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SCANNED AUG 12 2014

Department of the Treasury

Internal Revenue Service

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No 1545-0047

Open to Public Inspection

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

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

A F	or the	2013 calendar year, or tax year beginning NO	V 1, 2013 and	d ending 🗜	DEC 31, 2013		
B c	heck if pplicable	C Name of organization			D Employer identifie	cation number	
	Addres	TEAMMATES FOR KIDS FOUNDATION					
	Name change	Doing Business As			84-148	4370	
	Initial _return	Number and street (or P.O. box if mail is not del	vered to street address)	Room/suite	E Telephone number	T	
	Termin ated	1900 WAZEE BIREEI		205	303-75	9-9777	
]Amend return	City or town, state or province, country, and	ZIP or foreign postal code		G Gross receipts \$	1,195,794.	
	Application	DENVER, CO 80202			H(a) Is this a group re	eturn	
	pendin	F Name and address of principal officer: JASON	GRAHAME		for subordinates	? Yes X No	
		SAME AS C ABOVE			H(b) Are all subordinates in	ncluded? Yes No	
		7) or 527	If "No," attach a	list (see instructions)	
JV	Vebsit	e: WWW.TEAMMATESFORKIDS.COM			H(c) Group exemption	n number 🕨	
KF	orm of	organization. x Corporation Trust As	sociation Other	∟ Year	of formation: 1999	State of legal domicile; CO	
Pa	ırt I	Summary					
· O	1	Briefly describe the organization's mission or most	significant activities: TO CO	NTRIBUTE	FINANCIAL		
Governance]	RESOURCES TO NON-PROFIT ENTITIES THAT	SUPPORT CHILDREN.	0-05	1 ()		
Ĕ	2	Check this box 🕨 🔲 if the organization discor	ntinued its operations or d <u>isp</u>	osed of mor	e than 25% of its net as	ssets.	
Š	з :	Number of voting members of the governing body	(Part VI, line 1a)			10	
<u>ح</u>	4	Number of independent voting members of the go	/eming body (Part VI, [[ਜਦ 1b]	NUG O 🖭	2014 8	10	
es 6		Total number of individuals employed in calendar y	1 1	-	S 5	4	
ξ	6	Total number of volunteers (estimate if necessary)		CDEN	C = C	10	
Activities &	1	Total unrelated business revenue from Part VIII, co	lumn (C), line 12	GDEN	, U 7a	0.	
4	ь	Net unrelated business taxable income from Form	990-T, line 34	1000	7b	0.	
-					Prior Year	Current Year	
Revenue	8	Contributions and grants (Part VIII, line 1h)			6,190,495.	1,049,568.	
	9	Program service revenue (Part VIII, line 2g)			0.	0.	
ě	10	Investment income (Part VIII, column (A), lines 3, 4	and 7d)		748,135.	117,830.	
œ	l	Other revenue (Part VIII, column (A), lines 5, 6d, 8c			-215,531.	-34.	
	12	Total revenue - add lines 8 through 11 (must equal	Part VIII, column (A), line 12)		6,723,099.	1,167,364.	
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	1	1,926,981.	919,120.	
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.	
S	15	Salaries, other compensation, employee benefits (l	Part IX, column (A), lines 5-10) [413,286.	81,672.	
Expenses	16a	Professional fundraising fees (Part IX, column (A), I	ne 11e)		0.	0.	
ğ	Ь	Total fundraising expenses (Part IX, column (D), lin	e 25) 🕨 84	1,651.	.,		
Ш	17	Other expenses (Part IX, column (A), lines 11a-11d	, 11f-24e)		436,509.	104,953.	
	18	Total expenses Add lines 13-17 (must equal Part I	X, column (A), line 25)		2,776,776.	1,105,745.	
	19	Revenue less expenses. Subtract line 18 from line	12		3,946,323.	61,619.	
Net Assets or Fund Balances				В	eginning of Current Year	End of Year	
alar	20	Total assets (Part X, line 16)	_		31,432,010.	31,985,500.	
d As	21	Total liabilities (Part X, line 26)			0.	0.	
		Net assets or fund balances. Subtract line 21 from	line 20		31,432,010.	31,985,500.	
	art II	Signature Block					
		Ities of perjury, I declare that I have exampled this return,				y knowledge and belief, it is	
true	, correc	t, and complete. Declaration of preparer (other than office	er) is based on all information of	which prepare			
		Hasm 1 - 2 me			7.25	.14	
Sig	n	Signature of officer			Date *		
Her	e	JASON GRAHAME, PRESIDENT					
		Type or print name and title					
		Print/Type preparer's name	Preparer's signature		Date Check	PTIN	
Paid		DORI J. EGGETT	AV / ///X		7/25/20 14 self-employ		
	parer	Firm's name EKS&H LLLP	Firm's EIN 46-1497033				
Use	Only	Firm's address 7979 E. TUFTS AVENUE, SU	ITE 400				
_		DENVER, CO 80237-2521			Phone no.303		
Ma	y the I	RS discuss this return with the preparer shown abo			. <u></u>	X Yes No	
3320	001 10-2	9-13 LHA For Paperwork Reduction Act Notic	e, see the separate instruc	tions.		Form 990 (2013)	

917-21-23

Form	990 (2013) TEAMMATES FOR KIDS FOUNDATION	84-1484370	Page 2
Par	t 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 CONTRIBUTE FINANCIAL RESOURCES TO SELECTED NON-PROFIT ENTITIES THAT		
	HAVE CONSISTENTLY DEMONSTRATED THE CAPACITY TO EFFICIENTLY AND		
	EFFECTIVELY DELIVER A WIDE RANGE OF OPPORTUNITIES TO NEEDY CHILDREN.		
2	Did the organization undertake any significant program services during the year which were not listed on		
	the prior Form 990 or 990-EZ?		Yes X 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?	1	Yes X 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 other	ers, the total ex	penses, and
	revenue, if any, for each program service reported.	-	•
4a	(Code) (Expenses \$ 771,389. including grants of \$ 751,120.) (Revenue	ue \$)
	THE TEAMMATES FOR KIDS FOUNDATION CONTINUES TO TAKE STRIDES IN THE		
	CONTRIBUTIONS GIVEN AND PROGRAMS ENACTED TO BENEFIT THE AREA OF		
	CHILDREN'S HEALTH.		· · · - · · · · · · · · · · · · · · · ·
			
	· · · · · · · · · · · · · · · · · · ·		·
			
4b	(Code) (Expenses \$ 69,572. including grants of \$ 52,000.) (Revenue		
40	(Code) (Expenses \$	16 \$)
	EDUCATION CONTINUES TO BE AN IMPORTANT AREA OF OVERALL GIVING.		
	EDUCATION CONTINUES TO BE AN IMPORTANT AREA OF OVERALL GIVING.		
			
4c	(Code) (Expenses \$144,498. including grants of \$) (Reven	ue \$)
	TEAMMATES FOR KIDS CONTINUED TO PROVIDE OPPORTUNITIES FOR INNER-CITY		
	KIDS ACROSS THE U.S.		
4d	Other program services (Describe in Schedule O.)		
-7-0	(Expenses \$ including grants of \$) (Revenue \$		١
	Total program service expenses 985,459.		_1
46	Total program service expenses		Form 990 (2013)
33200			rom 330 (2013)

10-29-13

Form 990 (2013) TEAMMATES FOR KIDS 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	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
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	3		x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	Ŭ	_	_
	during the tax year? If "Yes," complete Schedule C, Part II	4		х
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	5		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	6		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			.,
8	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	7		X
0	Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV			x
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent	9		
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
L	Part VI	11a	х	
	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	11b		х
С	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	11c		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	110		
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		х
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	11f		х
I2a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X -
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E Did the organization maintain an office, employees, or agents outside of the United States?	13		x
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	14a		
-	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	х	
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	15	х	
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	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	10		
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		х
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	18		Х
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	40		х
202	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	19 20a	<u> </u>	X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a 20b		 -
			990	(2012)

332003 10-29-13

Part IV Checklist of Required Schedules (continued)

			990	(2013)
_	Note. All Form 990 filers are required to complete Schedule O	38	х	L
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	 	<u> </u>	
J1	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	36		
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	36		x
00	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		х
	Part V, line 1	34		х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33_		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			-
JŁ	Schedule N, Part II	32		х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	31		
31	If "Yes," complete Schedule N, Part I	31		х
24	contributions? If "Yes," complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations?	30		<u> </u>
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	30		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
_	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		х
	instructions for applicable filing thresholds, conditions, and exceptions):			
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		х
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	complete Schedule L, Part II	26		x
20	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so,			
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or	200		
	Schedule L, Part I	25b		х
D	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
ь	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	<u> </u>		
ZJ d	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		х
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a	<u>_</u> -ru		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
·	any tax-exempt bonds?	24c	Ì	
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	240		
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24a 24b		
	Schedule K If "No", go to line 25a	24a		х
24 8	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
242	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the	_23		
	and former officers, directors, trustees, key employees, and nignest compensated employees? If res, complete Schedule J	23		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			
00	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	\dashv	х
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX,		l	v
	government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
			Yes	No

Form	990 (2013) TEAMMATES FOR KIDS FOUNDATION		84-1484370		P	age 5
Par						
	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	1a	3			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and r	eporta	ble gamıng			
	(gambling) winnings to prize winners?			1c	Х	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,					
	filed for the calendar year ending with or within the year covered by this return	2a	4			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retu	rns?		2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions	s)				
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?			3a		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule	0		3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other	author	ity over, a			i
	financial account in a foreign country (such as a bank account, securities account, or other financial	accou	nt)?	4a	Х	
b	If "Yes," enter the name of the foreign country: ► CANADA					
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial	Accou	nts.			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		Х
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	action?	'	5b_		X
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5c_		<u> </u>
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did to	he orga	anızatıon solicit			l
	any contributions that were not tax deductible as charitable contributions?			6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contribu	tions o	r gifts			
_	were not tax deductible?			6b		-
7	Organizations that may receive deductible contributions under section 170(c).					l "
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and se	rvices p	rovided to the payor?	7a		Х
	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b	-	╁
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w	as req	uirea	- -		x
ان.	to file Form 8282?	ايحا		7c	\vdash	 ^
a	If "Yes," indicate the number of Forms 8282 filed during the year	7d	L	7.	l	
•	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit continuous.		λίτ	7e 7f	├─	x
t g	If the organization received a contribution of qualified intellectual property, did the organization file F		100 as required?	7g		x
9 h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization		•	79 7h	-	+
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. D					
•	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at			8		
9	Sponsoring organizations maintaining donor advised funds.	· •,				
a	Did the organization make any taxable distributions under section 4966?			9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?			9b	 	T
10	Section 501(c)(7) organizations. Enter:					
а	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b		1		
11	Section 501(c)(12) organizations. Enter:			1		1
a	Gross income from members or shareholders	11a		j		ı
b	Gross income from other sources (Do not net amounts due or paid to other sources against				1	
	amounts due or received from them.)	11b			1	1
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	າ 1041	?	12a		<u> </u>
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.				<u> </u>	ļ
а	Is the organization licensed to issue qualified health plans in more than one state?			13a	<u> </u>	↓
	Note. See the instructions for additional information the organization must report on Schedule O.				1	
b	Enter the amount of reserves the organization is required to maintain by the states in which the		1		1	
	organization is licensed to issue qualified health plans	13b		ļ]
	Enter the amount of reserves on hand	13c		ļ	<u> </u>	1
С					1	Х
14a	Did the organization receive any payments for indoor tanning services during the tax year? If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedul	_		14a 14b	 	$\overline{}$

TEAMMATES FOR KIDS FOUNDATION 84-1484370 Form 990 (2013) Page 6 Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management No Yes 1a Enter the number of voting members of the governing body at the end of the tax year 1a If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. b Enter the number of voting members included in line 1a, above, who are independent 10 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? Х Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? х 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? Х 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 7a **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? Х 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? 8a х **b** Each committee with authority to act on behalf of the governing body? 8b Х Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code) Yes No 10a Did the organization have local chapters, branches, or affiliates? 10a b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10h х 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990. 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 х 12a Х b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12c X Х Did the organization have a written whistleblower policy? 13 14 Did the organization have a written document retention and destruction policy? Х 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official Х 15a **b** Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16a Х b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?

Section	C.	Discl	OSI	ıre

17	List the states with which a copy of this Form 990 is required to be filed	NON
	LIST THE STATES WITH WHICH A CODY OF THIS FORTH 330 IS TEQUIFED TO DE HIEU	11011

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

Upon request Another's website Other (explain in Schedule O)

Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

State the name, physical address, and telephone number of the person who possesses the books and records of the organization: CONNIE RHODES - 303-759-9777

1900 WAZEE STREET SUITE 205, DENVER, CO 80202

Form 990 (2013)

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

(A)	(B)			(C	C)			(D)	(E)	(F)
Name and Title	Average hours per		not c	heck	more rson	than o	one	Reportable compensation	Reportable compensation	Estimated amount of
	week	box, unless person is both an officer and a director/trustee)				r/trus	tee)	from	from related	other
	(list any hours for	Individual trustee or director				٠		the organization	organizations (W-2/1099-MISC)	compensation from the
	related	tee or	ustee			ensate		(W-2/1099-MISC)	,	organization
	organizations	al trus	onal tr		oloyee	comp				and related
	below line)	divid	institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) TROY AIKMAN	2.00	=	=	0	<u> </u>	포핑	-			
DIRECTOR	-	x			ŀ			0.	0.	0
(2) GREG ANDERSON	2.00	┞							·	
DIRECTOR		x		Ì				0.	0.	0
(3) RANDY BERNARD	2.00									
DIRECTOR		х						0.	0.	0
(4) SHARON MAGNESS BLAKE	2,00									
DIRECTOR		х				<u> </u>		0.	0.	0
(5) WILLIAM BOSTROM	2.00		1							
DIRECTOR/SECRETARY		Х		Х	<u> </u>	ļ		0.	0.	0
(6) GARTH BROOKS	2.00				ļ					_
DIRECTOR		Х	L	<u> </u>	L	_		0.	0.	0
(7) ANTHONY MUNOZ	2.00	1		ĺ						
DIRECTOR		х		_	_	ļ	<u> </u>	0.	0.	0
(8) MIKE REILLY	2.00	l								Ι .
DIRECTOR		х	<u> </u>			-	_	0.	0.	C
(9) LARRY WALKER	2.00	∤	1		ļ				0.	٫ ا
DIRECTOR	2,00	х	-		_	-	H	0.	U.	
(10) ANITA ZUCKER	2,00	· x			l			0.	0.	(
DIRECTOR (11) JASON GRAHAME	40.00	Ĥ	┢	H	⊢	├	-	 	<u> </u>	
PRESIDENT	40.00	1		x	l			101,801.	0.	14,878
(12) SCOTT ZEBEDIS	40.00	╁	┢	 	-	┢	╂	102,001.	<u> </u>	
VICE PRESIDENT	10,00	1	ŀ	x		1		127,386.	0.	6,626
(13) CONNIE RHODES	40.00	一	╁╌		 	\dagger	┢			
TREASURER	-	1		x		İ		55,316.	.] o.	664
		\vdash	\vdash	┢	 	1	T	<u> </u>		
	-	1								
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332007 10-29-13

