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Form 990

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047

2013

Open to Public
Inspection

► Do not enter Social Security numbers on this form as it may be made public.

► Information about Form 990 and its instructions is at www.irs.gov/form990.

A For the 2013 calendar year, or tax year beginning

and ending

B Check if applicable <input type="checkbox"/> Address change <input checked="" type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization THE MISSION CONTINUES Doing Business As Number and street (or P.O. box if mail is not delivered to street address) 1141 SOUTH 7TH STREET		Room/suite	D Employer identification number 20-8742553
	City or town, state or province, country, and ZIP or foreign postal code SAINT LOUIS, MO 63104			E Telephone number 314.588.8805
	F Name and address of principal officer SPENCER KYMPTON SAME AS C ABOVE			G Gross receipts \$ 7,714,128.
	I Tax-exempt status <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c)() (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	J Website: ► WWW.MISSIONCONTINUES.ORG			H(b) Are all subordinates included? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "No," attach a list. (see instructions)
	K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ►		L Year of formation, 2007	M State of legal domicile, MO

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities ASSIST VETERANS IN SERVING AS CITIZEN LEADERS, HONORING THE FALLEN THROUGH SERVICE		
	2 Check this box ► <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets		
Revenue	3 Number of voting members of the governing body (Part VI, line 1a)	3	9
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	8
	5 Total number of individuals employed in calendar year 2013 (Part V, line 2a)	5	42
	6 Total number of volunteers (estimate if necessary)	6	3300
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
	b Net unrelated business taxable income from Form 990-T, line 34	7b	0.
	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	6,205,012.	7,553,590.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	0.	0.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	8,963.	<166,484. >
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	<120,798. >	<68,794. >
	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	6,093,177.	7,318,312.
14 Benefits paid to or for members (Part IX, column (A), line 4)	1,310,741.	1,690,533.	
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	0.	0.	
16a Professional fundraising fees (Part IX, column (A), line 11e)	2,248,236.	2,403,657.	
b Total fundraising expenses (Part IX, column (D), line 25) ► 516,057.	0.	0.	
17 Other expenses (Part IX, column (A), lines 11a 11d, 11f 24e)	1,931,724.	1,835,068.	
18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	5,490,701.	5,929,258.	
19 Revenue less expenses Subtract line 18 from line 12	602,476.	1,389,054.	
Net Assets or Fund Balances	Beginning of Current Year	End of Year	
	20 Total assets (Part X, line 16)	5,287,804.	6,705,369.
	21 Total liabilities (Part X, line 26)	168,362.	196,873.
	22 Net assets or fund balances Subtract line 21 from line 20	5,119,442.	6,508,496.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	► Signature of officer SPENCER KYMPTON, PRESIDENT Type or print name and title	Date			
Paid Preparer Use Only	Print/Type preparer's name JENNIFER M. VACHA	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN P01251998
	Firm's name ► BROWN SMITH WALLACE, L.L.C.		Firm's EIN ► 43-1001367		
	Firm's address ► 6 CITYPLACE DRIVE, SUITE 900 ST. LOUIS, MO 63141		Phone no. 314.983.1200		

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

 Yes No

G1,42 23

Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response or note to any line in this Part III

1 Briefly describe the organization's mission

THE MISSION CONTINUES EMPOWERS VETERANS, FACING THE CHALLENGE OF
 ADJUSTING TO LIFE AT HOME, TO FIND NEW MISSIONS. WE REDEPLOY VETERANS
 IN THEIR COMMUNITIES SO THAT THEIR SHARED LEGACY WILL BE ONE OF ACTION
 AND SERVICE.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No

If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No
 If "Yes," describe these changes on Schedule O4 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 \$ 3,375,734, including grants of \$ 1,690,533,) (Revenue \$ _____)

FELLOWSHIP PROGRAM - THE MISSION CONTINUES AWARDS COMMUNITY SERVICE FELLOWSHIPS TO POST-9/11 VETERANS, EMPOWERING THEM TO TRANSFORM THEIR OWN LIVES BY SERVING OTHERS AND DIRECTLY IMPACTING THEIR COMMUNITIES. THE MISSION CONTINUES FELLOWS SERVE FOR SIX MONTHS AT A LOCAL NONPROFIT ORGANIZATION ADDRESSING KEY EDUCATIONAL, ENVIRONMENTAL, OR SOCIAL ISSUES. THE MISSION CONTINUES AWARDED 303 FELLOWSHIPS IN 2013.

4b (Code _____) (Expenses \$ 1,009,121, including grants of \$ _____) (Revenue \$ _____)

THOUGHT LEADERSHIP PROGRAM - VETERANS ARE OFTEN TOLD "THANK YOU" WHEN THEY RETURN HOME FROM MILITARY SERVICE, BUT THEY ALSO NEED TO HEAR "WE STILL NEED YOU". THROUGH ITS THOUGHT LEADERSHIP PROGRAM, THE MISSION CONTINUES IS CONDUCTING RESEARCH AND BROADCASTING THE MESSAGE THAT OUR RETURNING VETERANS ARE CIVIC ASSETS WHOSE STRENGTHS AND LEADERSHIP CAN BE USED TO IMPROVE COMMUNITIES HERE AT HOME. THE MISSION CONTINUES' GOAL IS TO FUNDAMENTALLY RESHAPE HOW OUR NATION WELCOMES HOME OUR VETERANS.

4c (Code _____) (Expenses \$ 724,554, including grants of \$ _____) (Revenue \$ _____)

SERVICE PROJECTS PROGRAM - THE MISSION CONTINUES CHALLENGES VETERANS OF ALL ERAS AND CIVILIANS OF ALL AGES TO SERVE THEIR COUNTRY BY SERVING THEIR COMMUNITIES. SERVICE PROJECTS PROVIDE A PLACE FOR VETERANS TO BE CITIZEN LEADERS AND FOR ALL CIVILIANS TO LIVE THE BELIEFS OF VETERANS WHILE SERVING BY THEIR SIDES. 3,300 VOLUNTEERS IN COMMUNITIES ACROSS THE COUNTRY SERVED WITH THE MISSION CONTINUES IN 2013.

