, V IVI,	5	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,	5		1
the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 10 bid the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part II 10 bid the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part II 10 bid 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 10 bid 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 11 If the organization answer to any of the following questions is "Yes," then complete Schedule D, Part V 12 bid the organization report an amount for investments—other securities in Part X, line 10? If "Yes," complete Schedule D, Part V 13 bid the organization report an amount for investments—other securities in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part V 14 cid Did the organization report an amount for other lassets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part V 15 cid the organization report an amount for other lassets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part V 16 bid the organization or port an amount for other liabilities in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X 17 bid the organization or school described in section 17(b)(t)(t)(A)(ii) (if "Yes," complete Schedule D, Part X 18 bid the	6	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			1
Bid the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 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. 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 . If the organization answer to any of the following questions is "Yes," then complete Schedule D, Part V I, VII, VII, IX, or X as applicable Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VII . 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 . Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII . Did the organization report an amount for other assets in Part X, line 15? If "Yes," complete Schedule D, Part VII . Did the organization report an amount for other assets in Part X, line 15? If "Yes," complete Schedule D, Part X in the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts X and XII is the organization obtain separate, independent audited financial statements for the tax year? If "Yes," and if the organization obtain separate, independent audited financial statements for the tax year? If "Yes," and if the organization aschool described in section 170(b)(I)(A)(I)(P) If "Yes," complete Schedule E, Parts II and V . Did the organization	7				1
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 V \ 10 Did the organization, directly or through a related organization, hold assets in temporanty restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V \ 11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Part V \ 11, 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 \ 110 ✓ b Did the organization report an amount for investments—other securities in Part X, line 10? If "Yes," complete Schedule D, Part VI \ 110 ✓ c Did the organization report an amount for investments—other securities in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII \ 110 ✓ d Did the organization report an amount for other lassets in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII \ 110 ✓ 111 ✓ 112 Did the organization report an amount for other lassets in the repair of the total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII \ 111 ✓ 112 Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," and if the organization obtain separate, independent audited financial statements for the tax year? If "Yes," and if the organization assets in temporant permonent and the organization or entity located outside the United States? If "Yes," complete Schedule E, Parts II and IV \ 122 ✓ 112 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of garegate grants or assistance to individuals located outside th		Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
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to 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		If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,	10	V	
b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII			11a	1	
c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	b				1
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX		Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more		1	V
the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X for Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization is liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X and XII		Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			1
the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X. 12 a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII. 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. 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E. 14 a Did the organization maintain an office, employees, or agents outside of the United States? 15 Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV. 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV. 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. 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IXI, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part II (see instructions) 18 Did the organization report more than \$15,000 of did of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II. 19 Did the organization operate one or more thospital facilities? If "Yes," complete Schedule H. 10 Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H. 11 Did the organization operate one or	е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X			1
12 a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			1
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII			
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if		✓	
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E			1
fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		1
foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV					
organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV			14b		1
to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	15		15		1
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	16		16		1
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	17				
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		Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
20 a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
		·	_		

Part	Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	√	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		1
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	~	
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		√
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		√ √
d 25a		24d 25a		√ ✓
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		√
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		1
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		√
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		√ √
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		1
29 30	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	29 30		√ √
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		√
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		1
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? <i>If "Yes," complete Schedule R, Part I </i>	33		1
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	1	
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		1
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	35b 36	1	
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,	30		
38	Part VI	37		✓
	13. Tester, in 1900 more are required to complete concedible 0	38	_ <u> </u>	<u>L</u>

Part	V Statements Regarding Other IRS Filings and Tax Compliance			. ago c
	Check if Schedule O contains a response to any question in this Part V		_	. п
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b o	1		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and	1		
	reportable gaming (gambling) winnings to prize winners?	1c	<u> </u>	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a	Ì		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		1
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
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	ľ		
	account)?	4a	ļ	✓
b	If "Yes," enter the name of the foreign country: ▶			
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		ŀ	
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	i	1
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		1
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a	✓	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b	✓	1
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 payor?	7a	1	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	✓	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		✓
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		✓
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		1
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
_	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
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		li	
	organization, have excess business holdings at any time during the year?	8		✓
9	Sponsoring organizations maintaining donor advised funds.			
a	Did the organization make any taxable distributions under section 4966?	9a		
. b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b	1		
11	Section 501(c)(12) organizations. Enter:	1		
a b	Gross income from members or shareholders	1		
D	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
100	, <u>110</u>	-		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	12a	ļ	<u> </u>
	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.	1-		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
h	Note. See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which			
b	the organization is licensed to see a gualified health store			
_				
	100	4	 	<u> </u>
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	ļ	✓
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b		Ì

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Part	, , , , , , , , , , , , , , , , , , , ,			
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S	See in:	struct	
Soot	Check if Schedule O contains a response to any question in this Part VI	<u> </u>		<u>.</u>
Sect	ion 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 1a 10		163	140
	If there are material differences in voting rights among members of the governing body, or	Ή		
	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 10			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with		<u> </u>	
_	any other officer, director, trustee, or key employee?	2		✓
3	Did the organization delegate control over management duties customarily performed by or under the direct	١.		
4	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		/
4 5	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets?	4		√
6	Did the organization become aware during the year of a significant diversion of the organization's assets?	6		1
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint	F-	_	 •
	one or more members of the governing body?	7a	ŀ	1
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			<u> </u>
	stockholders, or persons other than the governing body?	7b		✓
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:			
a	The governing body?	8a	✓	<u> </u>
ь 9	ls there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at	8b	✓	-
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		1
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reven		ode.)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		1
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			
44.	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	<u> </u>	✓
b 12a	Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? If "No," go to line 13	10-		
b	Did the organization have a written conflict of interest policy? <i>If "No," go to line 13 </i>	12a 12b	1	-
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	120	_	
	describe in Schedule O how this was done	12c	1	
13	Did the organization have a written whistleblower policy?	13	✓	
14	Did the organization have a written document retention and destruction policy?	14		1
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?	1-		
a b	The organization's CEO, Executive Director, or top management official	15a 15b	√	<u> </u>
_	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	135	-	
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a	-	1
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the		ļ	L
Conti	organization's exempt status with respect to such arrangements?	16b		
<u>Secti</u>	on C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section	501/	C)(3)e	Only
	available for public inspection. Indicate how you made these available. Check all that apply.	. 501(ບ)(ປ)ຮ	orny)
	☐ Own website ☐ Another's website ☑ 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	f inte	rest p	olicy,
	and financial statements available to the public during the tax year.		·	
20	State the name, physical address, and telephone number of the person who possesses the books and records	of the	•	
	organization: Langitar Cravics, One Transmiller Rose, Humanille, Al. 25005, 250, 420, 6702			

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

														_
Check if Schedule O contains a response to any question in this Part VII .													- 1	- 1
offect if ochequie o contains a response to any question in this rait vir.	•	•	-	•	•	•	•	•	•	•	-	•	٠ ,	_

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

☐ Check this box if neither the organization no	r any relate	d org	anız	atic	n c	ompe	nsa	ited any currer	nt officer, director	, or trustee.
				(6	C)					
(A)	(B)	١,,			ition			(D)	(E)	(F)
Name and Title	Average					than one is both		Reportable	Reportable	Estimated
	hours per	office	er and			or/trus		compensation	compensation from	amount of
	week (list any hours for	Individual trustee or director	Щ	♀	<u>۵</u>	육	ਨ	from the	related organizations	other compensation
	related	dred	itu.	Officer	Key employee	p greet	Former	organization	(W-2/1099-MISC)	from the
	organizations below dotted	S E	ion	`	뮻	9 c	~	(W-2/1099-MISC)	1	organızatıon and related
	line)	trus	al tro		yee) mg				organizations
		E E	Institutional trustee			Highest compensated employee				
	_		L a			<u>e</u>				<u> </u>
(4) 00 (0.1) 0.1 (1.1)	[[
(1) BG (Ret.)Daniel Montgomery	ļ	/								
Chairman	.5	-		\vdash	-					
(2) Ms. Jan Smith	45	1								
Vice Chairman	.15	┝┻	\vdash	-						 -
(3) Dr. Waymon Burke	.05	1				•				
Director	.05	-			H	ļ				
(4) Ms. Jean Wessel Templeton	.05	1								
(5) Ms. Dorothy Davidson	.05		-	\vdash	\vdash		┢		-	
Director	.05	1								
(6) Ms. Tom Butler	.03	H		\vdash	┢					
Director	.05	1								
/7) Marchinela Caribb	.03	١			\vdash	<u> </u>				
(7) MS. Linda Smith Director	.05	1							1	
(8) Dr. Owen Garriott				-			\vdash			
Director	.05	1								
(9) Ms. Ginney McDonald	1									
Secretary/Treasurer	.10	✓								
(10) Senator Arthur Orr										
Director	.05	✓								
(11) Dr. Deborah Barnhart										
Chief Executive Officer_	4.0	<u> </u>		✓	l		ł		216,184.00	
(12) Mrs. Jennifer Crozier										
Executive Director	20.0			1					80,090.00	
(13)										
		L		L	$oxed{oxed}$		$oxed{oxed}$			
(14)										
			ł	l		ĺ				

ı aı ı	Section A. Officers, Directors, Trus	lees, key E	ilibio	/662			nyne	51 U	onipensated E	inployees (Jonanue	- u)		
	(A) Name and title		box, ι	ot ch unles	Pos eck s pe	rson	e than o is both or/trust	an	(D) Reportable compensation	(E) Reportab compensation		Esti	(F) mated ount of	
		week (list any hours for related organizations below dotted line)	Individ or dire	Institutional trustee	Officer		Highest compensated employee	Former	from the organization (W-2/1099-MISC)	related organizatio (W-2/1099-N	ons	comp fro orgai and	ther ensation the nization related nization	1
(15)							-							
(16)					_									
(17)														
(18)														
(19)					-		_							
(20)													_	
(21)								<u> </u>						
(22)														
(23)								<u> </u>			· .			
(24)														
(25)						-					_			
								L						
1b c	Sub-total	VII, Sectio						>		296,27				
d 2	Total (add lines 1b and 1c) Total number of individuals (including but	t not limited						e) w	ho received m	296,21 ore than \$1		of		
	reportable compensation from the organ												Yes	No
3	Did the organization list any former of employee on line 1a? <i>If "Yes," complete</i>											3		✓
4	For any individual listed on line 1a, is the	sum of re	portal	ole d	con	npei	nsatio	n a	ind other comp	ensation fr	om the			•
	organization and related organizations individual	_							-			4	✓	
5	Did any person listed on line 1a receive of for services rendered to the organization									ation or inc		5		✓
Section	on B. Independent Contractors								, , , , , , , , , , , , , , , , , , , ,			10		
1	Complete this table for your five highest compensation from the organization. Repyear.													ax
	(A) Name and business add	fress							(B) Description of s	ervices	((C) Compens	ation	
														_
							·							
2	Total number of independent contractor	-	-					th	ose listed ab	ove) who				