Form **990** (2013)

Form 990 (2013) TEAMMATES FO									84-1484	1370		F	age 8
Part VII Section A. Officers, Directors, Trus		ploy	ees			ighe	st C	Compensated Employe	es (continued)				
(A) Name and title	(B) Average hours per week	box	not o	Pos heck ss pe nd a d	ition more rson	than is bot	h an	(D) Reportable compensation from	(E) Reportable compensation from related		on amour		of
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organization (W-2/1099-MIS		f org an	npensa rom th ganizat id relat anizat	ne tion ted
		_											
			ļ										
1b Sub-total c Total from continuation sheets to Part V	II, Section A	_	L	L!		1	<u> </u>	284,503.		0.		22	,168.
d Total (add lines 1b and 1c)						` .	<u> </u>	284,503.		0,		22	,168.
Total number of individuals (including but no compensation from the organization		iose	IISTE	eo ar	oove	e) Wr	10 re	eceived more than \$100	J,000 of reportable	le		Yes	No 2
3 Did the organization list any former officer, line 1a? If "Yes," complete Schedule J for s		ustee	e, ke	у еп	nplo	yee	, or	highest compensated e	mployee on		3		x
4 For any individual listed on line 1a, is the su and related organizations greater than \$15	0,000? If "Yes,	" co	mple	ete S	Sche	edule	e J f	for such individual	J		4		х
5 Did any person listed on line 1a receive or a rendered to the organization? If "Yes," commoderation B. Independent Contractors							elat	ed organization or indiv	idual for services		5		х
Complete this table for your five highest co										npens	ation	from	
the organization Report compensation for (A) Name and business		ear e		ng w	vith	or w	ithir	the organization's tax (B) Description of s		C		C) ensatio	 on
								·					
	_						\dashv					_	
							-						
Total number of independent contractors (in \$100,000 of compensation from the organical contractors).		ot lii	mıte	d to	tho	se li:	stec	d above) who received n	nore than				
#100,000 of compensation from the organi	ZaliUii										Form	ggn	(2012)

			Check if Schedule O con	tains a response	or note to any lin				
						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
nts	1	а	Federated campaigns	1a		· -			
ag of		b	Membership dues	1b					
A, E		C	Fundraising events	1c					1
اقاق		d	Related organizations	1d					
ns,			Government grants (contribu	·					1
흕		f	All other contributions, gifts, gran						
들된			similar amounts not included abo	ve 1f	1,049,568.				
Contributions, Gifts, Grants and Other Similar Amounts		g		s 1a-1f \$	6,500.		j		
<u>5 ē</u>		h	Total. Add lines 1a-1f		<u> </u>	1,049,568.			
	_				Business Code				
ا <u>ۋ</u>	2								
le š		b							
E E		С.			<u> </u>				_
ga Be		d							
Program Service Revenue		e	All atheres are a second						
_			All other program service reve	enue					
\dashv	3	g	Total. Add lines 2a-2f Investment income (including	duudondo intor	ant and				
	3		other similar amounts)	dividends, inter-	est, and	146,260.			146 260
	4		Income from investment of ta	v-evempt bond r	roceeds	140,200.			146,260
	5		Royalties	x-exempt bond p	Dioceeus				
	J		rioyanos	(i) Real	(II) Personal				
	6	а	Gross rents	Willean	(ii) i Cisoriai				
			Less: rental expenses						
l			Rental income or (loss)						
I			Net rental income or (loss)		<u> </u>				
l			Gross amount from sales of	(i) Securities	(II) Other				· · · · · · · · · · · · · · · · · · ·
			assets other than inventory	· · · · · · · · · · · · · · · · · · ·					
		b	Less cost or other basis						
			and sales expenses	28,430.					
		С	Gain or (loss)	-28,430.					
		d	Net gain or (loss)			-28,430.			-28,430
<u>o</u>	8	а	Gross income from fundraisin	g events (not					
eune			ıncludıng \$	of					
ا ۾			contributions reported on line	1c). See					
Other Reve			Part IV, line 18	а					
됩			Less direct expenses	b					
_			Net income or (loss) from fund	-					
	9	а	Gross income from gaming ad	ctivities. See					
			Part IV, line 19	a					
			Less: direct expenses	b					
			Net income or (loss) from gan		P				
	10	а	Gross sales of inventory, less						
		_	and allowances	a					
			Less: cost of goods sold	b	<u> </u>				
ŀ		<u>U</u>	Net income or (loss) from sale		Business Carl				
ŀ	11	2	Miscellaneous Revenu EXCHANGE CURRENCY CONV		Business Code 525990	-34.			3.4
j		a b				- 54,			-34
		C							
l		d	All other revenue			-			
Ì		-	Total. Add lines 11a-11d			-34.			
-	12	J	Total revenue. See instructions.			1,167,364.	0.	0	. 117,796,
332009		_	Total revenue . Occ mon detions.			=,=0.,004.			Form QQQ (2012)

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 (A) Total expenses Do not include amounts reported on lines 6b, Fundraising Management and Program service 7b, 8b, 9b, and 10b of Part VIII general expenses expenses expenses Grants and other assistance to governments and 869,120 869,120 organizations in the United States. See Part IV, line 21 Grants and other assistance to individuals in the United States. See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the 50,000 50,000 United States See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 14,055. 51,108 22,720 14,333 trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 25,042 11,132 7,023 6,887. Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 145 64 41 40. Other employee benefits 5,377 2,390 1,508 1,479. 10 Payroll taxes Fees for services (non-employees): Management b Legal Accounting C d Lobbying Professional fundraising services. See Part IV, line 17 f Investment management fees Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.) 7,043 280 6,590 173. 22,056 056 Advertising and promotion 12 1,779 356 534 889. 13 Office expenses 831 166 249 416. 14 Information technology 15 Royalties 1,669 558 623 488. 16 Occupancy 44,207. 47,667 3,460 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 2,144 429 643 1,072. Depreciation, depletion, and amortization 22 13,608 2,722 4,082 6,804. 23 Insurance 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.) FUNDRAISING EXPENSE 8.126 8,126. OTHER EXPENSES 30 15. 6 9 b C d All other expenses Total functional expenses. Add lines 1 through 24e 1,105,745 985,459 35,635 84,651. Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here _____ if following SOP 98-2 (ASC 958-720)

