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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)

▶ 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](http://www.irs.gov/form990).

OMB No. 1545-0047

**2013**Open to Public  
Inspection**A** For the 2013 calendar year, or tax year beginning , 2013, and ending , 20**B** Check if applicable:

|                          |                     |
|--------------------------|---------------------|
| <input type="checkbox"/> | Address change      |
| <input 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

RONALD MCDONALD HOUSE CHARITIES, INC.

## Doing Business As

Number and street (or P.O. box if mail is not delivered to street address)

Room/suite

ONE KROC DRIVE

City or town, state or province, country, and ZIP or foreign postal code

OAK BROOK, IL 60523

**F** Name and address of principal officer:

J.C. Gonzalez-Mendez - One Kroc Drive, Oak Brook, IL 60523

**D** Employer identification number

36-2934689

**E** Telephone number

(630) 623-7048

**G** Gross receipts \$ 45,544,050**H(a)** Is this a group return for subordinates? Yes ☒ No ☐**H(b)** Are all subordinates included? Yes ☒ No ☐

If "No," attach a list (see instructions)

**H(c)** Group exemption number ▶**I** Tax-exempt status: ☒ 501(c)(3) ☐ 501(c) ( ) ◀ (Insert no.) 4947(a)(1) or 527**J** Website: ▶ [www.rmhc.org](http://www.rmhc.org)**K** Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶ **L** Year of formation: 1977 **M** State of legal domicile IL**Part I** Summary

|                                                                         |                                                                                                                                                  |                                                                                                           |              |
|-------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|--------------|
| Activities & Governance                                                 | <b>1</b> Briefly describe the organization's mission or most significant activities:                                                             | Mission: To create, find and support programs that directly improve the health and well-being of children |              |
|                                                                         | <b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets. |                                                                                                           |              |
|                                                                         | <b>3</b> Number of voting members of the governing body (Part VI, line 1a)                                                                       | 3                                                                                                         | 30           |
|                                                                         | <b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)                                                           | 4                                                                                                         | 30           |
|                                                                         | <b>5</b> Total number of individuals employed in calendar year 2013 (Part V, line 2a)                                                            | 5                                                                                                         | 0            |
|                                                                         | <b>6</b> Total number of volunteers (estimate if necessary)                                                                                      | 6                                                                                                         | 100          |
|                                                                         | <b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12                                                                   | 7a                                                                                                        | 6,455        |
| <b>b</b> Net unrelated business taxable income from Form 990-T, line 34 | 7b                                                                                                                                               | 0                                                                                                         |              |
| Revenue                                                                 | <b>8</b> Contributions and grants (Part VIII, line 1h)                                                                                           | Prior Year                                                                                                | Current Year |
|                                                                         | <b>9</b> Program service revenue (Part VIII, line 2g)                                                                                            | 31,290,873                                                                                                | 30,943,116   |
|                                                                         | <b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)                                                                          | 95,050                                                                                                    | 509,619      |
|                                                                         | <b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)                                                               | 3,021,804                                                                                                 | 6,076,880    |
|                                                                         | <b>12</b> Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)                                                     | (31,376)                                                                                                  | 41,688       |
| Expenses                                                                | <b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3)                                                                       | 34,376,351                                                                                                | 37,571,303   |
|                                                                         | <b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)                                                                          | 22,440,142                                                                                                | 23,129,869   |
|                                                                         | <b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)                                                      | 0                                                                                                         | 0            |
|                                                                         | <b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)                                                                         | 0                                                                                                         | 0            |
|                                                                         | <b>b</b> Total fundraising expenses (Part IX, column (D), line 25) ▶ 2,869,304                                                                   | 2,110                                                                                                     | 4,369        |
|                                                                         | <b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-14e)                                                                           | 7,310,688                                                                                                 | 8,141,873    |
|                                                                         | <b>18</b> Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)                                                              | 29,752,940                                                                                                | 31,276,111   |
| <b>19</b> Revenue less expenses. Subtract line 18 from line 12          | 4,623,411                                                                                                                                        | 6,295,192                                                                                                 |              |
| Net Assets or Fund Balances                                             | <b>20</b> Total assets (Part X, line 16)                                                                                                         | Beginning of Current Year                                                                                 | End of Year  |
|                                                                         | <b>21</b> Total liabilities (Part X, line 26)                                                                                                    | 131,500,478                                                                                               | 147,358,362  |
|                                                                         | <b>22</b> Net assets or fund balances. Subtract line 21 from line 20                                                                             | 9,836,962                                                                                                 | 12,506,577   |
|                                                                         |                                                                                                                                                  | 121,663,516                                                                                               | 134,851,785  |

**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

|                  |                              |        |
|------------------|------------------------------|--------|
| <b>Sign Here</b> | Signature of officer         | Date   |
|                  | Spero Droulias               | 5/9/14 |
|                  | Type or print name and title |        |
|                  | Spero Droulias, Treasurer    |        |

|                               |                                                                         |                          |          |                                                 |           |
|-------------------------------|-------------------------------------------------------------------------|--------------------------|----------|-------------------------------------------------|-----------|
| <b>Paid Preparer Use Only</b> | Print/Type preparer's name                                              | Preparer's signature     | Date     | Check <input type="checkbox"/> if self-employed | PTIN      |
|                               | Angela M. Moore                                                         | Angela M. Moore          | 05/01/14 |                                                 | P00244342 |
|                               | Firm's name ▶ Ernst & Young, LLP                                        | Firm's EIN ▶ 34-6565596  |          |                                                 |           |
|                               | Firm's address ▶ 111 Monument Circle, Ste. 4000, Indianapolis, IN 46204 | Phone no. (317) 681-7000 |          |                                                 |           |

May the IRS discuss this return with the preparer shown above? (see instructions) Yes ☒ No ☐

For Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2013)

SCANNED JUN 23 2014

**Part III** Statement of Program Service AccomplishmentsCheck if Schedule O contains a response or note to any line in this Part III ☒ **X****1** Briefly describe the organization's mission

To create, find and support programs that directly improve the health and well-being of children

**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 O

**4** Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported**4a** (Code ) (Expenses \$23,129,670 including grants of \$ 18,414,186 ) (Revenue \$ 509,264 )

Support of Local Chapters worldwide: In 2013, Ronald McDonald House Charities, Inc. (RMHC) continued its commitment to strengthen its global system of independently incorporated Local RMHC Chapters around the world by providing capacity building grants and programmatic support to help each Local Chapter achieve a high level of excellence in management and operations, and to help them effectively and efficiently fulfill their mission. In 2013, these activities included: resource development; sharing best practices to improve all aspects of the organization; strategic planning; ongoing training of Local Boards, staff and volunteers to encourage excellence in program, fundraising, and administrative practices; facilitation of networking opportunities; and developing local fundraising capabilities to grow resources, thereby meeting new and (continued in Schedule O)

**4b** (Code ) (Expenses \$ 3,944,416 including grants of \$ 3,925,143 ) (Revenue \$ 0 )

Grants and other program services to improve the health of children: One of the most critical needs facing children worldwide is access to basic healthcare services. RMHC grants provided the resources for programs that give kids opportunities to grow physically and emotionally. Services supported by the grants included preventive and therapeutic programs, including pre-and-post natal care, immunizations, screening tests, physical exams, health education, applied research, accessible medical, surgical, and dental care, and general counseling and family support.

**4c** (Code ) (Expenses \$ 417,016 including grants of \$ 415,540 ) (Revenue \$ 0 )

Grants and other program services to improve the well-being of children: Today's children deal with a number of challenges and troubling issues in their daily lives. RMHC grants supported programs that ranged from child hunger to child homelessness. The grants support educational programs and enhance programs that enrich the lives of children by broadening their horizons through educational, cultural, and recreational experiences.

**4d** Other program services (Describe in Schedule O )

(Expenses \$ 375,000 including grants of \$ 375,000 ) (Revenue \$ 0 )

**4e** Total program service expenses ▶ 27,866,102

**Part IV Checklist of Required Schedules**

|                                                                                                                                                                                                                                                                                                                              | Yes          | No |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|----|
| <b>1</b> Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A . . . . .                                                                                                                                                                         | <b>1</b> X   |    |
| <b>2</b> Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? . . . . .                                                                                                                                                                                                         | <b>2</b> X   |    |
| <b>3</b> 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 . . . . .                                                                                                                      | <b>3</b>     | X  |
| <b>4</b> <b>Section 501(c)(3) organizations.</b> 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 . . . . .                                                                                                       | <b>4</b> X   |    |
| <b>5</b> 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 . . . . .                                                                               | <b>5</b>     | X  |
| <b>6</b> 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 . . . . .                                                    | <b>6</b>     | X  |
| <b>7</b> 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 . . . . .                                                                                            | <b>7</b>     | X  |
| <b>8</b> Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III . . . . .                                                                                                                                                         | <b>8</b>     | X  |
| <b>9</b> 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 . . . . .            | <b>9</b>     | X  |
| <b>10</b> 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 . . . . .                                                                                                     | <b>10</b>    | X  |
| <b>11</b> 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                                                                                                                                                                     |              |    |
| <b>a</b> Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI . . . . .                                                                                                                                                                       | <b>11a</b> X |    |
| <b>b</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 . . . . .                                                                                                     | <b>11b</b> X |    |
| <b>c</b> Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII . . . . .                                                                                                     | <b>11c</b>   | X  |
| <b>d</b> 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 . . . . .                                                                                                                      | <b>11d</b>   | X  |
| <b>e</b> Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X . . . . .                                                                                                                                                                                     | <b>11e</b> X |    |
| <b>f</b> 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 . . . . .                                                            | <b>11f</b> X |    |
| <b>12a</b> Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII . . . . .                                                                                                                                                        | <b>12a</b> X |    |
| <b>b</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 . . . . .                                                                           | <b>12b</b>   | X  |
| <b>13</b> Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E . . . . .                                                                                                                                                                                                        | <b>13</b>    | X  |
| <b>14a</b> Did the organization maintain an office, employees, or agents outside of the United States? . . . . .                                                                                                                                                                                                             | <b>14a</b>   | X  |
| <b>b</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 . . . . . | <b>14b</b> X |    |
| <b>15</b> 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 . . . . .                                                                                                           | <b>15</b> X  |    |
| <b>16</b> 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 . . . . .                                                                                                     | <b>16</b>    | X  |
| <b>17</b> Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) . . . . .                                                                                            | <b>17</b>    | X  |
| <b>18</b> 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 . . . . .                                                                                                                           | <b>18</b> X  |    |
| <b>19</b> 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 . . . . .                                                                                                                                                     | <b>19</b>    | X  |
| <b>20a</b> Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H . . . . .                                                                                                                                                                                                             | <b>20a</b>   | X  |
| <b>b</b> If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? . . . . .                                                                                                                                                                                              | <b>20b</b>   |    |

**Part IV Checklist of Required Schedules (continued)**

|                                                                                                                                                                                                                                                                                                                                     | Yes         | No |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|----|
| <b>21</b> 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? <i>If "Yes," complete Schedule I, Parts I and II . . . . .</i>                                                                                                     | <b>21</b> X |    |
| <b>22</b> 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? <i>If "Yes," complete Schedule I, Parts I and III . . . . .</i>                                                                                                           | <b>22</b> X |    |
| <b>23</b> 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? <i>If "Yes," complete Schedule J . . . . .</i>                                                     | <b>23</b>   | X  |
| <b>24 a</b> 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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a. . . . .</i>                          | <b>24a</b>  | X  |
| <b>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . . . .                                                                                                                                                                                                                | <b>24b</b>  |    |
| <b>c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? . . . . .                                                                                                                                                                       | <b>24c</b>  |    |
| <b>d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . . . .                                                                                                                                                                                                          | <b>24d</b>  |    |
| <b>25 a</b> <b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I. . . . .</i>                                                                                                    | <b>25a</b>  | X  |
| <b>b</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? <i>If "Yes," complete Schedule L, Part I. . . . .</i>                                        | <b>25b</b>  | X  |
| <b>26</b> Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payable to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II. . . . .                                            | <b>26</b>   | X  |
| <b>27</b> 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? <i>If "Yes," complete Schedule L, Part III. . . . .</i> | <b>27</b>   | X  |
| <b>28</b> 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)                                                                                                                              |             |    |
| <b>a</b> A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV. . . . .</i>                                                                                                                                                                                                    | <b>28a</b>  | X  |
| <b>b</b> A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV. . . . .</i>                                                                                                                                                                                 | <b>28b</b>  | X  |
| <b>c</b> 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? <i>If "Yes," complete Schedule L, Part IV. . . . .</i>                                                                                     | <b>28c</b>  | X  |
| <b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M . . . . .</i>                                                                                                                                                                                                 | <b>29</b> X |    |
| <b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M . . . . .</i>                                                                                                                                 | <b>30</b>   | X  |
| <b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I. . . . .</i>                                                                                                                                                                                        | <b>31</b>   | X  |
| <b>32</b> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II. . . . .</i>                                                                                                                                                                      | <b>32</b>   | X  |
| <b>33</b> Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I. . . . .</i>                                                                                                                      | <b>33</b>   | X  |
| <b>34</b> Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 . . . . .</i>                                                                                                                                                                 | <b>34</b>   | X  |
| <b>35 a</b> Did the organization have a controlled entity within the meaning of section 512(b)(13)? . . . . .                                                                                                                                                                                                                       | <b>35a</b>  | X  |
| <b>b</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)? <i>If "Yes," complete Schedule R, Part V, line 2. . . . .</i>                                                                                          | <b>35b</b>  |    |
| <b>36</b> <b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2 . . . . .</i>                                                                                                                          | <b>36</b>   | X  |
| <b>37</b> 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? <i>If "Yes," complete Schedule R, Part VI. . . . .</i>                                                                             | <b>37</b>   | X  |
| <b>38</b> Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O . . . . .                                                                                                                             | <b>38</b> X |    |

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

|            |                                                                                                                                                                                                                                                                                       | Yes | No |
|------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|
| <b>1a</b>  | Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable. <b>1a</b> 49                                                                                                                                                                                            |     |    |
| <b>b</b>   | Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable. <b>1b</b> 0                                                                                                                                                                                          |     |    |
| <b>c</b>   | Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? <b>1c</b> X                                                                                                                  | X   |    |
| <b>2a</b>  | 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. <b>2a</b> 0                                                                                            |     |    |
| <b>b</b>   | If at least one is reported on line 2a, did the organization file all required federal employment tax returns?<br><b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions). <b>2b</b>                                         |     |    |
| <b>3a</b>  | Did the organization have unrelated business gross income of \$1,000 or more during the year? <b>3a</b> X                                                                                                                                                                             | X   |    |
| <b>b</b>   | If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O. <b>3b</b> X                                                                                                                                                              | X   |    |
| <b>4a</b>  | 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)? <b>4a</b>                                  |     | X  |
| <b>b</b>   | If "Yes," enter the name of the foreign country <b>▶</b> _____<br>See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. <b>4b</b>                                                                                            |     |    |
| <b>5a</b>  | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? <b>5a</b>                                                                                                                                                                       |     | X  |
| <b>b</b>   | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? <b>5b</b>                                                                                                                                                            |     | X  |
| <b>c</b>   | If "Yes" to line 5a or 5b, did the organization file Form 8886-T? <b>5c</b>                                                                                                                                                                                                           |     |    |
| <b>6a</b>  | 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? <b>6a</b>                                                                     |     | X  |
| <b>b</b>   | If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? <b>6b</b>                                                                                                                               |     |    |
| <b>7</b>   | <b>Organizations that may receive deductible contributions under section 170(c).</b>                                                                                                                                                                                                  |     |    |
| <b>a</b>   | 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? <b>7a</b> X                                                                                                                           | X   |    |
| <b>b</b>   | If "Yes," did the organization notify the donor of the value of the goods or services provided? <b>7b</b> X                                                                                                                                                                           | X   |    |
| <b>c</b>   | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? <b>7c</b>                                                                                                                                        |     | X  |
| <b>d</b>   | If "Yes," indicate the number of Forms 8282 filed during the year. <b>7d</b>                                                                                                                                                                                                          |     |    |
| <b>e</b>   | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? <b>7e</b>                                                                                                                                                             |     | X  |
| <b>f</b>   | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? <b>7f</b>                                                                                                                                                                |     | X  |
| <b>g</b>   | If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? <b>7g</b>                                                                                                                                            |     |    |
| <b>h</b>   | If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? <b>7h</b>                                                                                                                                          |     |    |
| <b>8</b>   | <b>Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? <b>8</b> |     |    |
| <b>9</b>   | <b>Sponsoring organizations maintaining donor advised funds.</b>                                                                                                                                                                                                                      |     |    |
| <b>a</b>   | Did the organization make any taxable distributions under section 4966? <b>9a</b>                                                                                                                                                                                                     |     |    |
| <b>b</b>   | Did the organization make a distribution to a donor, donor advisor, or related person? <b>9b</b>                                                                                                                                                                                      |     |    |
| <b>10</b>  | <b>Section 501(c)(7) organizations.</b> Enter                                                                                                                                                                                                                                         |     |    |
| <b>a</b>   | Initiation fees and capital contributions included on Part VIII, line 12. <b>10a</b>                                                                                                                                                                                                  |     |    |
| <b>b</b>   | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities. <b>10b</b>                                                                                                                                                                               |     |    |
| <b>11</b>  | <b>Section 501(c)(12) organizations.</b> Enter                                                                                                                                                                                                                                        |     |    |
| <b>a</b>   | Gross income from members or shareholders. <b>11a</b>                                                                                                                                                                                                                                 |     |    |
| <b>b</b>   | Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them). <b>11b</b>                                                                                                                                               |     |    |
| <b>12a</b> | <b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041? <b>12a</b>                                                                                                                                                          |     |    |
| <b>b</b>   | If "Yes," enter the amount of tax-exempt interest received or accrued during the year. <b>12b</b>                                                                                                                                                                                     |     |    |
| <b>13</b>  | <b>Section 501(c)(29) qualified nonprofit health insurance issuers.</b>                                                                                                                                                                                                               |     |    |
| <b>a</b>   | Is the organization licensed to issue qualified health plans in more than one state?<br><b>Note.</b> See the instructions for additional information the organization must report on Schedule O. <b>13a</b>                                                                           |     |    |
| <b>b</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. <b>13b</b>                                                                                                                 |     |    |
| <b>c</b>   | Enter the amount of reserves on hand. <b>13c</b>                                                                                                                                                                                                                                      |     |    |
| <b>14a</b> | Did the organization receive any payments for indoor tanning services during the tax year? <b>14a</b>                                                                                                                                                                                 |     | X  |
| <b>b</b>   | If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O. <b>14b</b>                                                                                                                                                                 |     |    |

**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 ☒ **X****Section A. Governing Body and Management**

|                                                                                                                                                                                                                                   | Yes         | No |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|----|
| <b>1a</b> Enter the number of voting members of the governing body at the end of the tax year . . . . .                                                                                                                           | 30          |    |
| If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O                  |             |    |
| <b>1b</b> Enter the number of voting members included in line 1a, above, who are independent . . . . .                                                                                                                            | 30          |    |
| <b>2</b> 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? . . . . .                                          | <b>2</b> X  |    |
| <b>3</b> 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? . . | <b>3</b>    | X  |
| <b>4</b> Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? . . . . .                                                                                               | <b>4</b>    | X  |
| <b>5</b> Did the organization become aware during the year of a significant diversion of the organization's assets? . . . .                                                                                                       | <b>5</b>    | X  |
| <b>6</b> Did the organization have members or stockholders? . . . . .                                                                                                                                                             | <b>6</b>    | X  |
| <b>7a</b> 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>7a</b> X |    |
| <b>b</b> Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? . . . . .                                                      | <b>7b</b>   | X  |
| <b>8</b> Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following                                                                                         |             |    |
| <b>a</b> The governing body? . . . . .                                                                                                                                                                                            | <b>8a</b> X |    |
| <b>b</b> Each committee with authority to act on behalf of the governing body? . . . . .                                                                                                                                          | <b>8b</b> X |    |
| <b>9</b> 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 . . . . .   | <b>9</b>    | X  |

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

|                                                                                                                                                                                                                                                                                                                 | Yes          | No |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|----|
| <b>10a</b> Did the organization have local chapters, branches, or affiliates? . . . . .                                                                                                                                                                                                                         | <b>10a</b>   | X  |
| <b>b</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? . .                                                                         | <b>10b</b>   |    |
| <b>11a</b> Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? .                                                                                                                                                                        | <b>11a</b> X |    |
| <b>b</b> Describe in Schedule O the process, if any, used by the organization to review this Form 990 . . . . .                                                                                                                                                                                                 | <b>12a</b> X |    |
| <b>12a</b> Did the organization have a written conflict of interest policy? If "No," go to line 13 . . . . .                                                                                                                                                                                                    | <b>12a</b> X |    |
| <b>b</b> Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? . . . . .                                                                                                                                                          | <b>12b</b> X |    |
| <b>c</b> Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done . . . . .                                                                                                                                           | <b>12c</b> X |    |
| <b>13</b> Did the organization have a written whistleblower policy? . . . . .                                                                                                                                                                                                                                   | <b>13</b> X  |    |
| <b>14</b> Did the organization have a written document retention and destruction policy? . . . . .                                                                                                                                                                                                              | <b>14</b> X  |    |
| <b>15</b> 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?                                                                                  |              |    |
| <b>a</b> The organization's CEO, Executive Director, or top management official . . . . .                                                                                                                                                                                                                       | <b>15a</b>   | X  |
| <b>b</b> Other officers or key employees of the organization . . . . .                                                                                                                                                                                                                                          | <b>15b</b>   | X  |
| If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)                                                                                                                                                                                                                              |              |    |
| <b>16a</b> 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>16a</b> X |    |
| <b>b</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? . . . . . | <b>16b</b> X |    |

**Section C. Disclosure**

**17** List the states with which a copy of this Form 990 is required to be filed **See Schedule G, Part I, Line 3**

**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 **Stacey Bifero, One Kroc Drive, Oak Brook, IL 60523 (630) 623-7048**

**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)<br>Name and Title                                | (B)<br>Average hours per week (list any hours for related organizations below dotted line) | (C)<br>Position<br>(do not check more than one box, unless person is both an officer and a director/trustee) |                       |         |              |                              |        | (D)<br>Reportable compensation from the organization (W-2/1099-MISC) | (E)<br>Reportable compensation from related organizations (W-2/1099-MISC) | (F)<br>Estimated amount of other compensation from the organization and related organizations |
|------------------------------------------------------|--------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------|-----------------------|---------|--------------|------------------------------|--------|----------------------------------------------------------------------|---------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------|
|                                                      |                                                                                            | Individual trustee or director                                                                               | Institutional trustee | Officer | Key employee | Highest compensated employee | Former |                                                                      |                                                                           |                                                                                               |
| (1) J.C. Gonzalez-Mendez<br>Trustee, President & CEO | 12                                                                                         | X                                                                                                            |                       | X       |              |                              |        | 0                                                                    | 0                                                                         | 0                                                                                             |
| (2) Aggie Dentice<br>Trustee                         | 1                                                                                          | X                                                                                                            |                       |         |              |                              |        | 0                                                                    | 0                                                                         | 0                                                                                             |
| (3) Linda Dunham<br>Trustee, Chairperson             | 1                                                                                          | X                                                                                                            |                       | X       |              |                              |        | 0                                                                    | 0                                                                         | 0                                                                                             |
| (4) Wai-Ling Eng<br>Trustee                          | 1                                                                                          | X                                                                                                            |                       |         |              |                              |        | 0                                                                    | 0                                                                         | 0                                                                                             |
| (5) Jan Fields<br>Trustee                            | 1                                                                                          | X                                                                                                            |                       |         |              |                              |        | 0                                                                    | 0                                                                         | 0                                                                                             |
| (6) Ginger Hardage<br>Trustee                        | 1                                                                                          | X                                                                                                            |                       |         |              |                              |        | 0                                                                    | 0                                                                         | 0                                                                                             |
| (7) Alan Harris, MD<br>Trustee                       | 1                                                                                          | X                                                                                                            |                       |         |              |                              |        | 0                                                                    | 0                                                                         | 0                                                                                             |
| (8) David C. Herman, MD<br>Trustee                   | 1                                                                                          | X                                                                                                            |                       |         |              |                              |        | 0                                                                    | 0                                                                         | 0                                                                                             |
| (9) Fred Huebner<br>Trustee                          | 1                                                                                          | X                                                                                                            |                       |         |              |                              |        | 0                                                                    | 0                                                                         | 0                                                                                             |
| (10) Donna Hyland<br>Trustee                         | 1                                                                                          | X                                                                                                            |                       |         |              |                              |        | 0                                                                    | 0                                                                         | 0                                                                                             |
| (11) Muhtar Kent<br>Trustee                          | 1                                                                                          | X                                                                                                            |                       |         |              |                              |        | 0                                                                    | 0                                                                         | 0                                                                                             |
| (12) Sheldon Lavin<br>Trustee                        | 1                                                                                          | X                                                                                                            |                       |         |              |                              |        | 0                                                                    | 0                                                                         | 0                                                                                             |
| (13) Robert Lawrence<br>Trustee                      | 1                                                                                          | X                                                                                                            |                       |         |              |                              |        | 0                                                                    | 0                                                                         | 0                                                                                             |
| (14) Mats Lederhausen<br>Trustee                     | 1                                                                                          | X                                                                                                            |                       |         |              |                              |        | 0                                                                    | 0                                                                         | 0                                                                                             |