4d Other program services (Describe in Schedule O)

(Expenses \$ _____ including grants of \$ _____) (Revenue \$ _____)

4e Total program service expenses ► 5,109,409

Part IV Checklist of Required Schedules

- 1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?
If "Yes," complete Schedule A
- 2 Is the organization required to complete Schedule B, Schedule of Contributors?
- 3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I
- 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) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? 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 I
- 7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II
- 8 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 counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV
- 10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V
- 11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable
 - a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI
 - 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
 - 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
 - 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
 - e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X
 - f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X
- 12a 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
- 14a Did the organization maintain an office, employees, or agents outside of the United States?
 - b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, 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 other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV
- 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? 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 IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I
- 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II
- 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
- 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H
 - b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

	Yes	No
1	X	
2	X	
3		X
4		X
5	X	
6		X
7		X
8		X
9	X	
10		X
11a	X	
11b		X
11c		X
11d		X
11e		X
11f	X	
12a	X	
12b		X
13		X
14a		X
14b		X
15		X
16		X
17		X
18	X	
19		X
20a		X
20b		

Part IV Checklist of Required Schedules (continued)

		Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	x
22	Did the organization report more than \$5,000 of grants or 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	x
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	x
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 25a	24a	x
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c	
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	x
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	x
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II	26	x
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	x
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)	28a	x
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	x
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28c	x
c	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	29	x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	30	x
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	31	x
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	32	x
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	33	x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	34	x
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	35a	x
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35b	
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	36	x
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	37	x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	38	x
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?		

Note. All Form 990 filers are required to complete Schedule O

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response or note to any line in this Part V

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter 0 if not applicable	1a	441
1b	Enter the number of Forms W-2G included in line 1a. Enter 0 if not applicable	1b	0
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	X
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	42
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <i>Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)</i>	2b	X
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	X
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, 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 account)?	4a	X
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	5a	X
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5b	X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5c	
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	6a	X
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?	6b	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	7a	X
7	Organizations that may receive deductible contributions under section 170(c).	7b	X
a	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?	7c	X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7e	X
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7f	X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7g	
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7h	
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	8	
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	9a	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	9b	
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the organization make any taxable distributions under section 4966?		
b	Did the organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter		
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11	Section 501(c)(12) organizations. Enter		
a	Gross income from members or shareholders	11a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of tax exempt interest received or accrued during the year	12b	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state?	13a	
	<i>Note. See the instructions for additional information the organization must report on Schedule O</i>		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b	
c	Enter the amount of reserves on hand	13c	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	

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

Check if Schedule O contains a response or note to any line in this Part VI

Section A. Governing Body and Management

1a Enter the number of voting members of the governing body at the end of the tax year
 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.

1b Enter the number of voting members included in line 1a, above, who are independent

2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?

3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?

4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?

5 Did the organization become aware during the year of a significant diversion of the organization's assets?

6 Did the organization have members or stockholders?

7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?

b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?

8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:

a The governing body?

b Each committee with authority to act on behalf of the governing body?

9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O

	Yes	No
1a	9	
1b	8	
2		x
3		x
4	x	
5		x
6		x
7a		x
7b		x
8a	x	
8b	x	
9		x

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

10a Did the organization have local chapters, branches, or affiliates?

b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?

11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?

b Describe in Schedule O the process, if any, used by the organization to review this Form 990

12a Did the organization have a written conflict of interest policy? If "No," go to line 13

b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?

c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done

13 Did the organization have a written whistleblower policy?

14 Did the organization have a written document retention and destruction policy?

15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?

a The organization's CEO, Executive Director, or top management official

b Other officers or key employees of the organization

If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)

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?

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 organization's exempt status with respect to such arrangements?

	Yes	No
10a	x	
10b		
11a	x	
12a	x	
12b	x	
12c	x	
13	x	
14	x	
15a	x	
15b	x	
16a		x
16b		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ► AL AR CA CT FL GA IL KY MD MA ME MN

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply

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 interest policy, 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 ► THE ORGANIZATION - 314.588.8805

1141 SOUTH 7TH STREET SAINT LOUIS, MO 63104

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

 Check if Schedule O contains a response or note to any line in this Part VII
Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					(D) Reportable compensation from the organization (W-2/1099 MISC)	(E) Reportable compensation from related organizations (W 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee			
(1) ERIC GREITENS - CEO/FOUNDER	40.00								
<u>AVG ANNUAL COMP \$100,214 SINCE 2007</u>		X	X				175,000.	0.	11,507.
(2) GARY GIGLIO CHAIRMAN	4.00	X	X				0.	0.	0.
(3) MARY MCMURTRY GOVERNANCE COMM CHAIR - RES. 11/2013	2.00	X	X				0.	0.	0.
(4) ROBERT GASCOFF TREASURER - EXP. 5/2013	2.00	X	X				0.	0.	0.
(5) TIM NOONAN TREASURER	2.00	X	X				0.	0.	0.
(6) KAJ LARSEN DIRECTOR	2.00	X					0.	0.	0.
(7) VANESSA KIRSCH DIRECTOR	2.00	X					0.	0.	0.
(8) PETER GRIEVE DIRECTOR	2.00	X					0.	0.	0.
(9) JOHN TIEN DIRECTOR	2.00	X					0.	0.	0.
(10) PETER BISHOP DIRECTOR	2.00	X					0.	0.	0.
(11) DAVID GERGEN DIRECTOR	2.00	X					0.	0.	0.
(12) SPENCER KYMPTON PRESIDENT	40.00		X				184,349.	0.	11,350.
(13) MEREDITH KNOPP VP PROGRAMS	40.00			X			126,174.	0.	10,041.
(14) JACK NEYENS VP FINANCE & OPERATIONS	40.00				X		121,152.	0.	7,608.
(15) LAURA L'ESPERANCE VP COMMUNICATIONS	40.00					X	145,882.	0.	8,645.
(16) LORI STEVENS VP GROWTH STRATEGY AND DEVELOPMENT	40.00					X	175,460.	0.	8,473.

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

1b Sub-total

928,017. 0. 57,624.

c Total from continuation sheets to Part VII, Section A

0. 0. 0.

d Total (add lines 1b and 1c)

928,017. 0. 57,624.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ►

6

3 Did the organization list any **former** officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual

	Yes	No
--	-----	----

4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150 000? If "Yes," complete Schedule J for such individual.

4 y

5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person.