332010 10-29-13

	π χ_	Check if Schedule O contains a response or not	e to ar	ny line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			36,557.	1	36,551.
	2	Savings and temporary cash investments			9,500,193.	2	12,624,506.
	3	Pledges and grants receivable, net			3		
	4	Accounts receivable, net			4		
	5	Loans and other receivables from current and for	officers, directors,			 	
		trustees, key employees, and highest compensation					
		Part II of Schedule L		5			
	6	Loans and other receivables from other disquali	ersons (as defined under				
		section 4958(f)(1)), persons described in section					
		employers and sponsoring organizations of sect					
ţ		employees' beneficiary organizations (see instr).	Comp	olete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net				7	
Ä	8	Inventories for sale or use			8		
	9	Prepaid expenses and deferred charges		11,092.	9	0.	
	10a	Land, buildings, and equipment: cost or other		Ι			
		basis. Complete Part VI of Schedule D	10a	59,306.			
	b	Less: accumulated depreciation	10b	59,306.	2,143.	10c	0.
	11	Investments - publicly traded securities		21,882,025.	11	19,324,443.	
	12	Investments - other securities. See Part IV, line 1		12			
	13	Investments - program-related. See Part IV, line		13			
	14	Intangible assets		14			
	15	Other assets See Part IV, line 11		15			
	16	Total assets. Add lines 1 through 15 (must equal	31,432,010.	16	31,985,500.		
	17	Accounts payable and accrued expenses		17			
	18	Grants payable		18			
	19	Deferred revenue			,	19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete I	Part IV	of Schedule D		21	
S	22	Loans and other payables to current and former	office	rs, directors, trustees,			
≝		key employees, highest compensated employee	es, and	disqualified persons.			
Liabilities		Complete Part II of Schedule L				22	
_	23	Secured mortgages and notes payable to unrela	ated th	ird parties		23	
	24	Unsecured notes and loans payable to unrelate	d thırd	parties		24	
	25	Other liabilities (including federal income tax, pa	yables	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			0.	26	0.
		Organizations that follow SFAS 117 (ASC 958), che	ck here ▶ X and			
es		complete lines 27 through 29, and lines 33 and	d 34.				
anc	27	Unrestricted net assets			2,667,006.	27	5,315,755.
Bal	28	Temporarily restricted net assets			28,765,004.	28	26,669,745.
ā	29	Permanently restricted net assets				29	
Z		Organizations that do not follow SFAS 117 (A	SC 95	8), check here 🕨 📖 📗			
ğ		and complete lines 30 through 34.					
Sets	30	Capital stock or trust principal, or current funds	<u> </u>		30		
As	31	Paid-in or capital surplus, or land, building, or ec				31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated in	come,	or other funds		32	
~	33	Total net assets or fund balances		Ļ	31,432,010.	33	31,985,500.
	34	Total liabilities and net assets/fund balances			31,432,010.	34	31,985,500. Form 990 (2013)

Form 990 (2013)

Form	1 990 (2013) TEAMMATES FOR KIDS FOUNDATION	84-1484370		Pag	ge 12			
Pa	rt 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	1	,167,	,364.			
2	Total expenses (must equal Part IX, column (A), line 25)	2	1	,105,	745.			
3	Revenue less expenses. Subtract line 2 from line 1							
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	31	,432,	,010.			
5	Net unrealized gains (losses) on investments	5		491,	,841.			
6	Donated services and use of facilities	6						
7	Investment expenses	7						
8	Prior period adjustments	8			30.			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,							
_	column (B))	10	31	,985,	,500.			
Pa	rt XII Financial Statements and Reporting							
	Check if Schedule O contains a response or note to any line in this Part XII			· · · · ·	<u> X</u>			
				Yes	No			
1	Accounting method used to prepare the Form 990: Cash Cash Counting method used to prepare the Form 990: Cash Cash Cash Cash Cash Cash Cash Cash							
_	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0						
2 a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Х			
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a						
	separate basis, consolidated basis, or both:				-			
	Separate basis Separate basis Both consolidated and separate basis							
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	<u> </u>			
	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:							
	X Separate basis Consolidated basis Both consolidated and separate basis							
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,	_	v				
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	<u> </u>			
2-	If the organization changed either its oversight process or selection process during the tax year, explain in Sche							
зa	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin Act and OMB Circular A-133?	gie Audit			x			
L			3a		├ <u>^</u>			
D	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits? If the organization did not undergo the required audit or audits.	eu audit	a.					
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		(2013)			
			rom	23U ((2013)			

SCHEDULE A

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

Open to Public Inspection

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Part I	Reason		for kids foundatio ity Status (All organiz		ot complet	o this part	· \ Coo inot	rustions	84	1-1484370		
								ructions				
ريس ا		•	because it is: (For lines	•	•	•	•					
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2			'0(b)(1)(A)(ii). (Attach Sc	•		470/1-1/41/	A.V.::					
3	-	-	tal service organization					/LV4VAV:	il Enter	tha haanstal!		. ~
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	-		eives a substantial part	or its supp	ort from a	governme	entai unit c	or trom the	generai	public desci	nbea ii	ח
• 🗀	,	b)(1)(A)(vi). (Comple	•	(Complete	D 11 \							
9 🗀	-		section 170(b)(1)(A)(vi).		•	rom contr	hutiana m		- face -			£
9 🗀	-		eives: (1) more than 33 nctions - subject to certa								•	
		•	axable income (less sec	•	•	•			• •	•		
		509(a)(2). (Complete		liononia	ix) iloin bu	SII 162262 6	acquired b	y trie orga	iriization	arter June 3	U, 19 <i>1</i>	5.
10 🔲			perated exclusively to te	et for nubl	ıc səfəty S	See sectio	n 500(a)(/	11				
11 🗔	-	- ·	perated exclusively for the	-	-			-	v out the	numoses o	f one (or
	•	•	ations described in secti						•			,,
			organization and compl		•		.,. 000 00 0	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	a)(0). On	CON THE BOX	triat	
	a Type I			ype III - Fu	_		,		e III - No	n-functionall	v intec	ıratec
е 🗀		-	at the organization is not		=	-		• •				•
	-	-	han one or more publicly		-	-	-		•	•		
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	., -	-	organization accepted ar	ny gift or c	ontribution	from any	of the follo	owing per	sons?			
J	=		lirectly controls, either al			_					Yes	No
	the gove	erning body of the si	upported organization?	_						11g(i)		
	(ii) A family	member of a persor	n described in (i) above?	•						11g(ii)		
	(iii) A 35% (controlled entity of a	person described in (i)	or (II) above	e?					11g(iii)		
h	Provide the f	ollowing information	about the supported or	ganization	(s).							
(i) Name	of supported	(ii) EIN	(iii) Type of organization		organization		notify the	(vi) ls	the	(vii) Amount	of mor	netarv
	ganization (ii) Lin		nization (described on lines 1-9		in col. (i) listed in your organization governing document? (i) of your s		ion in coi. T(i) oraș		on in col. red in the	` supp		,
			above or IRC section (see instructions))				support?	Ü.S	5.7			
			(000 111011 00110110))	Yes	No	Yes	No	Yes	No			
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Total	Opportunit D	duction Ast Nation	see the Instructions t	ior.	1	<u> </u>	I	Cabadai	 a_A_/F_==	m 990 or 90	<u></u>	004

332021 09-25-13

Form 990 or 990-EZ.

Page 2

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)

Sec	ction A. Public Support						
Cale	ndar 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 ")	6,052,281.	4,391,136.	4,919,467.	6,190,495.	1,049,568.	22,602,947.
2	Tax revenues levied for the organ-						
	ızatıon'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	6,052,281.	4,391,136.	4,919,467.	6,190,495.	1,049,568.	22,602,947.
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)						5,089,165.
6	Public support. Subtract line 5 from line 4						17,513,782.
	ction B. Total Support	<u> </u>	<u>.</u>	<u>.</u>			· · ·
	ndar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7	Amounts from line 4	6,052,281.	4,391,136.	4,919,467.	6,190,495.	1,049,568.	22,602,947.
8	Gross income from interest,						
_	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources	433,155.	525,699.	604,433.	734,372.	146,260.	2,443,919.
9	Net income from unrelated business	,			,	, ,	
J	activities, whether or not the						
	business is regularly carried on						
10	Other income Do not include gain			-			
10	or loss from the sale of capital						
	assets (Explain in Part IV.)	402.					402.
44	Total support. Add lines 7 through 10						25,047,268.
12	Gross receipts from related activities,	oto (see instructi	ne)	!		12	
13	·	•	•	fourth or fifth to	y year as a sectio		
13	organization, check this box and stop	•	ilist, second, tilic	i, lourer, or mer ta	x year as a section	11 30 1 (0)(3)	ightharpoonup
Se	ction C. Computation of Pub	ic Support Per	rcentage				
14	Public support percentage for 2013 (nlumn (fl)		14	69.92 %
15	Public support percentage from 2012	,	·	oldimi (i))		15	89.67 %
	33 1/3% support test - 2013. If the		•	line 13 and line 1	4 is 33 1/3% or n	L L	
	stop here. The organization qualifies	-		i iii o ro, and iii o r	710 00 17070 01 11	nord, driedik triid be	▶ X
ŀ	33 1/3% support test - 2012. If the		<u>-</u>	ne 13 or 16a and	line 15 is 33 1/3%	or more check th	-
•	and stop here. The organization qual	•				or more, errock ar	▶ □
17:	10% -facts-and-circumstances tes		• •		13 16a or 16b a	and line 14 is 10%	or more
176	and if the organization meets the "fac	_					
	meets the "facts-and-circumstances"			=	•	it iv now the organ	LEAGON ►
	10% -facts-and-circumstances tes	-	-	• • • •	-	17a and line 15 ie :	10% or
L	more, and if the organization meets to	-					
	organization meets the "facts-and-cir						▶ □
19	Private foundation. If the organization			-			
_10	i mate roundation. Il the organization	an did not offeen a	SON OFFINE TO, TOO	, 100, 17a, 01 17b		edule A (Form 990	
					Joine	(1 01111 000	J. JUG LEJ 2010

Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II If the organization fails to qualify under the tests listed below, please complete Part II)

Se	ction A. Public Support								
Cale	ndar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(€	2013	(f) Total	_
	Gifts, grants, contributions, and								
	membership fees received (Do not			1					
	ınclude any "unusual grants.")								
2	Gross receipts from admissions,								
	merchandise sold or services per-								
	formed, or facilities furnished in any activity that is related to the								
	organization's tax-exempt purpose					l			
3	Gross receipts from activities that								_
	are not an unrelated trade or bus-		l			1			
	iness under section 513								
4	Tax revenues levied for the organ-								
	ization's benefit and either paid to								
	or expended on its behalf					ł			
5	The value of services or facilities								_
	furnished by a governmental unit to								
	the organization without charge								
6	Total. Add lines 1 through 5					Ţ			_
	Amounts included on lines 1, 2, and			1	1	1			_
	3 received from disqualified persons					1		1	
b	Amounts included on lines 2 and 3 received			<u> </u>	1	T			_
	from other than disqualified persons that								
	exceed the greater of \$5,000 or 1% of the amount on line 13 for the year					ŀ			
	Add lines 7a and 7b								_
	Public support (Subtract line 7c from line 6)								_
Se	ction B. Total Support		1		<u> </u>			,	_
Cale	endar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(6	e) 2013	(f) Total	_
	Amounts from line 6			1 7		,		1	
	Gross income from interest,								
	dividends, payments received on			1					
	securities loans, rents, royalties and income from similar sources		•						
ŀ	Unrelated business taxable income								_
	(less section 511 taxes) from businesses		1						
	acquired after June 30, 1975								
,	Add lines 10a and 10b								_
11	Net income from unrelated business				-	1			
	activities not included in line 10b,								
	whether or not the business is regularly carried on								
12	Other income. Do not include gain					 			
	or loss from the sale of capital				:				
13	assets (Explain in Part IV.) Total support. (Add lines 9, 10c, 11, and 12)				 		•••		
	First five years. If the Form 990 is fo	r the organization	's first second thi	rd fourth or fifth	tax vear as a section	on 501	(c)(3) organi	zation.	
	check this box and stop here	o organization	- mot, goodia, till	. u, rourur, or mur	, 40 4 50011	551	(=)(S) Organi	, ▶ □	
Se	ction C. Computation of Publ	ic Support Pe	ercentage						
	Public support percentage for 2013 (column (fl)	-	15			%
16			•			16			/ 0
	ction D. Computation of Inve			1		1 10			
						17			%
17 18		•	• • • • • • • • • • • • • • • • • • • •	10, column (i))		18			%
	a 33 1/3% support tests - 2013. If the			on line 14 and lin	ne 15 is more than		% and line	17 is not	
196	more than 33 1/3%, check this box a	-					,, and 11110	., is not ⊾ [\neg
	more than 33 1/3%, check this box a 33 1/3% support tests - 2012. If the	•	•				n 33 1/30/	and	_
1	• •	•							\neg
20	line 18 is not more than 33 1/3%, che			•			-	' ~ [╡
20	Private foundation. If the organization	ni did not check a	DOX On line 14, 19	a, or 190, check	uns box and see in	structi	UIIS O		=

SCHEDULE D

Department of the Treasury

(Form 990)

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

Attach to Form 990.

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

Internal Revenue Service Name of the organization

Employer identification number

TEAMMATES FOR KIDS FOUNDATION 84-1484370 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the Part I organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 1 Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year 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? 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? Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year a Total number of conservation easements 2a Total acreage restricted by conservation easements 2b c Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure **2**d listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax 3 year > Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ 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)? 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 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 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

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

Schedule D (Form 990) 2013

b Assets included in Form 990, Part X

Sche	dule D (Form 990) 2013 TEAMMATES E	OR KIDS FOUNDAT	rion					84-14843	370	Page 2
Par	t III Organizations Maintaining C	collections of A	rt, His	torical Tr	easures, c	or Other	Simil	ar Asse	ts (continue	∋d)
3	Using the organization's acquisition, accessi	on, and other record	ds, checl	k any of the	following tha	t are a sig	nıfıcant	use of its	collection i	tems
	(check all that apply)		<u></u>							
а	Public exhibition	c			hange progra	ams				
b	Scholarly research	e	. L	Other						
С	Preservation for future generations									
4	Provide a description of the organization's co	ollections and explai	n how th	ney further tl	he organizati	on's exem	pt purpo	ose ın Par	t XIII	
5	During the year, did the organization solicit of	r receive donations	of art, hı	storical trea	sures, or oth	er sımılar a	assets	-	_	
	to be sold to raise funds rather than to be ma								Yes	<u> No</u>
Par	t IV Escrow and Custodial Arran		ete if the	organizatio	n answered '	'Yes" to F	orm 990	, Part IV, I	ine 9, or	
	reported an amount on Form 990, Pa	rt X, line 21				,				
1a	Is the organization an agent, trustee, custod	an or other intermed	diary for	contribution	s or other as	sets not II	ncluded	,	_	
	on Form 990, Part X?								Yes	L No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing 1	table [.]						
									Amount	
С	Beginning balance						1c			
d	Additions during the year						1d			
е	Distributions during the year						1e			
f	Ending balance						1f		Ţ.	
2a	Did the organization include an amount on F	orm 990, Part X, line	21?						Yes	Щ No
	If "Yes," explain the arrangement in Part XIII.		_							
Par	t V Endowment Funds. Complete	f the organization ar	swered	"Yes" to Fo	rm 990, Part					
		(a) Current year	(b) P	rior year	(c) Two year	s back (c	1) Three y	ears back	(e) Four yo	ears back
1a	Beginning of year balance									
b	Contributions									
С	Net investment earnings, gains, and losses									
	Grants or scholarships									
е	Other expenditures for facilities									
	and programs									
f	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of the cur	rent year end baland	ce (line 1	g, column (a	a)) held as.					
а	Board designated or quasi-endowment		_%							
b	Permanent endowment >	%								
C	Temporarily restricted endowment ▶	%								
	The percentages in lines 2a, 2b, and 2c should	ıld equal 100%.								
3a	Are there endowment funds not in the posse	ession of the organiz	ation tha	at are held a	nd admınıste	red for the	e organiz	zation	_	
	by									es No
	(i) unrelated organizations								3a(i)	
	(ii) related organizations								3a(ii)	
b	If "Yes" to 3a(II), are the related organization:	•							3b	
4	Describe in Part XIII the intended uses of the		owment	funds.						
Pai	t VI Land, Buildings, and Equipm									
	Complete if the organization answere	d "Yes" to Form 990), Part IV							
	Description of property	(a) Cost or o		, ,	or other	` '	cumulate		(d) Book v	/alue
		basis (investi	nent)	basis	(other)	depr	eciation			
	Land									
b	Buildings									
C	Leasehold improvements				25 424		25	121		
	Equipment				25,131.			131.		0.
	Other			(2)	34,175.		34,	175.	-	0.
Tota	l. Add lines 1a through 1e. (Column (d) must e	equai ⊢orm 990, Part	x, colur	ກກ (<i>B), line</i> 1	U(C))					0.

Schedule D (Form 990) 2013

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

Schedule D (Form 990) 2013

(5) (6)(7)(8)

SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue Service

Statement of Activities Outside the United States

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

➤ Attach to Form 990. ➤ See separate instructions.

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

2013
Open to Public Inspection

Employer identification number Name of the organization TEAMMATES FOR KIDS FOUNDATION 84-1484370 General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 14b. For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance. X Yes No the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed) (a) Region (b) Number of (c) Number of (d) Activities conducted in region (e) If activity listed in (d) (f) Total employees, agents, and independent expenditures offices (by type) (e.g., fundraising, program is a program service, for and in the region services, investments, grants to describe specific type investments contractors recipients located in the region) of service(s) in region in region ın region INNER CITY CHILDREN GRANTMAKING ASSISTANCE 50,000. NORTH AMERICA 0 50 000. 3 a Sub-total **b** Total from continuation 0 0. sheets to Part I c Totals (add lines 3a 50,000. and 3b)

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

Schedule F (Form 990) 2013

Schedule F (Form 990) 2013 TEAMMATES FOR KIDS FOUNDATION

84-1484370

TEAMMATES FOR KIDS FOUNDATION

TEAMMATES recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		NORTH AMERICA	CHILDREN'S EDUCATION ASSISTANCE	50,000.CHECK	СНЕСК	0.		1
2 Enter total number of the IRS, or for which	recipient organizatio	ns listed above that are el has provided a section	Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter	foreign country,	recognized as tax-e	cempt by		1
3 Enter total number of other organizations or entities	other organizations	or entities						

Schedule F (Form 990) 2013

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TEAMMATES FOR KIDS FOUNDATION

Page 3

84-1484370

Schedule F (Form 990) 2013 TEAMMATES FOR KIDS FOUNDATION

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16

Part III can be duplicated if additional space is needed

	!			 	 	1 1				lω
(h) Method of valuation (book, FMV, appraisal, other)										Schedule F (Form 990) 2013
(g) Description of non-cash assistance							,			Schedu
(f) Amount of non-cash assistance										
(e) Manner of cash disbursement										
(d) Amount of cash grant										
(c) Number of recipients										
(b) Region										
(a) Type of grant or assistance (b) Region										

Did the organization have any operations in or related to any boycotting countries during the tax year? If

"Yes," the organization may be required to file Form 5713, International Boycott Report. (see Instructions

Schedule F (Form 990) 2013

Yes

X No

6

for Form 5713)

SCHEDULE (Form 990) Department of the Treasury ntemal Revenue Service

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

OMB No 1545-0047

Open to Public Inspection

> Information about Schedule I (Form 990) and its instructions is at www us gov/form990. Attach to Form 990.

≗ ∏ **Employer identification number** (h) Purpose of grant or assistance 84-1484370 X Yes 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 INNER CITY EALTH TEALTH TEALTH TEALTH 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 (g) Description of non-cash assistance (f) Method of valuation (book, FMV, appraisal, other) 0 ö 。 ٥. ċ (e) Amount of assistance non-cash Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States recipient that received more than \$5,000 Part II can be duplicated if additional space is needed. 596. 20,000. 40,000. 18,000, 106,000, (d) Amount of cash grant 25, (c) IRC section if applicable 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) TEAMMATES FOR KIDS FOUNDATION 13-1624096 74-2442488 75-2051646 31-0669700 74-2421549 General Information on Grants and Assistance (p) EIN criteria used to award the grants or assistance? 1 (a) Name and address of organization CINCINNATI FND - 200 W FOURTH ST DIVISION OF FAMILY CENTERED CARE MOUNT SINAI KRAVIS CHILDREN'S HOSPITAL - ONE GUSTAVE L LEVY PLACE - NEW YORK, NY 10029 PHOENIX CHILDREN HOSPITAL KIDS 2 CAMP FUND GREATER KROENKE SPORTS CHARITIES or government CINCINNATI, OH 45202 1000 CHOPPER CIRCLE Name of the organization FT WORTH, TX 76104 PHOENIX, AZ 85016 CO 80204 801 SEVENTH AVE COOK'S CHILDREN Parti DENVER, Part II

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

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

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Schedule I (Form 990) (2013)

INNER CITY

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10,000,

13-4365598 501(C)(3)

LITCHFIELD AREA MENTORSHIP PROGRAM

135 SIBLEY AVENUE NORTH

LITCHFIELD, MN 55355

Page 2 Schedule I (Form 990) (2013) (f) Description of non-cash assistance (e) Method of valuation (book, FMV, appraisal, other) 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. Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information. (d) Amount of non-cash assistance (c) Amount of cash grant DOCUMENTATION, MAINLY PROOF OF NON-PROFIT STATUS IN THE FORM OF A LETTER OF EXPLANATION: TEAMMATES FOR KIDS FOUNDATION REQUIRES THAT ALL ORGANIZATIONS TEAMMATES REQUIRES THAT A LETTER BE SENT BACK WITHIN 14 DAYS OF RECEIPT OF DETERMINATION TO INDICATE 501(C)(3) STATUS, THEY MUST ALSO PROVIDE A FULL GRANT FUNDS CONFIRMING THAT FUNDS HAVE BEEN RECEIVED AND THAT ALL MISSION 332102 10-29-13 AUDIT AND BUDGET REPORTS, AS WELL AS A STATEMENT OF MISSION. FURTHERMORE, GRANT APPLICATION, WHICH ASKS FOR THEIR FINANCIAL INFORMATION, INCLUDING (b) Number of recipients WITHIN THE U.S. BENEFITTING FROM TFKF FUNDING HAVE PROPER IRS (a) Type of grant or assistance Schedule I (Form 990) (2013) PART I, LINE 2: Part IV. Part III

84-1484370

TEAMMATES FOR KIDS FOUNDATION

Schedule I (Form 990) TEAMMATES FOR KIDS FOUNDATION	84-1484370	Page 2
Schedule I (Form '990) TEAMMATES FOR KIDS FOUNDATION Part IV Supplemental Information		
STATEMENTS AND USE OF FUNDS HAVE NOT CHANGED. AN ADDITIONAL LETTER IS		
REQUESTED AT THE 6 MONTH MARK, ASKING FOR A REPORT ON THE USE OF FUNDS AS	······································	
WELL AS PERSONAL STORY OF A SPECIFIC CHILD AND/OR FAMILY WHO BENEFITED FROM		
THE GRANT.		
	<u></u>	
		<u>-</u>
		· · · · · ·
	•	

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

OMB No 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Name of the organization **Employer identification number** TEAMMATES FOR KIDS FOUNDATION 84-1484370 FORM 990, PART VI, SECTION B, LINE 11: EXPLANATION: THE RETURN IS REVIEWED BY THE FINANCIAL COMMITTEE AND PRESENTED TO THE BOARD BEFORE IT IS FILED WITH THE IRS. FORM 990, PART VI, SECTION B, LINE 12C: EXPLANATION: THE FOUNDATION REVIEWS THE POLICY ANNUALLY AND REQUIRES THE BOARD OF DIRECTORS AND EMPLOYEES TO CERTIFY ANNUALLY. FORM 990, PART VI, SECTION B, LINE 15: EXPLANATION: AT LEAST TWO BOARD MEMBERS REVIEW AND APPROVE OFFICER COMPENSATION AMOUNTS. THEY COMPARE THE COMPENSATION AGAINST OTHER COMPARABLE ORGANIZATIONS USING INDUSTRY COMPENSATION STANDARDS. FORM 990, PART VI, SECTION C, LINE 19: EXPLANATION: THE ORGANIZATION'S GOVERNING DOCUMENTS AND FINANCIAL STATEMENT ARE AVAILABLE UPON REQUEST. FORM 990, PART XII, LINE 1: EXPLANATION: THE FOUNDATION USES THE MODIFIED CASH BASIS OF ACCOUNTING

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

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

Form 1128

General Information

(Rev January 2008)

Department of the Treasury
Internal Revenue Service

Application To Adopt, Change, or Retain a Tax Year

► See separate instructions.

OMB No 1545-0134

Attachment Sequence No 148

	Important: All filers must complete Part I and sign below See instructions	
Ī	Name of filer (if a joint return is filed, also enter spouse's name) (see instructions)	Filer's identifying number
-	Teammates for Kids Foundation	84-1484370
ſ	Number, street, and room or suite no (if a P O box, see instructions)	Service Center where income tax return will be filed
틸	1900 Wazee Street, Suite 205	Ogden, UT
-	City or town, state, and ZIP code	Filer's area code and telephone number/Fax number
be	Denver, CO 80202	303-759-9777
5	Name of applicant, if different than the filer (see instructions)	Applicant's identifying number (see instructions)
	Name of person to contact (if not the applicant or filer, attach a power of attorney)	Contact person's area code and telephone number/Fax number
1	Check the appropriate box(es) to indicate the type of applicant (see instruction of the controlled foreign corporation (CFC) (sec 957) Foreign sales corporation (FSC) or Interest-charge domestic international sales corporation (IC-DISC)	Passive foreign investment company (PFIC) (sec 1297) Other foreign corporation X Tax-exempt organization
	Domestic corporation Specified foreign corporation (SFC) (sec 898) S corporation Personal service corporation (PSC) Trust	Homeowners Association (sec 528) Other (Specify entity and applicable Code section)
2	Approval is requested to (check one) (see instructions)	
		led for the tax year cember 31 , 20 13 nt financial reporting year? ► x Yes No
	provide opportunities to children.	support officer organizations that
	Signature - All Filers (See Who Must Sign In	
Inde	repenalties of perjury, I declare that I have examined this application, including accompanying belief, it is true, correct, and complete. Declaration of preparer (other than filer) is based on all information of prep	schedules and statements, and to the best of my knowledge tion of which preparer has any knowledge. Preparer (other than filer) 7/25/20/4 Signature of individual preparing the application and date Dori Eggett Name of individual preparing the application
	e application is filed on behalf of a controlled foreign corporation or a	EKSSH ULP Name of firm preparing the application

	Automatic Approval Request (see instructions)		
•	Identify the revenue procedure under which this automatic approval request is filed ▶		
Se	ection A - Corporations (Other Than S Corporations or Personal Service Corporations) (Rev. Proc. 2006-45 or its successor)	,	
1	Is the applicant a corporation (including a homeowners association (section 528)) that is requesting a change in	Yes	No
	tax year and is not precluded from using the automatic approval rules under section 4 of Rev Proc 2006-45	1,	-
	(or its successor)? (see instructions)		
2	Does the corporation intend to elect to be an S corporation for the tax year immediately following the short period?		
	If "Yes" and the corporation is electing to change to a permitted tax year, file Form 1128 as an attachment to Form 2553		
3	Is the applicant a corporation requesting a concurrent change for a CFC, FSC or IC-DISC? (see instructions)		
Se	ection B - Partnerships, S Corporations, Personal Service Corporations (PCSs), and Trusts (Rev. Proc. 2006-46,		
	or its successor)	,	İ
4	Is the applicant a partnership, S corporation, PSC, or trust that is requesting a tax year and is not precluded from]
	using the automatic approval rules under section 4 of Rev Proc 2006-46 (or its successor)? (see instructions)		<u></u>
5	Is the partnership, S corporation, PSC, or trust requesting to change to its required tax year or a partnership, S	1	
	corporation, or PSC that wants to change to a 52-53 week tax year ending with reference to such tax year? >	<u></u>	
6	Is the partnership, S corporation, or PSC (other than a member of a tiered structure) requesting a tax year that		
	coincides with its natural business year described in section 4 01(2) of Rev Proc 2006-46 (or its successor)? Attach	, ,	۸,
	a statement showing gross receipts for the most recent 47 months. (See instructions for information	ł	·
	required to be submitted)		
	Is the S corporation requesting an ownership tax year? (see instructions)		ļ
8	Is the applicant a partnership requesting a concurrent change pursuant to section 6 09 of Rev Proc 2006-45	, 👯	57
	(or its successor) or section 5 04(8) of Rev Proc 2002-39 (or its successor)? (see instructions) ▶		
	ection C - Individuals (Rev. Proc. 2003-62, or its successor) (see instructions)	ļ. ÷	
	Is the applicant an individual requesting a change from a fiscal year to a calendar year?▶		
_	ection D - Tax-Exempt Organizations (Rev. Proc. 76-10 or 85-58) (see instructions)	, .	٨
	Is the applicant a tax-exempt organization requesting a change?	x	L
_Pa	irt III Ruling Request (All applicants requesting a ruling must complete Section A and any other se	ection	that
	applies to the entity. See instructions) (Rev. Proc. 2002-39, or its successor)	T.,	1
	ection A - General Information	Yes	No
Se 1	ection A - General Information Is the applicant a partnership, S corporation, personal service corporation, or trust that is under examination by	Yes	No
	Is the applicant a partnership, S corporation, personal service corporation, or trust that is under examination by the IRS, before an appeals office, or a Federal court?	Yes	No
1	Is the applicant a partnership, S corporation, personal service corporation, or trust that is under examination by the IRS, before an appeals office, or a Federal court? If "Yes," see the instructions for information that must be included on an attached explanation	Yes	No
	Is the applicant a partnership, S corporation, personal service corporation, or trust that is under examination by the IRS, before an appeals office, or a Federal court? If "Yes," see the instructions for information that must be included on an attached explanation Has the applicant changed its annual accounting period at any time within the most recent 48-month period	Yes	No
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2	Is the applicant a partnership, S corporation, personal service corporation, or trust that is under examination by the IRS, before an appeals office, or a Federal court? If "Yes," see the instructions for information that must be included on an attached explanation. Has the applicant changed its annual accounting period at any time within the most recent 48-month period ending with the last month of the requested tax year? If "Yes" and a letter ruling was issued granting approval to make the change, attach a copy of the letter ruling, or if not available, an explanation including the date approval was granted. If a letter ruling was not issued, indicate when and explain how the change was implemented.		No
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1 2 4 a b	Is the applicant a partnership, S corporation, personal service corporation, or trust that is under examination by the IRS, before an appeals office, or a Federal court? If "Yes," see the instructions for information that must be included on an attached explanation Has the applicant changed its annual accounting period at any time within the most recent 48-month period ending with the last month of the requested tax year? If "Yes" and a letter ruling was issued granting approval to make the change, attach a copy of the letter ruling, or if not available, an explanation including the date approval was granted. If a letter ruling was not issued, indicate when and explain how the change was implemented. Within the most recent 48-month period, has any accounting period application been withdrawn, not perfected, denied, or not implemented? If "Yes," attach an explanation. Is the applicant requesting to establish a business purpose under section 5 02(1) of Rev. Proc. 2002-39 (or its successor)? If "Yes," attach an explanation of the legal basis supporting the requested tax year (see instructions). If your business purpose is based on one of the natural business year tests under section 5 03, check the applicable box. Annual business cycle test. Seasonal business test. 25-percent gross receipts test. Attach a statement showing gross receipts from sales and services (and inventory cost if applicable) for the test period. (see instructions) Enter the taxable income or (loss) for the 3 tax years immediately preceding the year of change and for the short period. Short period. First preceding year. First preceding year. Third preceding year.		No