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

| (A)<br>Name and title                                          | (B)<br>Average hours per week (list any hours for related organizations below dotted line) | (C)<br>Position<br>(do not check more than one box, unless person is both an officer and a director/trustee) |                       |         |              |                              |        | (D)<br>Reportable compensation from the organization (W-2/1099-MISC) | (E)<br>Reportable compensation from related organizations (W-2/1099-MISC) | (F)<br>Estimated amount of other compensation from the organization and related organizations |
|----------------------------------------------------------------|--------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------|-----------------------|---------|--------------|------------------------------|--------|----------------------------------------------------------------------|---------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------|
|                                                                |                                                                                            | Individual trustee or director                                                                               | Institutional trustee | Officer | Key employee | Highest compensated employee | Former |                                                                      |                                                                           |                                                                                               |
| (15) Herbert Lotman<br>Trustee                                 | 1                                                                                          | X                                                                                                            |                       |         |              |                              |        | 0                                                                    | 0                                                                         | 0                                                                                             |
| (16) Donald G. Lubin<br>Trustee, Vice President                | 1                                                                                          | X                                                                                                            |                       | X       |              |                              |        | 0                                                                    | 0                                                                         | 0                                                                                             |
| (17) Andrew J. McKenna<br>Trustee                              | 1                                                                                          | X                                                                                                            |                       |         |              |                              |        | 0                                                                    | 0                                                                         | 0                                                                                             |
| (18) Theodore Perlman<br>Trustee                               | 1                                                                                          | X                                                                                                            |                       |         |              |                              |        | 0                                                                    | 0                                                                         | 0                                                                                             |
| (19) David Poplack, MD<br>Trustee                              | 1                                                                                          | X                                                                                                            |                       |         |              |                              |        | 0                                                                    | 0                                                                         | 0                                                                                             |
| (20) Steven M. Ramirez<br>Trustee                              | 1                                                                                          | X                                                                                                            |                       |         |              |                              |        | 0                                                                    | 0                                                                         | 0                                                                                             |
| (21) J. Christopher Reyes<br>Trustee                           | 1                                                                                          | X                                                                                                            |                       |         |              |                              |        | 0                                                                    | 0                                                                         | 0                                                                                             |
| (22) Michael D. Richard<br>Trustee, Vice President             | 1                                                                                          | X                                                                                                            |                       | X       |              |                              |        | 0                                                                    | 0                                                                         | 0                                                                                             |
| (23) Alex Rodriguez<br>Trustee                                 | 1                                                                                          | X                                                                                                            |                       |         |              |                              |        | 0                                                                    | 0                                                                         | 0                                                                                             |
| (24) Eduardo Sanchez<br>Trustee                                | 1                                                                                          | X                                                                                                            |                       |         |              |                              |        | 0                                                                    | 0                                                                         | 0                                                                                             |
| (25) Stuart E. Siegel, MD<br>Trustee                           | 1                                                                                          | X                                                                                                            |                       |         |              |                              |        | 0                                                                    | 0                                                                         | 0                                                                                             |
| <b>1b Sub-total</b>                                            |                                                                                            |                                                                                                              |                       |         |              |                              |        | 0                                                                    | 0                                                                         | 0                                                                                             |
| <b>c Total from continuation sheets to Part VII, Section A</b> |                                                                                            |                                                                                                              |                       |         |              |                              |        | 0                                                                    | 0                                                                         | 0                                                                                             |
| <b>d Total (add lines 1b and 1c)</b>                           |                                                                                            |                                                                                                              |                       |         |              |                              |        | 0                                                                    | 0                                                                         | 0                                                                                             |

**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 **0**

- 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. **X**
- 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. **X**
- 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. **X**

|   | Yes | No |
|---|-----|----|
| 3 |     | X  |
| 4 |     | X  |
| 5 |     | X  |

**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.

| (A)<br>Name and business address                                  | (B)<br>Description of services | (C)<br>Compensation |
|-------------------------------------------------------------------|--------------------------------|---------------------|
| DDB Chicago Inc., 200 East Randolph, Chicago, IL                  | Advertising/Website            | 801,307             |
| Reserve Advisors, Inc., 735 N Water St., Ste. 175, Milwaukee, WI  | Property Reserve Studies       | 568,600             |
| Siffermann Group, LLC, 235-A Burlington Ave, Clarendon Hills, IL  | Consulting                     | 233,427             |
| JHud Productions, Inc., 234 W 35th St FL4, New York, NY           | Fundraiser Entertainment       | 200,000             |
| Intl Scholarship & Tuition Svcs, 231 Public Sq, #201 Franklin, TN | Application Processing         | 154,000             |

- 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 **10**

**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)<br>Name and Title                                        | (B)<br>Average hours per week (list any hours for related organizations below dotted line) | (C)<br>Position<br>(do not check more than one box, unless person is both an officer and a director/trustee) |                       |         |              |                              |        | (D)<br>Reportable compensation from the organization (W-2/1099-MISC) | (E)<br>Reportable compensation from related organizations (W-2/1099-MISC) | (F)<br>Estimated amount of other compensation from the organization and related organizations |
|--------------------------------------------------------------|--------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------|-----------------------|---------|--------------|------------------------------|--------|----------------------------------------------------------------------|---------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------|
|                                                              |                                                                                            | Individual trustee or director                                                                               | Institutional trustee | Officer | Key employee | Highest compensated employee | Former |                                                                      |                                                                           |                                                                                               |
| 26(1) Gay Simplot<br>Trustee                                 | 1                                                                                          | X                                                                                                            |                       |         |              |                              |        | 0                                                                    | 0                                                                         | 0                                                                                             |
| 27(2) James A. Skinner<br>Trustee                            | 1                                                                                          | X                                                                                                            |                       |         |              |                              |        | 0                                                                    | 0                                                                         | 0                                                                                             |
| 28(3) Wayne Stingley<br>Trustee                              | 1                                                                                          | X                                                                                                            |                       |         |              |                              |        | 0                                                                    | 0                                                                         | 0                                                                                             |
| 29(4) Donald Thompson<br>Trustee                             | 1                                                                                          | X                                                                                                            |                       |         |              |                              |        | 0                                                                    | 0                                                                         | 0                                                                                             |
| 30(5) James D. Watkins<br>Trustee, Vice President            | 1                                                                                          | X                                                                                                            |                       | X       |              |                              |        | 0                                                                    | 0                                                                         | 0                                                                                             |
| 31(6) Michael D. Irgang<br>Treasurer                         | 3                                                                                          |                                                                                                              |                       | X       |              |                              |        | 0                                                                    | 0                                                                         | 0                                                                                             |
| 32(7) Adele Jamieson<br>Secretary                            | 6                                                                                          |                                                                                                              |                       | X       |              |                              |        | 0                                                                    | 0                                                                         | 0                                                                                             |
| 33(8) Sheila Musolino<br>VP & COO starting 4/30              | 28                                                                                         |                                                                                                              |                       | X       |              |                              |        | 0                                                                    | 0                                                                         | 0                                                                                             |
| 34(9) Martin J. Coyne, Jr.<br>Trustee, Pres & CEO until 2/28 | 24                                                                                         | X                                                                                                            |                       | X       |              |                              |        | 0                                                                    | 0                                                                         | 0                                                                                             |
| (10)                                                         |                                                                                            |                                                                                                              |                       |         |              |                              |        |                                                                      |                                                                           |                                                                                               |
| (11)                                                         |                                                                                            |                                                                                                              |                       |         |              |                              |        |                                                                      |                                                                           |                                                                                               |
| (12)                                                         |                                                                                            |                                                                                                              |                       |         |              |                              |        |                                                                      |                                                                           |                                                                                               |
| (13)                                                         |                                                                                            |                                                                                                              |                       |         |              |                              |        |                                                                      |                                                                           |                                                                                               |
| (14)                                                         |                                                                                            |                                                                                                              |                       |         |              |                              |        |                                                                      |                                                                           |                                                                                               |

**Part VIII Statement of Revenue**Check if Schedule O contains a response or note to any line in this Part VIII ☐

|                                                                   |                                                                    |                                                                                                                                               |                                                                                           | (A)<br>Total revenue | (B)<br>Related or<br>exempt<br>function<br>revenue | (C)<br>Unrelated<br>business<br>revenue | (D)<br>Revenue<br>excluded from tax<br>under sections<br>512-514 |
|-------------------------------------------------------------------|--------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------|----------------------|----------------------------------------------------|-----------------------------------------|------------------------------------------------------------------|
| <b>Contributions, Gifts, Grants<br/>and Other Similar Amounts</b> | <b>1a</b>                                                          | Federated campaigns . . . . .                                                                                                                 | <b>1a</b> 670,424                                                                         |                      |                                                    |                                         |                                                                  |
|                                                                   | <b>b</b>                                                           | Membership dues . . . . .                                                                                                                     | <b>1b</b> 0                                                                               |                      |                                                    |                                         |                                                                  |
|                                                                   | <b>c</b>                                                           | Fundraising events . . . . .                                                                                                                  | <b>1c</b> 4,338,587                                                                       |                      |                                                    |                                         |                                                                  |
|                                                                   | <b>d</b>                                                           | Related organizations . . . . .                                                                                                               | <b>1d</b> 0                                                                               |                      |                                                    |                                         |                                                                  |
|                                                                   | <b>e</b>                                                           | Government grants (contributions) . . . . .                                                                                                   | <b>1e</b> 0                                                                               |                      |                                                    |                                         |                                                                  |
|                                                                   | <b>f</b>                                                           | All other contributions, gifts, grants,<br>and similar amounts not included above . . . . .                                                   | <b>1f</b> 25,934,105                                                                      |                      |                                                    |                                         |                                                                  |
|                                                                   | <b>g</b>                                                           | Noncash contributions included in lines 1a-1f \$ . . . . .                                                                                    | 757,818                                                                                   |                      |                                                    |                                         |                                                                  |
|                                                                   | <b>h</b>                                                           | <b>Total.</b> Add lines 1a-1f . . . . .                                                                                                       |                                                                                           | 30,943,116           |                                                    |                                         |                                                                  |
| <b>Program Service Revenue</b>                                    | <b>2a</b>                                                          | Local Chapter Conference Fees                                                                                                                 | Business Code 611430                                                                      | 509,619              | 509,619                                            | 0                                       | 0                                                                |
|                                                                   | <b>b</b>                                                           |                                                                                                                                               |                                                                                           | 0                    | 0                                                  | 0                                       | 0                                                                |
|                                                                   | <b>c</b>                                                           |                                                                                                                                               |                                                                                           | 0                    | 0                                                  | 0                                       | 0                                                                |
|                                                                   | <b>d</b>                                                           |                                                                                                                                               |                                                                                           | 0                    | 0                                                  | 0                                       | 0                                                                |
|                                                                   | <b>e</b>                                                           |                                                                                                                                               |                                                                                           | 0                    | 0                                                  | 0                                       | 0                                                                |
|                                                                   | <b>f</b>                                                           | All other program service revenue . . . . .                                                                                                   |                                                                                           | 0                    | 0                                                  | 0                                       | 0                                                                |
|                                                                   | <b>g</b>                                                           | <b>Total.</b> Add lines 2a-2f . . . . .                                                                                                       |                                                                                           | 509,619              |                                                    |                                         |                                                                  |
|                                                                   | <b>Other Revenue</b>                                               | <b>3</b>                                                                                                                                      | Investment income (including dividends, interest, and<br>other similar amounts) . . . . . |                      | 2,860,238                                          | 0                                       | 6,455                                                            |
| <b>4</b>                                                          |                                                                    | Income from investment of tax-exempt bond proceeds . . . . .                                                                                  |                                                                                           | 0                    | 0                                                  | 0                                       | 0                                                                |
| <b>5</b>                                                          |                                                                    | Royalties . . . . .                                                                                                                           |                                                                                           | 0                    | 0                                                  | 0                                       | 0                                                                |
| <b>6a</b>                                                         |                                                                    | Gross rents . . . . .                                                                                                                         | (i) Real (ii) Personal                                                                    |                      |                                                    |                                         |                                                                  |
| <b>b</b>                                                          |                                                                    | Less rental expenses . . . . .                                                                                                                |                                                                                           |                      |                                                    |                                         |                                                                  |
| <b>c</b>                                                          |                                                                    | Rental income or (loss) . . . . .                                                                                                             | 0 0                                                                                       |                      |                                                    |                                         |                                                                  |
| <b>d</b>                                                          |                                                                    | Net rental income or (loss) . . . . .                                                                                                         |                                                                                           | 0                    | 0                                                  | 0                                       | 0                                                                |
| <b>7a</b>                                                         |                                                                    | Gross amount from sales of<br>assets other than inventory . . . . .                                                                           | (i) Securities (ii) Other                                                                 | 10,062,937 0         |                                                    |                                         |                                                                  |
| <b>b</b>                                                          |                                                                    | Less cost or other basis<br>and sales expenses . . . . .                                                                                      |                                                                                           | 6,846,295 0          |                                                    |                                         |                                                                  |
| <b>c</b>                                                          |                                                                    | Gain or (loss) . . . . .                                                                                                                      |                                                                                           | 3,216,642 0          |                                                    |                                         |                                                                  |
| <b>d</b>                                                          |                                                                    | Net gain or (loss) . . . . .                                                                                                                  |                                                                                           | 3,216,642            | 0                                                  | 0                                       | 3,216,642                                                        |
| <b>8a</b>                                                         |                                                                    | Gross income from fundraising<br>events (not including \$4,338,587<br>of contributions reported on line 1c)<br>See Part IV, line 18 . . . . . | a 1,164,419                                                                               |                      |                                                    |                                         |                                                                  |
| <b>b</b>                                                          |                                                                    | Less direct expenses . . . . .                                                                                                                | b 1,122,376                                                                               |                      |                                                    |                                         |                                                                  |
| <b>c</b>                                                          |                                                                    | Net income or (loss) from fundraising events . . . . .                                                                                        |                                                                                           | 42,043               | 0                                                  | 0                                       | 42,043                                                           |
| <b>9a</b>                                                         |                                                                    | Gross income from gaming activities<br>See Part IV, line 19 . . . . .                                                                         | a 0                                                                                       |                      |                                                    |                                         |                                                                  |
| <b>b</b>                                                          |                                                                    | Less direct expenses . . . . .                                                                                                                | b 0                                                                                       |                      |                                                    |                                         |                                                                  |
| <b>c</b>                                                          |                                                                    | Net income or (loss) from gaming activities . . . . .                                                                                         |                                                                                           | 0                    | 0                                                  | 0                                       | 0                                                                |
| <b>10a</b>                                                        | Gross sales of inventory, less<br>returns and allowances . . . . . | a 3,722                                                                                                                                       |                                                                                           |                      |                                                    |                                         |                                                                  |
| <b>b</b>                                                          | Less cost of goods sold . . . . .                                  | b 4,077                                                                                                                                       |                                                                                           |                      |                                                    |                                         |                                                                  |
| <b>c</b>                                                          | Net income or (loss) from sales of inventory . . . . .             |                                                                                                                                               | (355)                                                                                     | (355)                | 0                                                  | 0                                       |                                                                  |
| <b>Miscellaneous Revenue</b>                                      |                                                                    |                                                                                                                                               | <b>Business Code</b>                                                                      |                      |                                                    |                                         |                                                                  |
| <b>11a</b>                                                        |                                                                    |                                                                                                                                               |                                                                                           |                      |                                                    |                                         |                                                                  |
| <b>b</b>                                                          |                                                                    |                                                                                                                                               |                                                                                           |                      |                                                    |                                         |                                                                  |
| <b>c</b>                                                          |                                                                    |                                                                                                                                               |                                                                                           |                      |                                                    |                                         |                                                                  |
| <b>d</b>                                                          | All other revenue . . . . .                                        |                                                                                                                                               |                                                                                           |                      |                                                    |                                         |                                                                  |
| <b>e</b>                                                          | <b>Total.</b> Add lines 11a-11d . . . . .                          |                                                                                                                                               |                                                                                           |                      |                                                    |                                         |                                                                  |
| <b>12</b>                                                         | <b>Total revenue.</b> See instructions . . . . .                   |                                                                                                                                               |                                                                                           | 37,571,303           | 509,264                                            | 6,455                                   | 6,112,468                                                        |

**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

☒ X**Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.**

|                                                                                                                                                                                                                                            | (A)<br>Total expenses | (B)<br>Program service expenses | (C)<br>Management and general expenses | (D)<br>Fundraising expenses |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|---------------------------------|----------------------------------------|-----------------------------|
| 1 Grants and other assistance to governments and organizations in the United States. See Part IV, line 21.                                                                                                                                 | 15,995,974            | 15,995,974                      |                                        |                             |
| 2 Grants and other assistance to individuals in the United States. See Part IV, line 22.                                                                                                                                                   | 375,000               | 375,000                         |                                        |                             |
| 3 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16.                                                                                                      | 6,758,895             | 6,758,895                       |                                        |                             |
| 4 Benefits paid to or for members.                                                                                                                                                                                                         | 0                     | 0                               |                                        |                             |
| 5 Compensation of current officers, directors, trustees, and key employees.                                                                                                                                                                | 0                     | 0                               | 0                                      | 0                           |
| 6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).                                                                                           | 0                     | 0                               | 0                                      | 0                           |
| 7 Other salaries and wages.                                                                                                                                                                                                                | 0                     | 0                               | 0                                      | 0                           |
| 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions).                                                                                                                                      | 0                     | 0                               | 0                                      | 0                           |
| 9 Other employee benefits.                                                                                                                                                                                                                 | 0                     | 0                               | 0                                      | 0                           |
| 10 Payroll taxes.                                                                                                                                                                                                                          | 0                     | 0                               | 0                                      | 0                           |
| 11 Fees for services (non-employees):                                                                                                                                                                                                      |                       |                                 |                                        |                             |
| a Management                                                                                                                                                                                                                               | 0                     | 0                               | 0                                      | 0                           |
| b Legal                                                                                                                                                                                                                                    | 59,594                | 46,657                          | 9,387                                  | 3,550                       |
| c Accounting                                                                                                                                                                                                                               | 57,804                | 0                               | 57,804                                 | 0                           |
| d Lobbying                                                                                                                                                                                                                                 | 0                     | 0                               | 0                                      | 0                           |
| e Professional fundraising services. See Part IV, line 17.                                                                                                                                                                                 | 4,369                 |                                 |                                        | 4,369                       |
| f Investment management fees                                                                                                                                                                                                               | 278,490               | 190,430                         | 88,060                                 | 0                           |
| g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O).                                                                                                                              | 3,088,944             | 1,984,310                       | 59,253                                 | 1,045,381                   |
| 12 Advertising and promotion.                                                                                                                                                                                                              | 311,342               | 0                               | 0                                      | 311,342                     |
| 13 Office expenses.                                                                                                                                                                                                                        | 336,686               | 134,658                         | 26,222                                 | 175,806                     |
| 14 Information technology.                                                                                                                                                                                                                 | 860,629               | 393,624                         | 23,660                                 | 443,345                     |
| 15 Royalties.                                                                                                                                                                                                                              | 0                     | 0                               | 0                                      | 0                           |
| 16 Occupancy.                                                                                                                                                                                                                              | 0                     | 0                               | 0                                      | 0                           |
| 17 Travel.                                                                                                                                                                                                                                 | 675,675               | 459,588                         | 77,002                                 | 139,085                     |
| 18 Payments of travel or entertainment expenses for any federal, state, or local public officials.                                                                                                                                         | 0                     | 0                               | 0                                      | 0                           |
| 19 Conferences, conventions, and meetings.                                                                                                                                                                                                 | 1,510,174             | 1,196,993                       | 32,889                                 | 280,292                     |
| 20 Interest.                                                                                                                                                                                                                               | 0                     | 0                               | 0                                      | 0                           |
| 21 Payments to affiliates.                                                                                                                                                                                                                 | 0                     | 0                               | 0                                      | 0                           |
| 22 Depreciation, depletion, and amortization.                                                                                                                                                                                              | 315,453               | 236,043                         | 11,520                                 | 67,890                      |
| 23 Insurance.                                                                                                                                                                                                                              | 53,126                | 26,677                          | 26,449                                 | 0                           |
| 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 <u>Donation box expense</u>                                                                                                                                                                                                              | 216,263               | 36,550                          | 0                                      | 179,713                     |
| b <u>Banking fees</u>                                                                                                                                                                                                                      | 129,822               | 0                               | 9,250                                  | 120,572                     |
| c <u>Acknowledgement</u>                                                                                                                                                                                                                   | 110,583               | 21,391                          | 1,446                                  | 87,746                      |
| d <u>Bad debt expense</u>                                                                                                                                                                                                                  | 81,398                | 0                               | 81,398                                 | 0                           |
| e All other expenses                                                                                                                                                                                                                       | 55,890                | 9,312                           | 36,365                                 | 10,213                      |
| 25 Total functional expenses. Add lines 1 through 24e.                                                                                                                                                                                     | 31,276,111            | 27,866,102                      | 540,705                                | 2,869,304                   |
| 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 <input type="checkbox"/> 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)<br>Beginning of year |             | (B)<br>End of year |
|----------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|-------------|--------------------|
| <b>Assets</b>                                                        | 1 Cash - non-interest-bearing                                                                                                                                                                                                                                                                                                    | 0                        | 1           | 0                  |
|                                                                      | 2 Savings and temporary cash investments                                                                                                                                                                                                                                                                                         | 11,251,739               | 2           | 9,383,695          |
|                                                                      | 3 Pledges and grants receivable, net                                                                                                                                                                                                                                                                                             | 11,032,410               | 3           | 12,923,142         |
|                                                                      | 4 Accounts receivable, net                                                                                                                                                                                                                                                                                                       | 103,816                  | 4           | 228,321            |
|                                                                      | 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L.                                                                                                                                                           | 0                        | 5           | 0                  |
|                                                                      | 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 instructions). Complete Part II of Schedule L. | 0                        | 6           | 0                  |
|                                                                      | 7 Notes and loans receivable, net                                                                                                                                                                                                                                                                                                | 0                        | 7           | 0                  |
|                                                                      | 8 Inventories for sale or use                                                                                                                                                                                                                                                                                                    | 133,882                  | 8           | 141,837            |
|                                                                      | 9 Prepaid expenses and deferred charges                                                                                                                                                                                                                                                                                          | 590,145                  | 9           | 609,358            |
|                                                                      | 10a Land, buildings, and equipment cost or other basis. Complete Part VI of Schedule D.                                                                                                                                                                                                                                          | 10a 1,788,558            |             |                    |
|                                                                      | b Less accumulated depreciation                                                                                                                                                                                                                                                                                                  | 10b 1,242,245            | 10c         | 546,313            |
|                                                                      | 11 Investments - publicly traded securities                                                                                                                                                                                                                                                                                      | 94,082,002               | 11          | 109,739,761        |
|                                                                      | 12 Investments - other securities. See Part IV, line 11.                                                                                                                                                                                                                                                                         | 12,632,599               | 12          | 12,943,840         |
|                                                                      | 13 Investments - program-related. See Part IV, line 11.                                                                                                                                                                                                                                                                          | 0                        | 13          | 0                  |
|                                                                      | 14 Intangible assets                                                                                                                                                                                                                                                                                                             | 0                        | 14          | 0                  |
|                                                                      | 15 Other assets. See Part IV, line 11.                                                                                                                                                                                                                                                                                           | 1,373,635                | 15          | 842,095            |
| 16 <b>Total assets.</b> Add lines 1 through 15 (must equal line 34). | 131,500,478                                                                                                                                                                                                                                                                                                                      | 16                       | 147,358,362 |                    |
| <b>Liabilities</b>                                                   | 17 Accounts payable and accrued expenses                                                                                                                                                                                                                                                                                         | 339,444                  | 17          | 857,599            |
|                                                                      | 18 Grants payable                                                                                                                                                                                                                                                                                                                | 8,852,266                | 18          | 11,137,749         |
|                                                                      | 19 Deferred revenue                                                                                                                                                                                                                                                                                                              | 0                        | 19          | 0                  |
|                                                                      | 20 Tax-exempt bond liabilities                                                                                                                                                                                                                                                                                                   | 0                        | 20          | 0                  |
|                                                                      | 21 Escrow or custodial account liability. Complete Part IV of Schedule D.                                                                                                                                                                                                                                                        | 0                        | 21          | 0                  |
|                                                                      | 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.                                                                                                                                         | 0                        | 22          | 0                  |
|                                                                      | 23 Secured mortgages and notes payable to unrelated third parties                                                                                                                                                                                                                                                                | 0                        | 23          | 0                  |
|                                                                      | 24 Unsecured notes and loans payable to unrelated third parties                                                                                                                                                                                                                                                                  | 0                        | 24          | 0                  |
|                                                                      | 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.                                                                                                                                                        | 645,252                  | 25          | 511,229            |
|                                                                      | 26 <b>Total liabilities.</b> Add lines 17 through 25.                                                                                                                                                                                                                                                                            | 9,836,962                | 26          | 12,506,577         |
| <b>Net Assets or Fund Balances</b>                                   | <b>Organizations that follow SFAS 117 (ASC 958), check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27 through 29, and lines 33 and 34.</b>                                                                                                                                                                |                          |             |                    |
|                                                                      | 27 Unrestricted net assets                                                                                                                                                                                                                                                                                                       | 117,756,406              | 27          | 130,554,532        |
|                                                                      | 28 Temporarily restricted net assets                                                                                                                                                                                                                                                                                             | 3,907,110                | 28          | 4,297,253          |
|                                                                      | 29 Permanently restricted net assets                                                                                                                                                                                                                                                                                             | 0                        | 29          | 0                  |
|                                                                      | <b>Organizations that do not follow SFAS 117 (ASC 958), check here</b> <input type="checkbox"/> <b>and complete lines 30 through 34.</b>                                                                                                                                                                                         |                          |             |                    |
|                                                                      | 30 Capital stock or trust principal, or current funds                                                                                                                                                                                                                                                                            | 0                        | 30          | 0                  |
|                                                                      | 31 Paid-in or capital surplus, or land, building, or equipment fund                                                                                                                                                                                                                                                              | 0                        | 31          | 0                  |
|                                                                      | 32 Retained earnings, endowment, accumulated income, or other funds                                                                                                                                                                                                                                                              | 0                        | 32          | 0                  |
|                                                                      | 33 <b>Total net assets or fund balances</b>                                                                                                                                                                                                                                                                                      | 121,663,516              | 33          | 134,851,785        |
|                                                                      | 34 <b>Total liabilities and net assets/fund balances.</b>                                                                                                                                                                                                                                                                        | 131,500,478              | 34          | 147,358,362        |

**Part XI Reconciliation of Net Assets**Check if Schedule O contains a response or note to any line in this Part XI ☒

|           |                                                                                                                         |           |             |
|-----------|-------------------------------------------------------------------------------------------------------------------------|-----------|-------------|
| <b>1</b>  | Total revenue (must equal Part VIII, column (A), line 12) . . . . .                                                     | <b>1</b>  | 37,571,303  |
| <b>2</b>  | Total expenses (must equal Part IX, column (A), line 25) . . . . .                                                      | <b>2</b>  | 31,276,111  |
| <b>3</b>  | Revenue less expenses Subtract line 2 from line 1 . . . . .                                                             | <b>3</b>  | 6,295,192   |
| <b>4</b>  | Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) . . . . .                     | <b>4</b>  | 121,663,516 |
| <b>5</b>  | Net unrealized gains (losses) on investments . . . . .                                                                  | <b>5</b>  | 6,907,486   |
| <b>6</b>  | Donated services and use of facilities . . . . .                                                                        | <b>6</b>  | 0           |
| <b>7</b>  | Investment expenses . . . . .                                                                                           | <b>7</b>  | 0           |
| <b>8</b>  | Prior period adjustments . . . . .                                                                                      | <b>8</b>  | 0           |
| <b>9</b>  | Other changes in net assets or fund balances (explain in Schedule O) . . . . .                                          | <b>9</b>  | (14,409)    |
| <b>10</b> | Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B)) . . . . . | <b>10</b> | 134,851,785 |

**Part XII Financial Statements and Reporting**Check if Schedule O contains a response or note to any line in this Part XII ☐

|                                                                                                                                                                                                                                                                                                                                                                                                                                              | Yes | No |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|
| <b>1</b> Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____<br>If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O                                                                                                                                                   |     |    |
| <b>2a</b> Were the organization's financial statements compiled or reviewed by an independent accountant? . . . . .<br>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<br><input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis |     | X  |
| <b>b</b> Were the organization's financial statements audited by an independent accountant? . . . . .<br>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<br><input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis                 | X   |    |
| <b>c</b> 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?<br>If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O                                                                                | X   |    |
| <b>3a</b> 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? . . . . .                                                                                                                                                                                                                                                                 |     | X  |
| <b>b</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                                                                                                                                                                                                                |     |    |

**SCHEDULE A**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

**Public Charity Status and Public Support**

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

OMB No 1545-0047

**2013**

Open to Public  
Inspection

▶ 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](http://www.irs.gov/form990).