7 8 9 10 11 12 13

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

the organization Report compensation for the calendar year ending with or within the organization's tax year		
(A) Name and business address	(B) Description of services	(C) Compensation
FLEISHMAN HILLARD INC ST. LOUIS, MO	PR CONSULTING	305,382

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ► 1

3

Part VIII

Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a				
	b Membership dues	1b				
	c Fundraising events	1c	614,354.			
	d Related organizations	1d				
	e Government grants (contributions)	1e				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	6,939,236.			
	g Noncash contributions included in lines 1a-1f \$		337,978.			
	h Total. Add lines 1a-1f		► 7,553,590			
Program Service Revenue	Business Code					
	2 a					
	b					
	c					
	d					
	e					
f All other program service revenue						
g Total. Add lines 2a-2f		►				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		► 6,935.		6,935.	
	4 Income from investment of tax-exempt bond proceeds		►			
	5 Royalties		►			
	6 a Gross rents	(i) Real	(ii) Personal			
	b Less rental expenses					
	c Rental income or (loss)					
	d Net rental income or (loss)		►			
	7 a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other			
	b Less cost or other basis and sales expenses	88,203.				
	c Gain or (loss)	88,266.	173,356.			
d Net gain or (loss)	<63.►	<173,356.►				
8 a Gross income from fundraising events (not including \$ 614,354. of contributions reported on line 1c) See Part IV, line 18	a	64,728.				
b Less direct expenses	b	134,194.				
c Net income or (loss) from fundraising events		►	<69,466.►		<69,466.►	
9 a Gross income from gaming activities See Part IV, line 19	a					
b Less direct expenses	b					
c Net income or (loss) from gaming activities		►				
10 a Gross sales of inventory, less returns and allowances	a					
b Less cost of goods sold	b					
c Net income or (loss) from sales of inventory		►				
Miscellaneous Revenue		Business Code				
11 a MISC REFUNDS		900099	672.		672.	
b						
c						
d All other revenue						
e Total. Add lines 11a-11d		► 672.				
12 Total revenue See instructions		► 7,318,312.	0.	0.	<235,278.►	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX

<i>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</i>	(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 Grants and other assistance to individuals in the United States. See Part IV, line 22	1,690,533.	1,690,533.		
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	382,206.	301,943.	22,932.	57,331.
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 Other salaries and wages	1,663,631.	1,211,424.	146,463.	305,744.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	28,829.	24,290.	2,831.	1,708.
9 Other employee benefits	177,005.	147,476.	16,179.	13,350.
10 Payroll taxes	151,986.	118,920.	5,695.	27,371.
11 Fees for services (non-employees)				
a Management				
b Legal				
c Accounting	48,414.	9,683.	33,890.	4,841.
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O)	506,795.	480,419.	5,990.	20,386.
12 Advertising and promotion	84,706.	84,453.		253.
13 Office expenses	135,774.	94,423.	15,865.	25,486.
14 Information technology	37,360.	32,344.	3,360.	1,656.
15 Royalties				
16 Occupancy	109,749.	76,824.	21,950.	10,975.
17 Travel	338,209.	306,969.	3,549.	27,691.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	279,038.	272,789.	444.	5,805.
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	190,064.	170,626.	12,959.	6,479.
23 Insurance	25,817.	17,010.	6,383.	2,424.
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.)				
a VOLUNTEER PROJECTS AND	50,091.	50,091.		
b VOLUNTEER RECOGNITION	24,973.	19,192.	1,535.	4,246.
c TAXES AND LICENSES	4,078.		3,767.	311.
d				
e All other expenses				
25 Total functional expenses Add lines 1 through 24e	5,929,258.	5,109,409.	303,792.	516,057.
26 Joint costs Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Check here if following SOP 98-2 (ASC 958-720)

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non interest bearing	2,200,655.	1	1,476,597.
	2 Savings and temporary cash investments	1,996,536.	2	4,026,971.
	3 Pledges and grants receivable, net	478,200.	3	645,000.
	4 Accounts receivable, net		4	
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr) Complete Part II of Sch L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges		9	
	10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a 418,582.		
	b Less accumulated depreciation	10b 180,581.	10c 480,863.	238,001.
	11 Investments - publicly traded securities		11	
	12 Investments - other securities See Part IV, line 11		12	
	13 Investments - program related See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets See Part IV, line 11	131,550.	15	318,800.
	16 Total assets Add lines 1 through 15 (must equal line 34)	5,287,804.	16	6,705,369.
Liabilities	17 Accounts payable and accrued expenses	168,362.	17	196,873.
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability Complete Part IV of Schedule D		21	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		22	
	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 of Schedule D		25	
	26 Total liabilities Add lines 17 through 25	168,362.	26	196,873.
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here ► <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	4,016,242.	27	4,942,796.
	28 Temporarily restricted net assets	1,103,200.	28	1,565,700.
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here ► <input type="checkbox"/> 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		32	
	33 Total net assets or fund balances	5,119,442.	33	6,508,496.
	34 Total liabilities and net assets/fund balances	5,287,804.	34	6,705,369.

Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response or note to any line in this Part XI

1 Total revenue (must equal Part VIII, column (A), line 12)	1	7,318,312.
2 Total expenses (must equal Part IX, column (A), line 25)	2	5,929,258.
3 Revenue less expenses Subtract line 2 from line 1	3	1,389,054.
4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	5,119,442.
5 Net unrealized gains (losses) on investments	5	
6 Donated services and use of facilities	6	
7 Investment expenses	7	
8 Prior period adjustments	8	
9 Other changes in net assets or fund balances (explain in Schedule O)	9	0.
10 Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	6,508,496.

Part XII Financial Statements and ReportingCheck if Schedule O contains a response or note to any line in this Part XII

	Yes	No
1 Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both. <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	2a	x
2b Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both. <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	2b	x
2c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	2c	x
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3a	x
	3b	

Form 990 (2013)

SCHEDULE A
(Form 990 or 990-EZ)

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.

4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

Name of the organization

Employer identification number

20-8742553

Part I Reason for Public Charity Status (All organizations must complete this part) See instructions.

The organization is not a private foundation because it is (For lines 1 through 11, check only one box.)

1	<input type="checkbox"/>	A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
2	<input type="checkbox"/>	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)
3	<input type="checkbox"/>	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
4	<input type="checkbox"/>	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	<input type="checkbox"/>	An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II)
6	<input type="checkbox"/>	A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
7	<input checked="" type="checkbox"/>	An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II)
8	<input type="checkbox"/>	A community trust described in section 170(b)(1)(A)(vi). (Complete Part II)
9	<input type="checkbox"/>	An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2) (Complete Part III)
10	<input type="checkbox"/>	An organization organized and operated exclusively to test for public safety. See section 509(a)(4).
11	<input type="checkbox"/>	An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h
e	<input type="checkbox"/>	a <input type="checkbox"/> Type I b <input type="checkbox"/> Type II c <input type="checkbox"/> Type III - Functionally integrated d <input type="checkbox"/> Type III - Non functionally integrated
e	<input type="checkbox"/>	By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)
f	If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box <input type="checkbox"/>	
g	Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?	
g	(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?	
g	(ii) A family member of a person described in (i) above?	
g	(iii) A 35% controlled entity of a person described in (i) or (ii) above?	
h	Provide the following information about the supported organization(s).	

