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Form	9 90	ÿ

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.

2013 Open to Public

OMB No 1545-0047

		rue Service	▶ Information about Form 990 and its instructions is at www.irs.gu	ov/form990.		Inspection			
Ā	For the	e 2013 calend	ar year, or tax year beginning , 2013, and er			20			
В	Check if	applicable	C Name of organization RAPID CITY GIRLS JR OLYMPIC	_	D Empl	oyer Identification no			
	Address	change	Doing Business As AMATUER SOFTBALL ASSOCIATION		46-0	447817			
	Name ch	ange	E Telepi	none number					
	Initial retu	um	Number and street (or PO box if mail is not delivered to street address) PO BOX 247			718-4507			
Ō	Terminate	ed	City or town, state or province, country, and ZIP or foreign postal code	<u> </u>		170,242			
=	Amended		RAPID CITY, SD 57709		G Gross	receipts \$			
	Application	on pending	F Name and address of principal officer AARON DAVIS						
		_	RD, RAPID CITY, SD 57702	H(a) Is this a grou subordinates	p return for	Yes X No			
ı	Tax-exem	npt status. 🔯	501(c)(3)	H(b) Are all subor	dinates include				
J	Website:	▶ N/A		If "No," attac H(c) Group exem	dinates include h a list (see ins plion number	tructions)			
К	Form of o	rganization 🔀	Corporation ☐ Trust ☐ Association ☐ Other ▶ ☐ L Year of formation. 20		legal domicile	SD			
Pa	urt I	Summar							
	1	Briefly descri	be the organization's mission or most significant activities: SPONSORSHIP OF Y	OUTH SPORTS					
d)									
Activities & Governance									
il.									
Š	2	Check this bo	x $ ightharpoons$ If the organization discontinued its operations or disposed of more than 25% of	its net assets.					
S S	3	Number of vo	ting members of the governing body (Part VI, line 1a)	[3	7			
sa 4	4	Number of inc	lependent voting members of the governing body (Part VI, line 1b)	[4	0			
ξ	5	Total number	of individuals employed in calendar year 2013 (Part V, line 2a)	[5	0			
É	6	Total number	of volunteers (estimate if necessary)		6	15			
•	7a	Total unrelate	d business revenue from Part VIII, column (C), line 12	[7a	0			
	Ь	Net unrelated	business taxable income from Form 990-T, line 34	<u></u> [7b	0			
				Prior Year	C	urrent Year			
	8	Contributions	and grants (Part VIII, line 1h)			0			
)Te	9	3,							
Revenue	10	Investment in	come (Part VIII, column (A), lines 3, 4, and 7d)			0			
8	11	Other revenue	e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	36,2	216	20,291			
	12	Total revenue	- add lines 8 through 11 (must equal Part VIII, column (A), line 12)	109,5	84	108,796			
-	13	Grants and si	milar amounts paid (Part IX, column (A), lines 1-3)			0			
	14	Benefits paid	to or for members (Part IX, column (A), line 4)			0			
(A)	15	Salaries, othe	r compensation, employee benefits (Part IX, column (A), lines 5-10)	11,8	45	0			
Expenses	16a	Professional f	undraising fees (Part IX, column (A), line 11e)			0			
per	b	Total fundrais	ng expenses (Part IX, column (D), line 25)						
ŭ	17	Other expens	es (Part IX, column (A), lines 11a-11d, 11f-24e)	72,3	22	97,816			
	18	Total expense	s. Add lines 13-17 (must equal Part IX, columns (A), line 25)	84,1	.67	97,816			
	19	Revenue less	s. Add lines 13-17 (must equal Part IX, column (A), line 25)	25,4	17	10,980			
o d			Part X line 16)	eginning of Current Ye	ar E	nd of Year			
Set	20	Total assets (Part X, line 16) OGDEN 15	74,1	.91	85,171			
Net Assets or Fund Balances	21	Total fiabilities	(Part X, line 26)			0			
			fund balances. Subtract line 21 from line 20	74,1	.91	85,171			
	rt II	Signatur							
nder ue, co	penalties orrect, an	of perjury, I declar d complete Declar	e that I have examined this return, including accompanying schedules and statements, and to thebest of my kno ation of preparer (other than officer) is based on all information of which preparer has any knowledge	owledge and belief, it is					
			1. 10/11 - 1/1/11		0 11	1 1 11			
igı	, I	BILL Signature			8-14	1-17			
. –				·	Date				
ler	e		KELLY, TREASURER U						
			nt name and title Date						
•		Print/Type prep	arer's name Pregarer's signature	Check L i					
aic				self-employed	P000	31667			
•	parer	Firm's name		Firm's EIN 🕨		 .			
se	Only	Firm's address		Phone no		_			
		<u> </u>	Rapid City SD 57702		-716-389				
lay t	the IRS	discuss this r	etum with the preparer shown above? (see instructions)	<u> </u>	<u> 🛚 🔀</u>	Yes No			

	int III Statement of Program Service Accomplishments
• 4	
1	Check if Schedule O contains a response or note to any line in this Part III
•	SPONSORSHIP OF YOUTH SPORTS
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
	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 \$97,816 including grants of \$) (Revenue \$108,796)
	PROVIDE SPONSORSHIP, FUND RAISING AND SERVICES FOR YOUTH SPORT PROGAMS AND IS ORGANIZED
	EXCLUSIVLEY FOR CHARITABLE, CIVIC, EDUCATIONAL, AND ATHLETIC PURPOSE
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
	, (2.15.16.5 V
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
4d	Other program services. (Describe in Schedule O.)
	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses > 97,816