Name of the organization

RONALD MCDONALD HOUSE CHARITIES, INC.

Employer identification number

36-2934689

**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 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 ☐ A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E.)
- 3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 ☐ 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 ☐ 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 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 ☐ A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 ☐ 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 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 11 ☐ 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.
- a ☐ Type I    b ☐ Type II    c ☐ Type III-Functionally integrated    d ☐ Type III-Non-functionally integrated
- e ☐ 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. \_\_\_\_\_ ☐
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

- (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? \_\_\_\_\_
- (ii) A family member of a person described in (i) above? \_\_\_\_\_
- (iii) A 35% controlled entity of a person described in (i) or (ii) above? \_\_\_\_\_

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

h Provide the following information about the supported organization(s)

| (i) Name of supported organization | (ii) EIN | (iii) Type of organization (described on lines 1-9 above or IRC section (see instructions)) | (iv) Is the organization in col. (i) listed in your governing document? |    | (v) Did you notify the organization in col. (i) of your support? |    | (vi) Is the organization in col. (i) organized in the U.S.? |    | (vii) Amount of monetary support |
|------------------------------------|----------|---------------------------------------------------------------------------------------------|-------------------------------------------------------------------------|----|------------------------------------------------------------------|----|-------------------------------------------------------------|----|----------------------------------|
|                                    |          |                                                                                             | Yes                                                                     | No | Yes                                                              | No | Yes                                                         | No |                                  |
| (A)                                |          |                                                                                             |                                                                         |    |                                                                  |    |                                                             |    |                                  |
| (B)                                |          |                                                                                             |                                                                         |    |                                                                  |    |                                                             |    |                                  |
| (C)                                |          |                                                                                             |                                                                         |    |                                                                  |    |                                                             |    |                                  |
| (D)                                |          |                                                                                             |                                                                         |    |                                                                  |    |                                                             |    |                                  |
| (E)                                |          |                                                                                             |                                                                         |    |                                                                  |    |                                                             |    |                                  |
| Total                              |          |                                                                                             |                                                                         |    |                                                                  |    |                                                             |    |                                  |

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   |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|------------|------------|------------|------------|-------------|
| <b>1</b> Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") . . . . .                                                                                                   | 26,091,101 | 26,407,580 | 32,422,531 | 31,290,873 | 30,943,116 | 147,155,201 |
| <b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . . . .                                                                                                    | 0          | 0          | 0          | 0          | 0          | 0           |
| <b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge . . . . .                                                                                            | 0          | 0          | 0          | 0          | 0          | 0           |
| <b>4</b> <b>Total.</b> Add lines 1 through 3. . . . .                                                                                                                                                                 | 26,091,101 | 26,407,580 | 32,422,531 | 31,290,873 | 30,943,116 | 147,155,201 |
| <b>5</b> 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). . . . . |            |            |            |            |            | 11,525,652  |
| <b>6</b> <b>Public support.</b> Subtract line 5 from line 4 . . . . .                                                                                                                                                 |            |            |            |            |            | 135,629,549 |

**Section B. Total Support**

| Calendar year (or fiscal year beginning in) ►                                                                                                                                                                                            | (a) 2009   | (b) 2010   | (c) 2011   | (d) 2012   | (e) 2013   | (f) Total   |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|------------|------------|------------|------------|-------------|
| <b>7</b> Amounts from line 4 . . . . .                                                                                                                                                                                                   | 26,091,101 | 26,407,580 | 32,422,531 | 31,290,873 | 30,943,116 | 147,155,201 |
| <b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources . . . . .                                                                                        | 2,334,103  | 1,682,422  | 2,892,979  | 2,278,126  | 2,853,783  | 12,041,413  |
| <b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on . . . . .                                                                                                                    | 426        | 3,417      | 5,619      | 0          | 2,680      | 12,142      |
| <b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV) . . . . .                                                                                                                       | 625,108    | 1,084,763  | 970,539    | 1,142,531  | 1,164,419  | 4,987,360   |
| <b>11</b> <b>Total support.</b> Add lines 7 through 10 . . . . .                                                                                                                                                                         |            |            |            |            |            | 164,196,116 |
| <b>12</b> Gross receipts from related activities, etc. (see instructions) . . . . .                                                                                                                                                      |            |            |            |            | 12         | 513,341     |
| <b>13</b> <b>First five years.</b> 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 <b>stop here</b> . . . . . <input type="checkbox"/> |            |            |            |            |            |             |

**Section C. Computation of Public Support Percentage**

|                                                                                                                                                                                                                                                                                                                                                                                                                                                        |           |           |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|-----------|
| <b>14</b> Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f)) . . . . .                                                                                                                                                                                                                                                                                                                                             | <b>14</b> | 82.6022 % |
| <b>15</b> Public support percentage from 2012 Schedule A, Part II, line 14 . . . . .                                                                                                                                                                                                                                                                                                                                                                   | <b>15</b> | 81.9758 % |
| <b>16a</b> <b>33 1/3% support test - 2013.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization . . . . . <input checked="" type="checkbox"/>                                                                                                                                                                |           |           |
| <b>b</b> <b>33 1/3% support test - 2012.</b> 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 <b>stop here.</b> The organization qualifies as a publicly supported organization . . . . . <input type="checkbox"/>                                                                                                                                                                        |           |           |
| <b>17a</b> <b>10%-facts-and-circumstances test - 2013.</b> 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 <b>stop here.</b> 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>b</b> <b>10%-facts-and-circumstances test - 2012.</b> 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 <b>stop here.</b> 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>18</b> <b>Private foundation.</b> 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 |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|----------|----------|----------|----------|-----------|
| <b>1</b> Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")                                                                                  |          |          |          |          |          |           |
| <b>2</b> 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 . . . . . |          |          |          |          |          |           |
| <b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513 . . . . .                                                                             |          |          |          |          |          |           |
| <b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . . . .                                                                          |          |          |          |          |          |           |
| <b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge . . . . .                                                                  |          |          |          |          |          |           |
| <b>6 Total.</b> Add lines 1 through 5 . . . . .                                                                                                                                             |          |          |          |          |          |           |
| <b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons . . . . .                                                                                                |          |          |          |          |          |           |
| <b>b</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 . . . . .           |          |          |          |          |          |           |
| <b>c</b> Add lines 7a and 7b. . . . .                                                                                                                                                       |          |          |          |          |          |           |
| <b>8 Public support</b> (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 |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|----------|----------|----------|----------|-----------|
| <b>9</b> Amounts from line 6. . . . .                                                                                                                                                                                               |          |          |          |          |          |           |
| <b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources . . . . .                                                                                 |          |          |          |          |          |           |
| <b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 . . . . .                                                                                                          |          |          |          |          |          |           |
| <b>c</b> Add lines 10a and 10b . . . . .                                                                                                                                                                                            |          |          |          |          |          |           |
| <b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on . . . . .                                                                                     |          |          |          |          |          |           |
| <b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV) . . . . .                                                                                                                  |          |          |          |          |          |           |
| <b>13 Total support.</b> (Add lines 9, 10c, 11, and 12) . . . . .                                                                                                                                                                   |          |          |          |          |          |           |
| <b>14 First five years.</b> 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 <b>stop here</b> . . . . . ▶ <input type="checkbox"/> |          |          |          |          |          |           |

**Section C. Computation of Public Support Percentage**

|                                                                                                            |           |   |
|------------------------------------------------------------------------------------------------------------|-----------|---|
| <b>15</b> Public support percentage for 2013 (line 8, column (f) divided by line 13, column (f)) . . . . . | <b>15</b> | % |
| <b>16</b> Public support percentage from 2012 Schedule A, Part III, line 15. . . . .                       | <b>16</b> | % |

**Section D. Computation of Investment Income Percentage**

|                                                                                                                 |           |   |
|-----------------------------------------------------------------------------------------------------------------|-----------|---|
| <b>17</b> Investment income percentage for 2013 (line 10c, column (f) divided by line 13, column (f)) . . . . . | <b>17</b> | % |
| <b>18</b> Investment income percentage from 2012 Schedule A, Part III, line 17 . . . . .                        | <b>18</b> | % |

**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.)

Note 1 - Part II, Line 10, Other Income:

Revenue reported for 2009 - 2013 is gross income from special fundraising events.

**SCHEDULE C**  
**(Form 990 or 990-EZ)**

**Political Campaign and Lobbying Activities**

OMB No 1545-0047

**2013**

**Open to Public  
Inspection**

Department of the Treasury  
Internal Revenue Service

**For Organizations Exempt From Income Tax Under section 501(c) and section 527**  
▶ **Complete if the organization is described below.** ▶ **Attach to Form 990 or Form 990-EZ.**  
▶ **See separate instructions.** ▶ **Information about Schedule C (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).**

**If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then**

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

**If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then**

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

**If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then**

- Section 501(c)(4), (5), or (6) organizations Complete Part III

Name of organization

Employer identification number

RONALD MCDONALD HOUSE CHARITIES, INC.

36-2934689

**Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.**

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV
- 2 Political expenditures . . . . . ▶ \$
- 3 Volunteer hours . . . . .

**Part I-B Complete if the organization is exempt under section 501(c)(3).**

- 1 Enter the amount of any excise tax incurred by the organization under section 4955. . . . . ▶ \$
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 . . ▶ \$
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? . . . . . ☐ Yes ☐ No
- 4a Was a correction made? . . . . . ☐ Yes ☐ No
- b If "Yes," describe in Part IV

**Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).**

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities. . . . . ▶ \$
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities. . . . . ▶ \$
- 3 Total exempt function expenditures. Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b . . . . . ▶ \$
- 4 Did the filing organization file **Form 1120-POL** for this year? . . . . . ☐ Yes ☐ No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

| (a) Name | (b) Address | (c) EIN | (d) Amount paid from filing organization's funds If none, enter -0- | (e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0- |
|----------|-------------|---------|---------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------|
| (1)      |             |         |                                                                     |                                                                                                                                            |
| (2)      |             |         |                                                                     |                                                                                                                                            |
| (3)      |             |         |                                                                     |                                                                                                                                            |
| (4)      |             |         |                                                                     |                                                                                                                                            |
| (5)      |             |         |                                                                     |                                                                                                                                            |
| (6)      |             |         |                                                                     |                                                                                                                                            |

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

Schedule C (Form 990 or 990-EZ) 2013

**Part II-A** Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

**A** Check ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).

**B** Check ☐ if the filing organization checked box A and "limited control" provisions apply

| Limits on Lobbying Expenditures<br>(The term "expenditures" means amounts paid or incurred.)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                             | (a) Filing organization's totals                | (b) Affiliated group totals                              |                    |                              |                                         |                                                 |                                           |                                                   |                                            |                                                  |                   |             |  |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------|----------------------------------------------------------|--------------------|------------------------------|-----------------------------------------|-------------------------------------------------|-------------------------------------------|---------------------------------------------------|--------------------------------------------|--------------------------------------------------|-------------------|-------------|--|--|
| <b>1a</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Total lobbying expenditures to influence public opinion (grass roots lobbying) . . . . .                                                                    |                                                 |                                                          |                    |                              |                                         |                                                 |                                           |                                                   |                                            |                                                  |                   |             |  |  |
| <b>b</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Total lobbying expenditures to influence a legislative body (direct lobbying) . . . . .                                                                     |                                                 |                                                          |                    |                              |                                         |                                                 |                                           |                                                   |                                            |                                                  |                   |             |  |  |
| <b>c</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Total lobbying expenditures (add lines 1a and 1b) . . . . .                                                                                                 |                                                 |                                                          |                    |                              |                                         |                                                 |                                           |                                                   |                                            |                                                  |                   |             |  |  |
| <b>d</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Other exempt purpose expenditures . . . . .                                                                                                                 |                                                 |                                                          |                    |                              |                                         |                                                 |                                           |                                                   |                                            |                                                  |                   |             |  |  |
| <b>e</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Total exempt purpose expenditures (add lines 1c and 1d) . . . . .                                                                                           |                                                 |                                                          |                    |                              |                                         |                                                 |                                           |                                                   |                                            |                                                  |                   |             |  |  |
| <b>f</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Lobbying nontaxable amount Enter the amount from the following table in both columns                                                                        |                                                 |                                                          |                    |                              |                                         |                                                 |                                           |                                                   |                                            |                                                  |                   |             |  |  |
| <table border="1"> <thead> <tr> <th>If the amount on line 1e, column (a) or (b) is:</th> <th>The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000</td> </tr> </tbody> </table> |                                                                                                                                                             | If the amount on line 1e, column (a) or (b) is: | The lobbying nontaxable amount is:                       | Not over \$500,000 | 20% of the amount on line 1e | Over \$500,000 but not over \$1,000,000 | \$100,000 plus 15% of the excess over \$500,000 | Over \$1,000,000 but not over \$1,500,000 | \$175,000 plus 10% of the excess over \$1,000,000 | Over \$1,500,000 but not over \$17,000,000 | \$225,000 plus 5% of the excess over \$1,500,000 | Over \$17,000,000 | \$1,000,000 |  |  |
| If the amount on line 1e, column (a) or (b) is:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | The lobbying nontaxable amount is:                                                                                                                          |                                                 |                                                          |                    |                              |                                         |                                                 |                                           |                                                   |                                            |                                                  |                   |             |  |  |
| Not over \$500,000                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | 20% of the amount on line 1e                                                                                                                                |                                                 |                                                          |                    |                              |                                         |                                                 |                                           |                                                   |                                            |                                                  |                   |             |  |  |
| Over \$500,000 but not over \$1,000,000                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | \$100,000 plus 15% of the excess over \$500,000                                                                                                             |                                                 |                                                          |                    |                              |                                         |                                                 |                                           |                                                   |                                            |                                                  |                   |             |  |  |
| Over \$1,000,000 but not over \$1,500,000                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | \$175,000 plus 10% of the excess over \$1,000,000                                                                                                           |                                                 |                                                          |                    |                              |                                         |                                                 |                                           |                                                   |                                            |                                                  |                   |             |  |  |
| Over \$1,500,000 but not over \$17,000,000                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | \$225,000 plus 5% of the excess over \$1,500,000                                                                                                            |                                                 |                                                          |                    |                              |                                         |                                                 |                                           |                                                   |                                            |                                                  |                   |             |  |  |
| Over \$17,000,000                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | \$1,000,000                                                                                                                                                 |                                                 |                                                          |                    |                              |                                         |                                                 |                                           |                                                   |                                            |                                                  |                   |             |  |  |
| <b>g</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Grassroots nontaxable amount (enter 25% of line 1f) . . . . .                                                                                               |                                                 |                                                          |                    |                              |                                         |                                                 |                                           |                                                   |                                            |                                                  |                   |             |  |  |
| <b>h</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Subtract line 1g from line 1a. If zero or less, enter -0- . . . . .                                                                                         |                                                 |                                                          |                    |                              |                                         |                                                 |                                           |                                                   |                                            |                                                  |                   |             |  |  |
| <b>i</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Subtract line 1f from line 1c. If zero or less, enter -0- . . . . .                                                                                         |                                                 |                                                          |                    |                              |                                         |                                                 |                                           |                                                   |                                            |                                                  |                   |             |  |  |
| <b>j</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? . . . . . |                                                 | <input type="checkbox"/> Yes <input type="checkbox"/> No |                    |                              |                                         |                                                 |                                           |                                                   |                                            |                                                  |                   |             |  |  |

**4-Year Averaging Period Under Section 501(h)**

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

| Lobbying Expenditures During 4-Year Averaging Period             |          |          |          |          |           |
|------------------------------------------------------------------|----------|----------|----------|----------|-----------|
| Calendar year (or fiscal year beginning in)                      | (a) 2010 | (b) 2011 | (c) 2012 | (d) 2013 | (e) Total |
| <b>2a</b> Lobbying nontaxable amount                             |          |          |          |          |           |
| <b>b</b> Lobbying ceiling amount (150% of line 2a, column (e))   |          |          |          |          |           |
| <b>c</b> Total lobbying expenditures                             |          |          |          |          |           |
| <b>d</b> Grassroots nontaxable amount                            |          |          |          |          |           |
| <b>e</b> Grassroots ceiling amount (150% of line 2d, column (e)) |          |          |          |          |           |
| <b>f</b> Grassroots lobbying expenditures                        |          |          |          |          |           |

Schedule C (Form 990 or 990-EZ) 2013

**Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).**

| For each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity                                                                                                             | (a) |    | (b)    |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|--------|
|                                                                                                                                                                                                                                       | Yes | No | Amount |
| <b>1</b> During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of |     |    |        |
| <b>a</b> Volunteers?                                                                                                                                                                                                                  |     | X  |        |
| <b>b</b> Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?                                                                                                                                 |     | X  |        |
| <b>c</b> Media advertisements?                                                                                                                                                                                                        |     | X  |        |
| <b>d</b> Mailings to members, legislators, or the public?                                                                                                                                                                             |     | X  |        |
| <b>e</b> Publications, or published or broadcast statements?                                                                                                                                                                          |     | X  |        |
| <b>f</b> Grants to other organizations for lobbying purposes?                                                                                                                                                                         |     | X  |        |
| <b>g</b> Direct contact with legislators, their staffs, government officials, or a legislative body?                                                                                                                                  |     | X  |        |
| <b>h</b> Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?                                                                                                                                    |     | X  |        |
| <b>i</b> Other activities?                                                                                                                                                                                                            | X   |    | 45     |
| <b>j</b> Total. Add lines 1c through 1i                                                                                                                                                                                               |     |    | 45     |
| <b>2a</b> Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?                                                                                                                               |     | X  |        |
| <b>b</b> If "Yes," enter the amount of any tax incurred under section 4912                                                                                                                                                            |     |    |        |
| <b>c</b> If "Yes," enter the amount of any tax incurred by organization managers under section 4912                                                                                                                                   |     |    |        |
| <b>d</b> If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?                                                                                                                                 |     |    |        |

**Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).**

|                                                                                                            | Yes | No |
|------------------------------------------------------------------------------------------------------------|-----|----|
| <b>1</b> Were substantially all (90% or more) dues received nondeductible by members?                      | 1   |    |
| <b>2</b> Did the organization make only in-house lobbying expenditures of \$2,000 or less?                 | 2   |    |
| <b>3</b> Did the organization agree to carry over lobbying and political expenditures from the prior year? | 3   |    |

**Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 3, is answered "Yes."**

|                                                                                                                                                                                                                                                     |    |  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|--|
| <b>1</b> Dues, assessments and similar amounts from members                                                                                                                                                                                         | 1  |  |
| <b>2</b> Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).                                                                                 |    |  |
| <b>a</b> Current year                                                                                                                                                                                                                               | 2a |  |
| <b>b</b> Carryover from last year                                                                                                                                                                                                                   | 2b |  |
| <b>c</b> Total                                                                                                                                                                                                                                      | 2c |  |
| <b>3</b> Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues                                                                                                                                            | 3  |  |
| <b>4</b> If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? | 4  |  |
| <b>5</b> Taxable amount of lobbying and political expenditures (see instructions)                                                                                                                                                                   | 5  |  |

**Part IV Supplemental Information**

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, line 2, and Part II-B, line 1. Also, complete this part for any additional information.

Part II-B, Line 1i, Other activities:

RMHC has an investment in a limited partnership which conducted lobbying activities during the year. The amount reported on line 1i is the portion allocated to RMHC as a result of its investment in the partnership.

## Part IV Supplemental Information (continued)

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

**SCHEDULE D  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Financial Statements**

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

► Attach to Form 990.

► Information about Schedule D (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No 1545-0047

**2013**

**Open to Public  
Inspection**

Name of the organization

RONALD MCDONALD HOUSE CHARITIES, INC.

Employer identification number

36-2934689

**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? . . . . .                                                            |                         | <input type="checkbox"/> Yes <input type="checkbox"/> 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? . . . . . |                         | <input type="checkbox"/> Yes <input type="checkbox"/> 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

|                                                                                                                                                      | Held at the End of the Tax Year |
|------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------|
| a Total number of conservation easements . . . . .                                                                                                   | 2a                              |
| b Total acreage restricted by conservation easements . . . . .                                                                                       | 2b                              |
| c Number of conservation easements on a certified historic structure included in (a) . . . . .                                                       | 2c                              |
| d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register . . . . . | 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

b 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 . . . . . ► \$ \_\_\_\_\_

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule D (Form 990) 2013

**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

|                                        | Amount    |
|----------------------------------------|-----------|
| <b>c</b> Beginning balance             | <b>1c</b> |
| <b>d</b> Additions during the year     | <b>1d</b> |
| <b>e</b> Distributions during the year | <b>1e</b> |
| <b>f</b> Ending balance                | <b>1f</b> |

**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. ☐ Yes ☐ No

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

|                                                         | (a) Current year | (b) Prior year | (c) Two years back | (d) Three years back | (e) Four years back |
|---------------------------------------------------------|------------------|----------------|--------------------|----------------------|---------------------|
| <b>1a</b> Beginning of year balance                     |                  |                |                    |                      |                     |
| <b>b</b> Contributions                                  |                  |                |                    |                      |                     |
| <b>c</b> Net investment earnings, gains, and losses     |                  |                |                    |                      |                     |
| <b>d</b> Grants or scholarships                         |                  |                |                    |                      |                     |
| <b>e</b> Other expenditures for facilities and programs |                  |                |                    |                      |                     |
| <b>f</b> Administrative expenses                        |                  |                |                    |                      |                     |
| <b>g</b> End of year balance                            |                  |                |                    |                      |                     |

**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

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

|               | Yes | No |
|---------------|-----|----|
| <b>3a(i)</b>  |     |    |
| <b>3a(ii)</b> |     |    |
| <b>3b</b>     |     |    |

**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 |
|---------------------------------------------------------------------------------------------------------|--------------------------------------|---------------------------------|------------------------------|----------------|
| <b>1a</b> Land                                                                                          |                                      |                                 |                              |                |
| <b>b</b> Buildings                                                                                      |                                      |                                 |                              |                |
| <b>c</b> Leasehold improvements                                                                         |                                      |                                 |                              |                |
| <b>d</b> Equipment                                                                                      |                                      |                                 |                              |                |
| <b>e</b> Other                                                                                          |                                      | 1,788,558                       | 1,242,245                    | 546,313        |
| <b>Total.</b> Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)). |                                      |                                 |                              | 546,313        |

**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<br>(including name of security)  | (b) Book value    | (c) Method of valuation<br>Cost or end-of-year market value |
|--------------------------------------------------------------------------|-------------------|-------------------------------------------------------------|
| (1) Financial derivatives . . . . .                                      | 0                 |                                                             |
| (2) Closely-held equity interests . . . . .                              | 0                 |                                                             |
| (3) Other                                                                |                   |                                                             |
| (A) McDonald's Corporation                                               | 9,747,052         | End of year market value                                    |
| (B) Private equity investments                                           | 3,196,788         | Cost                                                        |
| (C)                                                                      |                   |                                                             |
| (D)                                                                      |                   |                                                             |
| (E)                                                                      |                   |                                                             |
| (F)                                                                      |                   |                                                             |
| (G)                                                                      |                   |                                                             |
| (H)                                                                      |                   |                                                             |
| <b>Total</b> (Column (b) must equal Form 990, Part X, col (B) line 12) ▶ | <b>12,943,840</b> |                                                             |

**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<br>Cost or end-of-year market value |
|--------------------------------------------------------------------------|----------------|-------------------------------------------------------------|
| (1)                                                                      |                |                                                             |
| (2)                                                                      |                |                                                             |
| (3)                                                                      |                |                                                             |
| (4)                                                                      |                |                                                             |
| (5)                                                                      |                |                                                             |
| (6)                                                                      |                |                                                             |
| (7)                                                                      |                |                                                             |
| (8)                                                                      |                |                                                             |
| (9)                                                                      |                |                                                             |
| <b>Total</b> (Column (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)                                                                                 |                |
| <b>Total.</b> (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                                                  | 0              |  |
| (2) Intermediary third party liability                                    | 511,229        |  |
| (3) (refer to Part XIII, Note 1)                                          |                |  |
| (4)                                                                       |                |  |
| (5)                                                                       |                |  |
| (6)                                                                       |                |  |
| (7)                                                                       |                |  |
| (8)                                                                       |                |  |
| (9)                                                                       |                |  |
| <b>Total.</b> (Column (b) must equal Form 990, Part X, col (B) line 25) ▶ | <b>511,229</b> |  |

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  | 49,413,050 |
| 2 | Amounts included on line 1 but not on Form 990, Part VIII, line 12            |    |            |
| a | Net unrealized gains on investments                                           | 2a | 6,907,486  |
| b | Donated services and use of facilities                                        | 2b | 4,948,670  |
| c | Recoveries of prior year grants                                               | 2c | 7,497      |
| d | Other (Describe in Part XIII)                                                 | 2d | (21,906)   |
| e | Add lines 2a through 2d                                                       | 2e | 11,841,747 |
| 3 | Subtract line 2e from line 1                                                  | 3  | 37,571,303 |
| 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 | 0          |
| b | Other (Describe in Part XIII)                                                 | 4b | 0          |
| c | Add lines 4a and 4b                                                           | 4c | 0          |
| 5 | Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) | 5  | 37,571,303 |

**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  | 36,224,781 |
| 2 | Amounts included on line 1 but not on Form 990, Part IX, line 25               |    |            |
| a | Donated services and use of facilities                                         | 2a | 4,948,670  |
| b | Prior year adjustments                                                         | 2b | 0          |
| c | Other losses                                                                   | 2c | 0          |
| d | Other (Describe in Part XIII)                                                  | 2d | 0          |
| e | Add lines 2a through 2d                                                        | 2e | 4,948,670  |
| 3 | Subtract line 2e from line 1                                                   | 3  | 31,276,111 |
| 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 | 0          |
| b | Other (Describe in Part XIII)                                                  | 4b | 0          |
| 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  | 31,276,111 |

**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.

**Note 1 - Part X - Other Liabilities, Line 1, Item (2):**

RMHC receives contributions from donors who intended the funds to be used by one of its independently incorporated Local RMHC Chapters. In accordance with Generally Accepted Accounting Principles, RMHC reports funds held at the end of the year that have not yet been distributed to the Local Chapters as Intermediary Third Party Liabilities. RMHC has no discretionary spending authority over the use of these funds, but is merely acting in an agency capacity on behalf of the Local Chapters until the funds are disbursed. These funds are not part of an escrow account.

**Note 2 - Part X, Other Liabilities, Line 2:**

The IRS has issued a ruling stating that RMHC is a Section 501(c)(3) charitable organization and qualifies as a public charity under Section 509(a)(1) of the IRC. As such, it is exempt from federal income taxation on related income.

**Part XIII** Supplemental Information (continued)

## Note 2 - Part X, Other Liabilities, Line 2 (continued):

However, income from certain activities not directly related to RMHC's tax-exempt purpose is subject to taxation as unrelated business income. Income taxes for such unrelated business income were less than \$1,000 for the years ended December 31, 2013 and 2012. The federal and state tax returns of RMHC for 2010, 2011, and 2012 are subject to examination by the IRS and state taxing authorities, generally for three years after they were filed. RMHC has determined that it is not necessary to record a liability for uncertain tax positions as of December 31, 2013 and 2012.

## Note 3 - Parts XI and XII: Reconciliation of Revenue and Expenses per Audited Financial Statements With Revenue and Expenses per Return:

There are rounding differences when reconciling the numbers per the audited financial statements, which are rounded to the nearest whole thousand (\$1,000) dollar increment, back to the numbers per Form 990, which are rounded to the nearest whole dollar (\$1) increment.

## Note 4 - Part XI, Line 2d, Reconciliation of Revenue:

Loss on cash surrender value of insurance -\$21,906

**SCHEDULE F  
(Form 990)****Statement of Activities Outside the United States**

OMB No 1545-0047

**2013****Open to Public  
Inspection**Department of the Treasury  
Internal Revenue Service

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

▶ Attach to Form 990. ▶ See separate instructions.

▶ Information about Schedule F (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

Name of the organization

RONALD MCDONALD HOUSE CHARITIES, INC.

Employer identification number

36-2934689

**Part I** General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 14b

1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ Yes ☐ No

2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States

3 Activities per Region (The following Part I, line 3 table can be duplicated if additional space is needed )

| (a) Region                                           | (b) Number of offices in the region | (c) Number of employees, agents, and independent contractors in region | (d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region) | (e) If activity listed in (d) is a program service, describe specific type of service(s) in region | (f) Total expenditures for and investments in region |
|------------------------------------------------------|-------------------------------------|------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------|------------------------------------------------------|
| (1) Europe                                           |                                     |                                                                        | Grantmaking                                                                                                                                 |                                                                                                    | 1,332,898                                            |
| Russia and the Newly<br>(2) Indep States (Russia)    |                                     |                                                                        | Grantmaking                                                                                                                                 |                                                                                                    | 150,000                                              |
| (3) North America                                    |                                     |                                                                        | Grantmaking                                                                                                                                 |                                                                                                    | 473,717                                              |
| Central America and<br>(4) the Caribbean (CA&C)      |                                     |                                                                        | Grantmaking                                                                                                                                 |                                                                                                    | 967,683                                              |
| (5) South America                                    |                                     |                                                                        | Grantmaking                                                                                                                                 |                                                                                                    | 103,480                                              |
| (6) Sub-Saharan Africa                               |                                     |                                                                        | Grantmaking                                                                                                                                 |                                                                                                    | 1,897,448                                            |
| East Asia and<br>(7) the Pacific (EA&P)              |                                     |                                                                        | Grantmaking                                                                                                                                 |                                                                                                    | 1,764,612                                            |
| Middle East and<br>(8) North Africa (ME&NA)          |                                     |                                                                        | Grantmaking                                                                                                                                 |                                                                                                    | 40,000                                               |
| (9) South Asia                                       |                                     |                                                                        | Grantmaking                                                                                                                                 |                                                                                                    | 29,057                                               |
| (10)                                                 |                                     |                                                                        |                                                                                                                                             |                                                                                                    |                                                      |
| (11)                                                 |                                     |                                                                        |                                                                                                                                             |                                                                                                    |                                                      |
| (12)                                                 |                                     |                                                                        |                                                                                                                                             |                                                                                                    |                                                      |
| (13)                                                 |                                     |                                                                        |                                                                                                                                             |                                                                                                    |                                                      |
| (14)                                                 |                                     |                                                                        |                                                                                                                                             |                                                                                                    |                                                      |
| (15)                                                 |                                     |                                                                        |                                                                                                                                             |                                                                                                    |                                                      |
| (16)                                                 |                                     |                                                                        |                                                                                                                                             |                                                                                                    |                                                      |
| (17)                                                 |                                     |                                                                        |                                                                                                                                             |                                                                                                    |                                                      |
| 3a Sub-total, . . . . .                              | 0                                   | 0                                                                      |                                                                                                                                             |                                                                                                    | 6,758,895                                            |
| b Total from continuation sheets to Part I . . . . . |                                     |                                                                        |                                                                                                                                             |                                                                                                    |                                                      |
| c Totals (add lines 3a and 3b)                       | 0                                   | 0                                                                      |                                                                                                                                             |                                                                                                    | 6,758,895                                            |

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule F (Form 990) 2013

**Part II** Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

| 1    | (a) Name of organization | (b) IRS code section and EIN (if applicable) | (c) Region    | (d) Purpose of grant | (e) Amount of cash grant | (f) Manner of cash disbursement | (g) Amount of non-cash assistance | (h) Description of non-cash assistance | (i) Method of valuation (book, FMV, appraisal, other) |
|------|--------------------------|----------------------------------------------|---------------|----------------------|--------------------------|---------------------------------|-----------------------------------|----------------------------------------|-------------------------------------------------------|
| (1)  |                          |                                              | Europe        | a                    | 200,000                  | Check                           |                                   |                                        |                                                       |
| (2)  |                          |                                              | Europe        | f                    | 100,000                  | Check                           |                                   |                                        |                                                       |
| (3)  |                          |                                              | Europe        | a                    | 150,000                  | Check                           |                                   |                                        |                                                       |
| (4)  |                          |                                              | Europe        | b                    | 10,000                   | Check                           |                                   |                                        |                                                       |
| (5)  |                          |                                              | Europe        | a                    | 450,000                  | Check                           |                                   |                                        |                                                       |
| (6)  |                          |                                              | Europe        | a                    | 150,000                  | Check                           |                                   |                                        |                                                       |
| (7)  |                          |                                              | Europe        | f                    | 43,658                   | Check                           |                                   |                                        |                                                       |
| (8)  |                          |                                              | Europe        | a, c                 | 203,000                  | Check                           |                                   |                                        |                                                       |
| (9)  |                          |                                              | Europe        | b                    | 10,000                   | Check                           |                                   |                                        |                                                       |
| (10) |                          |                                              | Europe        | b                    | 15,000                   | Check                           |                                   |                                        |                                                       |
| (11) |                          |                                              | Russia        | a                    | 150,000                  | Wire                            |                                   |                                        |                                                       |
| (12) |                          |                                              | North America | c, f                 | 63,284                   | Check                           |                                   |                                        |                                                       |
| (13) |                          |                                              | North America | a                    | 200,000                  | Check                           |                                   |                                        |                                                       |
| (14) |                          |                                              | North America | b                    | 10,000                   | Check                           |                                   |                                        |                                                       |
| (15) |                          |                                              | North America | e                    | 37,358                   | Check                           |                                   |                                        |                                                       |
| (16) |                          |                                              | North America | f                    | 90,000                   | Check                           |                                   |                                        |                                                       |

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter. 42

3 Enter total number of other organizations or entities. 0

**Part II** **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

| 1    | (a) Name of organization | (b) IRS code section and EIN (if applicable) | (c) Region         | (d) Purpose of grant | (e) Amount of cash grant | (f) Manner of cash disbursement | (g) Amount of non-cash assistance | (h) Description of non-cash assistance | (i) Method of valuation (book, FMV, appraisal, other) |
|------|--------------------------|----------------------------------------------|--------------------|----------------------|--------------------------|---------------------------------|-----------------------------------|----------------------------------------|-------------------------------------------------------|
| (1)  |                          |                                              | North America      | b                    | 10,000                   | Check                           |                                   |                                        |                                                       |
| (2)  |                          |                                              | North America      | c                    | 50,000                   | Check                           |                                   |                                        |                                                       |
| (3)  |                          |                                              | North America      | i                    | 10,000                   | Wire                            |                                   |                                        |                                                       |
| (4)  |                          |                                              | CA&C               | h                    | 967,004                  | Check                           |                                   |                                        |                                                       |
| (5)  |                          |                                              | South America      | c                    | 58,000                   | Check                           |                                   |                                        |                                                       |
| (6)  |                          |                                              | South America      | b                    | 40,000                   | Check                           |                                   |                                        |                                                       |
| (7)  |                          |                                              | South America      | h                    | 5,240                    | Check                           |                                   |                                        |                                                       |
| (8)  |                          |                                              | Sub-Saharan Africa | b, f                 | 72,500                   | Check                           |                                   |                                        |                                                       |
| (9)  |                          |                                              | Sub-Saharan Africa | h                    | 727,105                  | Check                           |                                   |                                        |                                                       |
| (10) |                          |                                              | Sub-Saharan Africa | h                    | 200,000                  | Check                           |                                   |                                        |                                                       |
| (11) |                          |                                              | Sub-Saharan Africa | h                    | 150,000                  | Check                           |                                   |                                        |                                                       |
| (12) |                          |                                              | Sub-Saharan Africa | h                    | 742,916                  | Check                           |                                   |                                        |                                                       |
| (13) |                          |                                              | EA&P               | b                    | 100,000                  | Wire                            |                                   |                                        |                                                       |
| (14) |                          |                                              | EA&P               | b                    | 10,000                   | Wire                            |                                   |                                        |                                                       |
| (15) |                          |                                              | EA&P               | a                    | 150,000                  | Check                           |                                   |                                        |                                                       |
| (16) |                          |                                              | EA&P               | a                    | 150,000                  | Check                           |                                   |                                        |                                                       |

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter. . . . .

3 Enter total number of other organizations or entities. . . . .

**Part II** Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

| 1    | (a) Name of organization | (b) IRS code section and EIN (if applicable) | (c) Region | (d) Purpose of grant | (e) Amount of cash grant | (f) Manner of cash disbursement | (g) Amount of non-cash assistance | (h) Description of non-cash assistance | (i) Method of valuation (book, FMV, appraisal, other) |
|------|--------------------------|----------------------------------------------|------------|----------------------|--------------------------|---------------------------------|-----------------------------------|----------------------------------------|-------------------------------------------------------|
| (1)  |                          |                                              | EA&P       | a, b                 | 192,000                  | Check                           |                                   |                                        |                                                       |
| (2)  |                          |                                              | EA&P       | b, c, f              | 478,000                  | Check                           |                                   |                                        |                                                       |
| (3)  |                          |                                              | EA&P       | f                    | 100,000                  | Check                           |                                   |                                        |                                                       |
| (4)  |                          |                                              | EA&P       | b                    | 25,000                   | Wire                            |                                   |                                        |                                                       |
| (5)  |                          |                                              | EA&P       | e                    | 67,726                   | Check                           |                                   |                                        |                                                       |
| (6)  |                          |                                              | EA&P       | h                    | 35,000                   | Check                           |                                   |                                        |                                                       |
| (7)  |                          |                                              | EA&P       | h                    | 399,500                  | Check                           |                                   |                                        |                                                       |
| (8)  |                          |                                              | EA&P       | h                    | 49,387                   | Check                           |                                   |                                        |                                                       |
| (9)  |                          |                                              | ME&NA      | b                    | 40,000                   | Check                           |                                   |                                        |                                                       |
| (10) |                          |                                              | South Asia | 1                    | 25,000                   | Check                           |                                   |                                        |                                                       |
| (11) |                          |                                              |            |                      |                          |                                 |                                   |                                        |                                                       |
| (12) |                          |                                              |            |                      |                          |                                 |                                   |                                        |                                                       |
| (13) |                          |                                              |            |                      |                          |                                 |                                   |                                        |                                                       |
| (14) |                          |                                              |            |                      |                          |                                 |                                   |                                        |                                                       |
| (15) |                          |                                              |            |                      |                          |                                 |                                   |                                        |                                                       |
| (16) |                          |                                              |            |                      |                          |                                 |                                   |                                        |                                                       |

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter. . . . .

3 Enter total number of other organizations or entities. . . . .

**Part III** **Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 16  
 Part III can be duplicated if additional space is needed

| (a) Type of grant or assistance | (b) Region | (c) Number of recipients | (d) Amount of cash grant | (e) Manner of cash disbursement | (f) Amount of non-cash assistance | (g) Description of non-cash assistance | (h) Method of valuation (book, FMV, appraisal, other) |
|---------------------------------|------------|--------------------------|--------------------------|---------------------------------|-----------------------------------|----------------------------------------|-------------------------------------------------------|
| (1)                             |            |                          |                          |                                 |                                   |                                        |                                                       |
| (2)                             |            |                          |                          |                                 |                                   |                                        |                                                       |
| (3)                             |            |                          |                          |                                 |                                   |                                        |                                                       |
| (4)                             |            |                          |                          |                                 |                                   |                                        |                                                       |
| (5)                             |            |                          |                          |                                 |                                   |                                        |                                                       |
| (6)                             |            |                          |                          |                                 |                                   |                                        |                                                       |
| (7)                             |            |                          |                          |                                 |                                   |                                        |                                                       |
| (8)                             |            |                          |                          |                                 |                                   |                                        |                                                       |
| (9)                             |            |                          |                          |                                 |                                   |                                        |                                                       |
| (10)                            |            |                          |                          |                                 |                                   |                                        |                                                       |
| (11)                            |            |                          |                          |                                 |                                   |                                        |                                                       |
| (12)                            |            |                          |                          |                                 |                                   |                                        |                                                       |
| (13)                            |            |                          |                          |                                 |                                   |                                        |                                                       |
| (14)                            |            |                          |                          |                                 |                                   |                                        |                                                       |
| (15)                            |            |                          |                          |                                 |                                   |                                        |                                                       |
| (16)                            |            |                          |                          |                                 |                                   |                                        |                                                       |
| (17)                            |            |                          |                          |                                 |                                   |                                        |                                                       |
| (18)                            |            |                          |                          |                                 |                                   |                                        |                                                       |

**Part IV Foreign Forms**

- 1** Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926) . . . . . ☐ Yes ☒ No
- 2** Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A) . . . . . ☐ Yes ☒ No
- 3** Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations (see Instructions for Form 5471) . . . . . ☐ Yes ☒ No
- 4** Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621) . . . . . ☐ Yes ☒ No
- 5** Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain Foreign Partnerships (see Instructions for Form 8865) . . . . . ☐ Yes ☒ No
- 6** Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713) . . . . . ☐ Yes ☒ No

Schedule F (Form 990) 2013

**Part V Supplemental Information**

Provide the information required by Part I, line 2 (monitoring of funds), Part I, line 3, column (f) (accounting method, amounts of investments vs expenditures per region), Part II, line 1 (accounting method), Part III (accounting method), and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

Note 1 - Part I, Line 2, Procedures for monitoring use of grant funds outside the US:

The majority of grants outside the US were made to Non-US Local RMHC Chapters. RMHC monitors the use of the funds in the following manner: All Local Chapters must submit a grant request that explains the proposed use of the funds and must agree in writing that funds received will only be used for the purposes requested in the grant proposal. US Field Service team members, who are unpaid volunteers, work with a specific Local Chapter and are responsible for reviewing all grant requests for appropriateness of use and for subsequent follow-up to determine that funds granted by RMHC to each respective Local Chapter have been used for their stated purposes. On occasion, the team members will also make in-person visits to a specific Local Chapter to conduct on-site training and will use that opportunity to verify that grant funds were utilized for their stated purposes. In addition, on an annual basis, each Local Chapter must submit a detailed accounting of the use of the funds received, as well as audited financial statements.

Most grants required to be included on Schedule F that were not made to Local Chapters were given to US organizations to be used for foreign activities. All of these organizations must submit a grant request that explains the proposed use of the funds and must agree in writing that funds received will only be used for the purposes requested in the grant proposal. RMHC team members, who are unpaid volunteers, are responsible for reviewing all grant requests for appropriateness of use and for subsequent follow-up to determine that funds granted have been used for their stated purposes. As part of the follow-up process, team members obtain a quarterly report of the status of the activities performed with the grant funds and a performance/outcomes report on the anniversary of their award date. This report includes a program budget and detailed accounting of the use of the funds.

**Part V Supplemental Information**

Provide the information required by Part I, line 2 (monitoring of funds), Part I, line 3, column (f) (accounting method, amounts of investments vs expenditures per region), Part II, line 1 (accounting method), Part III (accounting method), and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

Note 2 - Part II, Column (d), Purpose of grant:

(a) Ronald McDonald House Program support: includes new House seed grants, existing House construction grants to increase House size, and general House operating support, including miscellaneous supplies and equipment.

(b) New Local Chapter seed grants

(c) Capacity Building Support: to help Chapters achieve a high level of excellence in management and operations, and to help them effectively and efficiently fulfill their mission, RMHC provides grants that underwrite resource development, strategic planning, provide technology upgrades, training and education of Board, staff and volunteers, and facilitation of networking opportunities with other Local Chapters.

(e) Provide Chapter with a built-to-specification Ronald McDonald Care Mobile equipped to provide primary and specialty medical care and health education.

(f) New Ronald McDonald Family Room seed grant funds

(h) Grants to improve the health of children: provide resources to support preventive and therapeutic programs, including pre-and-post natal care, immunizations, screening tests, physical exams, health education, applied research, accessible medical, surgical, and dental care, and general counseling and family support.

(i) Grants to improve the well-being of children: provide resources to support programs ranging from child hunger to child homelessness, educational programs and those that enrich the lives of children by broadening their horizons through educational, cultural, and recreational experiences.

**SCHEDULE G**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Information Regarding Fundraising or Gaming Activities**

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

▶ Attach to Form 990 or Form 990-EZ.

▶ Information about Schedule G (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990)

OMB No 1545-0047

**2013**

**Open to Public  
Inspection**

Name of the organization

RONALD MCDONALD HOUSE CHARITIES, INC.

Employer identification number

36-2934689

**Part I**

**Fundraising Activities.** Complete if the organization answered "Yes" to Form 990, Part IV, line 17.  
Form 990-EZ filers are not required to complete this part.

**1** Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- |                                                                               |                                                                                    |
|-------------------------------------------------------------------------------|------------------------------------------------------------------------------------|
| <b>a</b> <input checked="" type="checkbox"/> Mail solicitations               | <b>e</b> <input checked="" type="checkbox"/> Solicitation of non-government grants |
| <b>b</b> <input checked="" type="checkbox"/> Internet and email solicitations | <b>f</b> <input type="checkbox"/> Solicitation of government grants                |
| <b>c</b> <input checked="" type="checkbox"/> Phone solicitations              | <b>g</b> <input checked="" type="checkbox"/> Special fundraising events            |
| <b>d</b> <input checked="" type="checkbox"/> In-person solicitations          |                                                                                    |

**2a** Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☒ Yes ☐ No

**b** If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

| (i) Name and address of individual or entity (fundraiser) | (ii) Activity | (iii) Did fundraiser have custody or control of contributions? |    | (iv) Gross receipts from activity | (v) Amount paid to (or retained by) fundraiser listed in col (i) | (vi) Amount paid to (or retained by) organization |
|-----------------------------------------------------------|---------------|----------------------------------------------------------------|----|-----------------------------------|------------------------------------------------------------------|---------------------------------------------------|
|                                                           |               | Yes                                                            | No |                                   |                                                                  |                                                   |
| 1 N/A - paid less than five thousand                      |               |                                                                |    |                                   |                                                                  |                                                   |
| 2                                                         |               |                                                                |    |                                   |                                                                  |                                                   |
| 3                                                         |               |                                                                |    |                                   |                                                                  |                                                   |
| 4                                                         |               |                                                                |    |                                   |                                                                  |                                                   |
| 5                                                         |               |                                                                |    |                                   |                                                                  |                                                   |
| 6                                                         |               |                                                                |    |                                   |                                                                  |                                                   |
| 7                                                         |               |                                                                |    |                                   |                                                                  |                                                   |
| 8                                                         |               |                                                                |    |                                   |                                                                  |                                                   |
| 9                                                         |               |                                                                |    |                                   |                                                                  |                                                   |
| 10                                                        |               |                                                                |    |                                   |                                                                  |                                                   |
| Total .....                                               |               |                                                                |    |                                   |                                                                  |                                                   |

**3** List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

Alabama, Alaska, Arizona, Arkansas, California, Colorado, Connecticut, District of Columbia, Florida, Georgia, Hawaii, Illinois, Kansas, Kentucky, Louisiana, Maine, Maryland, Massachusetts, Michigan, Minnesota, Mississippi, Missouri, New Hampshire, New Jersey, New Mexico, New York, North Carolina, North Dakota, Ohio, Oklahoma, Oregon, Pennsylvania, Rhode Island, South Carolina, Tennessee, Texas, Utah, Washington, West Virginia, Wisconsin

**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                   | (b) Event #2               | (c) Other events | (d) Total events                 |
|--------------------------------------------------------------------------|-------------------------------------------------------------------------|--------------------------------|----------------------------|------------------|----------------------------------|
|                                                                          |                                                                         | Dinner/Auction<br>(event type) | Golf Event<br>(event type) | (total number)   | (add col (a) through<br>col (c)) |
| Revenue                                                                  | 1 Gross receipts . . . . .                                              | 3,707,086                      | 1,795,920                  |                  | 5,503,006                        |
|                                                                          | 2 Less Contributions . . . . .                                          | 2,764,152                      | 1,574,435                  |                  | 4,338,587                        |
|                                                                          | 3 Gross income (line 1 minus<br>line 2). . . . .                        | 942,934                        | 221,485                    |                  | 1,164,419                        |
| Direct Expenses                                                          | 4 Cash prizes . . . . .                                                 | 0                              | 0                          |                  |                                  |
|                                                                          | 5 Noncash prizes . . . . .                                              | 0                              | 13,352                     |                  | 13,352                           |
|                                                                          | 6 Rent/facility costs . . . . .                                         | 121,608                        | 140,700                    |                  | 262,308                          |
|                                                                          | 7 Food and beverages . . . . .                                          | 201,269                        | 0                          |                  | 201,269                          |
|                                                                          | 8 Entertainment . . . . .                                               | 217,717                        | 30,000                     |                  | 247,717                          |
|                                                                          | 9 Other direct expenses . . . . .                                       | 368,334                        | 29,396                     |                  | 397,730                          |
|                                                                          | 10 Direct expense summary Add lines 4 through 9 in column (d) . . . . . |                                |                            |                  | 1,122,376                        |
| 11 Net income summary Subtract line 10 from line 3, column (d) . . . . . |                                                                         |                                |                            | 42,043           |                                  |

**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<br>bingo/progressive bingo                    | (c) Other gaming                                                    | (d) Total gaming (add<br>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 _____ %<br><input type="checkbox"/> No | <input type="checkbox"/> Yes _____ %<br><input type="checkbox"/> No | <input type="checkbox"/> Yes _____ %<br><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 \_\_\_\_\_

10 a 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? . . . . .                                                                                      | <input type="checkbox"/> Yes | <input type="checkbox"/> 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? . . . . . | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 13 | Indicate the percentage of gaming activity operated in                                                                                                          |                              |                             |
| a  | The organization's facility . . . . .                                                                                                                           | 13a                          | %                           |
| b  | An outside facility . . . . .                                                                                                                                   | 13b                          | %                           |
| 14 | Enter the name and address of the person who prepares the organization's gaming/special events books and records                                                |                              |                             |

Name ►

Address ►

- 15 a** 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).

**SCHEDULE I**  
**(Form 990)****Grants and Other Assistance to Organizations,  
Governments, and Individuals in the United States**Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.  
▶ Attach to Form 990.

OMB No. 1545-0047

**2013****Open to Public  
Inspection**Department of the Treasury  
Internal Revenue Service

Name of the organization

**RONALD MCDONALD HOUSE CHARITIES, INC.**

Employer identification number

**36-2934689****Part I General Information on Grants and Assistance**

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ Yes ☐ No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

**Part II Grants and Other Assistance to Governments and Organizations in the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

| 1    | (a) Name and address of organization or government                              | (b) EIN    | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|------|---------------------------------------------------------------------------------|------------|-------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| (1)  | Atlanta RMHC Inc.<br>795 Gatewood Road NE Atlanta GA                            | 58-1295754 | 501(c)(3)                     | 321,834                  |                                   |                                                       |                                        | Note (1) - b,d                     |
| (2)  | Central New York RMHC, Inc.<br>1100 East Genesee Street Syracuse NY             | 22-2371193 | 501(c)(3)                     | 65,556                   |                                   |                                                       |                                        | Note (1) - b                       |
| (3)  | RMHC in Omaha, Inc.<br>620 South 38th Avenue Omaha NE                           | 47-0755104 | 501(c)(3)                     | 36,075                   |                                   |                                                       |                                        | Note (1) - b                       |
| (4)  | RMHC of Alabama, Inc.<br>1700 4th Avenue South Birmingham AL                    | 63-0753358 | 501(c)(3)                     | 72,700                   |                                   |                                                       |                                        | Note (1) - b                       |
| (5)  | RMHC of Amarillo, Inc.<br>1501 Streit Drive Amarillo TX                         | 75-1790186 | 501(c)(3)                     | 17,066                   |                                   |                                                       |                                        | Note (1) - b                       |
| (6)  | RMHC of Arkansas, Inc.<br>1009 Wolfe Street Little Rock AR                      | 71-0525252 | 501(c)(3)                     | 42,848                   |                                   |                                                       |                                        | Note (1) - b                       |
| (7)  | RMHC of Arkoma, Inc.<br>518 S. Thompson St., Suite D Springdale AR              | 73-1563945 | 501(c)(3)                     | 44,360                   |                                   |                                                       |                                        | Note (1) - b,f                     |
| (8)  | RMHC of Augusta, Inc.<br>938 Greene Street Augusta GA                           | 58-1509465 | 501(c)(3)                     | 25,653                   |                                   |                                                       |                                        | Note (1) - b,d                     |
| (9)  | RMHC of Austin & Central Texas, Inc.<br>1315 Barbara Jordan Boulevard Austin TX | 74-2277664 | 501(c)(3)                     | 69,239                   |                                   |                                                       |                                        | Note (1) - b,d,g                   |
| (10) | RMHC of Baltimore, Inc.<br>635 West Lexington Street Baltimore MD               | 52-1184957 | 501(c)(3)                     | 126,049                  |                                   |                                                       |                                        | Note (1) - b                       |
| (11) | RMHC of Beaumont, Inc.<br>3000 West Cedar Beaumont TX                           | 76-0450065 | 501(c)(3)                     | 9,455                    |                                   |                                                       |                                        | Note (1) - b                       |
| (12) | RMHC of Bismarck, ND Inc.<br>609 North 7th Street Bismarck ND                   | 36-3705683 | 501(c)(3)                     | 13,612                   |                                   |                                                       |                                        | Note (1) - b,d                     |

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

294

3 Enter total number of other organizations listed in the line 1 table

0

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) (2013)

SCHEDULE I  
(Form 990)

Schedule I, Page 1a

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

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

OMB No 1545-0047

2013

Open to Public  
Inspection

Department of the Treasury  
Internal Revenue Service

Name of the organization

RONALD MCDONALD HOUSE CHARITIES, INC.

Employer identification number

36-2934689

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ Yes ☐ No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed

| 1    | (a) Name and address of organization or government                              | (b) EIN    | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|------|---------------------------------------------------------------------------------|------------|-------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| (1)  | RMHC of Burlington, Vermont, Inc.<br>16 South Winooski Avenue Burlington VT     | 03-0287584 | 501(c)(3)                     | 19,221                   |                                   |                                                       |                                        | Note (1) - b                       |
| (2)  | RMHC of Central Alabama, Inc.<br>4210 Lomac Street Montgomery AL                | 63-1122169 | 501(c)(3)                     | 22,019                   |                                   |                                                       |                                        | Note (1) - b                       |
| (3)  | RMHC of Central Florida, Inc.<br>1030 N. Orange Avenue, Suite 105 Orlando FL    | 59-3211250 | 501(c)(3)                     | 109,483                  |                                   |                                                       |                                        | Note (1) - b                       |
| (4)  | RMHC of Central Georgia, Inc.<br>1160 Forsyth Street Macon GA                   | 58-2473799 | 501(c)(3)                     | 14,746                   |                                   |                                                       |                                        | Note (1) - b,c                     |
| (5)  | RMHC of Central Illinois, Inc.<br>610 North Seventh Street Springfield IL       | 37-1145155 | 501(c)(3)                     | 62,894                   |                                   |                                                       |                                        | Note (1) - b                       |
| (6)  | RMHC of Central Indiana, Inc.<br>111 Monument Circle, Suite 882 Indianapolis IN | 35-1788444 | 501(c)(3)                     | 118,479                  |                                   |                                                       |                                        | Note (1) - b,d                     |
| (7)  | RMHC of Central Iowa, Inc.<br>1441 Pleasant Street Des Moines IA                | 42-1117423 | 501(c)(3)                     | 53,688                   |                                   |                                                       |                                        | Note (1) - b,d                     |
| (8)  | RMHC of Central Ohio, Inc.<br>711 E. Livingston Avenue Columbus, OH             | 31-0890152 | 501(c)(3)                     | 282,347                  |                                   |                                                       |                                        | Note (1) - a,b                     |
| (9)  | RMHC of Central Oregon, Inc.<br>1700 NE Purcell Boulevard Bend OR               | 93-1125838 | 501(c)(3)                     | 6,575                    |                                   |                                                       |                                        | Note (1) - b                       |
| (10) | RMHC of Central PA, Inc.<br>745 West Governor Road Hershey PA                   | 23-2204761 | 501(c)(3)                     | 69,764                   |                                   |                                                       |                                        | Note (1) - b                       |
| (11) | RMHC of Charleston, SC, Inc.<br>81 Gadsen Street Charleston SC                  | 57-0724845 | 501(c)(3)                     | 15,840                   |                                   |                                                       |                                        | Note (1) - b                       |
| (12) | RMHC of Charlottesville, VA, Inc.<br>300 9th Street, SW Charlottesville VA      | 54-1160157 | 501(c)(3)                     | 25,138                   |                                   |                                                       |                                        | Note (1) - b                       |

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3 Enter total number of other organizations listed in the line 1 table

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Schedule I (Form 990) (2013)

SCHEDULE I  
(Form 990)

Schedule I, Page 1b

OMB No. 1545-0047

2013

Open to Public  
Inspection

Department of the Treasury  
Internal Revenue Service

Name of the organization

RONALD McDONALD HOUSE CHARITIES, INC.

Employer identification number

36-2934689

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ Yes ☐ No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed

| 1    | (a) Name and address of organization or government                                             | (b) EIN    | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|------|------------------------------------------------------------------------------------------------|------------|-------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| (1)  | RMHC of Chicagoland & Northwest Indiana, Inc.<br>1301 W. 22nd Street, Suite 905 Oak Brook IL   | 36-3532553 | 501(c)(3)                     | 320,324                  |                                   |                                                       |                                        | Note (1) - b,d                     |
| (2)  | RMHC of Columbia, SC, Inc.<br>5000 Thurmond Mall, Suite 108 Columbia SC                        | 57-0725736 | 501(c)(3)                     | 33,484                   |                                   |                                                       |                                        | Note (1) - b,d                     |
| (3)  | RMHC of Connecticut and Western Massachusetts, Inc.<br>501 George Street, Suite A New Haven CT | 06-1239203 | 501(c)(3)                     | 109,876                  |                                   |                                                       |                                        | Note (1) - b,d                     |
| (4)  | RMHC of Corpus Christi, Inc.<br>3402 Fort Worth Street Corpus Christi TX                       | 74-2378671 | 501(c)(3)                     | 31,004                   |                                   |                                                       |                                        | Note (1) - b                       |
| (5)  | RMHC of Denver, Inc.<br>1300 E. 21st Avenue Denver CO                                          | 84-0728926 | 501(c)(3)                     | 180,645                  |                                   |                                                       |                                        | Note (1) - b,d,f                   |
| (6)  | RMHC of Eastern Iowa and Western Illinois, Inc.<br>730 Hawkins Drive Iowa City IA              | 42-1189783 | 501(c)(3)                     | 64,356                   |                                   |                                                       |                                        | Note (1) - b,d                     |
| (7)  | RMHC of Eastern New England, Inc.<br>3 Industrial Drive, #6 Windham NH                         | 22-2760752 | 501(c)(3)                     | 334,541                  |                                   |                                                       |                                        | Note (1) - b,d                     |
| (8)  | RMHC of Eastern Wisconsin, Inc.<br>8948 Watertown Plank Road Milwaukee WI                      | 39-1433107 | 501(c)(3)                     | 332,725                  |                                   |                                                       |                                        | Note (1) - a,b,d                   |
| (9)  | RMHC of El Paso, Inc.<br>300 East California Avenue El Paso TX                                 | 74-2257357 | 501(c)(3)                     | 58,132                   |                                   |                                                       |                                        | Note (1) - b,d                     |
| (10) | RMHC of Erie, Inc.<br>P.O. Box 9248 Erie PA                                                    | 25-1529707 | 501(c)(3)                     | 13,920                   |                                   |                                                       |                                        | Note (1) - b                       |
| (11) | RMHC of Greater Chattanooga, Inc.<br>200 Central Avenue Chattanooga TN                         | 62-1327855 | 501(c)(3)                     | 53,775                   |                                   |                                                       |                                        | Note (1) - b,d                     |
| (12) | RMHC of Greater Cincinnati, Inc.<br>350 Erkenbrecher Avenue Cincinnati OH                      | 31-0965333 | 501(c)(3)                     | 67,366                   |                                   |                                                       |                                        | Note (1) - b                       |

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3 Enter total number of other organizations listed in the line 1 table

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) (2013)

SCHEDULE I  
(Form 990)

Schedule I, Page 1c

OMB No. 1545-0047

2013

Open to Public  
Inspection

Department of the Treasury  
Internal Revenue Service

Name of the organization

RONALD McDONALD HOUSE CHARITIES, INC.

Employer identification number

36-2934689

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ Yes ☐ No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed

| 1    | (a) Name and address of organization or government                                  | (b) EIN    | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|------|-------------------------------------------------------------------------------------|------------|-------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| (1)  | RMHC of Greater Houston/Galveston, Inc.<br>3664 Walnut Bend Lane, Bldg B Houston TX | 76-0315037 | 501(c)(3)                     | 236,835                  |                                   |                                                       |                                        | Note (1) - b,d                     |
| (2)  | RMHC of Greater Las Vegas, Inc.<br>2323 Potosi Street Las Vegas NV                  | 94-3108570 | 501(c)(3)                     | 114,988                  |                                   |                                                       |                                        | Note (1) - b,d                     |
| (3)  | RMHC of Greater New Orleans, Inc.<br>4403 Canal Street New Orleans, LA              | 72-0882569 | 501(c)(3)                     | 116,807                  |                                   |                                                       |                                        | Note (1) - b,d                     |
| (4)  | RMHC of Greater North Texas, Inc.<br>3625 N. Hall Street, Suite 1100 Dallas TX      | 75-2238261 | 501(c)(3)                     | 214,855                  |                                   |                                                       |                                        | Note (1) - b,d                     |
| (5)  | RMHC of Greater Washington D.C. Inc.<br>3727 145h Street, NE Washington DC          | 52-1132262 | 501(c)(3)                     | 204,529                  |                                   |                                                       |                                        | Note (1) - b,d                     |
| (6)  | RMHC of Hawaii, Inc.<br>1970 Judd Hillside Road Honolulu HI                         | 99-0222124 | 501(c)(3)                     | 43,970                   |                                   |                                                       |                                        | Note (1) - b                       |
| (7)  | RMHC of Idaho, Inc.<br>101 Warm Springs Avenue Boise ID                             | 94-3030996 | 501(c)(3)                     | 51,263                   |                                   |                                                       |                                        | Note (1) - b                       |
| (8)  | RMHC of Indiana-Michiana, Inc.<br>615 N. Michigan Street South Bend IN              | 35-1831691 | 501(c)(3)                     | 119,495                  |                                   |                                                       |                                        | Note (1) - b                       |
| (9)  | RMHC of Jacksonville, Inc.<br>824 Children's Way Jacksonville FL                    | 59-2625008 | 501(c)(3)                     | 27,008                   | 48,659                            | FMV                                                   | Equipment                              | Note (1) - b,c                     |
| (10) | RMHC of Kansas City, Inc.<br>2502 Cherry Street Kansas City MO                      | 43-1190760 | 501(c)(3)                     | 58,513                   |                                   |                                                       |                                        | Note (1) - b,c                     |
| (11) | RMHC of Kentucky, Inc.<br>550 South First Street Louisville KY                      | 31-1053467 | 501(c)(3)                     | 64,306                   |                                   |                                                       |                                        | Note (1) - b,d                     |
| (12) | RMHC of Knoxville, Tennessee, Inc.<br>1705 W. Clinch Avenue Knoxville TN            | 58-1510276 | 501(c)(3)                     | 58,386                   |                                   |                                                       |                                        | Note (1) - b                       |

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3 Enter total number of other organizations listed in the line 1 table

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Schedule I (Form 990) (2013)

SCHEDULE I  
(Form 990)

Schedule I, Page 1d

OMB No. 1545-0047

2013

Open to Public  
Inspection

Department of the Treasury  
Internal Revenue Service  
Name of the organization

RONALD MCDONALD HOUSE CHARITIES, INC.

Employer identification number

36-2934689

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ Yes ☐ No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed

| 1    | (a) Name and address of organization or government                     | (b) EIN    | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|------|------------------------------------------------------------------------|------------|-------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| (1)  | RMHC of Madison, Inc.<br>2716 Marshall Court Madison WI                | 39-1655790 | 501(c)(3)                     | 54,057                   | 14,335                            | FMV                                                   | Equipment                              | Note (1) - b,c                     |
| (2)  | RMHC of Mahoning Valley & Western PA<br>4900 Market Street Boardman OH | 34-1748911 | 501(c)(3)                     | 16,449                   |                                   |                                                       |                                        | Note (1) - b                       |
| (3)  | RMHC of Maine, Inc.<br>250 Brackett St. Portland ME                    | 22-2912513 | 501(c)(3)                     | 76,033                   |                                   |                                                       |                                        | Note (1) - b                       |
| (4)  | RMHC of Marshfield, Inc.<br>803 West North Street Marshfield WI        | 93-0833012 | 501(c)(3)                     | 17,586                   |                                   |                                                       |                                        | Note (1) - b                       |
| (5)  | RMHC of Memphis, Inc.<br>535 Alabama Avenue Memphis TN                 | 62-1220396 | 501(c)(3)                     | 68,083                   |                                   |                                                       |                                        | Note (1) - b                       |
| (6)  | RMHC of Mid-Missouri, Inc.<br>3501 Lansing Ave Columbia MO             | 43-1225829 | 501(c)(3)                     | 15,526                   |                                   |                                                       |                                        | Note (1) - b                       |
| (7)  | RMHC of Mid-Penn Region, Inc.<br>1018 Bel Vista Court St. Marys PA     | 25-1665067 | 501(c)(3)                     | 16,798                   |                                   |                                                       |                                        | Note (1) - b                       |
| (8)  | RMHC of Mississippi, Inc.<br>2524 N. State Street Jackson MS           | 63-0906927 | 501(c)(3)                     | 55,198                   | 4,822                             | FMV                                                   | Software                               | Note (1) - b,c                     |
| (9)  | RMHC of Mobile, Inc.<br>1626 Springhill Avenue Mobile AL               | 63-1181258 | 501(c)(3)                     | 23,310                   |                                   |                                                       |                                        | Note (1) - b                       |
| (10) | RMHC of Montana, Inc.<br>3003 Fort Missoula Road Missoula MT           | 81-0400667 | 501(c)(3)                     | 25,171                   |                                   |                                                       |                                        | Note (1) - b                       |
| (11) | RMHC of Morgantown, WV, Inc.<br>841 Country Club Drive Morgantown WV   | 55-0663138 | 501(c)(3)                     | 74,869                   |                                   |                                                       |                                        | Note (1) - b,f                     |
| (12) | RMHC of Nashville, Inc.<br>2144 Fairfax Avenue Nashville TN            | 62-1310717 | 501(c)(3)                     | 63,841                   |                                   |                                                       |                                        | Note (1) - b                       |

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3 Enter total number of other organizations listed in the line 1 table

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) (2013)

SCHEDULE I  
(Form 990)

Schedule I, Page 1e

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

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

▶ Attach to Form 990.

Department of the Treasury  
Internal Revenue Service  
Name of the organization

RONALD McDONALD HOUSE CHARITIES, INC.

Employer identification number

36-2934689

OMB No. 1545-0047

2013

Open to Public  
Inspection

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ Yes ☐ No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed

| 1 | (a) Name and address of organization or government                                    | (b) EIN    | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|---------------------------------------------------------------------------------------|------------|-------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
|   | (1) RMHC of New Mexico, Inc.<br>1011 Yale Avenue, NE Albuquerque NM                   | 85-0283204 | 501(c)(3)                     | 41,986                   |                                   |                                                       |                                        | Note (1) - b                       |
|   | (2) RMHC of Norfolk, Inc.<br>404 Colley Avenue Norfolk VA                             | 54-1139497 | 501(c)(3)                     | 52,279                   |                                   |                                                       |                                        | Note (1) - b,d                     |
|   | (3) RMHC of North Carolina, Inc.<br>4601 Six Forks Road, Suite 200 Raleigh NC         | 56-1452714 | 501(c)(3)                     | 297,542                  |                                   |                                                       |                                        | Note (1) - b,d                     |
|   | (4) RMHC of North Central Florida, Inc.<br>1600 SW 14th Street Gainesville, FL        | 59-1887896 | 501(c)(3)                     | 47,008                   | 48,659                            | FMV                                                   | Equipment                              | Note (1) - a,b,c                   |
|   | (5) RMHC of Northeast Kansas, Inc.<br>825 SW Buchanan Street Topeka KS                | 48-1022967 | 501(c)(3)                     | 10,084                   |                                   |                                                       |                                        | Note (1) - b                       |
|   | (6) RMHC of Northeast Louisiana, Inc.<br>200 S. Third Street Monroe LA                | 72-1022797 | 501(c)(3)                     | 16,419                   |                                   |                                                       |                                        | Note (1) - b                       |
|   | (7) RMHC of Northeast Texas<br>PO Box 2920 Athens TX                                  | 75-2432188 | 501(c)(3)                     | 15,814                   |                                   |                                                       |                                        | Note (1) - b                       |
|   | (8) RMHC of Northeast Indiana, Inc.<br>11109 Parkview Plaza Fort Wayne IN             | 35-1950376 | 501(c)(3)                     | 18,644                   |                                   |                                                       |                                        | Note (1) - b                       |
|   | (9) RMHC of Northeastern Ohio, Inc.<br>6611 Rockside Road, Suite 105 Independence OH  | 34-1574291 | 501(c)(3)                     | 84,648                   |                                   |                                                       |                                        | Note (1) - b                       |
|   | (10) RMHC of Northeastern Pennsylvania, Inc.<br>104 S. State Street Clarks Summit, PA | 25-1719864 | 501(c)(3)                     | 48,310                   |                                   |                                                       |                                        | Note (1) - b                       |
|   | (11) RMHC of Northern California, Inc.<br>2555 49th Street Sacramento CA              | 68-0147193 | 501(c)(3)                     | 144,213                  |                                   |                                                       |                                        | Note (1) - b,d                     |
|   | (12) RMHC of Northwest Florida, Inc.<br>5200 Bayou Blvd Pensacola FL                  | 59-2172279 | 501(c)(3)                     | 26,939                   |                                   |                                                       |                                        | Note (1) - b                       |

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3 Enter total number of other organizations listed in the line 1 table

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) (2013)

SCHEDULE I  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Schedule I, Page 1f

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

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

OMB No 1545-0047

2013

Open to Public  
Inspection

Name of the organization

RONALD MCDONALD HOUSE CHARITIES, INC.

Employer identification number

36-2934689

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ Yes ☐ No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

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| 1 | (a) Name and address of organization or government                                            | (b) EIN    | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|-----------------------------------------------------------------------------------------------|------------|-------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
|   | (1) RMHC of Northwest Ohio, Inc.<br>3883 Monroe Street Toledo OH                              | 34-1349742 | 501(c)(3)                     | 34,511                   |                                   |                                                       |                                        | Note (1) - b                       |
|   | (2) RMHC of Oklahoma City, Inc.<br>1301 North East 14th Street Oklahoma City OK               | 73-1103242 | 501(c)(3)                     | 90,333                   |                                   |                                                       |                                        | Note (1) - b, d                    |
|   | (3) RMHC of Oregon and Southwest Washington, Inc.<br>2620 North Commercial Avenue Portland OR | 93-0806912 | 501(c)(3)                     | 104,577                  |                                   |                                                       |                                        | Note (1) - a, b                    |
|   | (4) RMHC of Outstate Michigan, Inc.<br>P.O. Box 534 Hudsonville MI                            | 38-2826089 | 501(c)(3)                     | 190,526                  |                                   |                                                       |                                        | Note (1) - b, d                    |
|   | (5) RMHC of Phoenix, Inc.<br>501 East Roanoke Avenue Phoenix AZ                               | 86-0483792 | 501(c)(3)                     | 164,631                  |                                   |                                                       |                                        | Note (1) - b, d                    |
|   | (6) RMHC of Pittsburgh, Inc.<br>451 44th Street Pittsburgh, PA                                | 25-1320272 | 501(c)(3)                     | 98,965                   |                                   |                                                       |                                        | Note (1) - b                       |
|   | (7) RMHC of Richmond, Virginia, Inc.<br>2330 Monument Avenue Richmond VA                      | 52-1359486 | 501(c)(3)                     | 59,160                   |                                   |                                                       |                                        | Note (1) - b, d                    |
|   | (8) RMHC of Rochester, NY, Inc.<br>333 Westmoreland Drive Rochester NY                        | 16-1271311 | 501(c)(3)                     | 25,165                   |                                   |                                                       |                                        | Note (1) - b                       |
|   | (9) RMHC of San Antonio, Texas, Inc.<br>4803 Sid Katz San Antonio TX                          | 74-2140528 | 501(c)(3)                     | 117,958                  |                                   |                                                       |                                        | Note (1) - b, d                    |
|   | (10) RMHC of San Diego, Inc.<br>2929 Childrens Way San Diego CA                               | 95-3251490 | 501(c)(3)                     | 83,755                   |                                   |                                                       |                                        | Note (1) - b                       |
|   | (11) RMHC of Siouxland, Inc.<br>2500 Nebraska Street Sioux City IA                            | 42-1369988 | 501(c)(3)                     | 13,924                   |                                   |                                                       |                                        | Note (1) - b, d                    |
|   | (12) RMHC of South Dakota, Inc.<br>825 S. Lake Avenue Sioux Falls, SD                         | 46-0371152 | 501(c)(3)                     | 27,059                   |                                   |                                                       |                                        | Note (1) - b                       |

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3 Enter total number of other organizations listed in the line 1 table

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) (2013)

SCHEDULE I  
(Form 990)

Schedule I, Page 1g

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

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

▶ Attach to Form 990.

Department of the Treasury  
Internal Revenue Service

Name of the organization

RONALD MCDONALD HOUSE CHARITIES, INC.

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ Yes ☐ No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed

| 1    | (a) Name and address of organization or government                         | (b) EIN    | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|------|----------------------------------------------------------------------------|------------|-------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| (1)  | RMHC of South Florida, Inc.<br>15 SE 15th Street Ft. Lauderdale FL         | 59-1899866 | 501(c)(3)                     | 170,498                  |                                   |                                                       |                                        | Note (1) - b,d                     |
| (2)  | RMHC of Southeast Michigan, Inc.<br>3911 Beaubien Street Detroit MI        | 38-2182406 | 501(c)(3)                     | 97,865                   |                                   |                                                       |                                        | Note (1) - b                       |
| (3)  | RMHC of Southern Arizona, Inc.<br>P.O. Box 40725 Tucson AZ                 | 95-3526934 | 501(c)(3)                     | 32,848                   |                                   |                                                       |                                        | Note (1) - b                       |
| (4)  | RMHC of Southern California, Inc.<br>765 S. Pasadena Avenue Pasadena CA    | 95-3167869 | 501(c)(3)                     | 489,329                  |                                   |                                                       |                                        | Note (1) - b,d                     |
| (5)  | RMHC of Southern Colorado, Inc.<br>311 North Logan Colorado Springs CO     | 84-1013843 | 501(c)(3)                     | 39,480                   |                                   |                                                       |                                        | Note (1) - b                       |
| (6)  | RMHC of Southern West Virginia, Inc.<br>302 30th Street SE Charleston, WV  | 55-0631080 | 501(c)(3)                     | 38,091                   |                                   |                                                       |                                        | Note (1) - b                       |
| (7)  | RMHC of Southwest Florida, Inc.<br>16100 Roserush Court Fort Myers, FL     | 11-3704163 | 501(c)(3)                     | 47,114                   |                                   |                                                       |                                        | Note (1) - b,d                     |
| (8)  | RMHC of Southwest Virginia, Inc.<br>2224 South Jefferson Street Roanoke VA | 54-1244769 | 501(c)(3)                     | 30,623                   |                                   |                                                       |                                        | Note (1) - b                       |
| (9)  | RMHC of Spokane, Inc.<br>1015 W. 5th Avenue Spokane, WA                    | 91-1176115 | 501(c)(3)                     | 57,451                   |                                   |                                                       |                                        | Note (1) - b                       |
| (10) | RMHC of St. Louis, Inc.<br>3450 Park Avenue St. Louis MO                   | 43-1160478 | 501(c)(3)                     | 81,870                   |                                   |                                                       |                                        | Note (1) - b,c                     |
| (11) | RMHC of Tallahassee, Inc.<br>712 East 7th Avenue Tallahassee FL            | 59-2794505 | 501(c)(3)                     | 28,975                   |                                   |                                                       |                                        | Note (1) - b,d                     |
| (12) | RMHC of Tampa Bay, Inc.<br>28 Columbia Drive Tampa Bay, FL                 | 59-1835985 | 501(c)(3)                     | 306,795                  |                                   |                                                       |                                        | Note (1) - b,d                     |

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

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For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) (2013)

SCHEDULE I  
(Form 990)

Schedule I, Page 1h

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

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

Department of the Treasury  
Internal Revenue Service  
Name of the organization

RONALD MCDONALD HOUSE CHARITIES, INC.

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ Yes ☐ No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed

| 1    | (a) Name and address of organization or government                             | (b) EIN    | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|------|--------------------------------------------------------------------------------|------------|-------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| (1)  | RMHC of Temple, Texas, Inc.<br>2415 South 47th Street Temple TX                | 74-2345274 | 501(c)(3)                     | 31,431                   |                                   |                                                       |                                        | Note (1) - b,d                     |
| (2)  | RMHC of Texarkana, Inc.<br>2015 Galleria Oaks Drive Texarkana TX               | 75-2561173 | 501(c)(3)                     | 21,695                   |                                   |                                                       |                                        | Note (1) - b                       |
| (3)  | RMHC of the Bay Area, Inc.<br>520 Sand Hill Road Palo Alto CA                  | 94-3083711 | 501(c)(3)                     | 170,500                  |                                   |                                                       |                                        | Note (1) - b,d                     |
| (4)  | RMHC of the Bluegrass, Inc.<br>P.O. Box 22414 Lexington KY                     | 61-0986164 | 501(c)(3)                     | 44,694                   | 645                               | FMV                                                   | Auction Items                          | Note (1) - b                       |
| (5)  | RMHC of the Capital Region, Inc.<br>139 South Lake Avenue Albany NY            | 22-2356004 | 501(c)(3)                     | 45,725                   |                                   |                                                       |                                        | Note (1) - b                       |
| (6)  | RMHC of the Carolinas, Inc.<br>706 Grove Road Greenville SC                    | 57-0844123 | 501(c)(3)                     | 67,026                   |                                   |                                                       |                                        | Note (1) - b,d                     |
| (7)  | RMHC of the Central Valley, Inc.<br>9161 Randall Way Madera CA                 | 94-2864490 | 501(c)(3)                     | 35,707                   |                                   |                                                       |                                        | Note (1) - b                       |
| (8)  | RMHC of the Coastal Empire, Inc.<br>4710 Waters Avenue Savannah GA             | 58-1630107 | 501(c)(3)                     | 54,093                   |                                   |                                                       |                                        | Note (1) - a,b                     |
| (9)  | RMHC of the Four States<br>3402 S. Jackson Joplin MO                           | 43-1758397 | 501(c)(3)                     | 12,518                   |                                   |                                                       |                                        | Note (1) - b                       |
| (10) | RMHC of the Huron Valley<br>1600 Washington Heights Ann Arbor MI               | 38-2473817 | 501(c)(3)                     | 17,842                   |                                   |                                                       |                                        | Note (1) - b                       |
| (11) | RMHC of the Intermountain Area, Inc.<br>1135 E. South Temple Salt Lake City UT | 74-2386043 | 501(c)(3)                     | 131,465                  |                                   |                                                       |                                        | Note (1) - b,f                     |
| (12) | RMHC of the Miami Valley Region, Inc.<br>555 Valley Street Dayton OH           | 31-0964793 | 501(c)(3)                     | 51,067                   |                                   |                                                       |                                        | Note (1) - b                       |

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3 Enter total number of other organizations listed in the line 1 table

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Schedule I (Form 990) (2013)

**SCHEDULE I  
(Form 990)****Grants and Other Assistance to Organizations,  
Governments, and Individuals in the United States**

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

▶ Attach to Form 990.

Department of the Treasury  
Internal Revenue Service

Name of the organization

RONALD McDONALD HOUSE CHARITIES, INC.

Employer identification number

36-2934689

OMB No 1545-0047

**2013****Open to Public  
Inspection****Part I General Information on Grants and Assistance**

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ Yes ☐ No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

**Part II Grants and Other Assistance to Governments and Organizations in the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed

| 1    | (a) Name and address of organization or government                                       | (b) EIN    | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|------|------------------------------------------------------------------------------------------|------------|-------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| (1)  | RMHC of the New York Tri-State Area, Inc.<br>111 Wood Ave South, Ste 400 Iselin NJ       | 22-3188156 | 501(c)(3)                     | 451,960                  |                                   |                                                       |                                        | Note (1) - b,d                     |
| (2)  | RMHC of the Ohio Valley, Inc.<br>3540 Washington Avenue Evansville IN                    | 35-1748468 | 501(c)(3)                     | 27,238                   |                                   |                                                       |                                        | Note (1) - b,d                     |
| (3)  | RMHC of the Ozarks, Inc.<br>949 E. Primrose Street Springfield MO                        | 43-1371143 | 501(c)(3)                     | 26,164                   |                                   |                                                       |                                        | Note (1) - b                       |
| (4)  | RMHC of the Philadelphia Region, Inc.<br>200 S. Broad Street, 10th Floor Philadelphia PA | 23-2705170 | 501(c)(3)                     | 313,022                  |                                   |                                                       |                                        | Note (1) - b,d                     |
| (5)  | RMHC of the Red River Valley, Inc.<br>1330 18th Avenue South Fargo ND                    | 45-0365598 | 501(c)(3)                     | 19,907                   |                                   |                                                       |                                        | Note (1) - b                       |
| (6)  | RMHC of the Rio Grande Valley, Inc.<br>1720 Treasure Hills Boulevard Harlingen TX        | 74-2656780 | 501(c)(3)                     | 59,134                   |                                   |                                                       |                                        | Note (1) - b,d                     |
| (7)  | RMHC of the Southwest, Inc.<br>3413 - 10th Street Lubbock TX                             | 75-1915179 | 501(c)(3)                     | 44,458                   |                                   |                                                       |                                        | Note (1) - b,d                     |
| (8)  | RMHC of the Tri-State, Inc.<br>1500 17th Street Huntington WV                            | 55-0643445 | 501(c)(3)                     | 29,059                   |                                   |                                                       |                                        | Note (1) - b                       |
| (9)  | RMHC of TriState, Inc.<br>240 Berger Road Paducah KY                                     | 61-1224406 | 501(c)(3)                     | 28,728                   |                                   |                                                       |                                        | Note (1) - b                       |
| (10) | RMHC of Tulsa, Inc.<br>6102 South Hudson Avenue Tulsa OK                                 | 73-1313892 | 501(c)(3)                     | 33,249                   |                                   |                                                       |                                        | Note (1) - b                       |
| (11) | RMHC of West Georgia, Inc.<br>1959 Hamilton Road Columbus GA                             | 58-2065776 | 501(c)(3)                     | 11,195                   |                                   |                                                       |                                        | Note (1) - b                       |
| (12) | RMHC of Western New York, Inc.<br>780 West Ferry Street Buffalo NY                       | 22-2438932 | 501(c)(3)                     | 29,307                   |                                   |                                                       |                                        | Note (1) - b                       |

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3 Enter total number of other organizations listed in the line 1 table

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Schedule I (Form 990) (2013)

**SCHEDULE I**  
**(Form 990)****Grants and Other Assistance to Organizations,  
Governments, and Individuals in the United States**

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

▶ Attach to Form 990.

OMB No. 1545-0047

**2013****Open to Public  
Inspection**Department of the Treasury  
Internal Revenue Service

Name of the organization

RONALD McDONALD HOUSE CHARITIES, INC.

Employer identification number

36-2934689

**Part I General Information on Grants and Assistance**

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ Yes ☐ No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States ☒ Yes ☐ No

**Part II Grants and Other Assistance to Governments and Organizations in the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed

| 1    | (a) Name and address of organization or government                                                          | (b) EIN    | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|------|-------------------------------------------------------------------------------------------------------------|------------|-------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| (1)  | RMHC of Western Washington & Alaska, Inc.<br>5130 40th Avenue N.E. Seattle WA                               | 91-1061043 | 501(c)(3)                     | 206,908                  |                                   |                                                       |                                        | Note (1) - b                       |
| (2)  | RMHC of Western WI & Southeastern MN, Inc.<br>2700 National Drive, Suite 100 Onalaska WI                    | 39-1794402 | 501(c)(3)                     | 67,241                   |                                   |                                                       |                                        | Note (1) - b,d                     |
| (3)  | RMHC of Wichita, Inc.<br>1110 N. Emporia Wichita KS                                                         | 48-0918101 | 501(c)(3)                     | 28,551                   |                                   |                                                       |                                        | Note (1) - b                       |
| (4)  | RMHC of Northern Nevada, Inc.<br>323 Maine Street Reno NV                                                   | 94-2863819 | 501(c)(3)                     | 30,070                   |                                   |                                                       |                                        | Note (1) - b,d                     |
| (5)  | RMHC, Upper Midwest<br>818 Fulton Street SE Minneapolis MN                                                  | 41-1313107 | 501(c)(3)                     | 117,639                  |                                   |                                                       |                                        | Note (1) - b                       |
| (6)  | Southern Appalachian RMHC, Inc.<br>418 N. State of Franklin Road Johnson City TN                            | 62-1578123 | 501(c)(3)                     | 40,618                   |                                   |                                                       |                                        | Note (1) - b                       |
| (7)  | Fundacion Infantil Ronald McDonald Puerto Rico, Inc.<br>300 Felisa Rincon de Gautier Ave Ste 10 San Juan PR | 66-0468226 | 501(c)(3)                     | 50,107                   |                                   |                                                       |                                        | Note (1) - b,c                     |
| (8)  | Philadelphia RMH, Inc.<br>200 S. Broad Street, 10th Floor Philadelphia PA                                   | 23-7377505 | 501(c)(3)                     | 53,500                   |                                   |                                                       |                                        | Note (1) - c                       |
| (9)  | RMH of Dallas, Inc.<br>4707 Bengal Street Dallas TX                                                         | 75-1609401 | 501(c)(3)                     | 48,450                   |                                   |                                                       |                                        | Note (1) - a                       |
| (10) | RMH of Delaware, Inc.<br>1901 Rockland Road Wilmington DE                                                   | 51-0295320 | 501(c)(3)                     | 5,500                    |                                   |                                                       |                                        | Note (1) - c                       |
| (11) | RMH of Scranton, Inc.<br>332 Wheeler Avenue Scranton PA                                                     | 22-2400153 | 501(c)(3)                     | 10,000                   |                                   |                                                       |                                        | Note (1) - f                       |
| (12) | Tooth Truck Inc.<br>949 E. Primrose Street Springfield MO                                                   | 41-2028871 | 501(c)(3)                     | 30,000                   |                                   |                                                       |                                        | Note (1) - e                       |

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3 Enter total number of other organizations listed in the line 1 table

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Schedule I (Form 990) (2013)

SCHEDULE I  
(Form 990)

Schedule I, Page 1k

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

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

▶ Attach to Form 990.

Department of the Treasury  
Internal Revenue Service

Name of the organization

RONALD McDONALD HOUSE CHARITIES, INC.

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ Yes ☐ No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed

| 1    | (a) Name and address of organization or government                                           | (b) EIN    | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|------|----------------------------------------------------------------------------------------------|------------|-------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| (1)  | Beaufort-Jasper-Hampton Comprehensive Health Service, Inc.<br>PO Box 357 Ridgeland SC        | 57-0523586 | 501(c)(3)                     | 17,500                   |                                   |                                                       |                                        | Note (1) - e                       |
| (2)  | UPMC<br>4401 Penn Avenue Pittsburgh PA                                                       | 25-0402510 | 501(c)(3)                     | 25,000                   |                                   |                                                       |                                        | Note (1) - e                       |
| (3)  | VMC Foundation<br>2400 Moorpark Avenue, Suite 207 San Jose CA                                | 77-0187890 | 501(c)(3)                     | 25,000                   |                                   |                                                       |                                        | Note (1) - e                       |
| (4)  | Eye Care Charity of Mid-America<br>732 Goddard Avenue Chesterfield MO                        | 20-0265693 | 501(c)(3)                     |                          | 476,093                           | FMV                                                   | Care Mobile                            | Note (1) - e                       |
| (5)  | John Muir Foundation<br>1341 Galaxy Way, Ste. D Concord CA                                   | 94-2650855 | 501(c)(3)                     | 35,262                   |                                   |                                                       |                                        | Note (1) - e                       |
| (6)  | Rockford Memorial Foundation<br>2400 N. Rockton Ave Rockford IL                              | 36-3197918 | 501(c)(3)                     | 34,000                   |                                   |                                                       |                                        | Note (1) - e                       |
| (7)  | Oral Health America<br>180 N. Michigan Ave., Suite 1150 Chicago IL                           | 36-2382334 | 501(c)(3)                     | 539,767                  |                                   |                                                       |                                        | Note (1) - h                       |
| (8)  | Curamericas Global, Inc.<br>318 W Millbrook Rd., Ste 105 Raleigh NC                          | 56-1400098 | 501(c)(3)                     | 100,000                  |                                   |                                                       |                                        | Note (1) - h                       |
| (9)  | Harlem Childrens Zone Inc.<br>35 E. 125th St., New York NY                                   | 23-7112974 | 501(c)(3)                     | 100,000                  |                                   |                                                       |                                        | Note (1) - i                       |
| (10) | American Red Cross<br>PO Box 37295 Washington DC                                             | 53-0196605 | 501(c)(3)                     | 230,000                  |                                   |                                                       |                                        | Note (1) - i                       |
| (11) | Chicago Music & Dance International Inc. NFP<br>3433 W. Peterson Ave., Chicago IL            | 27-0360346 | 501(c)(3)                     | 14,000                   |                                   |                                                       |                                        | Note (1) - i                       |
| (12) | Office of Cook County Public Guardian<br>C/O Juvenile Div 2245 W Ogden Ave 4th Fl Chicago IL | 36-3166053 | 501(c)(3)                     | 20,000                   |                                   |                                                       |                                        | Note (1) - i                       |

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

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Schedule I (Form 990) (2013)

**SCHEDULE I  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

Name of the organization

**RONALD MCDONALD HOUSE CHARITIES, INC.**

**Part I General Information on Grants and Assistance**

- Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ Yes ☐ No
- Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

**Part II Grants and Other Assistance to Governments and Organizations in the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed

| 1    | (a) Name and address of organization or government                                                         | (b) EIN    | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|------|------------------------------------------------------------------------------------------------------------|------------|-------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| (1)  | Partners Healthcare System Inc.<br>Massachusetts General Hosp. 55 Fruit St Boston MA                       | 04-3230035 | 501(c)(3)                     | 150,000                  |                                   |                                                       |                                        | Note (1) - g                       |
| (2)  | South Elgin Parks & Recreation Foundation<br>The FUNDation 556 Randall Rd Ste 10 South Elgin IL            | 61-1454963 | 501(c)(3)                     | 75,000                   |                                   |                                                       |                                        | Note (1) - g                       |
| (3)  | Baptist Childrens Homes of North Carolina Inc.<br>204 Idol Street Thomasville NC                           | 56-0547499 | 501(c)(3)                     | 57,500                   |                                   |                                                       |                                        | Note (1) - g                       |
| (4)  | All Childrens Hospital Foundation, Inc.<br>P.O. Box 3142 St. Petersburg FL                                 | 59-2481738 | 501(c)(3)                     | 37,500                   |                                   |                                                       |                                        | Note (1) - g                       |
| (5)  | Tampa General Hospital Foundation, Inc.<br>P.O. Box 1289 Tampa FL                                          | 23-7354477 | 501(c)(3)                     | 35,500                   |                                   |                                                       |                                        | Note (1) - g                       |
| (6)  | YMCA of the Inland Northwest Camp Reed<br>1126 N. Monroe Spokane WA                                        | 91-0827958 | 501(c)(3)                     | 33,900                   |                                   |                                                       |                                        | Note (1) - g                       |
| (7)  | Essentia Health Foundation<br>502 East Second Street Duluth MN                                             | 27-1984704 | 501(c)(3)                     | 30,000                   |                                   |                                                       |                                        | Note (1) - g                       |
| (8)  | Bon Secours Richmond Health Care Foundation<br>5801 Bremon Road Richmond VA                                | 54-1201346 | 501(c)(3)                     | 26,000                   |                                   |                                                       |                                        | Note (1) - g                       |
| (9)  | Faiths Lodge<br>4080 West Broadway, Suite 212 Minneapolis MN                                               | 20-4967588 | 501(c)(3)                     | 25,000                   |                                   |                                                       |                                        | Note (1) - g                       |
| (10) | Hillsdale Community Health Center<br>168 South Howell Hillsdale MI                                         | 38-6005550 | 501(c)(3)                     | 25,000                   |                                   |                                                       |                                        | Note (1) - g                       |
| (11) | NorthShore University HealthSystem<br>1033 University Place Suite 450 Evanston IL                          | 36-2167060 | 501(c)(3)                     | 25,000                   |                                   |                                                       |                                        | Note (1) - g                       |
| (12) | Receptions for Research-The Greg Olsen Foundation, Inc.<br>1801 S. Federal Highway 2nd Floor Boca Raton FL | 27-0843891 | 501(c)(3)                     | 25,000                   |                                   |                                                       |                                        | Note (1) - g                       |

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

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Schedule I (Form 990) (2013)

SCHEDULE I  
(Form 990)

Schedule I, Page 1m

OMB No. 1545-0047

2013

Open to Public  
Inspection

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

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

▶ Attach to Form 990.

Department of the Treasury  
Internal Revenue Service

Name of the organization

RONALD McDONALD HOUSE CHARITIES, INC.

Employer identification number

36-2934689

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ Yes ☐ No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed

| 1 | (a) Name and address of organization or government                                                        | (b) EIN    | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|-----------------------------------------------------------------------------------------------------------|------------|-------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
|   | (1) Lee Memorial Health System Foundation Inc.<br>16451 HealthPark Commons Dr Ste200 Fort Myers FL        | 65-0645343 | 501(c)(3)                     | 24,000                   |                                   |                                                       |                                        | Note (1) - g                       |
|   | (2) Viterbo College Inc.<br>900 Viterbo Drive La Crosse WI                                                | 39-0978445 | 501(c)(3)                     | 23,500                   |                                   |                                                       |                                        | Note (1) - g                       |
|   | (3) Medical Team International<br>14150 SW Milton Court Tigard OR                                         | 93-0878944 | 501(c)(3)                     | 23,425                   |                                   |                                                       |                                        | Note (1) - g                       |
|   | (4) St. Louis Blues Fourteen Fund<br>1401 Clark Avenue at Brett Hull Way St. Louis MO                     | 43-1820447 | 501(c)(3)                     | 22,500                   |                                   |                                                       |                                        | Note (1) - g                       |
|   | (5) Erlanger Health System Foundations<br>910 Blackford Street Chattanooga TN                             | 58-1664027 | 501(c)(3)                     | 20,000                   |                                   |                                                       |                                        | Note (1) - g                       |
|   | (6) Oregon Community Foundation<br>1221 SW Yamhill, Ste 100 Portland OR                                   | 23-7315673 | 501(c)(3)                     | 20,000                   |                                   |                                                       |                                        | Note (1) - g                       |
|   | (7) Pine Tree Society For Handicapped Children & Adults Inc.<br>149 Front Street PO Box 518 Bath ME       | 01-0212442 | 501(c)(3)                     | 19,200                   |                                   |                                                       |                                        | Note (1) - g                       |
|   | (8) Bakersfield Memorial Hospital Foundation<br>420 34th Street Bakersfield CA                            | 95-3555043 | 501(c)(3)                     | 17,500                   |                                   |                                                       |                                        | Note (1) - g                       |
|   | (9) University Health System, Inc.<br>2121 Medical Center Way, Suite 110 Knoxville TN                     | 31-1626179 | 501(c)(3)                     | 17,500                   |                                   |                                                       |                                        | Note (1) - g                       |
|   | (10) Foundation of St. Josephs Hospital of Marshfield, Inc.<br>611 North Saint Joseph's Ave Marshfield WI | 39-1684957 | 501(c)(3)                     | 16,500                   |                                   |                                                       |                                        | Note (1) - g                       |
|   | (11) Tallahassee Memorial Healthcare Foundation Inc.<br>1331 East 6th Avenue Tallahassee FL               | 59-1727645 | 501(c)(3)                     | 16,000                   |                                   |                                                       |                                        | Note (1) - g                       |
|   | (12) Benedictine School for Exceptional Children, Inc.<br>14299 Benedictine Lane Ridgely MD               | 52-1479494 | 501(c)(3)                     | 15,000                   |                                   |                                                       |                                        | Note (1) - g                       |

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

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Schedule I (Form 990) (2013)

SCHEDULE I  
(Form 990)Grants and Other Assistance to Organizations,  
Governments, and Individuals in the United StatesComplete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.  
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OMB No. 1545-0047

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Internal Revenue Service

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## Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed

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|------|----------------------------------------------------------------------------------|------------|-------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| (1)  | Catawba Science Center, Inc.<br>243 Third Avenue, NE Hickory NC                  | 56-1073440 | 501(c)(3)                     | 15,000                   |                                   |                                                       |                                        | Note (1) - g                       |
| (2)  | ChildNet Inc.<br>4100 Okeechobee Boulevard West Palm Beach FL                    | 65-1149351 | 501(c)(3)                     | 15,000                   |                                   |                                                       |                                        | Note (1) - g                       |
| (3)  | Childrens Haven Child Care Center<br>2600 S. Sheridan Blvd Denver CO             | 20-1857599 | 501(c)(3)                     | 15,000                   |                                   |                                                       |                                        | Note (1) - g                       |
| (4)  | Childrens Heart Foundation<br>3006 S. Maryland Parkway, Ste 690 Las Vegas NV     | 88-0405506 | 501(c)(3)                     | 15,000                   |                                   |                                                       |                                        | Note (1) - g                       |
| (5)  | Eye Care Charity of Mid-America<br>732 Goddard Avenue Chesterfield MO            | 20-0265693 | 501(c)(3)                     | 15,000                   |                                   |                                                       |                                        | Note (1) - g                       |
| (6)  | Greater Hickory Cooperative Christian Ministry<br>31 First Avenue, SE Hickory NC | 56-0934855 | 501(c)(3)                     | 15,000                   |                                   |                                                       |                                        | Note (1) - g                       |
| (7)  | Kids Food Basket<br>2055 Oak Industrial Drive SE Ste C Grand Rapids MI           | 04-3760991 | 501(c)(3)                     | 15,000                   |                                   |                                                       |                                        | Note (1) - g                       |
| (8)  | Kids Mobility Network Inc.<br>15131 E. Fremont Drive Suite 101 Centennial CO     | 20-3830020 | 501(c)(3)                     | 15,000                   |                                   |                                                       |                                        | Note (1) - g                       |
| (9)  | McMiracle Incorporated<br>37 W. 38th St. Indianapolis IN                         | 20-0403793 | 501(c)(3)                     | 15,000                   |                                   |                                                       |                                        | Note (1) - g                       |
| (10) | Holy Cross Parish<br>221 Farmington Avenue New Britain CT                        | 56-2413799 | 501(c)(3)                     | 14,850                   |                                   |                                                       |                                        | Note (1) - g                       |
| (11) | Boys & Girls Club of the Piedmont Inc.<br>1001 Cochran Street Statesville NC     | 20-3237215 | 501(c)(3)                     | 13,193                   |                                   |                                                       |                                        | Note (1) - g                       |
| (12) | Camp Carefree, Inc.<br>275 Carefree Lane Stokesdale, NC                          | 56-1479260 | 501(c)(3)                     | 13,125                   |                                   |                                                       |                                        | Note (1) - g                       |

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SCHEDULE I  
(Form 990)

Schedule I, Page 10

Grants and Other Assistance to Organizations,  
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Internal Revenue Service

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| 1    | (a) Name and address of organization or government                                                     | (b) EIN    | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
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| (1)  | Ronald McDonald House of Western Michigan, Inc.<br>1323 Cedar NE Grand Rapids MI                       | 38-2781170 | 501(c)(3)                     | 13,105                   |                                   |                                                       |                                        | Note (1) - g                       |
| (2)  | Illinois Professional Golfers Association Foundation, Inc.<br>2901 W. Lake Avenue, Suite A Glenview IL | 36-3793380 | 501(c)(3)                     | 13,000                   |                                   |                                                       |                                        | Note (1) - g                       |
| (3)  | Childrens Home of Reading<br>1010 Centre Avenue Reading PA                                             | 23-1352080 | 501(c)(3)                     | 12,500                   |                                   |                                                       |                                        | Note (1) - g                       |
| (4)  | Childrens Hospital of Philadelphia Foundation<br>3615 Civic Center Blvd. Philadelphia PA               | 23-2237932 | 501(c)(3)                     | 12,500                   |                                   |                                                       |                                        | Note (1) - g                       |
| (5)  | Free Minds Book Club & Writing Workshop<br>2201 P Street, NW Washington DC                             | 43-2066514 | 501(c)(3)                     | 12,500                   |                                   |                                                       |                                        | Note (1) - g                       |
| (6)  | Green Tree School<br>1196 East Washington Lane Philadelphia PA                                         | 23-1513012 | 501(c)(3)                     | 12,500                   |                                   |                                                       |                                        | Note (1) - g                       |
| (7)  | Lutheran Metropolitan Ministry<br>4515 Superior Avenue Cleveland OH                                    | 34-1043756 | 501(c)(3)                     | 12,500                   |                                   |                                                       |                                        | Note (1) - g                       |
| (8)  | Neighborhood Alliance<br>457 Griswold Road Elyria OH                                                   | 34-0714471 | 501(c)(3)                     | 12,500                   |                                   |                                                       |                                        | Note (1) - g                       |
| (9)  | New Jersey Performing Arts Center Corporation<br>1 Center Street Newark NJ                             | 22-2889703 | 501(c)(3)                     | 12,500                   |                                   |                                                       |                                        | Note (1) - g                       |
| (10) | Olivet Boys and Girls Club of Reading and Berks County Inc.<br>1161 Pershing Boulevard Reading PA      | 23-1365380 | 501(c)(3)                     | 12,500                   |                                   |                                                       |                                        | Note (1) - g                       |
| (11) | Partnership for Children of Johnston County, Inc.<br>1406-A Pollock Street Selma NC                    | 56-2063680 | 501(c)(3)                     | 12,500                   |                                   |                                                       |                                        | Note (1) - g                       |
| (12) | Rotary Camp for Children with Special Needs Inc.<br>4460 Rex Lake Drive Akron OH                       | 34-6557819 | 501(c)(3)                     | 12,500                   |                                   |                                                       |                                        | Note (1) - g                       |

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|   | (1) The Nemours Foundation<br>1600 Rockland Road Wilmington DE                       | 59-0634433 | 501(c)(3)                     | 12,500                   |                                   |                                                       |                                        | Note (1) - g                       |
|   | (2) The Salvation Army<br>400 E. 4th Street Texarkana AR                             | 58-0660607 | 501(c)(3)                     | 12,500                   |                                   |                                                       |                                        | Note (1) - g                       |
|   | (3) Wendy Hilliard Foundation<br>550 West 155th Street New York NY                   | 13-3879321 | 501(c)(3)                     | 12,500                   |                                   |                                                       |                                        | Note (1) - g                       |
|   | (4) Wernle Childrens Home Inc.<br>2000 Wernle Rd Richmond IN                         | 35-0868957 | 501(c)(3)                     | 12,500                   |                                   |                                                       |                                        | Note (1) - g                       |
|   | (5) YMCA of Central Stark County<br>1201 30th Street, NW, Suite 200 Canton OH        | 34-0714392 | 501(c)(3)                     | 12,500                   |                                   |                                                       |                                        | Note (1) - g                       |
|   | (6) MedCentral Health System<br>335 Glessner Avenue Mansfield OH                     | 34-0714456 | 501(c)(3)                     | 12,293                   |                                   |                                                       |                                        | Note (1) - g                       |
|   | (7) Achievement Center Inc.<br>2420 West 23rd Street Erie PA                         | 25-0965336 | 501(c)(3)                     | 12,250                   |                                   |                                                       |                                        | Note (1) - g                       |
|   | (8) Mercy Foundation, Inc.<br>2700 Stewart Parkway Roseburg OR                       | 93-6088946 | 501(c)(3)                     | 12,250                   |                                   |                                                       |                                        | Note (1) - g                       |
|   | (9) Kansas Childrens Service League<br>1355 N Custer Wichita KS                      | 48-0543749 | 501(c)(3)                     | 10,955                   |                                   |                                                       |                                        | Note (1) - g                       |
|   | (10) Achievement and Rehabilitation Centers, Inc.<br>10250 NW 53rd Street Sunrise FL | 59-0809623 | 501(c)(3)                     | 10,000                   |                                   |                                                       |                                        | Note (1) - g                       |
|   | (11) Alexandria Seaport Foundation<br>P.O. Box 25036 Alexandria VA                   | 54-1208614 | 501(c)(3)                     | 10,000                   |                                   |                                                       |                                        | Note (1) - g                       |
|   | (12) Bethesda Hospital Foundation, Inc.<br>2815 S. Seacrest Blvd. Boynton Beach FL   | 59-6137805 | 501(c)(3)                     | 10,000                   |                                   |                                                       |                                        | Note (1) - g                       |

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|   | (1) Black Canyon Boys & Girls Club Inc.<br>PO Box 1907 Montrose CO                                | 84-1508048 | 501(c)(3)                     | 10,000                   |                                   |                                                       |                                        | Note (1) - g                       |
|   | (2) Boys & Girls Club of Youngstown<br>2105 Oak Hill Avenue Youngstown OH                         | 34-1039928 | 501(c)(3)                     | 10,000                   |                                   |                                                       |                                        | Note (1) - g                       |
|   | (3) Camp Ocean Harbour Discoveries Inc.<br>841 NW 116th Avenue Plantation FL                      | 77-0675260 | 501(c)(3)                     | 10,000                   |                                   |                                                       |                                        | Note (1) - g                       |
|   | (4) Community Partners<br>11862 Balboa Blvd #405 Granada Hills CA                                 | 95-4302067 | 501(c)(3)                     | 10,000                   |                                   |                                                       |                                        | Note (1) - g                       |
|   | (5) D U E Season Charter School Inc.<br>1000 Atlantic Ave, 3rd Floor Camden NJ                    | 20-0977859 | 501(c)(3)                     | 10,000                   |                                   |                                                       |                                        | Note (1) - g                       |
|   | (6) Family Promise of Grand Rapids<br>906 S. Division Grand Rapids MI                             | 38-3357709 | 501(c)(3)                     | 10,000                   |                                   |                                                       |                                        | Note (1) - g                       |
|   | (7) Family Support Services of North Florida, Inc.<br>4057 Carmichael Ave Ste 101 Jacksonville FL | 59-3759863 | 501(c)(3)                     | 10,000                   |                                   |                                                       |                                        | Note (1) - g                       |
|   | (8) Fellowship of Christian Athletes<br>565 Metro Place South Suite 3040 Dublin OH                | 44-0610626 | 501(c)(3)                     | 10,000                   |                                   |                                                       |                                        | Note (1) - g                       |
|   | (9) Gallion Youth Baseball Club Inc.<br>P.O. Box 813 Gallion OH                                   | 26-1866091 | 501(c)(3)                     | 10,000                   |                                   |                                                       |                                        | Note (1) - g                       |
|   | (10) Little League Baseball Inc.<br>720 Glenwood Road Olde Forge PA                               | 23-1688231 | 501(c)(3)                     | 10,000                   |                                   |                                                       |                                        | Note (1) - g                       |
|   | (11) Los Angeles Music and Art School<br>3630 E. Third St. Los Angeles CA                         | 95-6001948 | 501(c)(3)                     | 10,000                   |                                   |                                                       |                                        | Note (1) - g                       |
|   | (12) Miami Childrens Hospital Foundation Inc.<br>3100 SW 62nd Avenue Miami FI                     | 59-1720704 | 501(c)(3)                     | 10,000                   |                                   |                                                       |                                        | Note (1) - g                       |

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| (1)  | Mobile Meals of Toledo Inc.<br>2200 Jefferson Ave. Toledo OH                                       | 34-1019610 | 501(c)(3)                     | 10,000                   |                                   |                                                       |                                        | Note (1) - g                       |
| (2)  | Palm Beach County Sports Commission<br>1555 Palm Beach Lakes Bl #930 West Palm Beach FL            | 65-0641013 | 501(c)(3)                     | 10,000                   |                                   |                                                       |                                        | Note (1) - g                       |
| (3)  | Palm Beach County Volunteer Fire Rescue Assn Inc.<br>405 Pike Rd. West Palm Beach FL               | 65-0044448 | 501(c)(3)                     | 10,000                   |                                   |                                                       |                                        | Note (1) - g                       |
| (4)  | Santa Clara Valley Boys and Girls Club<br>24909 Newhall Ave. Newhall CA                            | 95-2572622 | 501(c)(3)                     | 10,000                   |                                   |                                                       |                                        | Note (1) - g                       |
| (5)  | Shoes and Clothes for Kids Inc.<br>3311 Perkins Avenue, Suite 205 Cleveland OH                     | 34-1554285 | 501(c)(3)                     | 10,000                   |                                   |                                                       |                                        | Note (1) - g                       |
| (6)  | Springfield Day Nursery Corporation<br>1 Federal Street, Building 101 Springfield MA               | 04-2103855 | 501(c)(3)                     | 10,000                   |                                   |                                                       |                                        | Note (1) - g                       |
| (7)  | St. Josephs Hospital of Tampa Foundation Inc.<br>3001 W. Dr. Martin Luther King Jr. Blvd. Tampa FL | 59-1100828 | 501(c)(3)                     | 10,000                   |                                   |                                                       |                                        | Note (1) - g                       |
| (8)  | The Childrens Hospital Volunteers, Inc.<br>1200 Children's Ave., Suite 6205 Oklahoma City OK       | 23-7356912 | 501(c)(3)                     | 10,000                   |                                   |                                                       |                                        | Note (1) - g                       |
| (9)  | Unforgettable Prom<br>1007 N. Federal Hwy., #384 Fort Lauderdale FL                                | 30-0603495 | 501(c)(3)                     | 10,000                   |                                   |                                                       |                                        | Note (1) - g                       |
| (10) | Virginia Garcia Memorial Health Center<br>PO Box 586 Cornelius OR                                  | 93-0717997 | 501(c)(3)                     | 10,000                   |                                   |                                                       |                                        | Note (1) - g                       |
| (11) | West Valley Boys & Girls Club<br>7245 Remmet Ave Canoga Park CA                                    | 95-4419365 | 501(c)(3)                     | 10,000                   |                                   |                                                       |                                        | Note (1) - g                       |
| (12) | Young Mens Christian Association<br>131 Tremont Avenue, SE Massillon OH                            | 34-0719180 | 501(c)(3)                     | 10,000                   |                                   |                                                       |                                        | Note (1) - g                       |

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SCHEDULE I  
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Schedule I, Page 1s

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Department of the Treasury  
Internal Revenue Service  
Name of the organization

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| (1)  | Young Mens Christian Association of Florida First 6079 Bagley Road Jacksonville FL  | 59-0638514 | 501(c)(3)                     | 10,000                   |                                   |                                                       |                                        | Note (1) - g                       |
| (2)  | Orange County Family Justice Center Foundation 150 West Vermont Avenue Anaheim CA   | 20-4088652 | 501(c)(3)                     | 9,999                    |                                   |                                                       |                                        | Note (1) - g                       |
| (3)  | Capitol Region Education Council Foundation Inc. 123 Progress Drive Wethersfield CT | 20-4091009 | 501(c)(3)                     | 9,150                    |                                   |                                                       |                                        | Note (1) - g                       |
| (4)  | Pitt Memorial Hospital Foundation Inc. 2100 Stantonsburg Road Greenville NC         | 58-1399266 | 501(c)(3)                     | 9,133                    |                                   |                                                       |                                        | Note (1) - g                       |
| (5)  | Clarke School for the Deaf 45 Round Hill Road Northampton MA                        | 04-2104008 | 501(c)(3)                     | 9,000                    |                                   |                                                       |                                        | Note (1) - g                       |
| (6)  | Community Lodgings Inc. 3912 Elbert Avenue, Ste. 108 Alexandria VA                  | 54-1428495 | 501(c)(3)                     | 9,000                    |                                   |                                                       |                                        | Note (1) - g                       |
| (7)  | Valley Forge Educational Services 1777 North Valley Road, PO Box 730 Paoli PA       | 23-6050757 | 501(c)(3)                     | 8,650                    |                                   |                                                       |                                        | Note (1) - g                       |
| (8)  | Northern Virginia Therapeutic Riding Program Inc. 6429 Clifton Road Clifton VA      | 54-1897241 | 501(c)(3)                     | 8,210                    |                                   |                                                       |                                        | Note (1) - g                       |
| (9)  | Montcalm Area Intermediate School District PO Box 367 621 New Street Stanton MI     | 38-1715342 | Gov't                         | 8,106                    |                                   |                                                       |                                        | Note (1) - g                       |
| (10) | Therapeutic Riding Institute, Inc. PO Box 750664 Centerville OH                     | 31-0840947 | 501(c)(3)                     | 8,000                    |                                   |                                                       |                                        | Note (1) - g                       |
| (11) | Comprehensive Therapy Center Inc. 2505 Ardmore SE Grand Rapids MI                   | 38-2776868 | 501(c)(3)                     | 7,989                    |                                   |                                                       |                                        | Note (1) - g                       |
| (12) | Childrens Hospital of the Kings Daughters, Inc. 601 Children's Lane Norfolk VA      | 54-0506321 | 501(c)(3)                     | 7,950                    |                                   |                                                       |                                        | Note (1) - g                       |

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Schedule I (Form 990) (2013)

SCHEDULE I  
(Form 990)

Schedule I, Page 1t

OMB No. 1545-0047

2013

Open to Public  
Inspection

Department of the Treasury  
Internal Revenue Service

Name of the organization

RONALD McDONALD HOUSE CHARITIES, INC.

Employer identification number

36-2934689

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ Yes ☐ No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed

| 1 | (a) Name and address of organization or government                                                                    | (b) EIN    | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|-----------------------------------------------------------------------------------------------------------------------|------------|-------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
|   | (1) John Tracy Clinic<br>806 West Adams Blvd Los Angeles CA                                                           | 95-1642393 | 501(c)(3)                     | 7,825                    |                                   |                                                       |                                        | Note (1) - g                       |
|   | (2) Hillside School<br>2697 Brookside Road Macungie PA                                                                | 23-2263178 | 501(c)(3)                     | 7,759                    |                                   |                                                       |                                        | Note (1) - g                       |
|   | (3) American Diabetes Association<br>8604 Allisonville Rd. Suite 140 Indianapolis IN                                  | 13-1623888 | 501(c)(3)                     | 7,500                    |                                   |                                                       |                                        | Note (1) - g                       |
|   | (4) Cardinal McCloskey School & Home for Children Inc.<br>115 East Stevens Ave., Suite LL5 New York NY                | 13-1740443 | 501(c)(3)                     | 7,500                    |                                   |                                                       |                                        | Note (1) - g                       |
|   | (5) Childrens Medical Research Inc.<br>800 Research Parkway, Suite 150 Oklahoma City OK                               | 73-1200262 | 501(c)(3)                     | 7,500                    |                                   |                                                       |                                        | Note (1) - g                       |
|   | (6) Dayton Rowing Foundation<br>101 N. Diamond Mill Rd. Clayton OH                                                    | 31-1416456 | 501(c)(3)                     | 7,500                    |                                   |                                                       |                                        | Note (1) - g                       |
|   | (7) East End Community Services Corporation<br>624 Xenia Ave Dayton OH                                                | 31-1508554 | 501(c)(3)                     | 7,500                    |                                   |                                                       |                                        | Note (1) - g                       |
|   | (8) East Los Angeles Community Youth Center<br>4360 Dozier Street Los Angeles CA                                      | 95-3174212 | 501(c)(3)                     | 7,500                    |                                   |                                                       |                                        | Note (1) - g                       |
|   | (9) Echoes of Hope<br>300 N. Continental Blvd. Suite 622 El Segundo CA                                                | 26-0217549 | 501(c)(3)                     | 7,500                    |                                   |                                                       |                                        | Note (1) - g                       |
|   | (10) Edward Charles Inst of Nonprofit Mergers & Acquisitions Foundation<br>1880 Century Park Suite 300 Los Angeles CA | 26-4245043 | 501(c)(3)                     | 7,500                    |                                   |                                                       |                                        | Note (1) - g                       |
|   | (11) Friends of Art for Community Enrichment Inc.<br>191 Melyers Ct. Columbus OH                                      | 31-1116717 | 501(c)(3)                     | 7,500                    |                                   |                                                       |                                        | Note (1) - g                       |
|   | (12) High Hopes Therapeutic Riding Inc.<br>36 Town Woods Rd. Old Lyme CT                                              | 06-0987749 | 501(c)(3)                     | 7,500                    |                                   |                                                       |                                        | Note (1) - g                       |

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Schedule I (Form 990) (2013)

SCHEDULE I  
(Form 990)

Department of the Treasury  
Internal Revenue Service  
Name of the organization

RONALD McDONALD HOUSE CHARITIES, INC.

Part I General Information on Grants and Assistance

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| 1    | (a) Name and address of organization or government                                                        | (b) EIN    | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|------|-----------------------------------------------------------------------------------------------------------|------------|-------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| (1)  | Hillside Food Outreach Inc.<br>404 Irvington Street Pleasantville NY                                      | 01-0712431 | 501(c)(3)                     | 7,500                    |                                   |                                                       |                                        | Note (1) - g                       |
| (2)  | Horns for Kids Inc.<br>159 Pelham Avenue Hamden CT                                                        | 45-2159084 | 501(c)(3)                     | 7,500                    |                                   |                                                       |                                        | Note (1) - g                       |
| (3)  | Hospice of the Chesapeake Foundation Inc.<br>445 Defense Highway Annapolis MD                             | 52-1457419 | 501(c)(3)                     | 7,500                    |                                   |                                                       |                                        | Note (1) - g                       |
| (4)  | Laurel Center Intervention for Domestic & Sexual Violence<br>P.O. Box 14 Winchester VA                    | 54-1262535 | 501(c)(3)                     | 7,500                    |                                   |                                                       |                                        | Note (1) - g                       |
| (5)  | Make-A-Wish Foundation of the Mid-Atlantic Inc.<br>5272 River Road Ste 700 Bethesda MD                    | 52-1306075 | 501(c)(3)                     | 7,500                    |                                   |                                                       |                                        | Note (1) - g                       |
| (6)  | New Beginnings Church Inc.<br>2132 W Michigan St Indianapolis IN                                          | 32-0090427 | 501(c)(3)                     | 7,500                    |                                   |                                                       |                                        | Note (1) - g                       |
| (7)  | North Texas Food Bank<br>4500 S. Cockrell Hill Road Dallas TX                                             | 75-1785357 | 501(c)(3)                     | 7,500                    |                                   |                                                       |                                        | Note (1) - g                       |
| (8)  | Peoples Emergency Center<br>325 N. 39th Street Philadelphia PA                                            | 23-2017882 | 501(c)(3)                     | 7,500                    |                                   |                                                       |                                        | Note (1) - g                       |
| (9)  | St Josephs Center<br>2010 Adams Ave Scranton PA                                                           | 24-0795689 | 501(c)(3)                     | 7,500                    |                                   |                                                       |                                        | Note (1) - g                       |
| (10) | Teatro De La Luna - The Moon Theatre<br>4020 Georgia Avenue, NW Washington DC                             | 52-1739966 | 501(c)(3)                     | 7,500                    |                                   |                                                       |                                        | Note (1) - g                       |
| (11) | The Harmony Project<br>817 Vine Street, Suite 212 Los Angeles CA                                          | 95-4856236 | 501(c)(3)                     | 7,500                    |                                   |                                                       |                                        | Note (1) - g                       |
| (12) | Big Brothers & Big Sisters of Frederick County MD, Inc.<br>2 East Church Street P.O. Box 442 Frederick MD | 52-1107974 | 501(c)(3)                     | 7,375                    |                                   |                                                       |                                        | Note (1) - g                       |

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Schedule I (Form 990) (2013)

SCHEDULE I  
(Form 990)

Schedule I, Page 1v

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

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

Department of the Treasury  
Internal Revenue Service  
Name of the organization

RONALD MCDONALD HOUSE CHARITIES, INC.

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ Yes ☐ No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

| 1 | (a) Name and address of organization or government                    | (b) EIN           | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|-----------------------------------------------------------------------|-------------------|-------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
|   | (1) <u>Christamore House</u>                                          |                   |                               |                          |                                   |                                                       |                                        |                                    |
|   | <u>502 N Tremont St Indianapolis IN</u>                               | <u>35-0885588</u> | <u>501(c)(3)</u>              | <u>7,315</u>             |                                   |                                                       |                                        | <u>Note (1) - g</u>                |
|   | (2) <u>PTA Florida Congress</u>                                       |                   |                               |                          |                                   |                                                       |                                        |                                    |
|   | <u>P.O. Box 524 Jensen Beach FL</u>                                   | <u>23-7628364</u> | <u>501(c)(3)</u>              | <u>7,295</u>             |                                   |                                                       |                                        | <u>Note (1) - g</u>                |
|   | (3) <u>Philadelphia Childrens Alliance</u>                            |                   |                               |                          |                                   |                                                       |                                        |                                    |
|   | <u>300 East Hunting Park Avenue Philadelphia PA</u>                   | <u>23-2526605</u> | <u>501(c)(3)</u>              | <u>7,148</u>             |                                   |                                                       |                                        | <u>Note (1) - g</u>                |
|   | (4) <u>Helpmates Charitable Giving Foundation Inc.</u>                |                   |                               |                          |                                   |                                                       |                                        |                                    |
|   | <u>Guardian Angel Center P.O. Box 24 Kersey PA</u>                    | <u>13-4242476</u> | <u>501(c)(3)</u>              | <u>7,125</u>             |                                   |                                                       |                                        | <u>Note (1) - g</u>                |
|   | (5) <u>Ronald McDonald House of Mid-Michigan, Inc.</u>                |                   |                               |                          |                                   |                                                       |                                        |                                    |
|   | <u>121 S. Holmes Lansing MI</u>                                       | <u>38-3279325</u> | <u>501(c)(3)</u>              | <u>7,000</u>             |                                   |                                                       |                                        | <u>Note (1) - g</u>                |
|   | (6) <u>City of Philadelphia Tee Administering Wills Eye Institute</u> |                   |                               |                          |                                   |                                                       |                                        |                                    |
|   | <u>840 Walnut Street Philadelphia PA</u>                              | <u>23-6000204</u> | <u>501(c)(3)</u>              | <u>6,835</u>             |                                   |                                                       |                                        | <u>Note (1) - g</u>                |
|   | (7) <u>Schenectady Youth Boxing &amp; Fitness Inc.</u>                |                   |                               |                          |                                   |                                                       |                                        |                                    |
|   | <u>2330 Watt Street Schenectady NY</u>                                | <u>14-1966867</u> | <u>501(c)(3)</u>              | <u>6,825</u>             |                                   |                                                       |                                        | <u>Note (1) - g</u>                |
|   | (8) <u>Sabaoth Ministries</u>                                         |                   |                               |                          |                                   |                                                       |                                        |                                    |
|   | <u>730 St. Clair NW Grand Rapids MI</u>                               | <u>37-1480317</u> | <u>501(c)(3)</u>              | <u>6,750</u>             |                                   |                                                       |                                        | <u>Note (1) - g</u>                |
|   | (9) <u>Free Clinic of Southwest Washington</u>                        |                   |                               |                          |                                   |                                                       |                                        |                                    |
|   | <u>4100 Plomondon St Vancouver WA</u>                                 | <u>91-1707542</u> | <u>501(c)(3)</u>              | <u>6,575</u>             |                                   |                                                       |                                        | <u>Note (1) - g</u>                |
|   | (10) <u>Ark, Inc.</u>                                                 |                   |                               |                          |                                   |                                                       |                                        |                                    |
|   | <u>415 Lincoln Ave. Evansville IN</u>                                 | <u>35-1553918</u> | <u>501(c)(3)</u>              | <u>6,406</u>             |                                   |                                                       |                                        | <u>Note (1) - g</u>                |
|   | (11) <u>Susan B. Anthony Project, Inc.</u>                            |                   |                               |                          |                                   |                                                       |                                        |                                    |
|   | <u>179 Water Street Torrington CT</u>                                 | <u>06-1085983</u> | <u>501(c)(3)</u>              | <u>6,400</u>             |                                   |                                                       |                                        | <u>Note (1) - g</u>                |
|   | (12) <u>Ennis Center for Children, Inc.</u>                           |                   |                               |                          |                                   |                                                       |                                        |                                    |
|   | <u>129 E. Third St. Flint MI</u>                                      | <u>38-2222428</u> | <u>501(c)(3)</u>              | <u>6,276</u>             |                                   |                                                       |                                        | <u>Note (1) - g</u>                |

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Schedule I (Form 990) (2013)

SCHEDULE I  
(Form 990)

Department of the Treasury  
Internal Revenue Service  
Name of the organization

RONALD MCDONALD HOUSE CHARITIES, INC.

Part I General Information on Grants and Assistance

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|---|-------------------------------------------------------------------------------------|------------|-------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
|   | (1) Rose Bowl Aquatics Center<br>360 N Arroyo Blvd Pasadena CA                      | 95-3994788 | 501(c)(3)                     | 6,272                    |                                   |                                                       |                                        | Note (1) - g                       |
|   | (2) The Domestic Violence Shelter Inc.<br>P.O. Box 1524 Mansfield OH                | 34-1261703 | 501(c)(3)                     | 6,267                    |                                   |                                                       |                                        | Note (1) - g                       |
|   | (3) Under 21<br>Covenant House NY 460 W 41st St New York NY                         | 13-3076376 | 501(c)(3)                     | 6,250                    |                                   |                                                       |                                        | Note (1) - g                       |
|   | (4) Waterbury Hospital<br>64 Robbins St. Waterbury CT                               | 06-0665979 | 501(c)(3)                     | 6,250                    |                                   |                                                       |                                        | Note (1) - g                       |
|   | (5) Grand Rapids Public Schools<br>Lincoln Dev Center 862 Crahan NE Grand Rapids MI | 38-6002019 | Gov't                         | 6,063                    |                                   |                                                       |                                        | Note (1) - g                       |
|   | (6) Therapeutic and Recreational Riding Center Inc.<br>3750 Shady Lane Glenwood MD  | 52-1368120 | 501(c)(3)                     | 6,000                    |                                   |                                                       |                                        | Note (1) - g                       |
|   | (7) Father Flanagan's Boys Home<br>3555 Commonwealth Boulevard Tallahassee FL       | 20-0655144 | 501(c)(3)                     | 5,996                    |                                   |                                                       |                                        | Note (1) - g                       |
|   | (8) Food Bank of Siouxland Inc.<br>1313 11th St. Sioux City IA                      | 42-1381516 | 501(c)(3)                     | 5,705                    |                                   |                                                       |                                        | Note (1) - g                       |
|   | (9) Childrens Museum of the Upstate Inc.<br>300 College St Greenville, SC           | 57-1025453 | 501(c)(3)                     | 5,550                    |                                   |                                                       |                                        | Note (1) - g                       |
|   | (10) Rabbit Run Community Arts Association<br>49 Park Street Madison OH             | 34-1305784 | 501(c)(3)                     | 5,500                    |                                   |                                                       |                                        | Note (1) - g                       |
|   | (11) Central District Health Department<br>707 N Armstrong Place Boise ID           | 82-0335015 | Gov't                         | 5,377                    |                                   |                                                       |                                        | Note (1) - g                       |
|   | (12) Achievement Center for Children<br>4255 Northfield Road Highland Hills OH      | 34-0714766 | 501(c)(3)                     | 5,364                    |                                   |                                                       |                                        | Note (1) - g                       |

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Schedule I (Form 990) (2013)

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

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

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Employer identification number

36-2934689

Open to Public  
Inspection

SCHEDULE I  
(Form 990)

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

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Department of the Treasury  
Internal Revenue Service  
Name of the organization

RONALD MCDONALD HOUSE CHARITIES, INC.

Employer identification number

36-2934689

OMB No 1545-0047

2013

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|------|------------------------------------------------------------------------------|------------|-------------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|------------------------------------|
| (1)  | Shriners Hospitals for Children<br>3551 N. Board Street Philadelphia PA      | 36-2193608 | 501(c)(3)                     | 5,309                    |                                   |                                                       |                                        | Note (1) - g                       |
| (2)  | Resources for Inner City Children<br>1431 Howard Road, SE Washington DC      | 61-1441621 | 501(c)(3)                     | 5,287                    |                                   |                                                       |                                        | Note (1) - g                       |
| (3)  | Boys Hope Girls Hope<br>367 Clermont Ave. LaSalle Hall Brooklyn NY           | 13-2990982 | 501(c)(3)                     | 5,250                    |                                   |                                                       |                                        | Note (1) - g                       |
| (4)  | Help Mates for Hope<br>P.O. Box 288 Los Angeles CA 90710                     | 90-0749944 | 501(c)(3)                     | 5,250                    |                                   |                                                       |                                        | Note (1) - g                       |
| (5)  | District 5 Sports & Activities Council<br>PO Box 725 Duncan SC               | 27-2981106 | 501(c)(3)                     | 5,125                    |                                   |                                                       |                                        | Note (1) - g                       |
| (6)  | EUP Learning Center Inc.<br>LSSU, 650 W. Easterday Avenue Sault Ste Marie MI | 26-0112881 | 501(c)(3)                     | 5,109                    |                                   |                                                       |                                        | Note (1) - g                       |
| (7)  |                                                                              |            |                               |                          |                                   |                                                       |                                        |                                    |
| (8)  |                                                                              |            |                               |                          |                                   |                                                       |                                        |                                    |
| (9)  |                                                                              |            |                               |                          |                                   |                                                       |                                        |                                    |
| (10) |                                                                              |            |                               |                          |                                   |                                                       |                                        |                                    |
| (11) |                                                                              |            |                               |                          |                                   |                                                       |                                        |                                    |
| (12) |                                                                              |            |                               |                          |                                   |                                                       |                                        |                                    |

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Schedule I (Form 990) (2013)

**Part III** Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

| (a) Type of grant or assistance                                       | (b) Number of recipients | (c) Amount of cash grant | (d) Amount of non-cash assistance | (e) Method of valuation (book, FMV, appraisal, other) | (f) Description of non-cash assistance |
|-----------------------------------------------------------------------|--------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|
| Multi-year college scholarships for students of<br>1 Hispanic descent | 15                       | 375,000                  |                                   |                                                       |                                        |
| 2                                                                     |                          |                          |                                   |                                                       |                                        |
| 3                                                                     |                          |                          |                                   |                                                       |                                        |
| 4                                                                     |                          |                          |                                   |                                                       |                                        |
| 5                                                                     |                          |                          |                                   |                                                       |                                        |
| 6                                                                     |                          |                          |                                   |                                                       |                                        |
| 7                                                                     |                          |                          |                                   |                                                       |                                        |

**Part IV** Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information

Part I, Line 2 - Procedures for monitoring the use of grant funds in the US:

Local RMHC Chapters are required to submit audited financial statements that support the use of the funds granted. All other grantees are required to submit a performance/

outcomes report on the anniversary of their award date. This report includes a program budget and detailed accounting of the use of the funds.

RMHC requires scholarship assistance to be sent directly to the educational institution selected by the scholarship recipient. The educational institution must provide annual class transcripts as proof of enrollment, and provide proof that the scholarship recipient remained in good standing with the educational institution throughout the year.

Note (1) - Part II, Column (h), Purpose of grant:

(a) Ronald McDonald House grants: for new House seed grants, expansion, and ongoing House support

(b) All US Local Chapters receive general operating support grants on an annual basis

(c) Capacity Building Support: to help Local Chapters achieve a high level of excellence in management and operations, and to help them effectively and efficiently fulfill their mission,

RMHC provides grants that underwrite resource development, strategic planning, provide technology upgrades, training and education of Board, staff and volunteers, and facilitation

of networking opportunities with other Local Chapters

**Part III** Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22  
Part III can be duplicated if additional space is needed

|   | (a) Type of grant or assistance | (b) Number of recipients | (c) Amount of cash grant | (d) Amount of non-cash assistance | (e) Method of valuation (book, FMV, appraisal, other) | (f) Description of non-cash assistance |
|---|---------------------------------|--------------------------|--------------------------|-----------------------------------|-------------------------------------------------------|----------------------------------------|
| 1 |                                 |                          |                          |                                   |                                                       |                                        |
| 2 |                                 |                          |                          |                                   |                                                       |                                        |
| 3 |                                 |                          |                          |                                   |                                                       |                                        |
| 4 |                                 |                          |                          |                                   |                                                       |                                        |
| 5 |                                 |                          |                          |                                   |                                                       |                                        |
| 6 |                                 |                          |                          |                                   |                                                       |                                        |
| 7 |                                 |                          |                          |                                   |                                                       |                                        |

**Part IV** Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information

Note (1) continued:

(d) Matching funds to increase Local Chapter scholarship programs

(e) Build and support Ronald McDonald Care Mobile Units to operate in local communities - providing medical and/or dental care

(f) Support Ronald McDonald Family Room programs

(g) RMHC directly matches grants, up to a certain amount per Local Chapter, made to local children's organizations, which provide services to children in local communities

throughout the US

(h) Grants to improve the health of children: provide resources to support preventive and therapeutic programs, including pre-and-post natal care, immunizations, screening tests, physical exams, health education, applied research, accessible medical, surgical, and dental care, and general counseling and family support

(i) Grants to improve the well-being of children: provide resources to support programs ranging from child hunger to child homelessness, educational programs, and those that enrich the lives of children by broadening their horizons through educational, cultural, and recreational experiences

**SCHEDULE M  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Noncash Contributions**

- ▶ **Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.**  
▶ **Attach to Form 990.**  
▶ **Information about Schedule M (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).**

OMB No 1545-0047

**2013**

**Open To Public  
Inspection**

Name of the organization

**RONALD MCDONALD HOUSE CHARITIES, INC.**

Employer identification number

**36-2934689**

**Part I Types of Property**

|                                                                              | (a)<br>Check if<br>applicable | (b)<br>Number of contributions or<br>items contributed | (c)<br>Noncash contribution<br>amounts reported on<br>Form 990, Part VIII, line 1g | (d)<br>Method of determining<br>noncash contribution amounts |
|------------------------------------------------------------------------------|-------------------------------|--------------------------------------------------------|------------------------------------------------------------------------------------|--------------------------------------------------------------|
| 1 Art - Works of art . . . . .                                               |                               |                                                        |                                                                                    |                                                              |
| 2 Art - Historical treasures . . . . .                                       |                               |                                                        |                                                                                    |                                                              |
| 3 Art - Fractional interests . . . . .                                       |                               |                                                        |                                                                                    |                                                              |
| 4 Books and publications . . . . .                                           |                               |                                                        |                                                                                    |                                                              |
| 5 Clothing and household<br>goods . . . . .                                  |                               |                                                        |                                                                                    |                                                              |
| 6 Cars and other vehicles . . . . .                                          |                               |                                                        |                                                                                    |                                                              |
| 7 Boats and planes . . . . .                                                 |                               |                                                        |                                                                                    |                                                              |
| 8 Intellectual property . . . . .                                            |                               |                                                        |                                                                                    |                                                              |
| 9 Securities - Publicly traded . . . . .                                     | X                             | 9                                                      | 383,294                                                                            | Market quotations                                            |
| 10 Securities - Closely held stock . . . . .                                 |                               |                                                        |                                                                                    |                                                              |
| 11 Securities - Partnership, LLC,<br>or trust interests . . . . .            |                               |                                                        |                                                                                    |                                                              |
| 12 Securities - Miscellaneous . . . . .                                      |                               |                                                        |                                                                                    |                                                              |
| 13 Qualified conservation<br>contribution - Historic<br>structures . . . . . |                               |                                                        |                                                                                    |                                                              |
| 14 Qualified conservation<br>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 ▶ (Auction Items) . . . . .                                         | X                             | 191                                                    | 374,524                                                                            | FMV/Sales price                                              |
| 26 Other ▶ ( ) . . . . .                                                     |                               |                                                        |                                                                                    |                                                              |
| 27 Other ▶ ( ) . . . . .                                                     |                               |                                                        |                                                                                    |                                                              |
| 28 Other ▶ ( ) . . . . .                                                     |                               |                                                        |                                                                                    |                                                              |

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

|                                                                                                                                                                                                                                                                                                         | Yes | No |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|
| 30 a 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? . . . . . |     | X  |
| b If "Yes," describe the arrangement in Part II                                                                                                                                                                                                                                                         |     |    |
| 31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? . . . . .                                                                                                                                                                            | X   |    |
| 32 a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? . . . . .                                                                                                                                                             |     | 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                                                                                                                                                               |     |    |

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule M (Form 990) (2013)

JSA

**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.

Part I, Column (b), Number of contributions or items contributed:

RMHC is reporting the number of contributions received from donors, not the number of items received.

**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](http://www.irs.gov/form990).

OMB No 1545-0047

**2013**

**Open to Public  
Inspection**

Name of the organization

RONALD MCDONALD HOUSE CHARITIES, INC.

Employer identification number

36-2934689

Note 1 - Form 990, Part I, Lines 5 and 6 - Total Number of Employees and Volunteers:

RMHC has no paid employees. The Charity's day-to-day operations are run by employees of McDonald's Corporation, whose time is donated to RMHC. In addition, numerous other volunteers assist with various fundraising events and other administrative and program support. The number of volunteers varies at any given time, but RMHC estimates the total number of volunteers to be approximately 100.

Note 2 - Form 990, Part III, Line 4a, Support of Local Chapters worldwide (continued):

expanding local program needs worldwide. In 2013, RMHC provided general operating and capacity building support and grants totaling \$13,857,901 to Local Chapters.

Support for Three Core RMHC Programs:

(1) Ronald McDonald House Program Support - - -

The Ronald McDonald House is a home away from home for families of ill children while being treated at nearby hospitals. In 2013, volunteer field team members of RMHC provided ongoing support in the form of resource materials and training, for 336 Ronald McDonald Houses, in development or currently in operation by our Local Chapters around the world. In 2013, RMHC provided \$2,505,136 in support, including grants for new and expanding Ronald McDonald House programs and for ongoing operational support.

2) Ronald McDonald Care Mobile Program Support - - -

In addition to primary and specialty medical care, the Ronald McDonald Care Mobile may provide health education and oral health services and link children to other community and social services resources. In 2013, RMHC provided cash and non-cash grants and other support, totaling \$796,649, that helped to launch two new programs in the United States and Canada, as well as provide ongoing support, including training and updated resource materials, to 50 Ronald McDonald Care Mobile programs in nine countries.

|                                       |                                |
|---------------------------------------|--------------------------------|
| Name of the organization              | Employer identification number |
| RONALD MCDONALD HOUSE CHARITIES, INC. | 36-2934689                     |

## Note 2 (continued):

## (3) Ronald McDonald Family Room Program Support - - -

In 2013, RMHC provided \$938,729 to launch seven new Ronald McDonald Family Room programs run by Local Chapters outside the US and provided matching funds to run five programs in the US. Volunteer field team members of RMHC provide ongoing support to the 197 Ronald McDonald Family Rooms in operation globally, providing them with training and updated resource materials.

## Other Non-Core Program Local Chapter Support:

(1) RMHC directly matches US Local Chapter grants made to local children's organizations thereby increasing the availability and scope of services provided to children throughout the US. In 2013, these community focused matching grants totaled \$3,498,110.

(2) RMHC provided matching grant funds totaling \$1,533,145 that increased secondary educational scholarship funds for scholarship programs run by Local Chapters.

## Note 3 - Form 990, Part III, Line 4d, Other Program Services:

RMHC provides a limited number of multi-year educational scholarships for students of Hispanic descent. In 2013, RMHC provided 15 student scholarships totaling \$375,000.

## Note 4 - Form 990, Part VI, Line 2, Trustee and Officer Relationships:

| Name                 | Type of Relationship | With                                                                                                                                                                                                                                                                                                                       |
|----------------------|----------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Martin J. Coyne, Jr. | Business             | Adele Jamieson, Alex Rodriguez, Andrew J. McKenna,<br>Donald G. Lubin, Donald Thompson, Gay Simplot,<br>J. Christopher Reyes, Fred Huebner, Linda Dunham,<br>Michael D. Irgang, Muhtar Kent, J.C. Gonzalez-Mendez,<br>Sheldon Lavin, Steven M. Ramirez, Theodore Perlman,<br>Wai-Ling Eng, Eduardo Sanchez, Wayne Stingley |

|                                       |                                |
|---------------------------------------|--------------------------------|
| Name of the organization              | Employer identification number |
| RONALD MCDONALD HOUSE CHARITIES, INC. | 36-2934689                     |

## Note 4 (continued):

| Name                 | Type of Relationship | With                                                                                                                                                                                                                                                                                                                                           |
|----------------------|----------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Linda Dunham         | Business             | Andrew J. McKenna, Donald Thompson, Sheila Musolino,<br>Martin J. Coyne, Jr., J.C. Gonzalez-Mendez                                                                                                                                                                                                                                             |
| Wai-Ling Eng         | Business             | Andrew J. McKenna, Donald Thompson, Sheila Musolino,<br>Martin J. Coyne, Jr., J.C. Gonzalez-Mendez                                                                                                                                                                                                                                             |
| J.C. Gonzalez-Mendez | Business             | Adele Jamieson, Alex Rodriguez, Andrew J. McKenna,<br>Donald G. Lubin, Donald Thompson, Gay Simplot,<br>J. Christopher Reyes, Fred Huebner, Linda Dunham,<br>Michael D. Irgang, Muhtar Kent, Martin J. Coyne, Jr.,<br>Sheldon Lavin, Steven M. Ramirez, Theodore Perlman,<br>Wai-Ling Eng, Eduardo Sanchez, Wayne Stingley,<br>Sheila Musolino |
| Fred Huebner         | Business             | Andrew J. McKenna, Donald Thompson, Sheila Musolino,<br>Martin J. Coyne, Jr., J.C. Gonzalez-Mendez                                                                                                                                                                                                                                             |
| Michael D. Irgang    | Business             | Andrew J. McKenna, Donald Thompson, Sheila Musolino,<br>Martin J. Coyne, Jr., J.C. Gonzalez-Mendez,<br>Sheldon Lavin                                                                                                                                                                                                                           |
| Adele Jamieson       | Business             | Andrew J. McKenna, Donald Thompson, Sheila Musolino,<br>Martin J. Coyne, Jr., J.C. Gonzalez-Mendez                                                                                                                                                                                                                                             |
| Muhtar Kent          | Business             | Andrew J. McKenna, Donald Thompson, Sheila Musolino,<br>Martin J. Coyne, Jr., J.C. Gonzalez-Mendez                                                                                                                                                                                                                                             |
| Sheldon Lavin        | Business             | Andrew J. McKenna, Donald Thompson, Sheila Musolino,<br>Martin J. Coyne, Jr., J.C. Gonzalez-Mendez,<br>Michael D. Irgang                                                                                                                                                                                                                       |
| Donald G. Lubin      | Business             | Andrew J. McKenna, Donald Thompson, Sheila Musolino,<br>Martin J. Coyne, Jr., J.C. Gonzalez-Mendez                                                                                                                                                                                                                                             |

|                                       |                                |
|---------------------------------------|--------------------------------|
| Name of the organization              | Employer identification number |
| RONALD MCDONALD HOUSE CHARITIES, INC. | 36-2934689                     |

## Note 4 (continued):

| Name                 | Type of Relationship | With                                                                                                                                                                                                                                                                                                                                                |
|----------------------|----------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Andrew J. McKenna    | Business             | Adele Jamieson, Alex Rodriguez, Sheila Musolino,<br>Donald G. Lubin, Donald Thompson, Gay Simplot,<br>J. Christopher Reyes, Fred Huebner, Linda Dunham,<br>Michael D. Irgang, Muhtar Kent, J.C. Gonzalez-Mendez,<br>Sheldon Lavin, Steven M. Ramirez, Theodore Perlman,<br>Wai-Ling Eng, Eduardo Sanchez, Wayne Stingley,<br>Martin J. Coyne, Jr.   |
| Sheila Musolino      | Business             | Adele Jamieson, Alex Rodriguez, Andrew J. McKenna,<br>Donald G. Lubin, Donald Thompson, Gay Simplot,<br>J. Christopher Reyes, Fred Huebner, Linda Dunham,<br>Michael D. Irgang, Muhtar Kent, J.C. Gonzalez-Mendez,<br>Sheldon Lavin, Steven M. Ramirez, Theodore Perlman,<br>Wai-Ling Eng, Eduardo Sanchez, Wayne Stingley,<br>Martin J. Coyne, Jr. |
| Theodore Perlman     | Business             | Andrew J. McKenna, Donald Thompson, Sheila Musolino,<br>Martin J. Coyne, Jr., J.C. Gonzalez-Mendez                                                                                                                                                                                                                                                  |
| Steven M. Ramirez    | Business             | Andrew J. McKenna, Donald Thompson, Sheila Musolino,<br>Martin J. Coyne, Jr., J.C. Gonzalez-Mendez                                                                                                                                                                                                                                                  |
| J. Christopher Reyes | Business             | Andrew J. McKenna, Donald Thompson, Sheila Musolino,<br>Martin J. Coyne, Jr., J.C. Gonzalez-Mendez,<br>James A. Skinner                                                                                                                                                                                                                             |
| Alex Rodriguez       | Business             | Andrew J. McKenna, Donald Thompson, Sheila Musolino,<br>Martin J. Coyne, Jr., J.C. Gonzalez-Mendez                                                                                                                                                                                                                                                  |
| Eduardo Sanchez      | Business             | Andrew J. McKenna, Donald Thompson, Sheila Musolino,<br>Martin J. Coyne, Jr., J.C. Gonzalez-Mendez                                                                                                                                                                                                                                                  |

Name of the organization

RONALD MCDONALD HOUSE CHARITIES, INC.

Employer identification number

36-2934689

## Note 4 (continued):

| Name            | Type of Relationship | With                                                                                                                                                                                                                                                                                                                                                |
|-----------------|----------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Gay Simplot     | Business             | Andrew J. McKenna, Donald Thompson, Sheila Musolino,<br>Martin J. Coyne, Jr., J.C. Gonzalez-Mendez                                                                                                                                                                                                                                                  |
| Wayne Stingley  | Business             | Andrew J. McKenna, Donald Thompson, Sheila Musolino,<br>Martin J. Coyne, Jr., J.C. Gonzalez-Mendez                                                                                                                                                                                                                                                  |
| Donald Thompson | Business             | Adele Jamieson, Alex Rodriguez, Andrew J. McKenna,<br>Donald G. Lubin, Gay Simplot, Sheila Musolino,<br>J. Christopher Reyes, Fred Huebner, Linda Dunham,<br>Michael D. Irgang, Muhtar Kent, J.C. Gonzalez-Mendez,<br>Sheldon Lavin, Steven M. Ramirez, Theodore Perlman,<br>Wai-Ling Eng, Eduardo Sanchez, Wayne Stingley,<br>Martin J. Coyne, Jr. |

## Note 5 - Form 990, Part VI, Line 7a, Persons with Power to Elect Governing Body:

RMHC has two classes of Trustees: permanent and rotating Trustees. There are six permanent Trustees. The Chief Executive Officer of McDonald's Corporation (one of the permanent Trustees of RMHC) retains the right to appoint up to two officers of McDonald's Corporation to serve as permanent Trustees of RMHC. The total number of Trustees shall not be less than 25 and not more than 30.

## Note 6 - Form 990, Part VI, Line 10a, Local Chapters:

The RMHC system is comprised of numerous independent organizations that utilize the same set of trademarks. Ronald McDonald House Charities, Inc. commonly refers to the other independent organizations as RMHC "Local Chapters." However, it does not have legal control over these Local Chapters. Each Local Chapter must separately incorporate under the laws of its own state or country and obtain "charitable tax exempt" status (or the equivalent) under the laws of its own country.

Name of the organization

RONALD MCDONALD HOUSE CHARITIES, INC.

Employer identification number

36-2934689

Note 7 - Form 990, Part VI, Line 11b, 990 Review Process:

The Board retains the services of an independent CPA firm to review the organization's Form 990 before it is filed with the IRS. The firm meets annually with the audit committee to discuss the Form 990 before it is filed. After review and approval of the Form 990 by the audit committee, copies of the complete Form 990 and all accompanying schedules are provided to the remainder of the Board and Officers prior to filing it with the IRS.

Note 8 - Form 990, Part VI, Line 12c, Monitoring of Conflict of Interest Policy:

Trustees, Officers, and key volunteers are annually required to complete a Conflict of Interest disclosure statement as a precursor to their service to RMHC. Potential conflicts are logged with and monitored by the Secretary of the Board and reviewed by a committee of the Board. Interested parties are not allowed to participate in Board discussions or voting on corresponding related party matters.

Note 9 - Form 990, Part VI, Lines 15a and 15b, Compensation Process:

RMHC does not have any employees and does not compensate any Trustees or Officers. As a result, per the Form 990 instructions, questions 15a and 15b, which relate to the process for determining compensation, are marked "No."

Note 10 - Form 990, Part VI, Line 18, Public Inspection of 1023, 990, and 990-T:

RMHC posts copies of its Form 990 and Form 990-T (if prepared) for the three most recent years on its website. RMHC provides copies of its Form 1023 upon request.

Note 11 - Form 990, Part VI, Line 19, Public Inspection of Other Documents:

RMHC posts its Articles of Incorporation, By-laws, Conflict of Interest Policy, and Audited Financial Statements on its website.

|                                       |                                |
|---------------------------------------|--------------------------------|
| Name of the organization              | Employer identification number |
| RONALD MCDONALD HOUSE CHARITIES, INC. | 36-2934689                     |

Note 12 - Form 990, Part IX, Statement of Functional Expenses:

RMHC receives support from McDonald's Corporation (McDonald's) consisting of the free use of its facilities, equipment, materials, and employee services. The free goods and services provided by McDonald's partially defray certain costs that RMHC would otherwise incur to conduct special fundraising events, as well as selected program service, fundraising, and management and general expenditures. Certain management services, such as financial, fundraising and program services are provided free of charge by employees of McDonald's. Although the value of these goods and services is required to be included in RMHC's audited financial statements, some of it must be excluded from Form 990. The IRS specifically excludes donations of services, advertising space, use of equipment and use of facilities from total revenues in Part VIII and total expenses in Part IX of Form 990. In 2013, the total amount that was excluded from Form 990 was \$4,948,670, of which \$3,640,286 was donated services and facilities provided by McDonald's, \$1,213,000 was donated advertising provided by USA TODAY, and \$95,384 was donated services and use of equipment from other donors.

Note 13 - Form 990, Part IX, Line 11f, Investment Management Fees:

As a service to its US Local Chapters, RMHC pays the financial advisory services and administrative cost of an investment program that allows participating Local Chapters access to highly diversified investment options that would otherwise not be available to them.

Note 14 - Form 990, Part XI, Line 9, Other Changes in Net Assets or Fund Balances:

Recoveries of prior year grants \$7,497

Loss on cash surrender value of insurance -\$21,906