Form	1128 (Rev 1-2008)		Page 3
6	Corporations only, enter the losses or credits, if any, that were generated or that expired in the short period	Yes	No
	Generated Expiring		
	Net operating loss \$\$		
	Capital loss \$ \$		
	Unused credits \$ \$		
7	Enter the amount of deferral, if any, resulting from the change (see section 5 05(1), (2), (3) and 6 01(7) of		,
	Rev. Proc 2002-39, or its successor) ▶ \$		1
8 a		L	
	If "Yes," attach a statement for each CFC providing the name, address, identifying number, tax year, the		
	percentage of total combined voting power of the applicant, and the amount of income included in the gross		
	income of the applicant under section 951 for the 3 tax years immediately before the short period and for the		
_	short period		
D	Will each CFC concurrently change its tax year? If "Yes" to line 8b, go to Part II, line 3 ■		<u> </u>
	If "No," attach a statement explaining why the CFC will not be conforming to the tax year requested by the U.S.		
	shareholder	İ	
9 2	Is the applicant a LLO shareholder in a DEIO as defead in acetica 42070	+	
Ja	If "Yes," attach a statement providing the name, address, identifying number, and tax year of the PFIC, the	-	
	percentage of interest owned by the applicant, and the amount of distributions or ordinary earnings and net		
	capital gain from the PFIC included in the income of the applicant		
b	Did the applicant elect under section 1295 to treat the PFIC as a qualified electing fund?		
10 a			
	a shareholder of an IC-DISC, or a shareholder of an FSC?		
	If "Yes," attach a statement providing the name, address, identifying number, type of entity (partnership, trust,		
	estate, S corporation, IC-DISC, or FSC), tax year, percentage of interest in capital and profits, or percentage of		
	interest of each IC-DISC or FSC and the amount of income received from each entity for the first preceding year		
	and for the short period. Indicate the percentage of gross income of the applicant represented by each amount		
b	Will any partnership concurrently change its tax year to conform with the tax year requested? ▶		
C	If "Yes" to line 10b, has any Form 1128 been filed for such partnership?		
11	Does the applicant or any related entity currently have any accounting method, tax year, ruling, or technical		
	advice request pending with the IRS National Office?	 	
	If "Yes," attach a statement explaining the type of request (method, tax year, etc.) and the specific issues involved		
40	In each request	-	
12	Is Form 2848, Power of Attorney and Declaration of Representative, attached to this application?	\vdash	
13			
14	IRS proposes to disapprove the application?		
	ion B - Corporations (other than S corporations and controlled foreign corporations) (see instructions)		
15	Enter the date of incorporation		
16 a		Yes	No
b	period? If "Yes," will the corporation be going to a permitted S corporation tax year? •		
	If "No" to line 16b, attach an explanation		
17	Is the corporation a member of an affiliated group filing a consolidated return?		
	If "Yes," attach a statement providing (a) the name, address, identifying number used on the consolidated return,		
	tax year, and Service Center where the applicant files the return, (b) the name, address, and identifying number		
	of each member of the affiliated group, (c) the taxable income (loss) of each member for the 3 years immediately		
40	before the short period and for the short period, and (d) the name of the parent corporation	4	
18 a	Personal service corporations (PSCs) Attach a statement providing each shareholder's name, type of entity		
	(individual, partnership, corporation, etc.), address, identifying number, tax year, percentage of ownership, and		
	amount of income received from the PSC for the first preceding year and the short period		
b	If the PSC is using a tax year other than the required tax year, indicate how it obtained its tax year		
	Grandfathered (attach copy of letter ruling) Letter ruling (date of letter ruling (attach copy)) Section 444 election (date of election) (attach copy))		
	Letter ruling (date of letter ruling (attach copy))	1	

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Sect	tion C - S Corporations (see Instructions)		
19	Enter the date of the S corporation election ▶	Yes	No
20	Is any shareholder applying for a corresponding change in tax year?		
	If "Yes," each shareholder requesting a corresponding change in tax year must file a separate Form 1128 to get		
	advance approval to change its tax year	_	
21	If the corporation is using a tax year other than the required tax year, indicate how it obtained its tax year		
	Grandfathered (attach copy of letter ruling) Section 444 election (date of election)		
	Letter ruling (date of letter ruling (attach copy))		1
22	Attach a statement providing each shareholder's name, type of shareholder (individual, estate, qualified		
	subchapter S Trust, electing small business trust, other trust, or exempt organization), address, identifying number,	1	
	tax year, percentage of ownership, and the amount of income each shareholder received from the S corporation	1	
	for the first preceding year and for the short period		
Sect	tion D - Partnerships (see instructions)		,
<u>23</u>	Enter the date the partnership's business began ▶	Yes	No
24	Is any partner applying for a corresponding change in tax year?		
25	Attach a statement providing each partner's name, type of partner (individual, partnership, estate, trust,		
	corporation, S corporation, IC-DISC, etc.), address, identifying number, tax year, and the percentage of interest		
	in capital and profits	_	
26	Is any partner a shareholder of a PSC as defined in Regulations section 1 441-3(c)?		
	If "Yes," attach a statement providing the name, address, identifying number, tax year, percentage of interest		
	in capital and profits, and the amount of income received from each PSC for the first preceding year and for the		
	short period	4 !	
27	If the partnership is using a tax year other than the required tax year, indicate how it obtained its tax year		
	Grandfathered (attach copy of letter ruling) Section 444 election (date of election)		
C4	Letter ruling (date of letter ruling (attach copy))		L
	ion E - Controlled Foreign Corporations (CFC)		
28	Attach a statement for each U.S. shareholder (as defined in section 951(b)) providing the name, address, identifying		
	number, tax year, percentage of total value and percentage of total voting power, and the amount of income included in gross income under section 951 for the 3 tax years immediately before the short period and for the	i i	
	short period		
Sect	ion F - Tax-Exempt Organizations	ليبيل	
29	Type of organization Corporation Trust Other (specify) ▶	Yes	No
30	Date of organization Date of organization	163	NO
31	Code section under which the organization is exempt	-	
32	Is the organization required to file an annual return on Form 990, 1120-C, 990-PF, 990-T, 1120-H, or 1120-POL? ▶	1	
33	Enter the date the tax exemption was granted Attach a copy of the letter ruling granting	+-+	
	exemption If a copy of the letter ruling is not available, attach an explanation	1 1	
34	If the organization is a private foundation, is the foundation terminating its status under section 507?	1]	
	ion G - Estates		
35	Enter the date the estate was created ►		
	Attach a statement providing the name, identifying number, address, and tax year of each beneficiary and each p	erson	who
-	is an interested party of any portion of the estate		
b	Based on the adjusted total income of the estate entered in Part III, Section A, line 5, attach a statement si	howinc	the
	distribution deduction and the taxable amounts distributed to each beneficiary for the 2 tax years immediately	_	-
	short period and for the short period		
Secti	on H - Passive Foreign Investment Companies		
37	If the applicant is a passive foreign investment company, attach a statement providing each U.S. shareholder's name	ne. add	iress
	identifying number, and percentage of interest owned		50,