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Form **990**

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

2013

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Do not enter Social Security numbers on this form as it may be made public
Information about Form 990 and its instructions is at www.irs.gov/form990

A For the 2013 calendar year, or tax year beginning 10/01/13, and ending 12/31/13

B Check if applicable: Address change Name change Initial return Terminated Amended return <input type="checkbox"/> Application pending	C Name of organization <p style="text-align: center;">MIRACLES OF MITCH FOUNDATION</p> Doing Business As Number and street (or P O box if mail is not delivered to street address) Room/suite <p>7835 TELEGRAPH ROAD</p> City or town, state or province, country, and ZIP or foreign postal code <p>BLOOMINGTON MN 55438</p>		D Employer identification number <p>56-2384527</p>
	F Name and address of principal officer		E Telephone number <p>952-974-9600</p>
	I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		G Gross receipts \$ 176,133
	J Website WWW.MIRACLESOFMITCH.ORG		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list (see instructions)
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other			L Year of formation 2003 M State of legal domicile MN

Part I Summary

1 Briefly describe the organization's mission or most significant activities

TO PROVIDE QUALITY OF LIFE GRANTS AND OTHER ASSISTANCE TO FAMILIES OF CHILDREN BATTLING CANCER.

2 Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets

3 Number of voting members of the governing body (Part VI, line 1a)	13
4 Number of independent voting members of the governing body (Part VI, line 1b)	12
5 Total number of individuals employed in calendar year 2013 (Part V, line 2a)	8
6 Total number of volunteers (estimate if necessary)	75
7a Total unrelated business revenue from Part VIII, column (C), line 12	0
7b Net unrelated business taxable income from Form 990-T, line 34	0

	Prior Year	Current Year
8 Contributions and grants (Part VIII, line 1b)	157,410	64,589
9 Program service revenue (Part VIII, line 2a)		0
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	160	11
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,034,984	80,153
12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,192,554	144,753
13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	560,452	58,340
14 Benefits paid to or for members (Part IX, column (A), line 4)		0
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	533,000	169,913
16a Professional fundraising fees (Part IX, column (A), line 11e)		0
b Total fundraising expenses (Part IX, column (D), line 25) 60,710		
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	132,754	91,163
18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	1,226,206	319,416
19 Revenue less expenses Subtract line 18 from line 12	-33,652	-174,663
20 Total assets (Part X, line 16)	Beginning of Current Year 524,350	End of Year 863,613
21 Total liabilities (Part X, line 26)	40,688	554,614
22 Net assets or fund balances Subtract line 21 from line 20	483,662	308,999

Part II Signature Block

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

Sign Here	Signature of officer	<i>Brian Nelson</i>	Date	<i>8/13/14</i>
	Type or print name and title	BRIAN NELSON	EXECUTIVE DIRECTOR	

Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check if self-employed	PTIN
	MICHAEL DEEGAN	<i>Michael Deegan CPA</i>	08/12/14	<input type="checkbox"/>	P00472595
	Firm's name	Firm's EIN	Phone no		
WEBER & DEEGAN, LTD.		41-1758447	952-920-6186		
Firm's address					
7211 OHMS LANE					
EDINA, MN 55439					

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

Yes No

For Paperwork Reduction Act Notice, see the separate instructions
DAA

Form **990** (2013)

5 G17

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission

TO PROVIDE QUALITY OF LIFE GRANTS AND OTHER ASSISTANCE TO FAMILIES OF CHILDREN BATTLING CANCER.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

Yes No

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

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?

Yes No

If "Yes," describe these changes on Schedule O

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code) (Expenses \$ **134,327** including grants of \$ **47,042**) (Revenue \$)
HOME RESCUE TEAM (HRT) - THIS PROGRAM HELPS PEDIATRIC CANCER FAMILIES PAY THEIR HOUSING, UTILITIES, AUTO , BEREAVEMENT. IN THE STUB YEAR ENDED 10/1/13 - 12/31/13, 41 HRT GRANTS WERE AWARDED TO ASSIST PEDIATRIC CANCER FAMILIES FROM MINNESOTA, IOWA, NORTH DAKOTA, SOUTH DAKOTA, WISCONSIN, MONTANA, MICHIGAN, OHIO, TEXAS, NEBRASKA AND NEW JERSEY.

4b (Code) (Expenses \$ **84,228** including grants of \$ **11,298**) (Revenue \$)
QUALITY OF LIFE (QOL) PROGRAM - THE QOL PROGRAM BENEFITED PEDIATRIC CANCER FAMILIES FROM MINNESOTA, COLORADO, IOWA, KANSAS, NORTH DAKOTA, SOUTH DAKOTA, WISCONSIN, MONTANA, MICHIGAN OHIO, TEXAS, NEBRASKA AND NEW JERSEY. IN THE STUB YEAR ENDED 10/1/13 - 12/31/13, QOL CONSISTED OF THE FOLLOWING ACTIVITIES:
* **21 QOL GRANTS PROVIDING A VARIETY OF ASSISTANCE, INCLUDING GROCERY CARDS, GAS CARDS, AUTO REPAIRS, AUTO PAYMENTS AND CASH CARDS.**
* **26 FAMILIES ENJOYING MINNESOTA MIRACLE WEEKEND GETAWAYS TO THE HILTON MSP AIRPORT HOTEL AND MALL OF AMERICA.**

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 **218,555**

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	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		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II		X
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III		X
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		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		X
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		X
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		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		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	X	
b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII		X
c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII		X
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX		X
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X		X
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X		X
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	X	
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		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
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		X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	X	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III		X
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		X

Part IV Checklist of Required Schedules (continued)

	Yes	No
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II		X
22 Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	X	
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J		X
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I		X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I		X
26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III		X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)		
a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	X	
b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	X	
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	X	
29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I		X
34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, or IV, and Part V, line 1		X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

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

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 organizations compensated any current officer, director, or trustee

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) BRIAN NELSON EXECUTIVE DIRECTOR	0.00 0.00	X			X			39,500	0	0
(2) STEPHEN CHEPOKAS FOUNDER	2.00 0.00	X						6,000	0	0
(3) BOB COHEN DIRECTOR	0.00 0.00	X						0	0	0
(4) LORI DAY DIRECTOR	0.00 0.00	X						0	0	0
(5) REBECCA CHEPOKAS CO-FOUNDER	2.00 0.00	X						0	0	0
(6) MARK COHN CHAIRMAN	6.00 0.00	X		X				0	0	0
(7) LOWELL JOBE TREASURER	2.00 0.00	X		X				0	0	0
(8) JOHN TOWNSEND DIRECTOR	0.00 0.00	X						0	0	0
(9) CHRIS FINN DIRECTOR	0.00 0.00	X						0	0	0
(10) GILBERT NEWRAI DIRECTOR	0.00 0.00	X						0	0	0
(11) AARON KELLER DIRECTOR	0.00 0.00	X						0	0	0

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(12) BRIAN MARK DIRECTOR	0.00 0.00	X						0	0	0
(13) MIKE MOROZ DIRECTOR	0.00 0.00	X						0	0	0
(14) JERRY NYE DIRECTOR	0.00 0.00	X						0	0	0
(15)										
(16)										
(17)										
(18)										
(19)										
1b Sub-total								45,500		
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								45,500		

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization **0**

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual		X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person		X

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **0**

Part VIII Statement of Revenue

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

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a 8,489				
	b Membership dues	1b				
	c Fundraising events	1c				
	d Related organizations	1d				
	e Government grants (contributions)	1e				
	f All other contributions, gifts, grants, and similar amounts not included above	1f 56,100				
	g Noncash contributions included in lines 1a-1f	\$ 7,684				
	h Total. Add lines 1a-1f		64,589			
Program Service Revenue	2a	Busn Code				
	b					
	c					
	d					
	e					
	f All other program service revenue					
	g Total. Add lines 2a-2f					
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		11		11	
	4 Income from investment of tax-exempt bond proceeds					
	5 Royalties					
	6a Gross rents	(i) Real				
		(ii) Personal				
	b Less rental exps					
	c Rental inc or (loss)					
	d Net rental income or (loss)					
	7a Gross amount from sales of assets other than inventory	(i) Securities				
		(ii) Other				
	b Less cost or other basis & sales exps					
	c Gain or (loss)					
d Net gain or (loss)						
8a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18	a 111,533					
b Less direct expenses	b 31,380					
c Net income or (loss) from fundraising events		80,153			80,153	
9a Gross income from gaming activities See Part IV, line 19	a					
b Less direct expenses	b					
c Net income or (loss) from gaming activities						
10a Gross sales of inventory, less returns and allowances	a					
b Less cost of goods sold	b					
c Net income or (loss) from sales of inventory						
Miscellaneous Revenue	11a	Busn Code				
	b					
	c					
	d All other revenue					
	e Total. Add lines 11a-11d					
	12 Total revenue. See instructions		144,753	0	0	80,164

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U S See Part IV, line 21				
2 Grants and other assistance to individuals in the U S See Part IV, line 22	58,340	58,340		
3 Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees				
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	142,820	100,009	9,511	33,300
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits	14,674	10,171	958	3,545
10 Payroll taxes	12,419	8,679	824	2,916
11 Fees for services (non-employees)				
a Management				
b Legal				
c 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 (A) amount, list line 11g expenses on Schedule O)				
12 Advertising and promotion	27,178	10,056	4,077	13,045
13 Office expenses	15,011	9,410	2,693	2,908
14 Information technology				
15 Royalties				
16 Occupancy	4,398	2,859	704	835
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	7,113	3,556	3,069	488
23 Insurance	352	141	169	42
24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
a PROFESSIONAL FEES	14,820	741	13,339	740
b LOSS ON DISPOSAL OF ASSET	9,870	7,403	1,481	986
c AUTO EXPENSE	3,477	2,260	522	695
d INTEREST	2,355	1,531	353	471
e All other expenses	6,589	3,399	2,451	739
25 Total functional expenses Add lines 1 through 24e	319,416	218,555	40,151	60,710
26 Joint costs Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year	
Assets	1	Cash—non-interest bearing	469,258	1	272,440
	2	Savings and temporary cash investments	4,043	2	4,043
	3	Pledges and grants receivable, net	10,000	3	54,343
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	20,795	9	22,804
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	506,946		
	b	Less accumulated depreciation	8,200	10c	498,746
	11	Investments—publicly traded securities		11	
	12	Investments—other securities See Part IV, line 11		12	
	13	Investments—program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11	5,150	15	11,237
16	Total assets. Add lines 1 through 15 (must equal line 34)	524,350	16	863,613	
Liabilities	17	Accounts payable and accrued expenses	40,688	17	58,352
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	421,052
	24	Unsecured notes and loans payable to unrelated third parties		24	75,210
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	40,688	26	554,614
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.				
	27	Unrestricted net assets	483,662	27	283,999
	28	Temporarily restricted net assets		28	25,000
	29	Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
33	Total net assets or fund balances	483,662	33	308,999	
34	Total liabilities and net assets/fund balances	524,350	34	863,613	

Part 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	144,753
2	Total expenses (must equal Part IX, column (A), line 25)	2	319,416
3	Revenue less expenses Subtract line 2 from line 1	3	-174,663
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	483,662
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	
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	308,999

Part 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 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
2b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
2c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	X	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		X
3b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No 1545-0047

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

2013

▶ 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.

Department of the Treasury
Internal Revenue Service

Name of the organization

MIRACLES OF MITCH FOUNDATION

Employer identification number

56-2384527

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

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

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

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

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

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

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

Schedule A (Form 990 or 990-EZ) 2013

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
 (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 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						
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	
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

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

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")	108,905	150,212	145,013	157,410	64,589	626,129
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	643,483	807,686	949,644	1,192,394	144,742	3,737,949
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	752,388	957,898	1,094,657	1,349,804	209,331	4,364,078
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)						4,364,078

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	752,388	957,898	1,094,657	1,349,804	209,331	4,364,078
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	2,444	1,465	705	160	11	4,785
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	2,444	1,465	705	160	11	4,785
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on					0	
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)	754,832	959,363	1,095,362	1,349,964	209,342	4,368,863

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ►

Section C. Computation of Public Support Percentage

15 Public support percentage for 2013 (line 8, column (f) divided by line 13, column (f))	15	99.89%
16 Public support percentage from 2012 Schedule A, Part III, line 15	16	99.83%

Section D. Computation of Investment Income Percentage

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

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

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

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

Part IV Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, and Part III, line 12. Also complete this part for any additional information. (See instructions)

**SCHEDULE D
(Form 990)**

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

▶ Attach to Form 990

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

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization

Employer identification number

MIRACLES OF MITCH FOUNDATION

56-2384527

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" to Form 990, Part IV, line 6

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?		<input type="checkbox"/> Yes <input type="checkbox"/> No

Part II Conservation Easements.

Complete if the organization answered "Yes" to Form 990, Part IV, line 7

1 Purpose(s) of conservation easements held by the organization (check all that apply)	
<input type="checkbox"/> Preservation of land for public use (e g , recreation or education)	<input type="checkbox"/> Preservation of an historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	
2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year	
a Total number of conservation easements	Held at the End of the Tax Year
b Total acreage restricted by conservation easements	2a
c Number of conservation easements on a certified historic structure included in (a)	2b
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2c
3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶	2d
4 Number of states where property subject to conservation easement is located ▶	
5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?	<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶	
7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$	
8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements	

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 8

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items	
b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items	
(i) Revenues included in Form 990, Part VIII, line 1	▶ \$
(ii) Assets included in Form 990, Part X	▶ \$
2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items	
a Revenues included in Form 990, Part VIII, line 1	▶ \$
b Assets included in Form 990, Part X	▶ \$

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

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

- a** Public exhibition
- b** Scholarly research
- c** Preservation for future generations
- d** Loan or exchange programs
- e** Other

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

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements.

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

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No

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

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

	Amount
1c	
1d	
1e	
1f	

2a Did the organization include an amount on Form 990, Part X, line 21? Yes No

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

Part V Endowment Funds.

Complete if the organization answered "Yes" to Form 990, Part IV, line 10

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

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

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

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

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

- (i)** unrelated organizations
- (ii)** related organizations

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

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

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

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings	0	449,300	960	448,340
c Leasehold improvements				
d Equipment		57,646	7,240	50,406
e Other				

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) **498,746**

Part VII Investments—Other Securities.

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12) ▶		

Part VIII Investments—Program Related.

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

(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 13) ▶		

Part IX Other Assets.

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

(a) Description	(b) Book value
(1) INTANGIBLE, NET OF AMORTIZATION	11,237
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total (Column (b) must equal Form 990, Part X, col (B) line 15) ▶	

Part X Other Liabilities.

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total (Column (b) must equal Form 990, Part X, col (B) line 25) ▶	

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

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

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

1	Total revenue, gains, and other support per audited financial statements		1	172,767
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
a	Net unrealized gains on investments	2a		
b	Donated services and use of facilities	2b	28,014	
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII)	2d		
e	Add lines 2a through 2d		2e	28,014
3	Subtract line 2e from line 1		3	144,753
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII)	4b		
c	Add lines 4a and 4b		4c	
5	Total revenue Add lines 3 and 4c . (This must equal Form 990, Part I, line 12)		5	144,753

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

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

1	Total expenses and losses per audited financial statements		1	347,430
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			
a	Donated services and use of facilities	2a	28,014	
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII)	2d		
e	Add lines 2a through 2d		2e	28,014
3	Subtract line 2e from line 1		3	319,416
4	Amounts included on Form 990, Part IX, line 25, but not on line 1			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII)	4b		
c	Add lines 4a and 4b		4c	
5	Total expenses Add lines 3 and 4c . (This must equal Form 990, Part I, line 18)		5	319,416

Part XIII Supplemental Information

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

Part XIII Supplemental Information (continued)

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

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No 1545-0047

2013

Department of the Treasury
Internal Revenue Service

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

▶ Attach to Form 990 or Form 990-EZ

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

Open to Public Inspection

Name of the organization

MIRACLES OF MITCH FOUNDATION

Employer identification number

56-2384527

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

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

- a Mail solicitations
- b Internet and email solicitations
- c Phone solicitations
- d In-person solicitations
- e Solicitation of non-government grants
- f Solicitation of government grants
- g Special fundraising events

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

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

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

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

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

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events	
		<u>NEW YEARS EVE G</u> (event type)	<u>TRIATHLON</u> (event type)	<u>1</u> (total number)	(add col (a) through col (c))	
Revenue	1	Gross receipts	63,396	22,684	21,573	107,653
	2	Less Contributions				
	3	Gross income (line 1 minus line 2)	63,396	22,684	21,573	107,653
Direct Expenses	4	Cash prizes				
	5	Noncash prizes				
	6	Rent/facility costs				
	7	Food and beverages				
	8	Entertainment				
	9	Other direct expenses	18,213	14,718	-1,551	31,380
	10	Direct expense summary Add lines 4 through 9 in column (d)				31,380
	11	Net income summary Subtract line 10 from line 3, column (d)				76,273

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

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

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

a Is the organization licensed to operate gaming activities in each of these states?

Yes No

b If "No," explain

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?

Yes No

b If "Yes," explain

- 11 Does the organization operate gaming activities with nonmembers? Yes No
- 12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? Yes No
- 13 Indicate the percentage of gaming activity operated in

		Yes		No
13a				%
13b				%

 - a The organization's facility
 - b An outside facility
- 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records

Name ▶

Address ▶

- 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No
- b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue retained by the third party ▶ \$
- c If "Yes," enter name and address of the third party

Name ▶

Address ▶

16 Gaming manager information

Name ▶

Gaming manager compensation ▶ \$

Description of services provided ▶

Director/officer Employee Independent contractor

17 Mandatory distributions

- a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No
- b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$

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

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

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

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

▶ Attach to Form 990.

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

OMB No. 1545-0047

2013

**Open to Public
Inspection**

Name of the organization

MIRACLES OF MITCH FOUNDATION

Employer identification number

56-2384527

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Yes No Yes No

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

	(a) Name and address of organization or government	(b) EIN	(c) IRC section, if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1)								
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								

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

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

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

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22

Part III can be duplicated if additional space is needed

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1 HOME RESCUE TEAM	41	47,042		FMV	
2 QUALITY OF LIFE	47	11,298		FMV	
3					
4					
5					
6					
7					

Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information

SCHEDULE L

(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Name of the organization

Transactions With Interested Persons

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b

▶ Attach to Form 990 or Form 990-EZ

▶ See separate instructions

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

2013

Open To Public
Inspection

MIRACLES OF MITCH FOUNDATION

Employer identification number

56-2384527

Part I Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only)

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b

1	(a) Name of disqualified person	(b) Relationship between disqualified person and organization	(c) Description of transaction	(d) Corrected?	
				Yes	No
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958 ▶ \$ _____

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization ▶ \$ _____

Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26, or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22

1	(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the org?		(e) Original principal amount	(f) Balance due	(g) In default?		(h) Approved by board or committee?		(i) Written agreement?	
				To	From			Yes	No	Yes	No	Yes	No
(1)													
(2)													
(3)													
(4)													
(5)													
(6)													
(7)													
(8)													
(9)													
(10)													
Total							▶ \$						

Part III Grants or Assistance Benefiting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27

1	(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					

SCHEDULE O
(Form 990 or 990-EZ)Department of the Treasury
Internal Revenue Service

Name of the organization

Supplemental Information to Form 990 or 990-EZComplete 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****MIRACLES OF MITCH FOUNDATION**

Employer identification number

56-2384527**FORM 990, PART VI, LINE 2 - RELATED PARTY INFORMATION AMONG OFFICERS****JETSET PROMOTIONS****BECKY CHEPOKAS****DIRECTOR****HUSBAND OF BECKY****FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990**

IT IS MIRACLES OF MITCH FOUNDATION'S POLICY THAT MIRACLES OF MITCH
FOUNDATION'S BOARD OF DIRECTORS REVIEW THE IRS FORM 990 THAT IS FILED ON
THE ORGANIZATION'S BEHALF BEFORE IT IS FILED WITH THE IRS.

A FINANCE COMMITTEE RESOLUTION IS REQUIRED IN ORDER FOR THE FORM 990 TO BE
FILED.

THE MEANS OF DELIVERY SHALL BE VIA EMAIL TO EACH DIRECTOR.

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY

THE MOMF BOARD OF DIRECTORS ANNUALLY REVIEWS A FIVE-PAGE CONFLICT OF
INTEREST POLICY AND SUGGESTS ANY NEEDED REVISIONS. EACH BOARD MEMBER SIGNS
A DOCUMENT STATING THEY HAVE READ AND AGREE TO ABIDE BY THE CONFLICT OF
INTEREST POLICY THAT IS CURRENTLY IN EFFECT. IF THEY BELIEVE THEY HAVE A
POTENTIAL CONFLICT OF INTEREST, THEY WILL DISCLOSE IT ON THE DOCUMENT AS
WELL. SHOULD A CONFLICT OF INTEREST ARISE DURING THE COURSE OF BOARD
BUSINESS, THE BOARD MEMBER WITH THE CONFLICT WILL BE EXCUSED FROM THE
PORTION OF THE MEETING WHEN VOTING OCCURS. THAT PERSON'S INELIGIBILITY WILL
BE REFLECTED IN THE BOARD MINUTES.

FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL

Name of the organization

MIRACLES OF MITCH FOUNDATION

Employer identification number

56-2384527

A SELECT COMMITTEE OF BOARD MEMBERS ANNUALLY REVIEWS THE PERFORMANCE OF THE EXECUTIVE DIRECTOR USING A MULTI-PAGE REVIEW DOCUMENT. THE SELECT BOARD MEMBERS CREATE THE REVIEW DOCUMENT AND CONDUCT THE ACTUAL PERFORMANCE EVALUATION. ALL BOARD MEMBERS ARE ASKED FOR INPUT REGARDING THE EXECUTIVE DIRECTOR'S PERFORMANCE, WHICH IS THEN INCORPORATED INTO THE EVALUATION. THE EXECUTIVE DIRECTOR FILLS OUT THE DOCUMENT AS WELL TO PROVIDE A SELF-EVALUATION FOR THE DISCUSSION. GOALS ARE SET AND PROGRESS REVIEWED ANNUALLY OR AS NEEDED THROUGHOUT THE YEAR. COMPENSATION IS BASED ON PROVIDING A COMPETITIVE SALARY WITHIN THE MARKETPLACE.

FORM 990, PART VI, LINE 15B - COMPENSATION PROCESS FOR OFFICERS
THE EXECUTIVE DIRECTOR ANNUALLY REVIEWS STAFF MEMBERS USING A FOUR-PAGE PERFORMANCE EVALUATION FORM. STAFF MEMBERS FILL OUT THE FORM TO PROVIDE A SELF EVALUATION. EVALUATIONS ARE COMPARED AND DISCUSSED, AND PERFORMANCE GOALS ARE SET. PROGRESS TOWARD MEETING GOALS IS REVIEWED ANNUALLY OR AS NEEDED THROUGHOUT THE YEAR. COMPENSATION IS BASED ON PROVIDING A COMPETITIVE SALARY WITHIN THE MARKETPLACE.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION
ALL GOVERNING DOCUMENTS ARE AVAILABLE TO THE PUBLIC UPON REQUEST.

***MIRACLES OF MITCH FOUNDATION
BLOOMINGTON, MINNESOTA
FINANCIAL STATEMENTS AND INDEPENDENT AUDITOR'S REPORT
FIFTEEN MONTHS ENDED DECEMBER 31, 2013***

Weber & Deegan, Ltd.
Certified Public Accountants

**MIRACLES OF MITCH FOUNDATION
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FIFTEEN MONTHS ENDED DECEMBER 31, 2013**

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Statement of Cash Flows	5
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INDEPENDENT AUDITOR'S REPORT

Board of Directors
Miracles of Mitch Foundation
Bloomington, Minnesota

We have audited the accompanying financial statements of Miracles of Mitch Foundation (a non-profit organization), which comprise of the statement of financial position as of December 31, 2013 and the related statements of activities and changes in net assets, functional expenses, and cash flows for the fifteen months then ended, and the related notes to the financial statements

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America, this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error

Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion

Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of the Miracles of Mitch Foundation as of December 31, 2013, and the changes in its net assets and cash flows for the fifteen months then ended in conformity with accounting principles generally accepted in the United States of America

Weber & Deegan, Ltd.

Weber & Deegan, Ltd
Edina, Minnesota
August 12, 2014

**MIRACLES OF MITCH FOUNDATION
STATEMENT OF FINANCIAL POSITION
DECEMBER 31, 2013**

ASSETS

CURRENT ASSETS:	
Cash equivalents	\$ 276,483
Pledge receivables	54,343
Prepaid expenses and deposits	<u>22,804</u>
TOTAL CURRENT ASSETS	353,630
PROPERTY AND EQUIPMENT, NET	498,746
INTANGIBLE ASSETS, NET	<u>11,237</u>
TOTAL ASSETS	\$ <u>863,613</u>

LIABILITIES AND NET ASSETS

CURRENT LIABILITIES:	
Short-term notes payable	\$ 75,210
Accounts payable	37,108
Accrued expenses	21,244
Current maturities of long-term debt	<u>51,655</u>
TOTAL CURRENT LIABILITIES	185,217
LONG-TERM DEBT	<u>369,397</u>
TOTAL LIABILITIES	554,614
NET ASSETS	
Unrestricted	283,999
Temporarily restricted	<u>25,000</u>
TOTAL NET ASSETS	<u>308,999</u>
TOTAL LIABILITIES AND NET ASSETS	\$ <u>863,613</u>

See accompanying notes to financial statements

**MIRACLES OF MITCH FOUNDATION
STATEMENT OF ACTIVITIES AND CHANGES IN NET ASSETS
FOR THE FIFTEEN MONTHS ENDED DECEMBER 31, 2013**

	<u>Unrestricted</u>	<u>Temporarily Restricted</u>	<u>Total</u>
SUPPORT AND REVENUES:			
Contributions - Businesses	\$ 80,548	\$ 25,000	\$ 105,548
Contributions - Foundations	29,516	-	29,516
Contributions - Individuals	86,935	-	86,935
Special events, net of direct expenses of \$251,026	1,115,137	-	1,115,137
Donated goods and services	114,727	-	114,727
Interest income	171	-	171
TOTAL SUPPORT AND REVENUES	1,427,034	25,000	1,452,034
FUNCTIONAL EXPENSES:			
Program services	1,279,110	-	1,279,110
Support services:			
General & administrative	120,520	-	120,520
Fundraising	260,719	-	260,719
TOTAL FUNCTIONAL EXPENSES	1,660,349	-	1,660,349
CHANGE IN NET ASSETS	(233,315)	25,000	(208,315)
NET ASSETS, BEGINNING OF YEAR	517,314	-	517,314
NET ASSETS, END OF YEAR	\$ 283,999	\$ 25,000	\$ 308,999

See accompanying notes to financial statements

**MIRACLES OF MITCH FOUNDATION
STATEMENT OF FUNCTIONAL EXPENSES
FOR THE FIFTEEN MONTHS ENDED DECEMBER 31, 2013**

	<u>Program Services</u>	<u>Management & General</u>	<u>Fundraising</u>	<u>Total</u>
Program expenses				
Home rescue grants	\$ 333,861	\$ -	\$ -	\$ 333,861
Quality of living grants	399,658	-	-	399,658
Salaries	378,975	32,773	184,124	595,872
Employee Benefits	35,643	3,082	17,317	56,042
Payroll taxes	32,435	2,805	15,759	50,999
Professional fees	2,092	37,651	2,091	41,834
Advertising and marketing	12,610	5,112	16,358	34,080
Dues and fees	5,530	9,146	6,593	21,269
Office supplies	13,374	3,101	2,908	19,383
Rent	12,219	3,008	3,571	18,798
Depreciation	7,778	7,778	-	15,556
Telephone and technology	9,560	755	2,264	12,579
Travel	6,772	1,563	2,083	10,418
Loss on disposal of property and equipment	7,403	1,481	986	9,870
Other expenses	5,946	1,189	793	7,928
Insurance	2,577	3,093	773	6,443
Postage and freight	4,165	660	254	5,079
Amortization	2,205	-	2,204	4,409
Board expenses	2,160	1,289	35	3,484
Bank charges	-	2,738	561	3,299
Payroll processing fees	2,130	492	655	3,277
Training	-	2,331	777	3,108
Interest	1,531	353	471	2,355
Repairs and maintenance	486	120	142	748
TOTAL FUNCTIONAL EXPENSES	\$ 1,279,110	\$ 120,520	\$ 260,719	\$ 1,660,349

See accompanying notes to financial statements

**MIRACLES OF MITCH FOUNDATION
STATEMENT OF CASH FLOWS
FOR THE FIFTEEN MONTHS ENDED DECEMBER 31, 2013**

CASH FLOWS FROM OPERATING ACTIVITIES:	
Change in net assets	\$ (208,315)
Adjustments to reconcile change in net assets to net cash used in operating activities	
Amortization	4,409
Depreciation	15,556
Loss on disposal of property and equipment	9,870
In-kind donation of property and equipment	(5,250)
Changes in operating assets and liabilities:	
Pledge receivables	(49,660)
Prepaid expenses and deposits	(19,836)
Accounts payable	35,364
Accrued expenses	<u>15,230</u>
 NET CASH USED IN OPERATING ACTIVITIES	 (202,632)
CASH FLOWS FROM INVESTING ACTIVITIES:	
Purchase of property and equipment	<u>(4,992)</u>
 NET CASH USED IN INVESTING ACTIVITIES	 (4,992)
CASH FLOWS FROM FINANCING ACTIVITIES:	
Repayment of long-term debt	<u>(208)</u>
 NET CASH USED IN FINANCING ACTIVITIES	 <u>(208)</u>
 NET DECREASE IN CASH EQUIVALENTS	 (207,832)
 CASH EQUIVALENTS, BEGINNING OF PERIOD	 <u>484,315</u>
 CASH EQUIVALENTS, END OF PERIOD	 <u><u>\$ 276,483</u></u>

See accompanying notes to financial statements

**MIRACLES OF MITCH FOUNDATION
NOTES TO FINANCIAL STATEMENTS
FOR THE FIFTEEN MONTHS ENDED DECEMBER 31, 2013**

NOTE 1 – ORGANIZATIONAL PURPOSE

The Miracles of Mitch Foundation (the "Organization") was organized August 8, 2003 as a nonprofit organization and is exempt from income taxes under Section 501(c)(3) of the United States Internal Revenue Code and Minnesota state law. The Organization does not believe it has engaged in any activity that would threaten its exempt status. Contributions to the Organization are tax deductible within the limitations prescribed by the Code.

The Organization provides Quality of Life grants, Home Rescue grants, children's summer camp, and other assistance to families of children struggling with cancer

NOTE 2 – SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting

The financial statements of the Organization are prepared on the accrual basis of accounting. Support and revenue is recognized when it is earned, and expenses are recognized when they are incurred.

Use of Estimates

The preparation of financial statements in conformity with generally accepted accounting principles requires management to make estimates and assumptions that affect certain reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Accordingly, actual results could differ from those estimates.

Concentration of Risk

Cash Deposits In Excess of Federally Insured Limit

The Organization maintains cash balances at three financial institutions in Minnesota, which at times may exceed federally insured limits. The Organization has not experienced losses on these accounts, and management believes the Organization is not exposed to significant credit risks on cash and cash equivalents. The Foundation had no balances in excess of the FDIC limit as of December 31, 2013

Special Events, Net

Triathlon Event

The Organization had net revenue from the Triathlon Event that was 67% of total support and revenues for the fifteen months ended December 31, 2013. Included in this was a contribution from a corporate donor that was 13% of total support and revenues for the fifteen months ended December 31, 2013.

Triathlon direct expenses were 74% of total special event direct expenses for the fifteen months ended December 31, 2013. Included in the fundraising expenses were allocations of the race director, special projects coordinator and intern salaries, which comprised 13% of salaries expense for the fifteen months ended December 31, 2013.

Cash and Cash Equivalents

For purposes of statement of net asset presentation and reporting of cash flows, the Organization considers all unrestricted demand deposits and highly liquid investments with an initial maturity of 90 days or less to be cash equivalents.

**MIRACLES OF MITCH FOUNDATION
NOTES TO FINANCIAL STATEMENTS
FOR THE FIFTEEN MONTHS ENDED DECEMBER 31, 2013**

Property and Equipment

Fixed assets are recorded at cost or the estimated value on the date of contribution. Depreciation is computed on a straight-line basis over the estimated useful lives of the assets, ranging from 3 to 7 years for furniture and equipment and 39 years for the building.

Intangible Assets

Website development costs incurred for the development of the Organization's website have been capitalized and are being amortized on a straight-line basis over a period of 3 years.

Loan costs incurred in connection with obtaining bank financing are being amortized using the straight-line method over the life of the loan which is 5 years.

Net Assets

The financial statements of the Organization report amounts separately by class of net assets:

- Unrestricted amounts are those currently available at the discretion of the Board for use in the Organization's activities.
- Temporarily restricted amounts are those amounts whose use has been limited by donor-imposed time or purpose restrictions. When the funds have been spent as designated by the donor, the restrictions are satisfied and the funds are moved to unrestricted net assets.
- Permanently restricted net assets are those amounts required by donor imposed restrictions or by law to be maintained by the Organization in perpetuity as endowments or irrevocable trusts. The Organization did not have any net assets in this class as of December 31, 2013.

Public Support, Revenue and Expenses

Contribution income is recognized when the donor makes a promise to give to the Organization. Expenses are recorded when incurred in accordance with the accrual basis of accounting.

Advertising and Marketing

The Organization expenses advertising and marketing costs as incurred. Advertising and marketing costs charged to expense for the fifteen months ended December 31, 2013 was \$34,080.

Functional Allocation of Expenses

The costs of providing the various programs and supporting activities of the Organization have been allocated between program or supporting services based upon the best estimates of management.

Donated Goods and Services

Contributions of donated services that create or enhance non-financial assets or that require specialized skills, are provided by individuals possessing those skills, and would typically need to be purchased if not provided by donation, are recorded at their values in the period received.

Several individuals volunteer their time and perform a variety of tasks that assist the Organization, but do not meet the criteria for recognition as contributed services and have not been reported in these financial statements.

**MIRACLES OF MITCH FOUNDATION
NOTES TO FINANCIAL STATEMENTS
FOR THE FIFTEEN MONTHS ENDED DECEMBER 31, 2013**

For the fifteen months ended December 31, 2013, the Organization had total in-kind revenue of \$114,727, of which \$ 86,024 was from a local hotel as support for the Quality of Living Grants. Additionally, included in Special events is \$87,584 of in-kind contributions for the fifteen months ended December 31, 2013.

Uncertain Tax Positions

The Miracles of Mitch Foundation believes that it has appropriate support for any tax positions taken, and as such, does not have any uncertain tax positions that are material to the financial statements.

The Organization files the Return of Organization Exempt from Income Tax (Form 990) in the federal jurisdiction. The Organization has not been audited by the Internal Revenue Service and, accordingly, the returns for the past three and one-half years are open to examination.

NOTE 3 – STATEMENT OF CASH FLOWS SUPPLEMENTAL INFORMATION

The Organization made cash payments of \$626 for interest for the fifteen months ended December 31, 2013. There were no payments for income taxes.

The Organization incurred long-term debt of \$496,470 in connection with the purchase of property and equipment totaling \$489,407 and loan costs totaling \$7,063. The Organization also received in-kind donations of property and equipment totaling \$5,250 during the fifteen months ended December 31, 2013.

NOTE 4 – RELATED PARTIES

The Organization had related party transactions as follows for the fifteen months ended December 31, 2013

Support and revenue from board members related business entities	\$ <u>312,882</u>
Payments for goods/ services to business entites related to board members	\$ <u>2,506</u>

NOTE 5 – PROPERTY AND EQUIPMENT

Property and equipment was as follows at December 31, 2013

Building	\$ 449,300
Furniture and equipment	<u>57,646</u>
	506,946
Less accumulated depreciation	<u>(8,200)</u>
Property and equipment, net	\$ <u>498,746</u>

Depreciation expense was \$15,556 for the fifteen months ended December 31, 2013

**MIRACLES OF MITCH FOUNDATION
NOTES TO FINANCIAL STATEMENTS
FOR THE FIFTEEN MONTHS ENDED DECEMBER 31, 2013**

NOTE 6 – INTANGIBLE ASSETS

Intangible assets consisted of the following at December 31, 2013:

Website development costs	\$	10,300
Loan costs		<u>7,064</u>
		17,364
Less: accumulated amortization		<u>(6,127)</u>
Intangible assets, net	\$	<u><u>11,237</u></u>

Amortization expense was \$4,409 for the fifteen months ended December 31, 2013. Future amortization is expected to be as follows for the years ending December 31:

2014	\$	4,846
2015		2,272
2016		1,413
2017		1,413
2017		<u>1,293</u>
	\$	<u><u>11,237</u></u>

NOTE 7 – LEASE OBLIGATIONS

Prior to purchasing its building during 2013, the Organization leased office space under an annual lease. The Organization also leases certain equipment under operating leases expiring at various dates through September 2018 with monthly payments ranging from \$96 to \$313

Future minimum lease payments are as follows for the years ending December 31

2014	\$	4,908
2015		4,908
2016		2,718
2017		1,153
2018		<u>865</u>
	\$	<u><u>14,552</u></u>

Rent expense for the fifteen months ended December 31, 2013 totaled \$18,798

**MIRACLES OF MITCH FOUNDATION
NOTES TO FINANCIAL STATEMENTS
FOR THE FIFTEEN MONTHS ENDED DECEMBER 31, 2013**

NOTE 8 – DEBT

Short-Term Note Payable

The Organization has an unsecured short-term note payable to bank with interest at 4.71%. Beginning on January 4, 2014, there will be eleven monthly payments of \$1,219, one payment of \$12,500 on December 5, 2014, and a final payment of \$52,749 on December 15, 2014.

Long-Term Debt

Long-term debt consisted of the following at December 31, 2013:

Note payable to bank, payments of principal and interest as follows: 59 payments of \$3,429 beginning January 2014, 5 annual payments of \$20,000 beginning December 2014, and one payment of \$139,446 in December 2018. The note bears interest of 4.52% and is secured by mortgage on the related property	\$ 378,675
Note payable to finance company for purchase of software due in monthly payments of \$834, including interest at 6.13%, maturing in November 2018. Secured by software	<u>42,377</u>
	421,052
Less: current portion	<u>51,655</u>
	<u>\$ 369,397</u>

Future maturities of long term debt are as follows for the years ending December 31:

2014	\$ 51,655
2015	54,704
2016	57,364
2017	60,153
2018	<u>197,176</u>
	<u>\$ 421,052</u>

Interest expense was \$2,355 for the fifteen months ended December 31, 2013

**MIRACLES OF MITCH FOUNDATION
NOTES TO FINANCIAL STATEMENTS
FOR THE FIFTEEN MONTHS ENDED DECEMBER 31, 2013**

NOTE 9 – EMPLOYEE BENEFIT PLAN

The Organization sponsors a 401(k) retirement plan covering all employees meeting certain eligibility requirements. The Organization may make matching contributions to the plan at the discretion of the board of directors. There was no employer contributions to the plan during the fifteen months ended December 31, 2013.

NOTE 10 – SUBSEQUENT EVENTS

There were no subsequent events requiring disclosure in or adjustment to the audited financial statements. The Organization has evaluated subsequent events through August 12, 2014, the date which the financial statements were available to be issued.