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2013

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

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. 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) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	916,376.	1,586,278.	7,010,030.	6,205,012.	7,553,590.	23,271,286.
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	916,376.	1,586,278.	7,010,030.	6,205,012.	7,553,590.	23,271,286.
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)						2,112,389.
6 Public support. Subtract line 5 from line 4						21,158,897.

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7 Amounts from line 4	916,376.	1,586,278.	7,010,030.	6,205,012.	7,553,590.	23,271,286.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	670.	2,636.	9,460.	8,963.	6,935.	28,664.
9 Net income from unrelated business activities, whether or not the business is regularly carried on	825.					825.
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	3,575.	3,782.	2,704.	1,601.	672.	12,334.
11 Total support. Add lines 7 through 10						23,313,109.
12 Gross receipts from related activities, etc. (see instructions)					12	
13 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						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f))	14	90.76	%
15 Public support percentage from 2012 Schedule A, Part II, line 14	15	91.38	%
16a 33 1/3% support test - 2013. 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			
► <input checked="" type="checkbox"/>			
b 33 1/3% support test - 2012. 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			
► <input type="checkbox"/>			
17a 10% -facts-and-circumstances test - 2013. 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			
► <input type="checkbox"/>			
b 10% -facts-and-circumstances test - 2012. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization			
► <input type="checkbox"/>			
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions			
► <input type="checkbox"/>			

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

Calendar year (or fiscal year beginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees 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						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9 Amounts from line 6						
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, and 12)						

14 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

15 Public support percentage for 2013 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2012 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2013 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2012 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2013. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ►

b 33 1/3% support tests - 2012. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ►

20 Private foundation If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ►

Part IV

Supplemental Information. Provide the explanations required by Part II, line 10, 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)Department of the Treasury
Internal Revenue Service**Supplemental Financial Statements**

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

OMB No 1545-0047

2013Open to Public
Inspection

Name of the organization

THE MISSION CONTINUES

Employer identification number

20-8742553

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Yes No

6 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 conferring impermissible private benefit? Yes No

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7

1 Purpose(s) of conservation easements held by the organization (check all that apply)	
<input type="checkbox"/> Preservation of land for public use (e.g., recreation or education)	<input type="checkbox"/> Preservation of an historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	
2 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	

a Total number of conservation easements

b Total acreage restricted by conservation easements

c Number of conservation easements on a certified historic structure included in (a)

d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register

	Held at the End of the Tax Year
2a	
2b	
2c	
2d	

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ► _____

4 Number of states where property subject to conservation easement is located ► _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ► _____

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)(i) and section 170(h)(4)(B)(ii)? Yes No

9 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

1a 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

1b 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

(i) Revenues included in Form 990, Part VIII, line 1 ► \$ _____

(ii) Assets included in Form 990, Part X ► \$ _____

2 If the organization received or held works of art, historical 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

a Revenues included in Form 990, Part VIII, line 1 ► \$ _____

b Assets included in Form 990, Part X ► \$ _____

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)

a Public exhibition
 b Scholarly research
 c Preservation for future generations

d Loan or exchange programs
 e Other _____

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

Yes No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

Yes No

b If "Yes," explain the arrangement in Part XIII and complete the following table

c Beginning balance
 d Additions during the year
 e Distributions during the year
 f Ending balance

	Amount
1c	
1d	
1e	
1f	

2a Did the organization include an amount on Form 990, Part X, line 21?

Yes No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10

1a Beginning of year balance
 b Contributions
 c Net investment earnings, gains, and losses
 d Grants or scholarships
 e Other expenditures for facilities and programs
 f Administrative expenses
 g End of year balance

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a					
1b					
1c					
1d					
1e					
1f					
1g					

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

a Board designated or quasi-endowment ► _____ %
 b Permanent endowment ► _____ %
 c Temporarily restricted endowment ► _____ %

The percentages in lines 2a, 2b, and 2c should equal 100%

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization

by
 (i) unrelated organizations
 (ii) related organizations

	Yes	No
3a(i)		
3a(ii)		
3b		

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIII the intended uses of the organization's endowment funds

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		3,750.	2,281.	1,469.
d Equipment		101,598.	46,997.	54,601.
e Other		313,234.	131,303.	181,931.
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))			►	238,001.

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11b. See Form 990, Part X, line 12

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		

Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12) ►

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11c. See Form 990, Part X, line 13

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		

Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13) ►

Part IX Other Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11d. See Form 990, Part X, line 15

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	

Total. (Column (b) must equal Form 990, Part X, col. (B) line 15) ►

Part X Other Liabilities.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25) ►

2. Liability for uncertain tax positions In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" to Form 990, Part IV, line 12a

1	Total revenue, gains, and other support per audited financial statements	1	23,489,439.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	
b	Donated services and use of facilities	2b	15,997,771.
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII)	2d	
e	Add lines 2a through 2d	2e	15,997,771.
3	Subtract line 2e from line 1	3	7,491,668.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII)	4b	<173,356. >
c	Add lines 4a and 4b	4c	<173,356. >
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	7,318,312.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" to Form 990, Part IV, line 12a

1	Total expenses and losses per audited financial statements	1	22,100,385.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	15,997,771.
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII)	2d	173,356.
e	Add lines 2a through 2d	2e	16,171,127.
3	Subtract line 2e from line 1	3	5,929,258.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	5,929,258.

Part XIII Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4; Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

PART X, LINE 2:EXPLANATION THE ORGANIZATION HAS ADDRESSED THE PROVISIONS OF FASB ASC740, ACCOUNTING FOR INCOME TAXES. IN THAT REGARD, THE ORGANIZATION HASEVALUATED ITS TAX POSITIONS, EXPIRING STATUTES OF LIMITATIONS, AUDITS,PROPOSED SETTLEMENTS, CHANGES IN TAX LAW AND NEW AUTHORITATIVE RULINGS ANDBELIEVES THAT NO PROVISION FOR INCOME TAXES IS NECESSARY AT THIS TIME, TOCOVER ANY UNCERTAIN TAX POSITIONS.PART XI, LINE 4B - OTHER ADJUSTMENTS:LOSS ON WRITE DOWN OF WEBSITE -173,356.PART XII, LINE 2D - OTHER ADJUSTMENTS:332054
09-25-13

Part XIII **Supplemental Information (continued)**

LOSS ON WRITE DOWN OF WEBSITE 173,356.