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		İ	i
•	complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I			,
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)	3	<u> </u>	X
•	1 (1 1 17 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	١.		х
5	election in effect during the tax year? If "Yes," complete Schedule C, Part II Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,	4		
•	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			
	Part III	5	1	х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors	-		^
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If]		
	"Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	Ť		
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a			
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a	_X	
D	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more		- 1	
_	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
G	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		l	37
ď	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets	11c		X
ŭ	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		v
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	116	-	
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		Х
2a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		Х
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	12b		Х
3	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
4a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
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	14b		<u>X</u>
5	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or		1	
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	_15_		<u>X</u>
6	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other		1	٠,,
7	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
•	Book IV and your AN II you had not give a little of the Child of the Child	47		v
8	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	17	-+	X
-	Part VIII, lines 1c and 8a? If "Yes" complete Schedule G, Part II	18		Х
9	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	-10	\dashv	<u> </u>
	If "Yes," complete Schedule G, Part III	19		х
0a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	-+	$\frac{x}{x}$
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Checklist of Required Schedules (continued) Part IV No Yes Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or 21 21 Х 22 Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III X Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the 23 organization's current and former officers, directors, trustees, key employees, and highest compensated X Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than 24a \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes." answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a Х 24a Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b Did the organization maintain an escrow account other than a refunding escrow at any time during the year 24c Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction 25a X 25a b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? X 25b 26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L. Part II X ______ 26 27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III X Was the organization a party to a business transaction with one of the following parties (see Schedule L, 28 Part IV instructions for applicable filing thresholds, conditions, and exceptions): A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV Х 28a A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Х 28b An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV 28c Did the organization receive more than \$25,000 in non-cash contributions? If "Yes." complete Schedule M 29 29 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified X 30 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N. Х 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," 32 X 32 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations 33 Х Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, 34 34 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 35b Х Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable 36 36 Х 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, X 37

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and

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Form 990 (2013) RAPID CITY GIRLS JR OLYMPIC

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		<u></u> .	
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Χ	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		_X_
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		X
b	If "Yes," enter the name of the foreign country: ►			
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		_X_
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		<u>X</u>
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		<u>X</u>
þ	If "Yes," did the organization include with every solicitation an express statement that such contributions or		İ	
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		<u> </u>
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	_		••
	required to file Form 8282?	7c	}	X
d	If "Yes," indicate the number of Forms 8282 filed during the year	- .	ı	v
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e 7f	-	$\frac{X}{X}$
f ~		7g		X
g h	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	79 7h		$\frac{X}{X}$
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting	- /!!		<u></u>
•	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring	ŧ		
	organization, have excess business holdings at any time during the year?	8	Í	
9	Sponsoring organizations maintaining donor advised funds.			
a	Did the organization make any taxable distributions under section 4966?	9a	1	
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
0	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12	I		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	ŧ		
1	Section 501(c)(12) organizations. Enter:	I		
а	Gross income from members or shareholders	ŧ		
b	Gross income from other sources (Do not net amounts due or paid to other sources	I		
	against amounts due or received from them.)	I		
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		1	***************************************
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	I		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O			
b	Enter the amount of reserves the organization is required to maintain by the states in which	I	1	
	the organization is licensed to issue qualified health plans	#		
C	Enter the amount of reserves on hand			
l4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
þ	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

Form 990 (2013) 1 RAPID CITY GIRLS JR OLYMPIC Page 6 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. Section A. Governing Body and Management YAS No 1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. Enter the number of voting members included in line 1a, above, who are independent 1b Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 Х any other officer, director, trustee, or key employee? Did the organization delegate control over management duties customanly performed by or under the direct 3 supervision of officers, directors, or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 6 Did the organization have members or stockholders? Did the organization have members, stockholders, or other persons who had the power to elect or appoint 7a one or more members of the governing body? b Are any governance decisions of the organization reserved to (or subject to approval by) members, Х stockholders, or persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during 8 the year by the following: Х a The governing body? X **b** Each committee with authority to act on behalf of the governing body? 8b 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 X Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a Did the organization have local chapters, branches, or affiliates? 10a 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? 10b X 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990. 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a X Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12c 13 Did the organization have a written whistleblower policy? 14 Did the organization have a written document retention and destruction policy? 14 Did the process for determining compensation of the following persons include a review and approval by 15 independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official 15a 15b Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement X with a taxable entity during the year? 16a 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? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed > SD 17 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) 18 available for public inspection. Indicate how you made these available. Check all that apply. ☑ Upon request ☐ Other (explain in Schedule O) Another's website Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and 19 financial statements available to the public during the tax year.

State the name, physical address, and telephone number of the person who possesses the books and records of the organization:

▶BILL KELLEY (605)718-4507, PO BOX, RAPID CITY, SD 57709

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RAPID CITY GIRLS JR OLYMPIC

46-0447817

age 7

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)	(B)	Γ.		((C)			(D)	(E)	(F)
Name and Title	Average hours per week (list any hours for related	box, u	Position (do not check more than one box, unless person is both an officer and a director/trustee)				Reportable compensation from the organization	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the	
	organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee		Former	(W-2/1099-MISC)		organization and related organizations
(1) AARON DAVIS VICE PRESIDENT	1.00			Х				0	0	0
(2) MELANIE GREEN PRESIDENT	2.00			х				0	0	0
(3) BILL KELLEY TREASURER	2.00			Х				0	0	0
(4) ASHLEY BERG SECRETARY	1.00			Х				0	0	0
(5)	- -									
(6)										
(7)										
(8)										
(9)										
(10)										
(11)										
(12)										
(13)										
(14)										
FFA		اا								Form 000 (2012)

Part VI	Section A. Officers, Directors, Trustees,	Key Employ	ees, a	ınd l	High	est	Comp	ens	ated Employees	(continued)			
			Average hours per week (list any hours for						(E) Reportable compensation from related organizations		Estimated amount of other compensation		
		related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC))	from the organizati and relati organization	e ion ed
<u>(15)</u>											-		
<u>(16)</u>													
<u>(17)</u>									-				
<u>(18)</u>			,										
<u>(19)</u>													
(20)						-							
<u>(21)</u>									-				
(22)			i										
(23)							-						
(24)													
(25)													
c To	ub-total	on A .						•	0		0		0
2 To	otal number of individuals (including but not limited portable compensation from the organization								than \$100,000 of		0		_
	d the organization list any former officer, director,	or trustee k	ev emi	nlove	ee c	or hid	nhest o	come	pensated			Yes	No
en	nployee on line 1a? If "Yes," complete Schedule J	for such indi	vidual								3		X
	or any individual listed on line 1a, is the sum of rep ganization and related organizations greater than												
	dividual							 nizati	on or individual		4	 	X
fo	r services rendered to the organization? If "Yes,"									<u> </u>	5		Х
	B. Independent Contractors omplete this table for your five highest compensat	ed independe	ent con	trac	tors	that	receiv	ed n	nore than \$100.000	0 of			
cc	ompensation from the organization. Report compe												
	(A) Name and business address								(B) Description of	services	Co	(C)	n
		 							 				
	otal number of independent contractors (including served more than \$100,000 of compensation from			ose l	listed	d ab	ove) w	ho	<u> </u>				

Part VIII . Statement of Revenue

	farrit.	Check if Schedule O contains a response	orno	ote to any line in th	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
88	1a	Federated campaigns	1a		· · · · · · · · · · · · · · · · · · ·		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	512-514
Zan Z	Ь	· · · · · · · · · · · ·	1b					
وَقِ	c	Fundraising events	1c			ľ		
ifts ar A	d		1d					
Contributions, Gifts, Grants and Other Similar Amounts	e	Government grants (contributions)	1e					
	f	All other contributions, gifts, grants,	-10					
the the		and similar amounts not included above	1f		:			
ξÖ	a	Noncash contributions included in lines 1a-1						
and	h				ļ			
		-		Business Code				
5	2a	REGISTRATION FEES		711300	88,505	88,505		
BVB.	ь		_					
<u>8</u>	С		_					
er.	d		_					
É	е							
Program Service Revenue	f	All other program service revenue	┬.					
•	g	Total. Add lines 2a-2f			88,505			····
	3	Investment income (including dividends, inter and other similar amounts)	est,					
	4	Income from investment of tax-exempt bond	proce	eds >				
	5	Royalties						
		(ı) Real		(II) Personal			112111111111111111111111111111111111111	
	6a	Gross rents			4		•	
	b	Less: rental expenses			·			
		Rental income or (loss)						
	d	Net rental income or (loss)	• • •					
	7a	Gross amount from sales of assets other than inventory		(ii) Other	:			
	b	Less: cost or other basis and sales expenses						
	С	Gain or (loss)			1			
_	d	Net gain or (loss)	;		······································			
enne	8a	Gross income from fundraising				1		
>		events (not including \$	-			:		
R.		of contributions reported on line 1c).				:		
Other Re		See Part IV, line 18	- 1			·		
Ó		Less: direct expenses	b			·		
		Net income or (loss) from fundraising events	٠,	<u></u> ▶				
į	9a	Gross income from gaming activities.			: :	 		
		See Part IV, line 19	r					
		Less: direct expenses	L			!		
	C	Net income or (loss) from gaming activities						
		Gross sales of inventory, less returns and allowances		77,629	;			
		Less: cost of goods sold	-	61,446	1			
	С	Net income or (loss) from sales of inventory		<u></u> ▶	16,183	16,183		- 111.7
		Miscellaneous Revenue		Business Code		<u> </u>		
		MISCELLANEOUS	_	900099	4,108	4,108		
	b							
	С		_					
		All other revenue				Į Į		
		Total. Add lines 11a-11d			4,108			
	12	Total revenue. See instructions		•	108,796	108,796	0	0

Part IX	Statement	of Functional	Expenses
---------	-----------	---------------	----------

Sect	ion 501(c)(3) and 501(c)(4) organizations must complete all co	olumns. All other organi	zations must complete	column (A).	
	Check if Schedule O contains a response or note to a	ny line in this Part IX			<u> </u>
Do r	not include amounts reported on lines 6b, 7b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
8b, 9	b, and 10b of Part VIII.	Total expenses	expenses	general expenses	expenses
1	Grants and other assistance to governments and				
	organizations in the United States. See Part IV, line 21 .				
2	Grants and other assistance to individuals in				
	the United States. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				<u> </u>
6	Compensation not included above, to disqualified			:	
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				·
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees):				
а	Management				
b	Legal		-		
С	Accounting				
d	Lobbying				
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees		···-		
g	Other. (If line 11g amount exceeds 10% of line 25, column				
40	(A) amount, list line 11g expenses on Schedule O.)		·		
12	Advertising and promotion	1 404	1 404		
13	Office expenses	1,484	1,484		
14	Information technology				
15 16	Royalties	43,544	43,544		
17	Travel	43,344	43,344		
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				<u> </u>
21	Payments to affiliates		-		
22	Depreciation, depletion, and amortization	3,951	3,951		
23	Insurance	1,020	1,020		
24	Other expenses. Itemize expenses not covered				
	above (List miscellaneous expenses in line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)				
а	SUPPLIES	8,289	8,289		
b	REGISTRATION EXPENSE	11,190	11,190		
C	UMPIRES	27,959	27,959		
d	UNIFORMS	379	379		
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e .	97,816	97,816	0	0
26	Joint costs. Complete this line only if the				
	organization reported in column (B) joint costs from a combined educational campaign and				
	fundraising solicitation Check here ☐ if				
	following SOP 98-2 (ASC 958-720)				