Par	VIII	Statement of Revenue				_
		Check if Schedule O contains a response to any ques	tion in this Part V (A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
र द	1a	Federated campaigns 1a		TOTOTIAG		012, 010, 01 014
and and	ь	Membership dues 1b				
Contributions, Gifts, Grants and Other Similar Amounts	C	Fundraising events 1c				
	d	Related organizations 1d				
	e	Government grants (contributions) 1e 11,500				
Si Si	f	All other contributions, gifts, grants,				
ž ž		and similar amounts not included above 1f 1,885,006				
₹ ō	ا م	Noncash contributions included in lines 1a-1f \$ 120,000				
a So	h	Total. Add lines 1a–1f ▶	2,016,506			
<u>a</u>		Business Code	2,010,300			
ē	2a					
æ	ь					
<u>.8</u>	c					
Ş	d			·		
E	е					
Program Service Revenue	f	All other program service revenue .				
P	g	Total. Add lines 2a–2f			•	·
	3	Investment income (including dividends, interest,				
	!	and other similar amounts) ▶	6,089			
	4	Income from investment of tax-exempt bond proceeds ▶				
	5	Royalties				
		(i) Real (ii) Personal				,
	6a	Gross rents				
	b	Less: rental expenses				
	С	Rental income or (loss)				
	d	Net rental income or (loss) ▶		· · · · · · · · · · · · · · · · · · ·		
	7a	Gross amount from sales of (i) Secunties (ii) Other				,
		assets other than inventory				
	b	Less: cost or other basis				
		and sales expenses .	į			
	С	Gain or (loss)				
	d	Net gain or (loss)				
Φ	_					
enne	8a	Gross income from fundraising			,	
ě		events (not including \$				
Œ		of contributions reported on line 1c). See Part IV, line 18 a				
Other Rev	١ .					
ō		Less: direct expenses b				
		Net income or (loss) from fundraising events . Gross income from gaming activities.				
) Ja	See Part IV, line 19 a			1	
		Less: direct expenses b			1	
	b	Net income or (loss) from gaming activities				
		Gross sales of inventory, less				
	.00	returns and allowances a				ļ
	ь	Less: cost of goods sold b				
	C	Net income or (loss) from sales of inventory				
		Miscellaneous Revenue Business Code				
	11a		<u> </u>			
	ь					
	c				<u> </u>	<u> </u>
	d	All other revenue			<u> </u>	
	e	Total. Add lines 11a–11d			 	
	12	_	2 022 505		1	-

Part IX	Statement of Functional Expenses	
Section 501	(c)(2) and 501(c)(4) organizations must complete all columns	All other ergenizations must complete selver

Section	on 501(c)(3) and 501(c)(4) organizations must com				
<u> </u>	Check if Schedule O contains a respon	se to any question			
	ot include amounts reported on lines 6b, 7b, o, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
_	organizations in the United States. See Part IV, line 21	2,120,724	2,120,724		
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, trustees, and key employees				
6	Compensation not included above, to disqualified				
-	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)				
7 8	Other salaries and wages				
0	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees):				
а	Management			_	
b	Legal				
C	Accounting				
d e	Lobbying				
f	Investment management fees				
g g	Other. (If line 11g amount exceeds 10% of line 25, column				
9	(A) amount, list line 11g expenses on Schedule O.)	220		220	
12	Advertising and promotion				
13	Office expenses	2,884	637	2,247	
14	Information technology				
15	Royalties				
16	Occupancy				
17 18	Travel	14,403	11,726	80	2,596
10	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .	50		50	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	656	656		·
23	Insurance				
24	Other expenses. Itemize expenses not covered				
	above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)				
а	Benevolence	1,416		65	1,351
b	Brick Pavers	573			573
С	Exhibit Expense	2,748	2,748		
d					
е	All other expenses	36		36	
25	Total functional expenses. Add lines 1 through 24e	2,143,710	2,136,492	2,698	4,520
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs				
	from a combined educational campaign and		[
	fundraising solicitation. Check here following SOP 98-2 (ASC 958-720)		j		

Part X **Balance Sheet** Check if Schedule O contains a response to any question in this Part X (B) (A) Beginning of year End of year Cash—non-interest-bearing 1 656 2 Savings and temporary cash investments 2 149,832 147,521 3 3 137,182 Accounts receivable, net 4 0 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L. 6 Assets 7 7 8 Inventories for sale or use 8 Prepaid expenses and deferred charges 9 Land, buildings, and equipment: cost or 10a other basis. Complete Part VI of Schedule D 10a 10b Less: accumulated depreciation 656 75,000 10c <u>87,472</u> 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 98,918 104,764 14 14 15 15 16 Total assets. Add lines 1 through 15 (must equal line 34) . . . 16 462,174 340,413 17 Accounts payable and accrued expenses 17 612 7,596 18 18 225,182 217,552 19 19 20 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D. 21 Loans and other payables to current and former officers, directors, 22 Liabilities trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties . . . 23 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 25 Total liabilities. Add lines 17 through 25 26 26 225,794 225,148 Organizations that follow SFAS 117 (ASC 958), check here ▶ □ and Net Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. 27 27 28 Temporarily restricted net assets 28 29 29 Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ✓ and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 30 31 Paid-in or capital surplus, or land, building, or equipment fund . . . 31 32 Retained earnings, endowment, accumulated income, or other funds . 236,380 32 115,265 33 Total net assets or fund balances 236,380 33 115,265 34 Total liabilities and net assets/fund balances . . . 34 462,174 340,413 Form 990 (2012)

Corm	$\alpha \alpha \alpha$	(2012)	
гопп	990	120121	

Page **12**

Par	XI Reconciliation of Net Assets					<u> </u>
	Check if Schedule O contains a response to any question in this Part XI					✓
1	Total revenue (must equal Part VIII, column (A), line 12)	1				2,595
2	Total expenses (must equal Part IX, column (A), line 25)	2				13,710
3	Revenue less expenses. Subtract line 2 from line 1	3			(12	1,115)
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			23	6,380
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				
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line					
	33, column (B))	10			11	5,265
Part	XII Financial Statements and Reporting					
	Check if Schedule O contains a response to any question in this Part XII				<u>.</u> .	
			_	_	Yes	No
1	Accounting method used to prepare the Form 990: Cash Accrual Other		_			
	If the organization changed its method of accounting from a prior year or checked "Other," ex Schedule O.	plain	in			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		.	2a	1	
	If "Yes," check a box below to indicate whether the financial statements for the year were compared to the statement of the year were compared to the statement of the year were compared to the year we	olled (or 📙			
	reviewed on a separate basis, consolidated basis, or both:]		
	☐ Separate basis ☐ Consolidated basis ☑ Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b	✓	
	If "Yes," check a box below to indicate whether the financial statements for the year were audite separate basis, consolidated basis, or both:	ed on	а			
	☐ Separate basis ☐ Consolidated basis ☑ Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for or	ersigl/	nt 🗀		- 1	
	of the audit, review, or compilation of its financial statements and selection of an independent account	ntant'	? ;	2c	✓	
	If the organization changed either its oversight process or selection process during the tax year, ex	plaın	ın 🗀			
	Schedule O.					
За	As a result of a federal award, was the organization required to undergo an audit or audits as set	forth	ın 🗀			
	the Single Audit Act and OMB Circular A-133?			3a		✓
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not under		ie 🗀			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a	udits	;	3b		
				Forn	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

Open to Public Inspection

Employer identification number

			nter Foundation	*** ***							65839
Pa				rity Status (All orga						nstructio	ons.
1 2 3		A church, con A school desc	vention of churc ribed in section	ation because it is: (Fo hes, or association of 170(b)(1)(A)(ii). (Attac spital service organiza	churches th Sched	describe	ed in sec	tion 170(b)(1)(A)(i)).	
4		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, city, and state:									
5	_	_	on operated for)(1)(A)(iv). (Com	the benefit of a collect plete Part II.)	ge or uni	versity ov	wned or	operated	by a go	vernment	al unit described in
6 7		An organizatio	n that normally	nment or governmenta receives a substantia I (A)(vi). (Complete Par	l part of					ut or fron	n the general public
8		A community t	rust described i	n section 170(b)(1)(A)	(vi). (Cor	nplete Pa	ırt II.)				
9	r	receipts from support from	activities related gross investme	receives: (1) more that d to its exempt function ont income and unrelater June 30, 1975. Se	ions—sul ated bus	oject to d siness tax	ertain ex kable inc	ceptions ome (les	s, and (2) ss section	no more	than 331/3% of its
10		An organizatio	n organized and	l operated exclusively	to test fo	r public s	safety. Se	e sectio	n 509(a)(4).	
11	F	ourposes of o	ne or more pub	nd operated exclusive blicly supported organ describes the type of	nizations supportin	described ig organiz	d in secti cation and	on 509(a)(1) or se	ection 50	9(a)(2). See section
е	 ∀ €		ndation manage	II c Type III that the organization ers and other than one	is not co	ntrolled d	irectly or	indirectly	y by one	or more	
f	C	organization, o	check this box .	a written determination							e III supporting
g	f	ollowing pers	ons?	he organization accep	-				-		
		(iii) below,	the governing bo	ndirectly controls, eithody of the supported of	organızat	ion? .			described	d in (ii) ar 	11g(i) ✓ No
	-	•	•	on described in (i) abo							11g(ii) ✓
				a person described in							11g(iii)
h				on about the supporte					ı		
(i)		of supported anization	(iı) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	in col (i) lis	organization sted in your document?	(v) Did y the organ col. (i) supp	of your	organızat (i) organı		(vii) Amount of monetary support
					Yes	No	Yes	No	Yes	No	
A)AI Sc	aban ienc	na Space e Exhibit	63-0585103	6	√		4		1		2,139,410
(B)											
(C)											
(D)											
E)											
r _{oto}											

Part	(Complete only if you checked th						•
	Part III. If the organization fails to						
Secti	on A. Public Support		-				
Calen	dar 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 organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						<u> </u>
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)						
6	Public support. Subtract line 5 from line 4.						<u>L.</u>
	on B. Total Support			· · · · · · · · · · · · · · · · · · ·	•		
	dar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7	Amounts from line 4		_				
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
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 12	Total support. Add lines 7 through 10 Gross receipts from related activities, etc.	(see instruction	ons)			12	
13	First five years. If the Form 990 is for the					ear as a sectio	n 501(c)(3)
	organization, check this box and stop her	re			<u>.</u>		▶ 🗆
Secti	on C. Computation of Public Support	t Percentag	е				
14	Public support percentage for 2012 (line 6	i, column (f) di	vided by line 1	1, column (f))		14	%
15	Public support percentage from 2011 Sch					15	%
16a	331/3% support test — 2012. If the organiz						
	box and stop here. The organization qual						_
b	331/3% support test—2011. If the organic check this box and stop here. The organic						
17a	10%-facts-and-circumstances test—20 10% or more, and if the organization mee Part IV how the organization meets the "fa organization	ets the "facts- acts-and-circu	and-circumsta imstances" tes	nces" test, che	eck this box ar ation qualifies	nd stop here. E as a publicly s	Explain in
b	10%-facts-and-circumstances test—20 15 is 10% or more, and if the organization Explain in Part IV how the organization me supported organization	on meets the	e "facts-and-ci s-and-circums	rcumstances" tances" test. T	test, check the	ns box and st n qualifies as a	, and line op here. a publicly
18	Private foundation. If the organization did	d not check a	box on line 13	, 16a, 16b, 17a	a, or 17b, chec	k this box and	

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

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

Section A. Public Support							
	dar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
Calen 1	Gifts, grants, contributions, and membership fees	(a) 2006	(b) 2009	(0) 2010	(a) 2011	(e) 2012	(f) Total
	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose					;	
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on 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						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons .						
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						
_	Add lines 7a and 7b					_	
8	Public support (Subtract line 7c from line 6.)						
Sacti	on B. Total Support	·	<u> </u>				
	dar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9	Amounts from line 6	(a) 2000	(b) 2009	(6) 2010	(u) 2011	(e) 2012	(I) Total
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b					·	
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is for the organization, check this box and stop he	-	n's first, secon		-		
Secti	on C. Computation of Public Suppor	t Percentag	е				
15	Public support percentage for 2012 (line 8					15	%
16	Public support percentage from 2011 Sch			<u> </u>		16	%
	on D. Computation of Investment In						
17	Investment income percentage for 2012 (•	• • • •		%
18	Investment income percentage from 2011					18	<u>%</u>
19a	331/3% support tests—2012. If the organi						
	17 is not more than 33½%, check this box		_	=		-	
b	331/3% support tests—2011. If the organize line 18 is not more than 331/3%, check this to						
20	Private foundation. If the organization di		_				

Part IV	Supplemental Information. Complete this part to provide the explanations required by Part II, line 10;	Page 4
	Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).	
		•
	•••••••••••••••••••••••••••••••••••••••	
	······································	
	······································	
	······································	
		·
	······································	

SCHEDULE D (Form 990)

Supplemental Financial Statements

2012

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service ► 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 of the organization Employer identification number **U.S Space & Rocket Center Foundation** 63-1265839 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (b) Funds and other accounts 1 Total number at end of year Aggregate contributions to (during year) . 2 3 Aggregate grants from (during year) . . Aggregate value at end of year 4 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose ☐ Yes ☐ No Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). ☐ Preservation of land for public use (e.g., recreation or education) ☐ Preservation of an historically important land area ☐ Preservation of a certified historic structure ☐ Protection of natural habitat ☐ Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year a Total number of conservation easements . . . 2a Total acreage restricted by conservation easements Number of conservation easements on a certified historic structure included in (a) Number of conservation easements included in (c) acquired after 8/17/06, and not on a 2d 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 6 7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

b Assets included in Form 990, Part X

	n	/r	000	0040
Schedule	\mathbf{v}	(Form	990)	2012

3								
3	Using the organization's acquisition, a collection items (check all that apply):	ccession, and otr	ier records, che	ck any of tr	ie tollow	ring that are a si	gnificant u	se of its
а	☐ Public exhibition		d 🗌 Loar	n or exchang	ge progr	ams		
b	☐ Scholarly research		e 🗌 Othe					
С	☐ Preservation for future generations							•••
4	Provide a description of the organizati	on's collections a	nd explain how	they further	the orga	anızatıon's exem	npt purpose	ın Part
	XIII.				_			
5	During the year, did the organization s	solicit or receive o	ionations of art,	historical ti	reasures	s, or other simila	r	
	assets to be sold to raise funds rather	than to be maıntai	ned as part of th	ne organizat	ion's co	llection?	☐ Yes	☐ No
Par	IV Escrow and Custodial Arra	ngements. Con	nplete if the or	ganızation	answer	ed "Yes" to Fo		
	line 9, or reported an amount	on Form 990, P	art X, line 21.				·	•
1a	Is the organization an agent, trustee,			or contribut	tions or	other assets no	t	
	included on Form 990, Part X?						☐ Yes	□No
b	If "Yes," explain the arrangement in Pa	rt XIII and comple	te the following	table:				
	, ,	•	•			Ar	nount	
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					<u> </u>	☐ Yes	□ Na
	If "Yes," explain the arrangement in Pa							<u> </u>
Par	t V Endowment Funds. Comple							
_		(a) Current year	(b) Prior year	+		(d) Three years back	(e) Four year	
1a	Beginning of year balance	243,365	214,980		215,150	213,384	<u> </u>	220,108
b	Contributions	0	28,185	5	0	()	0
С	Net investment earnings, gains, and							
	losses	0	823	в	1,464	1,765	i	902
d	Grants or scholarships	0	623	3	1,634	(7,625
е	Other expenditures for facilities and					•		
	programs				}			
f	Administrative expenses							
g	End of year balance	243,365	243,365	,	214,980	215,150		213,384
2	Provide the estimated percentage of the						<u> </u>	£ 13,307
a	Board designated or quasi-endowmen		%	g, colaiiii (c	i,, noid d			
b		77%	.,,,					
c	Temporarily restricted endowment ▶	23%						
·	The percentages in lines 2a, 2b, and 2c		10%					
3a	Are there endowment funds not in the			ot are hold	and adr	ministered for th	•	
Ja	organization by:	possession or the	organization ti	iat are rieiu	and au	ministered for the		 _
	-						Ye	-
	(i) unrelated organizations						3a(i)	
	(ii) related organizations						3a(ii) ✓	
b	If "Yes" to 3a(II), are the related organiz						3b ✓	<u>′ </u>
4	Describe in Part XIII the intended uses							
Par	VI Land, Buildings, and Equip	nent. See Form	990, Part X, lır	ne 10.				
	Description of property	(a) Cost or oth (investme		or other basis other)		occumulated preciation	(d) Book v	alue
1a	Land							
b	Buildings							
c	Leasehold improvements							
ď	Equipment			QQ 120		656		97 472
e	Other			88,128		000		87,472
	Add lines 1a through 1e. (Column (d) m	ust equal Form 00	O Part V astron	n (D) line 11	2(a))			
i Utal.	Add intes ta unough re. (Column (0) m	usi equal FUIII 99	υ, Γαιι Λ, COIUM	ii (D), iirie 10	<i>Λ</i> (C).) .	<u> ▶ </u>		87,472