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990 EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000

	(a) Event #1 VETERANS DAY GALA (event type)	(b) Event #2 MARINE CORPS MARATHON (event type)	(c) Other events 2 (total number)	(d) Total events (add col (a) through col (c))
Revenue				
1 Gross receipts	635,040.	42,049.	1,993.	679,082.
2 Less Contributions	570,312.	42,049.	1,993.	614,354.
3 Gross income (line 1 minus line 2)	64,728.			64,728.
4 Cash prizes				
5 Noncash prizes				
6 Rent/facility costs				
7 Food and beverages	68,487.			68,487.
8 Entertainment	395.			395.
9 Other direct expenses	56,870.	4,729.	3,713.	65,312.
10 Direct expense summary Add lines 4 through 9 in column (d)				134,194.
11 Net income summary Subtract line 10 from line 3, column (d)				<69,466. ▶

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

	(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Revenue				
1 Gross revenue				
Direct Expenses				
2 Cash prizes				
3 Noncash prizes				
4 Rent/facility costs				
5 Other direct expenses				
6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
7 Direct expense summary Add lines 2 through 5 in column (d)				▶
8 Net gaming income summary Subtract line 7 from line 1, column (d)				▶

9 Enter the state(s) in which the organization operates gaming activities _____

a Is the organization licensed to operate gaming activities in each of these states? Yes No

b If "No," explain _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? Yes No

b If "Yes," explain _____

11 Does the organization operate gaming activities with nonmembers? Yes No

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? Yes No

13 Indicate the percentage of gaming activity operated in:

13a	%
13b	%

a The organization's facility
 b An outside facility

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records

Name ► _____

Address ► _____

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No

b If "Yes," enter the amount of gaming revenue received by the organization ► \$ _____ and the amount of gaming revenue retained by the third party ► \$ _____

c If "Yes," enter name and address of the third party.

Name ► _____

Address ► _____

16 Gaming manager information

Name ► _____

Gaming manager compensation ► \$ _____

Description of services provided ► _____

Director/officer

Employee

Independent contractor

17 Mandatory distributions

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No

b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► \$ _____

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions)

Part IV **Supplemental Information (continued)**

Part IV **Supplemental Information**

FELLOWSHIP TERM.

SCHEDULE J
(Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

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

► Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

► Attach to Form 990. ► See separate instructions.

► Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2013

Open to Public Inspection

Name of the organization

Employer identification number

20-8742553

THE MISSION CONTINUES

Part I Questions Regarding Compensation

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

<input type="checkbox"/> First-class or charter travel	<input type="checkbox"/> Housing allowance or residence for personal use
<input type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence
<input type="checkbox"/> Tax indemnification and gross-up payments	<input type="checkbox"/> Health or social club dues or initiation fees
<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)

Yes

No

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 explain

1b

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?

2

3 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

<input checked="" type="checkbox"/> Compensation committee	<input type="checkbox"/> Written employment contract
<input type="checkbox"/> Independent compensation consultant	<input type="checkbox"/> Compensation survey or study
<input checked="" type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Approval by the board or compensation committee

4a X

4b X

4c X

4 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

a Receive a severance payment or change-of-control payment?
b Participate in, or receive payment from, a supplemental nonqualified retirement plan?
c Participate in, or receive payment from, an equity based compensation arrangement?

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.

5 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:

5a X

5b X

a The organization?

b Any related organization?

If "Yes" to line 5a or 5b, describe in Part III

6 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 X

6b X

a The organization?

b Any related organization?

If "Yes" to line 6a or 6b, describe in Part III

7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III

7 X

8 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 in Part III

8 X

9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

9

THE MISSION CONTINUES

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

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

(A) Name and Title	(B) Breakdown of W-2 and/or 1099 MISC compensation			(C) Retirement and other, deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i) (D)	(F) Compensation reported as deferred in prior Form 990
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) ERIC GREITENS - CEO / FOUNDER <u>AVG ANNUAL COMP \$100,214 SINCE 2007</u>	(i) 175,000.	0.	0.	3,500.	8,007.	186,507.	0.
(2) SPENCER KYPMTON PRESIDENT	(i) 184,349.	0.	0.	5,500.	5,850.	195,699.	0.
(3) LAURA L'ESPERANCE VP COMMUNICATIONS	(i) 145,882.	0.	0.	2,992.	5,653.	154,527.	0.
(4) LORI STEVENS VP GROWTH STRATEGY AND DEVELOPMENT	(i) 175,460.	0.	0.	2,669.	5,804.	183,933.	0.
	(ii)					0.	0.
	(iii)					0.	0.
	(iv)					0.	0.
	(v)					0.	0.
	(vi)					0.	0.
	(vii)					0.	0.
	(viii)					0.	0.
	(ix)					0.	0.
	(x)					0.	0.
	(xi)					0.	0.
	(xii)					0.	0.
	(xiii)					0.	0.
	(xiv)					0.	0.
	(xv)					0.	0.
	(xvi)					0.	0.
	(xvii)					0.	0.
	(xviii)					0.	0.
	(xix)					0.	0.
	(xx)					0.	0.
	(xxi)					0.	0.
	(xxii)					0.	0.
	(xxiii)					0.	0.
	(xxiv)					0.	0.
	(xxv)					0.	0.
	(xxvi)					0.	0.
	(xxvii)					0.	0.
	(xxviii)					0.	0.
	(xxix)					0.	0.
	(xxx)					0.	0.
	(xxxi)					0.	0.
	(xxxii)					0.	0.
	(xxxiii)					0.	0.
	(xxxiv)					0.	0.
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	(xxxviii)					0.	0.
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	(xxxiv)					0.	0.
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	(xxxvi)					0.	0.
	(xxxvii)					0.	0.
	(xxxviii)					0.	0.
	(xxxix)					0.	0.
	(xxxxi)					0.	0.
	(xxxii)					0.	0.
	(xxxiii)					0.	0.
	(xxxiv)					0.	0.
	(xxxv)					0.	0.
	(xxxvi)					0.	0.
	(xxxvii)					0.	0.
	(xxxviii)					0.	0.
	(xxxix)					0.	0.
	(xxxxi)					0.	0.
	(xxxii)					0.	0.
	(xxxiii)					0.	0.
	(xxxiv)					0.	0.
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	(xxxvi)					0.	0.
	(xxxvii)					0.	0.
	(xxxviii)					0.	0.
	(xxxix)					0.	0.
	(xxxxi)					0.	0.
	(xxxii)					0.	0.
	(xxxiii)					0.	0.
	(xxxiv)					0.	0.
	(xxxv)					0.	0.
	(xxxvi)					0.	0.
	(xxxvii)					0.	0.
	(xxxviii)					0.	0.
	(xxxix)					0.	0.
	(xxxxi)					0.	0.
	(xxxii)					0.	0.
	(xxxiii)					0.	0.
	(xxxiv)					0.	0.
	(xxxv)					0.	0.
	(xxxvi)					0.	0.
	(xxxvii)					0.	0.
	(xxxviii)					0.	0.
	(xxxix)					0.	0.
	(xxxxi)					0.	0.
	(xxxii)					0.	0.
	(xxxiii)					0.	0.
	(xxxiv)					0.	0.
	(xxxv)					0.	0.
	(xxxvi)					0.	0.
	(xxxvii)					0.	0.
	(xxxviii)					0.	0.
	(xxxix)					0.	0.
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	(xxxiii)					0.	0.
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	(xxxvii)					0.	0.
	(xxxviii)					0.	0.
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	(xxxxi)					0.	0.
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	(xxxiii)					0.	0.
	(xxxiv)					0.	0.
	(xxxv)					0.	0.
	(xxxvi)					0.	0.
	(xxxvii)					0.	0.
	(xxxviii)					0.	0.
	(xxxix)					0.	0.
	(xxxxi)					0.	0.
	(xxxii)					0.	0.
	(xxxiii)					0.	0.
	(xxxiv)					0.	0.
	(xxxv)					0.	0.
	(xxxvi)					0.	0.
	(xxxvii)					0.	0.
	(xxxviii)					0.	0.
	(xxxix)					0.	0.
	(xxxxi)					0.	0.
	(xxxii)					0.	0.
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	(xxxv)				</td		

