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# Short Form Return of Organization Exempt From Income Tax

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

OMB No 1545-1150

2013

Open to Public  
Inspection

Department of the Treasury  
Internal Revenue Service

►Do not enter Social Security numbers on this form as it may be made public. By law, the IRS generally cannot redact the information on the form.

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

<b>A For the 2013 calendar year, or tax year beginning</b>		<b>, 2013, and ending</b>		<b>, 20</b>
<b>B Check if applicable</b>		<b>C Name of organization</b>		<b>D Employer identification number</b>
<input type="checkbox"/> Address change		RIVER CITY RUNNERS AND WALKERS CLUB		55-0645616
<input type="checkbox"/> Name change		Number and street (or P O box, if mail is not delivered to street address)		Room/suite
<input type="checkbox"/> Initial return		PO BOX 4496		
<input type="checkbox"/> Terminated		City or town, state or county, and ZIP + 4		
<input type="checkbox"/> Amended return		PARKERSBURG WV 26104		
<input type="checkbox"/> Application pending				
<b>G Accounting Method</b>		<input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual Other (specify) ►		
<b>I Website:</b>				
<b>J Tax-exempt status</b> (check only one) -		<input checked="" type="checkbox"/> 501(c)(3)	<input type="checkbox"/> 501(c)( )	◀ (insert no) 4947(a)(1) or 527
<b>K Form of organization</b>		<input checked="" type="checkbox"/> Corporation	<input type="checkbox"/> Trust	<input type="checkbox"/> Association <input type="checkbox"/> Other

**L Add lines 5b, 6c, and 7b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, line 25, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ. ► \$ 104,844.**

## Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I)

Check if the organization used Schedule O to respond to any question in this Part I

<b>Revenue</b>	1 Contributions, gifts, grants, and similar amounts received	1	16,179.
	2 Program service revenue including government fees and contracts	2	80,865.
	3 Membership dues and assessments	3	7,800.
	4 Investment income	4	
	5 a Gross amount from sale of assets other than inventory	5a	
	b Less cost or other basis and sales expenses	5b	16,179.
	c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	
	6 Gaming and fundraising events		
	a Gross income from gaming (attach Schedule G if greater than \$15,000)	6a	
	b Gross income from fundraising events (not including \$ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceed \$15,000)	6b	
c Less direct expenses from gaming and fundraising events	6c		
d Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	6d		
7 a Gross sales of inventory, less returns and allowances	7a		
b Less cost of goods sold	7b		
c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c		
8 Other revenue (describe in Schedule O)	8		
9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	9	104,844.	
<b>Expenses</b>	10 Grants and similar amounts paid (list in Schedule O)	10	11,214.
	11 Benefits paid to or for members	11	
	12 Salaries, other compensation, and employee benefits	12	
	13 Professional fees and other payments to independent contractors	13	265.
	14 Occupancy, rent, utilities, and maintenance	14	1,810.
	15 Printing, publications, postage, and shipping	15	9,718.
	16 Other expenses (describe in Schedule O)	16	67,769.
	17 Total expenses. Add lines 10 through 16	17	90,776.
<b>Net Assets</b>	18 Excess or (deficit) for the year (Subtract line 17 from line 9)	18	14,068.
	19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	44,379.
	20 Other changes in net assets or fund balances (explain in Schedule O)	20	(3,682.)
	21 Net assets or fund balances at end of year. Combine lines 18 through 20	21	54,765.

For Paperwork Reduction Act Notice, see the separate instructions.

Form 990-EZ (2013)

SCANNED AUG 21 2014

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15

**Part II Balance Sheets. (see the instructions for Part II )**

**Check if the organization used Schedule O to respond to any question in this Part II**

	(A) Beginning of year	(B) End of year
<b>22 Cash, savings, and investments</b>	<b>39,137</b>	<b>53,476</b>
<b>23 Land and buildings</b>	<b>23</b>	
<b>24 Other assets (describe in Schedule O)</b>	<b>5,242</b>	<b>1,289</b>
<b>25 Total assets</b>	<b>44,379</b>	<b>54,765</b>
<b>26 Total liabilities (describe in Schedule O)</b>	<b>26</b>	
<b>27 Net assets or fund balances</b> (line 27 of column (B) must agree with line 21)	<b>44,379</b>	<b>54,765</b>

**Part III Statement of Program Service Accomplishments** (see the instructions for Part III)

Check if the organization used Schedule O to respond to any question in this Part III.

What is the organization's primary exempt purpose? SEE SCHEDULE O

What is the organization's primary exempt purpose? SEE SCHEDULE C  
Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title

28 THE CLUB IS A MAJOR SPONSOR FOR THE TURKEY TROT ROAD RACE HELD FOR THE LAST 34 YEARS DURING THANKSGIVING, THERE WERE NEAR 3000 ENTRANTS

(Grants  ) If this amount includes foreign grants, check here  ►

## Expenses

(Required for section 501(c)(3)  
and 501(c)(4) organizations and  
section 4947(a)(1) trusts,  
optional for others.)