Balance Sheet

Part X

Beginning of year End of year Cash - non-interest-bearing 31,581 1 46,509 2 24,950 2 24,953 3 3 4 4 Loans and other receivables from current and former officers, directors, 5 trustees, key employees, and highest compensated employees. 5 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary 6 7 7 8 8 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D | 10a 54,558 40,849 17,660 10c 13,709 11 11 12 12 13 13 14 14 15 15 16 74,191 16 85,171 17 17 18 18 19 19 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 22 Loans and other payables to current and former officers, directors, Liabilities trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties 23 24 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X 25 26 0 26 0 Organizations that follow SFAS 117 (ASC 958), check here \blacktriangleright 🗓 and complete lines 27 through 29, and lines 33 and 34. **Net Assets of Fund Balances** 27 74,191 27 85,171 28 28 29 29 Organizations that do not follow SFAS 117 (ASC 958), check here 🕒 📙 and complete lines 30 through 34. 30 30 31 Paid-in or capital surplus, or land, building, or equipment fund 31 32 Retained earnings, endowment, accumulated income, or other funds 32 33 74,191 33 85,171 34 74,191 34 85,171

	n 990 (2013) RAPID CITY GIRLS JR OLYMPIC	46-04478	17	Р	age 12
Pa	irt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				. 🗆
1	Total revenue (must equal Part VIII, column (A), line 12)	. 1		108,	
2	Total expenses (must equal Part IX, column (A), line 25)	. 2		97,	816
3	Revenue less expenses. Subtract line 2 from line 1	. 3		10,	980
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	. 4		74,	191
5	Net unrealized gains (losses) on investments	. 5			
6	Donated services and use of facilities	. 6		·	
7	Investment expenses	. 7			
8	Prior period adjustments	. 8			
9	Other changes in net assets or fund balances (explain in Schedule O)	. 9			0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	. 10		85,	171
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				. 🗆
				Yes	No
1	Accounting method used to prepare the Form 990: 🗵 Cash 🔲 Accrual 🔲 Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in				
	Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Х
	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:				ĺ
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis	•			
b	Were the organization's financial statements audited by an independent accountant?		2b		Х
	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:				
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				ĺ
С	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?		2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in				
	Schedule O.				İ
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in			Ì	
	the Single Audit Act and OMB Circular A-133?		3a		X
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		3b		
EEA			Form	990 (2	2013)

Form 990 (2013)

SCHEDULE A

(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

OMB No 1545-0047

2013

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or Form 990-EZ.

Open to Public Inspection

 Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs gov/form990. Name of the organization Employer Identification number RAPID CITY GIRLS JR OLYMPIC 46-0447817 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). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 2 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the 4 hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 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). An organization that normally receives a substantial part of its support from a governmental unit or from the general public 7 described in section 170(b)(1)(A)(vi). (Complete Part II.) R A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 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-funtionally 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). If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting Since August 17, 2006, has the organization accepted any gift or contribution from any of the g following persons? A person who directly or indirectly controls, either alone or together with persons described in (ii) and Yes No (iii) below, the governing body of the supported organization? 11g(i) 11g(II) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) Provide the following information about the supported organization(s) h (iv) is the organization (III) Type of organization (i) Name of supported (ii) EIN (v) Did you notify (vi) Is the (vii) Amount of monetary organization (described on lines 1-9 in col (i) listed in your the organization in organization in col support above or IRC section governing document? col (i) of your (i) organized in the support? (see instructions)) US? Yes No Yes No Yes No (A) (B) (C) (D) (E) **Total**

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.)