THE MISSION CONTINUES
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

PART I. LINE 3.

EXPLANATION: THE PROCESS FOR DETERMINING COMPENSATION OF THE
ORGANIZATION'S CEO INCLUDED A REVIEW AND APPROVAL BY INDEPENDENT PERSONS
COMPARABILITY DATA FROM VARIOUS NATIONAL VETERANS ORGANIZATIONS, OTHER
MIDWEST SOCIAL SERVICE ORGANIZATIONS, AND THE CEO'S SALARY HISTORY, AND
CONTEMPORANEOUS SUBSTANTIATION OF THE DELIBERATION AND DECISION.

SCHEDULE M
(Form 990)

Noncash Contributions

OMB No 1545-0047

2013

Open to Public
Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

Employer identification number

THE MISSION CONTINUES

20-8742553

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded	X	9	88,270.	FMV
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ► (<u>ARLINE TICKET</u>)	X	1	200,000.	FMV
26 Other ► (<u>BENJAMIN MOOR</u>)	X	1	40,115.	FMV
27 Other ► (<u>EVENT TICKETS</u>)	X	1	9,108.	FMV
28 Other ► (<u>FOOD</u>)	X	1	489.	FMV

29 Number of Forms 8283 received by the organization during the tax year for contributions
for which the organization completed Form 8283, Part IV, Donee Acknowledgement

29

0

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 - 28, that it must hold for
at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for
the entire holding period?

b If "Yes," describe the arrangement in Part II

	Yes	No
30a		X

31 Does the organization have a gift acceptance policy that requires the review of any non standard contributions?

31	X
----	---

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash
contributions?

32a	X
-----	---

b If "Yes," describe in Part II

33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked,
describe in Part II

Part II **Supplemental Information.** Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information

SCHEDULE M, PART I, COLUMN (B).

EXPLANATION: THE ORGANIZATION IS REPORTING THE NUMBER OF CONTRIBUTORS.

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2013

Open to Public
Inspection

Name of the organization

THE MISSION CONTINUES

Employer identification number

20-8742553

FORM 990, PART VI, SECTION A, LINE 4:

EXPLANATION SINCE THE PRIOR YEAR 990 WAS FILED, THE ORGANIZATION LEGALLY

CHANGED ITS NAME TO "THE MISSION CONTINUES".

FORM 990, PART VI, SECTION B, LINE 11:

EXPLANATION A COPY OF THE 990 IS MADE AVAILABLE TO THE BOARD OF DIRECTORS

AFTER APPROVAL BY THE FINANCE COMMITTEE AND FILING WITH IRS.

FORM 990, PART VI, SECTION B, LINE 12C:

EXPLANATION THE ORGANIZATION CONDUCTS PERIODIC REVIEWS, SOMETIMES WITH THE

HELP OF OUTSIDE ADVISORS, TO ENSURE IT IS CONSISTENT IN MONITORING AND

ENFORCING COMPLIANCE WITH THE CONFLICT OF INTEREST POLICY. VIOLATIONS OF

THE CONFLICT OF INTEREST POLICY ARE INVESTIGATED BY THE GOVERNING BOARD

AND, IF NECESSARY, APPROPRIATE DISCIPLINARY AND CORRECTIVE ACTION IS TAKEN.

FORM 990, PART VI, SECTION B, LINE 15:

EXPLANATION THE PROCESS FOR DETERMINING COMPENSATION OF THE ORGANIZATION'S

CEO INCLUDED A REVIEW AND APPROVAL BY INDEPENDENT PERSONS, COMPARABILITY

DATA FROM VARIOUS NATIONAL VETERANS ORGANIZATIONS, OTHER MIDWEST SOCIAL

SERVICE ORGANIZATIONS, AND THE CEO'S SALARY HISTORY, AND CONTEMPORANEOUS

SUBSTANTIATION OF THE DELIBERATION AND DECISION.

FORM 990, PART VI, SECTION B, LINE 15B:

THE PROCESS FOR DETERMINING COMPENSATION OF THE ORGANIZATION'S OFFICERS AND

POTENTIAL KEY EMPLOYEES INCLUDE REVIEW AND APPROVAL BY MEMBERS OF THE BOARD

OF DIRECTORS, COMPARABILITY DATA FROM VARIOUS NATIONAL VETERANS

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

332211
09-04-13

Schedule O (Form 990 or 990-EZ) (2013)

Name of the organization

THE MISSION CONTINUES

Employer identification number

20-8742553

ORGANIZATIONS AND OTHER MIDWEST SOCIAL SERVICE ORGANIZATIONS, SALARYHISTORY, AND CONTEMPORANEOUS SUBSTANTIATION OF THE DELIBERATION ANDDECISION, THE ORGANIZATION DOES NOT CURRENTLY HAVE ANY KEY EMPLOYEES(DEFINED BY IRS AS INDIVIDUALS RECEIVING IN EXCESS OF \$150,000 OFREPORTABLE COMPENSATION).FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:AL, AR, CA, CT, FL, GA, IL, KY, MD, MA, ME, MN, MS, NH, NJ, NM, NY, OK, OR, RI, SC, TN, TX, UT, VAWV, WI, CO, DC, NC, ND, WAFORM 990, PART VI, SECTION C, LINE 19EXPLANATION THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OFINTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPONREQUEST.FORM 990, PART XII, LINE 2C:EXPLANATION THERE WERE NO CHANGES IN THE COMMITTEE'S PROCESS OFOVERSEEING THE AUDIT AND SELECTION OF AN INDEPENDENT ACCOUNTANT FROMPRIOR YEAR.



State of Missouri

Jason Kander, Secretary of State

Corporations Division
PO Box 778 / 600 W. Main St., Rm. 322
Jefferson City, MO 65102

COPY

File Number:

N00805096

Date Filed: 08/16/2013

Jason Kander

Secretary of State

Articles of Amendment for a Nonprofit Corporation

(Submit with filing fee of \$10.00)

The undersigned corporation, for the purpose of amending its articles of incorporation, hereby executes the following articles of amendment:

1. The name of corporation is The Center for Citizen Leadership N00805096
Charter Number
2. The amendment was adopted on 05/03/2013 month/day/year and changed article(s) (1) to state as follows
The name of the Corporation is The Mission Continues
3. If approval of members was not required, and the amendment(s) was approved by a sufficient vote of the board of directors or incorporators, check here and skip to number (5)
4. If approval by members was required, check here and provide the following information:
A. Number of memberships outstanding.
B. Complete either C or D:
C. Number of votes for and against the amendment(s) by class was:

Class	Number entitled to vote	Number voting for	Number voting against

D. Number of undisputed votes cast for the amendment(s) was sufficient for approval, and was:

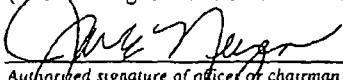
Class.	Number Voting undisputed

The number of votes cast in favor of the amendment(s) by each class was sufficient for approval by that class.

5. If approval of the amendment(s) by some person(s) other than the members, the board or the incorporators was required pursuant to section 355.606, check here to indicate that approval was obtained.

In Affirmation thereof, the facts stated above are true and correct:

(The undersigned understands that false statements made in this filing are subject to the penalties provided under Section 575.040, RSMo)


Authorized signature of officer or chairman of the board

Jack Neyens
Printed Name

Vice President
Title

8/13/2013
Date

Name and address to return filed document

Name Jack Neyens, The Mission Continues

Address: 1141 S. 7th St.

City, State, and Zip Code: St. Louis, MO 63104

State of Missouri
Amend/Restate - NonProfit 1 Page(s)



T1322816605

State of Missouri



Jason Kander
Secretary of State

CERTIFICATE OF AMENDMENT
OF A
MISSOURI NONPROFIT CORPORATION

WHEREAS,

The Mission Continues
N00805096

Formerly,

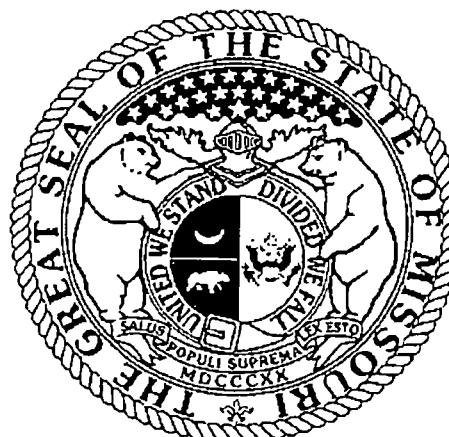
The Center for Citizen Leadership

a corporation organized under The Missouri Nonprofit Corporation Law has delivered to me its Articles of Amendment of its Articles of Incorporation and has in all respects complied with the requirements of law governing the Amendment of Articles of Incorporation under The Missouri Nonprofit Corporation Law, and that the Articles of Incorporation of said corporation are amended in accordance therewith

IN TESTIMONY WHEREOF, I hereunto set my hand and cause to be affixed the GREAT SEAL of the State of Missouri Done at the City of Jefferson, this 16th day of August, 2013

A handwritten signature of Jason Kander in black ink.

Secretary of State



COPY

**UNANIMOUS CONSENT OF THE DIRECTORS OF
THE CENTER FOR CITIZEN LEADERSHIP
REGARDING AMENDMENT OF ARTICLES OF INCORPORATION**

As of May 3, 2013

The undersigned, constituting all of the Directors of The Center for Citizen Leadership, a Missouri not-for-profit corporation, Charter Number N00805096 (the "Corporation"), acting without notice or a meeting, do hereby waive notice and the holding of a meeting, and consent to, vote in favor of, and adopt the following resolutions, such consent to have the same force and effect as a unanimous vote of the Directors at a meeting of the Board of Directors duly called and held on the above date.

WHEREAS, the Articles of Incorporation of the Corporation (the "Articles") were filed on March 22, 2007 with the Missouri Secretary of State, and

WHEREAS, Article (1) of the Articles provides that the name of the Corporation is The Center for Citizen Leadership; and

WHEREAS, on January 26, 2009, the Corporation registered the fictitious name "The Mission Continues" with the Missouri Secretary of State, and thereafter the Corporation has continually and consistently operated under the name The Mission Continues, and the Corporation is widely known as The Mission Continues to the public and to the Corporation's volunteers, donors, and partners, and

WHEREAS, the Directors have concluded that it will reduce confusion and expense and otherwise benefit the Corporation for it to change its name to The Mission Continues; and

WHEREAS, the Directors have concluded that it is in the best interests of the Corporation to amend the Articles to change the name of the Corporation to The Mission Continues and to authorize and direct the officers of the Corporation to take further action to complete the name change

NOW THEREFORE, BE IT RESOLVED that Article (1) of the Articles is hereby amended to read as follows.

The name of the Corporation is The Mission Continues.

RESOLVED, that the officers of the Corporation are hereby authorized and directed to file Articles of Amendment with the Missouri Secretary of State to reflect the above-referenced amendment of Article (1)

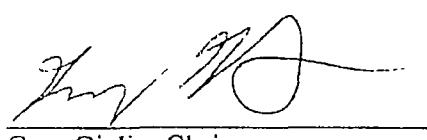
RESOLVED, that the officers of the Corporation are hereby authorized and directed to take all further necessary or desirable steps to complete the amendment of the Articles and the name change described herein, including, without limitation, the execution and delivery of any

COPY

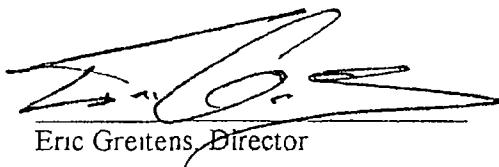
required notices or filings with the Missouri Secretary of State, the Internal Revenue Service, the United States Patent and Trademark Office, and any other appropriate local, state, or federal governmental authorities.