29 THE CLUB SPONSORS THE ANNUAL CHICK FIL A ROAD RACE  
THERE WERE OVER 300 ENTRANTS

28a 23, 163.

(Grants \$ 2,600.) If this amount includes foreign grants, check here

29a 7,736.

30 THE CLUB SPONSORS THE SHOES FOR KIDS 5K ROAD RACE  
PROCEEDS FROM THE RACE ARE USED TO PURCHASE SHOES FOR  
LOCAL CHILDREN, OVER 200 ENTRANTS

29a 7,736.

(Grants \$ 5,090.) If this amount includes foreign grants, check here

30a 8, 201.

**31 Other program services (describe in Schedule O)**

(Grants \$ 8,489.) If this amount includes foreign grants, check here  31a 51,676.

**Program Service Expenses (add lines 28a through 31a)**

**Part V Other Information** (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V) Check if the organization used Schedule O to respond to any question in this Part V

33 Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O 33  Yes  No

34 Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions) 34  X

35a Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)? 35a  X

b If "Yes", to line 35a, has the organization filed a Form 990-T for the year? If "No", provide an explanation in Schedule O 35b

c Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III 35c

36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N 36  X

37a Enter amount of political expenditures, direct or indirect, as described in the instructions ► 37a  0

b Did the organization file Form 1120-POL for this year? 37b

38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return? 38a  X

b If "Yes," complete Schedule L, Part II and enter the total amount involved 38b

39 Section 501(c)(7) organizations Enter 39a

a Initiation fees and capital contributions included on line 9 39b

b Gross receipts, included on line 9, for public use of club facilities 39b

40a Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911 ► 40a , section 4912 ► 40a , section 4955 ► 40a

b Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I 40b  X

c Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 40c

d Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c reimbursed by the organization 40d

e All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T 40e  X

41 List the states with which a copy of this return is filed ►

42a The organization's books are in care of ► STEVEN BROWNING Telephone no ► 304-588-0450  
Located at ► 16 CALICO LN WV MINERAL WELLS ZIP + 4 ► 26150 42a

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)? If "Yes," enter the name of the foreign country ► See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. 42b  X

c At any time during the calendar year, did the organization maintain an office outside of the U.S.? If "Yes," enter the name of the foreign country ► 42c  X

43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year ► 43

44a Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ 44a  X

b Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ 44b  X

c Did the organization receive any payments for indoor tanning services during the year? 44c  X

d If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 44d

45a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 45a  X

45b 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," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions) 45b  X

46 Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I

46

Yes	No
	X

### Part VI Section 501(c)(3) organizations only

All section 501(c)(3) organizations must answer questions 47–49b and 52, and complete the tables for lines 50 and 51

Check if the organization used Schedule O to respond to any question in this Part VI

47 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

48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

49a Did the organization make any transfers to an exempt non-charitable related organization?

b If "Yes," was the related organization a section 527 organization?

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

	Yes	No
47		X
48		X
49a		X
49b		

(a) Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
NONE				

f Total number of other employees paid over \$100,000 ►

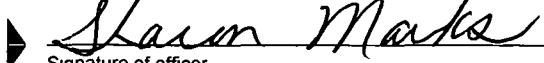
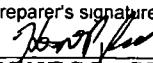
51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and business address of each independent contractor	(b) Type of service	(c) Compensation
NONE		

d Total number of other independent contractors each receiving over \$100,000. ►

52 Did the organization complete Schedule A? **Note.** All section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A ►  Yes  No

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

Sign Here	 SHARON MARKS		08/02/2014
	Signature of officer		Date
	SHARON MARKS		PRESIDENT
Type or print name and title			
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date
	KENT PYLES		08/02/2014
	Firm's name ► KIGER TAX AND BUSINESS SERVICES		Firm's EIN ► 25-1914540
Firm's address	1215 AVERY ST	Phone no 304-428-7505	
PARKERSBURG WV 26101-			

May the IRS discuss this return with the preparer shown above? See instructions

►  Yes  No  
Form 990-EZ (2013)

**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**

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► 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

RIVER CITY RUNNERS AND WALKERS CLUB

Employer identification number

55-0645616

**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 support
			Yes	No	Yes	No	Yes	No	
(A)									
(B)									
(C)									
(D)									
(E)									
<b>Total</b>									

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

Schedule A (Form 990 or 990-EZ) 2013

**Part III****Support Schedule for Organizations Described in Section 509(a)(2)**(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II  
If the organization fails to qualify under the tests listed below, please complete Part II.)**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") . . . . .	22121.	31805.	15388.	15300.	16179.	100793.
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 . . . . .	52630.	68894.	72175.	77373.	88665.	359737.
3 Gross receipts from activities that are not an unrelated trade or business under section 513 . . . . .						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . . . .						
5 The value of services or facilities furnished by a governmental unit to the organization without charge . . . . .						
6 Total. Add lines 1 through 5 . . . . .	74751.	100699.	87563.	92673.	104844.	460530.
7a Amounts included on lines 1, 2, and 3 received from disqualified persons . . . . .						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year . . . . .						
c Add lines 7a and 7b . . . . .						
8 Public support (Subtract line 7c from line 6) ►						460530.