Calendary year (or fiscal year beginning in) Gifts, grants, contributions, and membraiship fless received. (Do not include any Tunsus grants.) Total support of the contributions of the cont	Sec	tion A. Public Support							
membership fees received. (Co not include any "unusual grants.") 2 Tox reventues leved for the corganization's benefit and either paid to or operated on its behalf. 3 The value of services or facilities furnished by a governmental unit to the organization without charge 4 Total. Add lines I through 3 5 The portion of balf contributions by each person (often than a governmental unit to publicly supported organization (often than a governmental unit or publicly supported organization included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 6 Public support. Solvetic lines from line 4 Soction B. Total Support Calendar year (of fiscal year beginning in) > (a) 2009 (b) 2010 (c) 2011 (d) 2012 (e) 2013 (f) Total Calendar year (of fiscal year beginning in) > (a) 2009 (b) 2010 (c) 2011 (d) 2012 (e) 2013 (f) Total Calendar year (of fiscal year beginning in) > (a) 2009 (b) 2010 (c) 2011 (d) 2012 (e) 2013 (f) Total Calendar year (of fiscal year beginning in) > (a) 2009 (b) 2010 (c) 2011 (d) 2012 (e) 2013 (f) Total Calendar year (of fiscal year beginning in) > (a) 2009 (b) 2010 (c) 2011 (d) 2012 (e) 2013 (f) Total Calendar year (of fiscal year beginning in) > (a) 2009 (b) 2010 (c) 2011 (d) 2012 (e) 2013 (f) Total Calendar year (of fiscal year beginning in) > (a) 2009 (b) 2010 (c) 2011 (d) 2012 (e) 2013 (f) Total Calendar year (of fiscal year beginning in) > (a) 2009 (b) 2010 (c) 2011 (d) 2012 (e) 2013 (f) Total Calendar year (of fiscal year beginning in) > (a) 2009 (b) 2010 (c) 2011 (d) 2012 (e) 2013 (f) Total Calendar year (of fiscal year beginning in) > (a) 2009 (b) 2010 (c) 2011 (d) 2012 (e) 2013 (f) 2013	Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total	
organization's benefit and either paid to or expended on its behalf	1	membership fees received. (Do not							
furnished by a governmental unit to the organization without charge	2	organization's benefit and either paid							
secuperson of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 6 Public support. Subtract he of the amount shown on line 11, column (f) 7 Amounts from line 4 8 Gross income from interest, dividends, payments received on securities loans, rents, revalities excluded and income from similar sources. 9 Net income from unrelated business activities, whether or not the business is regularly carried on 1. 10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.). 11 Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc. (see instructions) 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(X) organization, check this box and stop here. 15 Public support percentage from 2012 Schedule A, Part II, line 14 16 Public support percentage from 2012 Schedule A, Part II, line 14 17 a 10%-facts-and-circumstances test - 2013. If the organization did not check the box on line 13, and line 14 is 33 1/3% support test - 2012. If the organization did not check the box on line 13, and line 14 is 31 1/3% support test - 2012. If the organization did not check a box on line 13 and line 14 is 31 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 10 10%-facts-and-circumstances test - 2013. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test, the organizatio	3	furnished by a governmental unit to the							
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)	4	Total. Add lines 1 through 3							
governmental unit or publicly supported organization in cut that exceeds 2% of the amount shown on line 1 that exceeds 2% of the amount shown on line 11, column (f)	5	The portion of total contributions by					, ,		
supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) . 8 Public support. Subtract he 5 from hes 4 Calendar year (or fiscal year beginning in) > (a) 2009 (b) 2010 (c) 2011 (d) 2012 (e) 2013 (f) Total 7 Amounts from line 4 8 Gross income from interest, dividends, payments received on securities loans, rents, royaltes and income from similar sources 9 Net income from unrelated business activities, whether or not the business is regularly carried on . 10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV). 11 Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc. (see instructions) 13 First five years. if the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 4 Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f)) 14 Year of the sale of the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization duallines as a publicly supported organization 17a 10%-facts-and-circumstances test - 2013. If the organization meets the "facts-and-circumstances" test, check this box and stop here. The organization duallines as a publicly supported organization 18 10% or more, and if the organization meets the "facts-and-circumstances" test, theck this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test, theck this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test, theck this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test, theck this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test, theck this box and stop here. Explain in Part IV how the organization meets t		each person (other than a			:				
line 1 that exceeds 2% of the amount shown on line 11, column (f) 6 Public support. Subtract his 5 from line 4 Section B. Total Support Calendar year (or fiscal year beginning in) ▶ (a) 2009 (b) 2010 (c) 2011 (d) 2012 (e) 2013 (f) Total 7 Amounts from line 4 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources 9 Net income from unrelated business activities, whether or not the business is regularly carried on one of capital assets (Explain in Part IV.) 10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.) 11 Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc. (see instructions) 12 Trist five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here 14 Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f)) 15 Public support percentage from 2012 Schedule A, Part II, line 14 16 33 113% support test - 2013. If the organization did not check the box on line 13, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17 a 10%-facts-and-circumstances test - 2013. If the organization did not check a box on line 13, 16a, and line 15 is 33 1/3% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test, theck this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-cir		governmental unit or publicly						1	
shown on line 11, column (f) 8 Public support. Subtract line 5 from line 4 8 Public support. Subtract line 5 from line 4 8 Public support. Subtract line 5 from line 4 8 Public support. Subtract line 5 from line 4 9 Public support subtract line 5 from line 4 9 Public support subtract line 7 line 1 line		supported organization) included on		1					
Section B. Total Support Amounts from line 4 Gross income from interest, dividends, payments received on securiles loans, rents, royaltes and income from interest, dividends, payments received on securiles loans, rents,									
Section B. Total Support Calendar year (or fiscal year beginning in) A mounts from line 4		shown on line 11, column (f)		<u> </u>	`				
Calendar year (or fiscal year beginning in) (a) 2009 (b) 2010 (c) 2011 (d) 2012 (e) 2013 (f) Total Amounts from line 4 Amounts from line 4 Gross income from interest, dividends, payments received on secunities loans, rents, royaltes and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. Add lines 7 through 10 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f)) 14 Yeur years. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. The organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organi				<u> </u>				<u> </u>	
7 Amounts from line 4 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources 9 Net income from unrelated business activities, whether or not the business is regularly carried on . 10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.) 11 Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc. (see instructions) 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here 8 Section C. Computation of Public Support Percentage 14 Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f)) 15 Public support percentage from 2012 Schedule A, Part II, line 14 16 33 1/3% support test - 2013. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 16 a 30 1/3% support test - 2012. If the organization duel files as a publicly supported organization 17 a 10%-facts-and-circumstances test - 2013. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circu								, · · · · · · · · · · · · · · · · · · ·	
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<u> </u>	18	*. •						▶ ⊔	
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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.)

Se	ction A. Public Support						
Cal	endar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	65,266	61,290	77,730			204,286
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	11,434	15,839				45,980
3	Gross receipts from activities that are not an unrelated trade or bus under sec 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5	76,700	77,129	96,437			250,266
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
C	Add lines 7a and 7b	, , , , , , , , , , , , , , , , , , ,				<u> </u>	
8	Public support (Subtract line 7c from line 6)						250,266
_	ction B. Total Support	r 					
	endar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9	Amounts from line 6	76,700	77,129	96,437			250,266
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
C	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carned on	1					
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)	76,700	77,129	96,437			250,266
14	First five years. If the Form 990 is for the orgonganization, check this box and stop here	<u> </u>	<u> </u>	-	, ,,	•	▶ □
<u>Se</u>	ction C. Computation of Public Su						
15	Public support percentage for 2013 (line 8, co)		15	100.00 %
16	Public support percentage from 2012 Schedu			<u></u>	<u></u>	16	99.99 %
	ction D. Computation of Investme					T .= T	
17 40	Investment income percentage for 2013 (line					17	0.00 %
18 192	Investment income percentage from 2012 Sc 33 1/3% support tests - 2013. If the organization			and line 15 is more		18	
	17 is not more than 33 1/3%, check this box a	and stop here. The	organization quali	fies as a publicly su	upported organiza	ition	▶ 🖾
D	33 1/3% support tests - 2012. If the organization 18 is not more than 33 1/3%, check this b	oox and stop here.	The organization of	jualifies as a public	ly supported orga	nızation	▶ 🛚
20	Private foundation. If the organization did no	ot check a box on li	ne 14, 19a, or 19b,	check this box and	d see instructions		▶ 🔲

ched	ule A (Form 9	90 or 990	0-EZ) 2013	RAI	PID CIT	TY GIR	LS JR	OLYMPIC	2				46	-0447817	Page 4
Pa	tIV.	Supp	olemental	Informa	tion. P	rovide ti	he expl	lanations	requi	red by Pa	art II, lir	ne 1	0; Part II	, line 17a d	or 17b; and
		Part I	II, line 12.	Also com	olete this	part for	any ad	ditional inf	ormati	on. (See i	nstructi	ons)			
01.	Тур	e of	suppo	rting	orga	nizat	tion	(Part	I,	Lines	11a		11d)		
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SCHEDULE D (Form 990)

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.

Department of the Treasury internal Revenue Service

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

2013

OMB No 1545-0047

Open to Public

Name	of the organization	· · · · · · · · · · · · · · · · · · ·	Employer identification number
RA	PID CITY GIRLS JR OLYMPIC		46-0447817
Pa	t I Organizations Maintaining Donor Adv	ised Funds or Other Similar Funds or A	
	Complete if the organization answered		
		(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 advisor	ors in writing that the assets held in donor advised	
	funds are the organization's property, subject to the organization	ganization's exclusive legal control?	
6	Did the organization inform all grantees, donors, and do	onor advisors in writing that grant funds can be us	ed
	only for charitable purposes and not for the benefit of the	ne donor or donor advisor, or for any other purpose	e
	conferring impermissible private benefit?	<u></u>	
Pa	t 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 orga	anization (check all that apply).	
	Preservation of land for public use (e.g., recreation	or education) Preservation of an histo	prically important land area
	Protection of natural habitat	Preservation of a certific	ed historic structure
	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
а	Total number of conservation easements		
b	Total acreage restricted by conservation easements		2b
C	Number of conservation easements on a certified histo	• •	2c
d	Number of conservation easements included in (c) acq		
3	Number of conservation easements modified, transferred	ed, released, extinguished, or terminated by the or	ganization during the
_	tax year >		
4	Number of states where property subject to conservation		
5	Does the organization have a written policy regarding the	- · · · · · · · · · · · · · · · · · · ·	
_	violations, and enforcement of the conservation easem		
6	Staff and volunteer hours devoted to monitoring, inspec	iting, and enforcing conservation easements durin	g the year
-	^		
7	Amount of expenses incurred in monitoring, inspecting, ▶ \$	and enforcing conservation easements during the	e year
8	Does each conservation easement reported on line 2(d) above esticity the requirements of easilier 470(h)	(4)(D)
•		• • • • • • • • • • • • • • • • • • • •	<u>_</u> _
9	(i) and section 170(h)(4)(B)(ii)?	anyation assembnts in its royanua and expanse at	
3	balance sheet, and include, if applicable, the text of the	•	•
	organization's accounting for conservation easements.	Tooliote to the organization's infancial statements	i diat describes die
Pa		tions of Art, Historical Treasures, or	Other Similar Assets
	Complete if the organization answered		
1a	If the organization elected, as permitted under SFAS 11		nt and balance sheet
	works of art, historical treasures, or other similar assets		
	public service, provide, in Part XIII, the text of the footne		
b	If the organization elected, as permitted under SFAS 11		
	works of art, historical treasures, or other similar assets		
	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, historic		·
	following amounts required to be reported under SFAS		
а	Revenues included in Form 990, Part VIII, line 1		▶\$
ь	Assets included in Form 990, Part X		

_	dule D (Form 990) 2013 . RAPID CITY GII				_			46-0447		Page 2
	rt III Organizations Maintaining (ets (conf	inued)
3'	Using the organization's acquisition, accession,	and other	er records, o	check any	of the follow	wing that are a	a signific	cant use of its		
	collection items (check all that apply):									
а	☐ Public exhibition		d 🗌 Loa	an or excha	nge progra	ams				
Ь	b Scholarly research e Other									
C	Preservation for future generations									_
4	Provide a description of the organization's collection	ctions an	d explain h	ow they fur	ther the org	ganization's e	xempt p	urpose in Part		
	XIII.									
5	During the year, did the organization solicit or re	eceive do	nations of a	art, historica	ıl treasures	s, or other sim	ıılar			
	assets to be sold to raise funds rather than to be			of the orga	nization's	collection?		<u> </u>	. 🗌 Yes	No 🗌 No
Pa	rt IV Escrow and Custodial Arrang	_								
	Complete if the organization ar	nswere	d "Yes" to	o Form 9	90, Part	IV, line 9,	or rep	orted an amour	nt on Forr	n
	990, Part X, line 21.									
1a	Is the organization an agent, trustee, custodian								_	
								<i>.</i>	. 🗌 Yes	i 🗌 No
b	If "Yes," explain the arrangement in Part XIII and	d comple	te the follow	ving table:						
							<u> </u>	Amo	unt	
С	Beginning balance						_	:		
d	Additions during the year						. 10	l		
е	Distributions during the year						_	<u> </u>		
f	Ending balance									
2a	Did the organization include an amount on Form	1 990, Pa	rt X, line 21	?					. 🗌 Yes	No 🗌 No
	If "Yes," explain the arrangement in Part XIII. Ch	neck here	e if the expla	anation has	been prov	ided in Part X	all	<u> </u>	<u></u>	. 🖳
Pa	tt V Endowment Funds.									
	Complete if the organization an	swere	d "Yes" to	<u>o Form 9</u>	<u>90, Part</u>	IV, line 10	<u>. </u>			
		(a) Cu	irrent year	(b) Pn	or year	(c) Two years	back	(d) Three years back	(e) Four year	ars back
1a	Beginning of year balance	ļ	<u>. </u>						 	
b	Contributions			ļ					<u> </u>	
C	Net investment earnings, gains, and									
	losses								ļ	
d	Grants or scholarships			ļ					ļ	
8	Other expenditures for facilities and	1]				
	programs								ļ	
f	Administrative expenses									
g	End of year balance					<u> </u>			<u> </u>	
2	Provide the estimated percentage of the current				mn (a)) he	eld as				
а	Board designated or quasi-endowment >		%							
b	Permanent endowment > %									
С	Temporarily restricted endowment		%							
	The percentages in lines 2a, 2b, and 2c should e									
3a	Are there endowment funds not in the possession	on of the	organizatio	n that are h	eld and ad	ministered for	the			
	organization by:									es No
	(4) 2						• • • •		3a(i)	
	(.,					• • • • • • •	• • • •		3a(ii)	
	If "Yes" to 3a(ii), are the related organizations lis		•		?		• • • •		_3b	
4	Describe in Part XIII the intended uses of the org		n's endown	nent funds.						
Pal	rt VI Land, Buildings, and Equipm		al 111Va a 11 4 :		00 04	N / 18 = 4 4	- 0=	. F 000 D	. V II 4	•
	Complete if the organization an								t X, line 1	0
	Description of property]	(a) Cost or oth		` '	r other basis		Accumulated	(d) Book va	lue
			(investm	телі)	· · · · · ·	other)	d:	epreciation		
1a	Land	• • •					·			
b	Buildings	· · · _		54,558				40,849	13	3,709
C	Leasehold improvements	$\cdots \vdash$	_							
d	Equipment	\cdots			ļ. <u></u>					
_ е	Other									
Total	I. Add lines 1a through 1e. (Column (d) must equi	al Form	990 Part X	. column (R) line 10/c	3.1		J d	11	709

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	(a) December of according to a set-	45.5.	Part IV, line 11b. See Form 990, Part X, line
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
1) Financial d	lenvatives		
2) Closely-he	ld equity interests		
) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
	must equal Form 990, Part X, col (B) line 12)		
art VIII	Investments - Program Related.		<u>. t</u>
<u> </u>		"Yes" to Form 990. F	Part IV, line 11c. See Form 990, Part X, line 1
	(a) Description of investment		
	(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5) (6)			
(6) (7)			
(7)			-
<u>(8)</u>	· · · - · · · ·		
(9)		 	
	must equal Form 990, Part X, col (B) line 13)		<u> </u>
Part IX	Other Assets.		
	Complete if the execution and would	"Vaa" ta Carra 000 D	Sent IV line 44d Con Farm 000 Dark V Pro 4
			Part IV, line 11d. See Form 990, Part X, line 1
	Complete if the organization answered (a) Des		Part IV, line 11d. See Form 990, Part X, line 1
			
(2)			
(2) (3)			
(2) (3) (4)			
(2) (3) (4) (5)			
(2) (3) (4) (5) (6)			
(2) (3) (4) (5) (6)			
(2) (3) (4) (5) (6) (7)			
(2) (3) (4) (5) (6) (7) (8) (9)	(a) Des		
	(a) Des		(b) Book value
(2) (3) (4) (5) (6) (7) (8) (9)	(a) Des n (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities.	conption	(b) Book value
(2) (3) (4) (5) (6) (7) (8) (9) otal. (Column	(a) Des n (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities.	conption	(b) Book value
(2) (3) (4) (5) (6) (7) (8) (9) otal. (Column	(a) Des n (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities.	conption	(b) Book value
(2) (3) (4) (5) (6) (7) (8) (9) tal. (Column	(a) Description (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities. Complete if the organization answered	conption	(b) Book value
(2) (3) (4) (5) (6) (7) (8) (9) otal. (Column	(a) Description (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities. Complete if the organization answered line 25.	"Yes" to Form 990, P	(b) Book value
(2) (3) (4) (5) (6) (7) (8) (9) tal. (Column	(a) Description of liability	"Yes" to Form 990, P	(b) Book value
(2) (3) (4) (5) (6) (7) (8) (9) (tal. (Column art X) (1) Federal in (2)	(a) Description of liability	"Yes" to Form 990, P	(b) Book value
(2) (3) (4) (5) (6) (7) (8) (9) otal. (Column Part X (1) Federal in (2) (3)	(a) Description of liability	"Yes" to Form 990, P	(b) Book value
(2) (3) (4) (5) (6) (7) (8) (9) (art X (1) Federal in (2) (3) (4)	(a) Description of liability	"Yes" to Form 990, P	(b) Book value
(2) (3) (4) (5) (6) (7) (8) (9) (ant X (1) Federal in (2) (3) (4)	(a) Description of liability	"Yes" to Form 990, P	(b) Book value
(2) (3) (4) (5) (6) (7) (8) (9) otal. (Column art X (1) Federal in (2) (3) (4) (5)	(a) Description of liability	"Yes" to Form 990, P	(b) Book value
(2) (3) (4) (5) (6) (7) (8) (9) (1) Federal in (2) (3) (4) (5) (6) (7)	(a) Description of liability	"Yes" to Form 990, P	(b) Book value
(2) (3) (4) (5) (6) (7) (8) (9) otal. (Column Part X (1) Federal in (2) (3) (4) (5) (6) (7) (8)	(a) Description of liability	"Yes" to Form 990, P	Part IV, line 11e or 11f. See Form 990, Part X
(2) (3) (4) (5) (6) (7) (8) (9) Part X (1) Federal in (2) (3) (4) (5) (6) (7) (8) (9)	(a) Description of liability	"Yes" to Form 990, P	(b) Book value Part IV, line 11e or 11f. See Form 990, Part X

Pa	Reconciliation of Revenue per Audited Financial Statements With Revenue per	Retu	rn.
	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	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains on investments		
ь	Donated services and use of facilities		
C	Recoveries of prior year grants		
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII.)	1 1	
С	Add lines 4a and 4b	4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	
Pa	rt XII Reconciliation of Expenses per Audited Financial Statements With Expenses	per Re	eturn.
	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.		
1	Total expenses and losses per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
С	Other losses		
ď	Other (Describe in Part XIII.)		
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
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		
Ь	Other (Describe in Part XIII)		
c	Add lines 4a and 4b	4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	
Pa	rt XIII Supplemental Information		
Provi	de 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, Par	t X, line	
	rt XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.		
_			

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Page 4

Schedule D (Form 990) 2013

· RAPID CITY GIRLS JR OLYMPIC

Schedule D (Form 990) 2013

EEA

SCHEDULE O

Department of the Treasury

Internal Revenue Service

Name of the organization

(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No 1545-0047

2013

Open to Public Inspection

Employer identification number

RAPID CITY GIRLS JR OLYMPIC 46-0447817 01. Form 990 governing body review (Part VI, line 11) NO REVIEW WAS CONDUCTED OR WILL BE CNDUCTED 02. Governing documents, etc, available to public (Part VI, line 19) ALL BOOKS AND RECORDS ARE OPEN TO PUBLIC UPON REQUEST.

Form **8868** (Rev January 2014)

Application for Extension of Time To File an Exempt Organization Return

Department of the Treasury

File a separate application for each return.

OMB No 1545-1709

Internal Revenue	Service	► Information about Form 88	368 and its i	nstructions is at www.irs.go	v/form8868.		1			
• If you are t	filing for an	Automatic 3-Month Extension, con							>	Ž
		Additional (Not Automatic) 3-Mont			age 2 of this form)					
		unless you have already been grant					38			
a corporation 8868 to reque Return for Tra	required to est an exten ensfers Ass	You can electronically file Form 886i file Form 990-T), or an additional (no ision of time to file any of the forms listociated With Certain Personal Beneficetalls on the electronic filing of this for	t automatic) sted in Part I t Contracts,	3-month exténsion of time. Yo or Part II with the exception of which must be sent to the IRS	u can electronicall f Form 8870, Infor in paper format (s	ly file l matior see	Form n	F		
Part I	Automa	tic 3-Month Extension of T	ime. Only	submit original (no cop	ies needed).					_
<u></u>		file Form 990-T and requesting an au								_
									▶	_
		cluding 1120-C filers), partnerships, R			request an extens	sion o	f time	3		
to file income					•					
				Enter	filer's identifying	g nun	nber,	see in	struction	5
Type or	Name of	exempt organization or other filer, se	e instruction		Employer identifi					_
print	RAPID	CITY GIRLS JR OLYMPIC			46-0447			•	•	
File by the	Number,	street, and room or suite no. If a P.O	. box, see in	structions.	Social security n	umbe	er (SS	SN)		_
due date for	PO BOX	C 247			•		•	•		
filing your return See	City, tow	n or post office, state, and ZIP code.	For a foreign	n address, see instructions.						_
ınstructions	RAPID	CITY, SD 57709	_							
		-								_
Enter the Retu	ırn code for	the return that this application is for (file a separa	ite application for each return)	• • • • • •		• • •		. 0	ij
Application			Return	Application					Return	_
is For			Code	Is For					Code	
Form 990 or	Form 990-	EZ	01	Form 990-T (corporation)					07	_
Form 990-BI			02	Form 1041-A					08	_
Form 4720 (03	Form 4720 (other than indivi	Form 4720 (other than individual)					_
Form 990-Pi			04	Form 5227	Form 5227					-
Form 990-T	(sec. 401(a) or 408(a) trust)	05	Form 6069						-
Form 990-T			06	Form 8870						-
	•								12	-
		are of ▶ JOEL HANKS, PO B		RAPID CITY, SD 5770	09					
•	_	5-718-4507 s not have an office or place of busine							. □	٦
-		eturn, enter the organization's four dig			. If this	o in		• • •		J
		k this box ▶		-	▶ ☐ and a					
-	• •	EINs of all members the extension is		in the group, check this tox	P 📋 and a	llacii				
		atic 3-month (6 months for a corporati		to file Form 990-T) extension a	f time					-
		15 , 20 14 , to file the exempt on				noion	. :-			
until			gariizadori id	stuff for the organization flame	d above. The exte	IISION	115			
	_	s return for:								
► ₩ C	alendar yea	ar 20 <u>13</u> or								
▶ □ 4		inner	20	, and ending		30				
	ax year beg					20	- .			
_	•	ed in line 1 is for less than 12 months	, check reas	ion: Initial return	Final return					
		inting period	200 0000		 -					-
		for Forms 990-BL, 990-PF, 990-T, 47	∠u, or 6069,	enter the tentative tax, less ar	1 y					
		its. See instructions.	300 1			3a	\$			_
		for Forms 990-PF, 990-T, 4720, or 60		1 1						
		ents made. Include any prior year ov				3b	\$		·	-
		ract line 3b from line 3a. Include your		n this form, it required, by usin	9					
		Federal Tax Payment System). See in		L.O 244 Abra Fa 2000 -			\$			-
Caution. If you	are going	to make an electronic funds withdraw	raı (direct del	DIT) WITH THIS FORM BUGG, See F	orm 8453-EO and	Form	. 8879	J-EO for	r	

payment instructions.