Part VII	Investments-Other Securities	See Form 990, Part X, I	ine 12.	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of val Cost or end-of-year n	
(1) Financial	derivatives			
	neld equity interests			
(3) Other				
(A)				
(B)				. . . <u></u>
(C)		· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·
(D)				
(E)				
(F)				
(G)				
(H) (l)				
	h) must squal Form 000 Port V and (P) line 12)			
Part VIII	b) must equal Form 990, Part X, col (B) line 12.) Investments—Program Related	See Form 990 Part Y	line 13	
	(a) Description of investment type	(b) Book value	(c) Method of va	luction
	a) Description of investment type		Cost or end-of-year n	
(1) Stocks			end of year market value	
(2) Bonds			end of year market value	
	erm Reserves	19,905	end of year market value	
(4)				<u></u>
(5)				
<u>(6)</u> (7)				
(8)				
(9)				
(10)				
	b) must equal Form 990, Part X, col. (B) line 13.)			7. 10
Part IX	Other Assets. See Form 990, Pa	irt X, line 15.		 <u></u>
) Description		(b) Book value
(1)				
(2)				
(3)				
(4)				
_(5)				
(6)				
(7)				
(8)				
<u>(9)</u>				
(10)	4) 45 000 5 44	(0) ((5)		
	mn (b) must equal Form 990, Part X, co		<u> </u>	
Part X	Other Liabilities. See Form 990,	· · · · · · · · · · · · · · · · · · ·	T	····
	(a) Description of liability Income taxes	(b) Book value		
				
(3)	Income Taxes			
(4)				
(5)				
(6)				i
(7)				
(8)				•
(9)				
(10)			1	
(11)			1	•
	b) must equal Form 990, Part X, col (B) line 25)		1	
	C 740) Footnote. In Part XIII, provide the t	ext of the footnote to the ora	anization's financial statements that	t reports the organization's
	certain tax positions under FIN 48 (ASC 7			

ı	Page	4

Part	XI Reconciliation of Revenue per Audited Financial Stateme	ents \	With Revenue per	Retu	rn
1	Total revenue, gains, and other support per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
а	Net unrealized gains on investments	2a			
b	Donated services and use of facilities	2b			
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d		1	
е	Add lines 2a through 2d			2e	1
3	Subtract line 2e from line 1			3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
С	Add lines 4a and 4b	<u> </u>		4c]
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line			5	
Part	XII Reconciliation of Expenses per Audited Financial Statem	ents	With Expenses pe	er Re	turn
1	Total expenses and losses per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	_			
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
С	Other losses	2c			
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1	<i>.</i> .		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
C	Add lines 4a and 4b			4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line	e 18.)		5	<u> </u>
	XIII Supplemental Information				
	ete this part to provide the descriptions required for Part II, lines 3, 5, and				
	, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b	. Also	complete this part to	prov	ride any additional
ınform	ation.				
					

Schedule D (Fo	orm 990) 2012	Page 5
Part XIII	Supplemental Information (continued)	
·		
	······································	

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

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

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

▶ Attach to Form 990.

2012

OMB No 1545-0047

Open to Publio Inspection **Employer identification number**

U.S. Space & Rocket Center Foundation Part General Information on Grants and Assista	tion n on Grants and	Assistance					63-1265839
1 Does the organization maintain records to substantiate the arthe selection criteria used to award the grants or assistance?	tain records to subsociated award the grants	stantiate the amouor assistance?	int of the grants or	assistance, the g	rantees' eligibility f	the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and note?	ce, and
Desc	nization's procedur	es for monitoring	the use of grant fu	nds in the United	States.		
Part II Grants and Other Assistance to Governmer Part IV, line 21, for any recipient that received	Assistance to Go Iny recipient that	vernments and received more th	Organizations i an \$5,000. Part	i n the United St Il can be duplica	ates. Complete i	nts and Organizations in the United States. Complete if the organization ansumore than \$5,000. Part II can be duplicated if additional space is needed.	nts and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, more than \$5,000. Part II can be duplicated if additional space is needed.
1 (a) Name and address of organization or government	(p) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) Alabama Space Science Exhibit Commision	63-0585103	170(b)(1)(A)(v	2,000,724	120,000		Exhibits	Programs Support
(2)							
(3)							
(4)	,						
(5)							
(9)							
(2)	·						
(8)							
(6)							
(10)	•						
(11)							
(12)							
 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table Enter total number of other organizations listed in the line 1 table 	n 501(c)(3) and gov organizations listed	ernment organization the line 1 table	ions listed in the li	ne 1 table			-
For Paperwork Reduction Act Notice, see the Instructions for Form	, see the Instruction	s for Form 990.		Cal	Cat. No. 50055P		Schedule I (Form 990) (2012)

Schedule I (F	Schedule I (Form 990) (2012) Part III Grants and Other Assistance to Individual Part III can be duplicated if additional space	ividuals in the Ul space is needed.	Jnited States, Con	nplete if the organiz	ation answered "Yes" to	Page ' ls in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. is needed.
	(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
-						
8						:
က						
4						
5						
9						
7						
Part IV	Supplemental Information. Complete this p information.	this part to pro	wide the informatic	on required in Part I,	line 2, Part III, column (b	bart to provide the information required in Part I, line 2, Part III, column (b), and any other additional
As a Found	As a Foundation supporting another organization in accordance with IRC 509(a)(3) all donations made to our 501(c)(3) are designated to be granted to the Alabama Space Science Exhibit	dance with IRC 509	9(a)(3) all donations m	ıade to our 501(c)(3) arı	e designated to be granted to	the Alabama Space Science E
Commissic	Commission in accordance with the donors restrictions and desi		olarship grants are aw	arded through a comp	etitive scholarship applicatior	es. All scholarship grants are awarded through a competitive scholarship application process and are submitted directly
to the U.S.	to the U.S. Space & Rocket Center scholarship office. The application includes designing a mission patch, writing a comprehensive essay, 3 letters of recommendation, and a description	application include	es designing a missio	n patch, writing a com	orehensive essay, 3 letters of	recommendation, and a descr
of an expe	of an experiment the applicant was involved in. International Space Camp participants must be the current U.S. Teacher of the Year sanctioned by the Council of Chief State School Officers.	nal Space Camp pa	rticipants must be the	current U.S. Teacher o	of the Year sanctioned by the	Council of Chief State School
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						Schadule I (Form 990) (2012

SCHEDULE J (Form 990)

Department of the Treasury

Internal Revenue Service Name of the organization **Compensation Information**

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

➤ Complete if the organization answered "Yes" to Form 990, Part IV, line 23.

➤ Attach to Form 990. ➤ See separate instructions.

OMB No 1545-0047

Open to Public Inspection

Employer identification number

U. S. Space & Rocket Center Foundation 63-1265839 Part | Questions Regarding Compensation No 1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. ☐ First-class or charter travel ☐ Housing allowance or residence for personal use ☐ Travel for companions Payments for business use of personal residence ☐ Tax indemnification and gross-up payments Health or social club dues or initiation fees ☐ Discretionary spending account Personal services (e.g., maid, chauffeur, chef) b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to 1b Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a? 2 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director, Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. ☐ Compensation committee ✓ Written employment contract ✓ Independent compensation consultant ✓ Compensation survey or study ☐ Form 990 of other organizations ✓ Approval by the board or compensation committee During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization: 4a Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4b Participate in, or receive payment from, an equity-based compensation arrangement? 4c If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: 5b If "Yes" to line 5a or 5b, describe in Part III. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: 6a 6b If "Yes" to line 6a or 6b, describe in Part III. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed 7 7 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe 8

If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in

Schedule J (Form 990) 2012

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed. Part II

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(I)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

18 Read-down of M.2 and (17) and (18) a	5	(B) Breakdown o	f W-2 and/or 1099-Mis	C. compensation	0 11 10 10 10 1	מיים מיים מיים מיים מיים מיים מיים מיים	שוים (ב) מווסחווצי	ים נומר ווכניומתו
		Suppression (a)		- Age and	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		compensation	compensation	reportable compensation	compensation	Sellents		reported as deferred in prior Form 990
	(6)	201,000		000'9		9.184	216.184	
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							Sche	Schedule J (Form 990) 2012

Schedule J (Form 990) 2012
Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.
Schedule J (Form 990) 2012

SCHEDULE 0 (Form 990 or 990-EZ)

Name of the organization

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

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

Open to Public Inspection

Employer identification number

Department of the Treasury ► Attach to Form 990 or 990-EZ. Internal Revenue Service

U.S. Space & Rocket Center Foundation	63-1265839
Continuation from Form 990 Page 2, Part III	
Memorial Donations (3,300.00)	
Unrestricted Contributions (59,399.00) Funds are granted to and utilized to support the mission of the	U.S. Space & Rocket Center.
Space Camp Team Sponsorships (47,500.00) Funds are granted to the USSRC and used for upgrades to	to the Space Camp programs.
990 Part VI Question 11b - The 990 and required schedules will be sent electronically to directors after	filing and a printed copy will be
provided at the next scheduled board of directors meeting.	ming and a printed copy will be
Question 12c - The policay is monitored through mandatory competitive bid processes and full disclos	sure statements.
Questions 15a and b - The U.S. Space & Rocket Center utilizes a Wage Grade System developed by an	
reviewed and assessed each year through participation with the Madison County Chamber of Commer	
Center is also required to conduct a wage grade evaluation and comparison each year through the Aff	irmative Action plan.
Question 19 - The organization's governing documents are available to the public upon request by mai	il, e-mail, or phone.

Schedule O (Form 990 or 990-EZ) (2012)	Page 2
Name of the organization	Employer identification number
<u></u>	
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<u></u>	
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m 990) 2012	Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35b, or 36.)
edule R (Form 990) 2012	art V Transactic
Sch	Δ.

Note Complete line 1 if any patity is listed in Darte II III or IV of this school line				Yes	No.
During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II–IV?	or more related organ	nzations listed in Part			
				1a	>
b Gift, grant, or capital contribution to related organization(s)				1b 🗸	
c Gift, grant, or capital contribution from related organization(s)				1c	>
d Loans or loan guarantees to or for related organization(s)	•	•		P	>
				1	>
			<u>J</u>		
f Dividends from related organization(s)				=	>
g Sale of assets to related organization(s)				1g	>
h Purchase of assets from related organization(s)				1 h	>
i Exchange of assets with related organization(s)				1i	>
j Lease of facilities, equipment, or other assets to related organization(s)		•		÷.	>
k Lease of facilities, equipment, or other assets from related organization(s)				\ \	
				7	
 Performance of services or membership or fundraising solicitations by related organization(s) 	(1	>
			•	}	
o Sharing of paid employees with related organization(s)				10 >	\bot
b Reimbursement paid to related organization(s) for expenses				1	>
d Reimbursement baid by related organization(s) for expenses				- p	<u> </u>
	•				
				-	>
s Other transfer of cash or property from related organization(s)				- - -	> :
2 If the answer to any of the above is "Yes," see the instructions for information on who must	complete this line, including covered relationships and transaction thresholds.	uding covered relation	ships and transaction	n thresho	olds.
(a) Name of other organization	(b) Transaction type (a–s)	(c) Amount involved	(d) Method of determining amount involved	amount inv	olved
(1) Alabama Space Science Exhibit Commission	q	2,120,724	2,120,724 Programs Needs		
(2) Alabama Space Science Exhibit Commission	u	296,274 Salary	Salary		
(3)					
(4)					
(5)					
(9)					
			Schedule R (Form 990) 2012	(Form 99(0) 2012

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

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

(a) (b) (c) (d) (e) (f) (g) (g) (g) (g) (g) (g) (g) (g) (g) (g	(b) Primary activity	(c) Legal domicile	(d) Predominant	(e) Are all partners	(f) Share of		(h) Disproportions	(i) (code V—UBI	(I) General or	(k) Percentage
		(state or foreign country)	income (related, unrelated, excluded from tax under	section 501(c)(3) organizations?	total income	end-of-year assets	allocations?	10	managing partner?	
			section 512-514)	Yes No	,		Yes No	$\overline{}$	Yes No	
(1)										
(2)										
(3)										
(4)										
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								Sche	dule R (For	Schedule R (Form 990) 2012

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SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

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► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

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OMB No. 1545-0047

Open to Public Inspection
Employer identification number

(g) Section 512(b)(13) controlled entity? Schedule R (Form 990) 2012 (f)
Direct controlling entity ŝ Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.) Yes 63-1265839 (f)
Direct controlling entity (e) End-of-year assets ¥ Public charity status (if section 501(c)(3)) (d) Total income Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.) (d) Exempt Code section 170(b)(1)(A)(v) (c)
Legal domicile (state
or foreign country) (c) Legal domicile (state or foreign country) Alabama (b) Primary activity (b)
Primary activity Museum For Paperwork Reduction Act Notice, see the Instructions for Form 990. (a) Name, address, and EIN (if applicable) of disregarded entity (a) Name, address, and EIN of related organization (1) Alabama Space Science Exhibit Commission One Tranquility Base, Huntsville, AL 35805 U. S. Space & Rocket Center Foundation Name of the organization Part I Part II 2 ල <u>බ</u> 2 ල € 3 9 E Ξ € 9

Cat No. 50135Y

Schedule R (Form 990) 2012

Section 512(b)(13) controlled entity? (k) Percentage ownership Schedule R (Form 990) 2012 ž Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.) Yes Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.) (i) General or managing partner? Yes No (h) Percentage ownership amount in box 20 of Schedule K-1 (Form 1065) (g)
Share of
end-of-year assets Code V-UBI (h)
Disproportionate
allocations? ŝ (f) Share of total Yes Income (g) Share of end-of-(e)
Type of entity
(C corp, S corp, or trust) (f) Share of total income (d)
Direct controlling entity (e)
Predominant
income (related,
unrelated,
excluded from
tax under
sections 512-514) (c)
Legal domicile
(state or foreign country) (d)
| Direct controlling entity (b) Primary activity (c)
Legal
domicile
(state or
foreign Primary activity (a)
Name, address, and EIN of related organization (a) ame, address, and EIN of related organization (2) **(2)** Name, Part III Part IV Ξ E 2 ଷ ල € 9 9 ପ ₹ 9