RESOLVED, that this Unanimous Consent may be executed in one or more counterparts. Any person shall be authorized to accept, and may rely upon, a PDF or facsimile transmission of this Unanimous Consent, as executed by any one or more of the undersigned, together or in counterparts

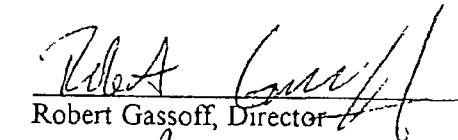
IN WITNESS WHEREOF, the undersigned have executed this Unanimous Consent as of the date first hereinabove stated



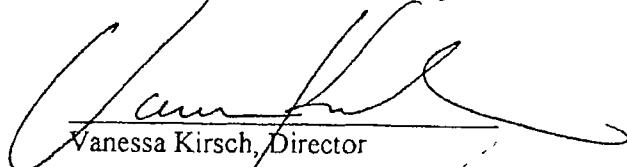
Gary Giglio, Chairperson



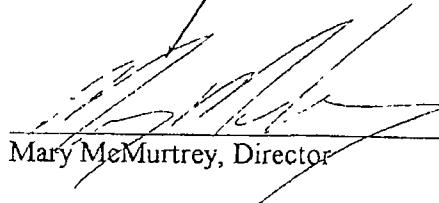
Eric Greitens, Director



Robert Gassoff, Director



Vanessa Kirsch, Director



Mary McMurtrey, Director

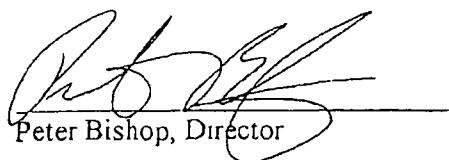


Tim Noonan, Director



David Gergen, Director

Peter Grieve, Director



Peter Bishop, Director

CONSTITUTING ALL OF THE DIRECTORS OF THE CORPORATION

✓ COPY

**UNANIMOUS CONSENT OF THE DIRECTORS OF
THE CENTER FOR CITIZEN LEADERSHIP
REGARDING AMENDMENT OF ARTICLES OF INCORPORATION**

As of May 3, 2013.

The undersigned, constituting all of the Directors of The Center for Citizen Leadership, a Missouri not-for-profit corporation, Charter Number N00805096 (the "Corporation"), acting without notice or a meeting, do hereby waive notice and the holding of a meeting, and consent to, vote in favor of, and adopt the following resolutions, such consent to have the same force and effect as a unanimous vote of the Directors at a meeting of the Board of Directors duly called and held on the above date.

WHEREAS, the Articles of Incorporation of the Corporation (the "Articles") were filed on March 22, 2007 with the Missouri Secretary of State, and

WHEREAS, Article (1) of the Articles provides that the name of the Corporation is The Center for Citizen Leadership, and

WHEREAS, on January 26, 2009, the Corporation registered the fictitious name "The Mission Continues" with the Missouri Secretary of State, and thereafter the Corporation has continually and consistently operated under the name The Mission Continues, and the Corporation is widely known as The Mission Continues to the public and to the Corporation's volunteers, donors, and partners, and

WHEREAS, the Directors have concluded that it will reduce confusion and expense and otherwise benefit the Corporation for it to change its name to The Mission Continues; and

WHEREAS, the Directors have concluded that it is in the best interests of the Corporation to amend the Articles to change the name of the Corporation to The Mission Continues and to authorize and direct the officers of the Corporation to take further action to complete the name change

NOW THEREFORE, BE IT RESOLVED that Article (1) of the Articles is hereby amended to read as follows.

The name of the Corporation is The Mission Continues

RESOLVED, that the officers of the Corporation are hereby authorized and directed to file Articles of Amendment with the Missouri Secretary of State to reflect the above-referenced amendment of Article (1)

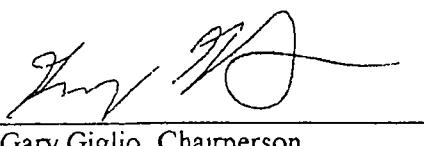
RESOLVED, that the officers of the Corporation are hereby authorized and directed to take all further necessary or desirable steps to complete the amendment of the Articles and the name change described herein, including, without limitation, the execution and delivery of any

COPY

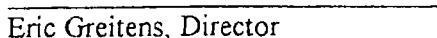
required notices or filings with the Missouri Secretary of State, the Internal Revenue Service, the United States Patent and Trademark Office, and any other appropriate local, state, or federal governmental authorities

RESOLVED, that this Unanimous Consent may be executed in one or more counterparts. Any person shall be authorized to accept, and may rely upon, a PDF or facsimile transmission of this Unanimous Consent, as executed by any one or more of the undersigned, together or in counterparts

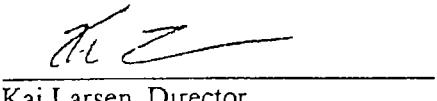
IN WITNESS WHEREOF, the undersigned have executed this Unanimous Consent as of the date first hereinabove stated



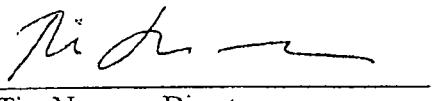
Gary Giglio, Chairperson



Eric Greitens, Director



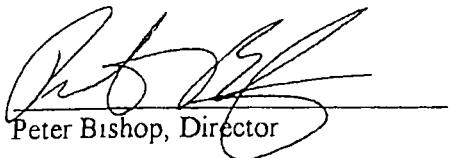
Kaj Larsen, Director



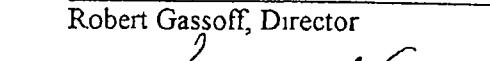
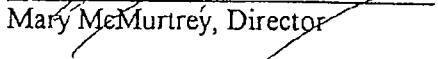
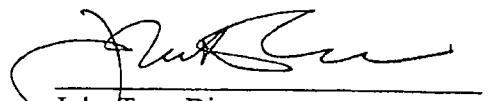
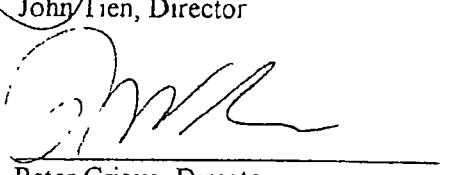
Tim Noonan, Director



David Gergen, Director



Peter Bishop, Director


Robert Gassoff, Director
Vanessa Kirsch, Director
Mary McMurtrey, Director
John Tien, Director
Peter Grieve, Director

CONSTITUTING ALL OF THE DIRECTORS OF THE CORPORATION