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SRS 03/26/2015 2 45 PM

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

➤ Attach to Form 990 or Form 990-EZ. ➤ See separate Instructions.

OMB No. 1545-0047

Open to Public Inspection

Name of the organiza		TE BOOK FORMONTA	ON T	NC		1	oyer Identifi -1004	cation number
Rant 12	Reason for Public Charity	Status (All organizations			his part \ S			
	s not a private foundation because				uno part.	/CC 11130	0000110	
Č	h, convention of churches, or ass	•	•	•	A)(i).			
-	ol described in section 170(b)(1)				. 707			
	tal or a cooperative hospital service		ion 170(b)(1)(A)(iii).			
—	cal research organization operated	-			•	ili). Enter	the hospit	ats name,
city, ar	d state:							,
	ization operated for the benefit of a college or university owned or operated by a governmental unit described in 170(b)(1)(A)(IV).(Complete Part II.)							
	al, state, or local government or go		ction 170	(b)(1)(A)(v).			
7 An org	enization that normally receives a	substantial part of its support from	a govern	mental un	it or from the	general p	ublic	
descni	ed in section 170(b)(1)(A)(vI).(C	complete Part II.)						
8 Acom	nunity trust described in section 1	I70(b)(1)(A)(vI).(Complete Part I	l.)					
9 🗶 An org	inization that normally receives: (1) more than 33 1/3% of its suppo	rt from co	ntributions	, membership	fees, and	gross	
receipt	from activities related to its exem	pt functions—subject to certain e	xceptions	, and (2) r	o more than	33 1/3% o	f its	
• •	from gross investment income an		-		1 tax) from b	usinesses		
	d by the organization after June 3							
—	inization organized and operated							
	inization organized and operated	•			•		-a!	
= =	es of one or more publicly supported	-	=		= ::	-	Ction	
303(a)	 Check the box that describes the state of the s	c Type III—Functions		-			an functio	nally integrated
a D By cha	king this box, I certify that the orga				- □			rany integrated
	an foundation managers and othe							
	on 509(a)(2)							
	ganization received a written dete	rmination from the IRS that it is a	Type I, Ty	pe II, or T	ype III suppo	rting		
organiz	ation, check this box			-				П
g Since	ugust 17, 2006, has the organizat	ion accepted any gift or contributi	on from a	ny of the	REC	EIVE	D	ji
	ng persons?			- 1_				
(i) A	person who directly or indirectly co	entrols, either alone or together wi	th persons	s describe		^	100	Yes No
	below, the governing body of the	• • • • • • • • • • • • • • • • • • • •			APK.	0 9 20	15 8	11g(i)
• •	amily member of a person describ				- YAA	7 75	أغوب	11g(ii)
	35% controlled entity of a person of			· · · · · · · ·		. V	T .	[11g(iii)]
	the following information about the		T (ha) to the	organization	ful Cod annu met	6. A4	to the	full A mount of managers.
(i) Name of suppo organization	led (ii) EIN	(Hii) Type of organization (described on lines 1-9		sted in your	(v) Did you not the organization		ts the tion in col.	(vil) Amount of monetary support
		above or IRC section	governing	document?	col. (i) of your support?		ized in the	
		(see instructions))	Yes	No	Yes No	_	No	
(A)								
							11	
(B)								
(C)						1		
(D)			-				 -	
			 	<u> </u>			 	
(E)			l					
				*****	% X 44 100		19:6:40	
Total			18 04.48	2006	84 2 C 3 B		(4.68 g)	
For Panamork	leduction Act Notice, see the i					Sched	ule A (Fo	orm 990 or 990-EZ) 2012

Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2012 SRS RAISE THE ROOF FOUNDATION, INC. 46-1004477 Page 2 .®Pářť II⊗ Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5 from line 4. Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total Amounts from line 4 Gross Income from interest, dividends, payments received on secunties loans, rents, royalties and income from similar sources Net income from unrelated business activities, whether or not the business 10 Other income. Do not include gain or loss from the sale of capital assets (Explain In Part IV.) 11 Total support. Add lines 7 through 10 Gross receipts from related activities, etc. (see instructions) 12 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f)) 14 Public support percentage from 2011 Schedule A, Part II, line 14 15 16a 33 1/3% support test-2012. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test-2011. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test—2012. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10%-facts-and-circumstances test—2011. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-droumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

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

instructions

Schedule A (Form 990 or 990-EZ) 2012 SRS RAISE THE ROOF FOUNDATION, INC. 46-1004477

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 th	e tests listed b	elow, please co	omplete Part II.)		
	tion A. Public Support		_	,	,	, -	
Caler	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")					264,855	264,855
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					130,010	130,010
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					394,865	394,865
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						
C	Add lines 7a and 7b		<u> </u>				
8	Public support (Subtract line 7c from line 6.)						394,865
	tion B. Total Support		·				
_	ndar year (or fiscal year beginning in)	(a) 2008	(ь) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9	-Amounts from line 6					394,865	394,865
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						
c	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,					394,865	394,865
14	First five years. If the Form 990 is for the	organization's first,	second, third, fourt	h, or fifth tax year a	as a section 501(c)(394,863
	organization, check this box and stop here	•					▶ □
Sec	tion C. Computation of Public Su						
15	Public support percentage for 2012 (line 8,			(ሰ)			100.00%
16	Public support percentage from 2011 Sche					16	
	tion D. Computation of Investme					1 4-1	
17	Investment income percentage for 2012 (li			olumn (f))			<u> </u>
18	Investment income percentage from 2011	•			. ,		<u> </u>
19a	33 1/3% support tests—2012. If the orga 17 is not more than 33 1/3%, check this bo						▶ 🕱
ь	33 1/3% support tests—2011. If the orga						• <u>•</u>
~	line 18 is not more than 33 1/3%, check thi						▶ □
20	Private foundation. If the organization did						<u></u> ▶ H

Part IV	mm 990 or 990-EZ) 2012 SRS RAISE THE ROOF FOUNDATION, INC. 46-1004477 Supplemental Information. Complete this part to provide the explanations required by Part II, line 10:	Pag
	Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).	
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