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9 Amounts from line 6 . . . . .	74751.	100699.	87563.	92673.	104844.	460530.
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources . . . . .	92.	58.	36.	21.		207.
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 . . . . .						
c Add lines 10a and 10b . . . . .	92.	58.	36.	21.		207.
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on . . . . .						
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) . . . . .						
13 Total support. (Add lines 9, 10c, 11, and 12) ►	74843.	100757.	87599.	92694.	104844.	460737.
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ► <input type="checkbox"/>						

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

15 Public support percentage for 2013 (line 8, column (f) divided by line 13, column (f)) . . . . .	15	99.96	%
16 Public support percentage from 2012 Schedule A, Part III, line 15 . . . . .	16	99.93	%

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

17 Investment income percentage for 2013 (line 10c, column (f) divided by line 13, column (f)) . . . . .	17	0.04	%
18 Investment income percentage from 2012 Schedule A, Part III, line 17 . . . . .	18	0.07	%
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 . . . . .			► <input checked="" type="checkbox"/>
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 . . . . .			► <input type="checkbox"/>
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions . . . . .			► <input type="checkbox"/>

**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

RIVER CITY RUNNERS AND WALKERS CLUB

Employer identification number  
55-0645616**990EZ PART I LINE 10 GRANTS PAID**

DONATIONS-----	1515
SCHOLARSHIPS-----	8200
SPONSORSHIPS FOR KIDS-----	1500

**990EZ PART I LINE 16 OTHER EXPENSES**

LICENSES AND PERMITS-----	285
ADVERTISING-----	50
INSURANCE-----	2816
MISCELLANEOUS-----	367
TECHNICAL SUPPORT-----	150
SOCIAL BANQUET-----	2579
TIMING EXPENSE-----	424
AWARDS-----	7161
CLUB APPAREL-----	213
EQUIPMENT RENTAL-----	500
COMPUTER EXPENSE-----	1473
HOLIDAY IN THE PARK-----	28
OFFICE SUPPLIES-----	897
PRIZES-----	2991
RACE PERMITS-----	3275
RACING SUPPLIES-----	3792
RACE REFRESHMENTS-----	1306
SUPPLIES-----	371
T-SHIRTS-----	38727

Name of the organization <b>RIVER CITY RUNNERS AND WALKERS CLUB</b>	Employer identification number <b>55-0645616</b>
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**990EZ PART I LINE 16 OTHER EXPENSES**

WEBSITE-----276

TRAVEL-----88

TOTAL TO LINE 16-----67769

**990EZ PART II LINE 24 OTHER ASSETS**

COMPUTER EQUIPMENT

**990EZ PART III ORGANIZATIONS PRIMARY PURPOSE**CREATING INCOME FOR SCHOLARSHIPS AND PROMOTING HEALTH AND  
WELLNESS THROUGHOUT THE COMMUNITY BY SPONSORING RUNNING  
RACES.**990EZ PART 1 LINE 20**

RECONCILIATION DISCREPANCY

Application for Extension of Time To File an  
Exempt Organization Return

► File a separate application for each return.  
► Information about Form 8868 and its instructions is at [www.irs.gov/form8868](http://www.irs.gov/form8868).

- If you are filing for an **Automatic 3-Month Extension**, complete only Part I and check this box ►
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only Part II (on page 2 of this form)

**Do not complete Part II unless** you have already been granted an automatic 3-month extension on a previously filed Form 8868

**Electronic filing (e-file).** You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit [www.irs.gov/efile](http://www.irs.gov/efile) and click on e-file for Charities & Nonprofits

**Part I Automatic 3-Month Extension of Time.** Only submit original (no copies needed)

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only ►

*All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns*

Enter filer's identifying number, see instructions

Type or print File by the due date for filing your return. See instructions	Name of exempt organization or other filer, see instructions RIVER CITY RUNNERS AND WALKERS CLUB	Employer identification number (EIN) or 55-0645616
	Number, street, and room or suite no. If a P O box, see instructions PO BOX 4496	Social security number (SSN)
	City, town or post office, state, and ZIP code For a foreign address, see instructions PARKERSBURG WV 26104	

Enter the Return code for the return that this application is for (file a separate application for each return) ►  01

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

- The books are in the care of ► STEVEN BROWNING  
Telephone No ► 304-588-0450 Fax No ►
- If the organization does not have an office or place of business in the United States, check this box ►
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) 2702 If this is for the whole group, check this box ►  If it is for part of the group, check this box ►  and attach a list with the names and EINs of all members the extension is for

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until AUG 15, 20 14, to file the exempt organization return for the organization named above. The extension is for the organization's return for  
►  calendar year 2013 or  
►  tax year beginning \_\_\_\_\_, 20 \_\_\_\_\_, and ending \_\_\_\_\_, 20 \_\_\_\_\_

2 If the tax year entered in line 1 is for less than 12 months, check reason  Initial return  Final return  
 Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions	3a \$
b If this application is for Form 990-PF or 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit	3b \$
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions	3c \$

**Caution.** If you are going to make an electronic fund withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions