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Form 990

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047 2013

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.

Open to Public Inspection

| <u>A</u> | For the | 2013 calendar year, or tax year beginning and | ending | • | |
|-------------------------|---------------------|---|-------------------------|------------------------------|-------------------------------|
| В | Check if applicable | C Name of organization | | D Employer identific | ation number |
| • | applicable | SAVING AMERICA'S MUSTANGS | | | |
| | Addres change | C/O WARM CREEK RANCH | | | |
| | Name change | Doing Business As | | 94-3 | 460086 |
| | Initial return | Number and street (or P.O. box if mail is not delivered to street address) | Room/suite | E Telephone number | • |
| | Termin- ated | HC 60 BOX 300 | | 858- | <u>759-5500</u> |
| | Amend | City or town, state or province, country, and ZIP or foreign postal code | | G Gross receipts \$ | 535,230. |
| | Application | WELLS, NV 89835 | | H(a) Is this a group re | turn |
| | pendin | F Name and address of principal officer MADELEINE PICKENS | | for subordinates | γ Yes X No |
| | | HC 60 BOX 300, WELLS, NV 89835 | | H(b) Are all subordinates in | cluded? Yes No |
| ī | Tax-exe | mpt status X 501(c)(3) | or 527 | If "No," attach a | list (see instructions) |
| J | Websit | e: ► WWW.SAVINGAMERICANSMUSTANGS.ORG | | H(c) Group exemption | n number 🕨 |
| ĸ | Form of | organization: X Corporation Trust Association Other | ∟ Year | of formation: 2008 M | State of legal domicile: NV |
| | art I | Summary | | | |
| _ | 1 | Briefly describe the organization's mission or most significant activities ${ m TO}$ DI | EVELOF | A SANCTUAR | Y FOR WILD |
| Activities & Governance | ; | HORSES HELD BY THE BUREAU OF LAND MANAGER | | | |
| T. | 2 | Check this box if the organization discontinued its operations or dispos | | | |
| Š | 3 1 | Number of voting members of the governing body (Part VI, line 1a) | | 3 | 3 |
| Ğ | 4 1 | Number of independent voting members of the governing body (Part VI, line 1b) | | 4 | 2 |
| 80 | 5 | Total number of individuals employed in calendar year 2013 (Part V, line 2a) | | 5 | 11 |
| ıţ. | 6 | Total number of volunteers (estimate if necessary) | | 6 | 0 |
| Ę | 7 a | Total unrelated business revenue from Part VIII, column (C), line 12 | | 7a | 0. |
| ⋖ | | Net unrelated business taxable income from Form 990-T, line 34 | | 7b | 0. |
| | | | ĺ | Prior Year | Current Year |
| Revenue | 8 | Contributions and grants (Part VIII, line 1h) | | 4,414,249. | 489,151. |
| | 9 | Program service revenue (Part VIII, line 2g) | | 0. | 0. |
| Š | 10 | Investment income (Part VIII, column (A), lines 3, 4, and 7d) | | -871,184. | 0. |
| ď | 11 | Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) | | 0. | 30,351. |
| | 1 | Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) | | 3,543,065. | 519,502. |
| _ | | Grants and similar amounts paid (Part IX, column (A), lines 1-3) | | 23,600. | 0. |
| | | Benefits paid to or for members (Part IX, column (A), line 4) | | 0. | 0. |
| G | 1 | Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) | | 133,533. | 303,637. |
| Expenses | 16a | Professional fundraising fees (Part IX, column (A), line 11e) | | 0. | 0. |
| De C | h | Total fundraising expenses (Part IX, column (D), line 25) | 0. | | |
| ŭ | 17 | Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) | | 1,092,724. | 1,619,884. |
| | | Total expenses Add lines 13-17 (must equal Part IX, column (A), line-25) | === | 1,249,857. | 1,923,521. |
| | | Revenue less expenses Subtract line 18 from line 12 | . , | 2.,293,208. | -1,404,019. |
| 5 | g | | Ве | ginning of Current Year | End of Year |
| TNeff Aggets or | 20 | Total assets (Part X, line 16) | 9 5 21 E | 6,672,125. | 8,399,677. |
| 8 | 21 | Total liabilities (Part X, line 26) | ننا- ، ور | 3,021,731. | 6,153,302. |
| 2 | 22 | Net assets or fund balances Subtract line 21 from line 20 | · · · · · · · · · · · · | 3,650,394. | 2,246,375. |
| P | art II | Signature Block | | , | |
| - | | Ities of perjury, I declare that I have examined this return, including accompanying schedule | es and staten | nents, and to the best of m | y knowledge and belief, it is |
| | | t, and complete. Declaration of preparer (other than officer) is based on all information of wi | | | |
| 3 6 | 1 | N/a delittles | | 14201 | 2014 |
| Şu | | Signature of officer | | Date | |
| Hé | | MADELEINE PICKENS, CHAIRPERSON, PRESI | DENT | | |
| | | Type or print name and title | | | · · · · · · |
| 310 | | Print/Type preparer's name Propaler's Suprature | CPA- | Date / Check | PTIN |
| ے۔ Pa | id | ROBERT H. LIPSEY Tophy Lipsey | 111 | 1///4//4 If setf-employ | P00234515 |
| | eparer | | DBERG | LLP Firm's EIN | 33-0883243 |
| | e Only | Firm's address 525 B STREET, SUITE 1400 | | | |
| | • | SAN DIEGO, CA 92101-4423 | | Phone no. 61 | 9-234-0877 |
| Ma | ay the II | RS discuss this return with the preparer shown above? (see instructions) | | | X Yes No |
| | | | | | |

| Form | 990'(2013) C/O WARM CREEK RANCH | <u>94-3460086</u> | 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 | | X |
| 1 | Briefly describe the organization's mission: | | |
| | THE PRIMARY PURPOSE OF THE ORGANIZATION IS TO DEVELOP A | PERMANENT | |
| | SANCTUARY FOR THE WILD HORSES HELD BY THE U.S. BUREAU OF | F LAND | |
| | MANAGEMENT IN SHORT TERM HOLDING FACILITIES. THE FOUND | ER IS COMMIT | TED |
| | TO SUPPORTING HUMANE, ECONOMICALLY VIABLE, TREATMENT OF | THE ANIMALS | • |
| 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? | 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 | 6 |
| - | Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other | | |
| | revenue, if any, for each program service reported | , , | |
| 4a | (Code) (Expenses \$ 48,034 · including grants of \$) (Reveni | ue \$ |) |
| | THE ORGANIZATION PROVIDES PUBLIC EDUCATION REGARDING TH | | |
| | SANCTUARY, THE HISTORY OF HORSES IN AMERICA AND THE PRO | | CARE |
| | OF WILD HORSES THROUGH PRINT LITERATURE, CHILDREN'S BOOK | | <u> </u> |
| | ADVERTISING. PRINT MEDIA IS ALSO USED TO PROMOTE VISITS | | |
| | SANCTUARY SO GUESTS MAY VIEW WILD HORSES ON OPEN TERRAI | | |
| | DANCTOAKT DO GODDID HAT VIEW WILD HORDED ON OTHER TERREST | 44.6 | |
| | THROUGH THE SAVING AMERICA'S MUSTANGS WEBSITE, VIDEO AND | D ADVERTISIN | IG. |
| | THE FOUNDATION IS INCREASING AWARENESS OF THE PLIGHT OF | | |
| | | VISIT THE | Robo |
| | HORSES AT THE SANCTUARY. VIDEO INCLUDES DRAMATIC FOOTAGE | | FAIT |
| | OF LAND MANAGEMENT (BLM) GATHERING OF WILD HORSES AND T | | |
| | SAVED HORSES ONTO THE SANCTUARY LAND. THE WEBSITE PROVI | | |
| 46 | | | MEMP |
| 4b | | ue \$ | ··········· ' |
| | THE ORGANIZATION ESTABLISHED THE HORSE SANCTUARY. | | |
| | THE HORSE SANCTUARY PROVIDES A HOME FOR WILD HORSES THA | שואנו ה אויים | , |
| | BEEN HELD IN SHORT TERM HOLDING FACILITIES BY THE BLM O | | |
| | | | |
| | SOLD TO SLAUGHTER HOUSES. THE HORSE SANCTUARY PROVIDES | M FREELY ON | |
| | | | |
| | | O GUESTS CAN | GET |
| | CLOSE TO THESE HORSES. THIS PRESERVE IS A LIVING MUSEUM | | 12.27 |
| | PUBLIC CAN VISIT, LEARN ABOUT, AND APPRECIATE THE HORSE | S AND AMERIC | AN |
| | CULTURE. | | |
| | | | |
| | 004 713 | | |
| 4c | (Code) (Expenses \$ 824,713. including grants of \$) (Reven | | , , , , , , , , , , , , , , , , , , , |
| | THE ORGANIZATION ESTABLISHED MUSTANG MONUMENT, A WILD H | ORSE ECO-RES | ORT |
| | AND PRESERVE. | | |
| | | <u> </u> | |
| | MUSTANG MONUMENT IS A SUSTAINABLE RESORT AND PRESERVE F | | |
| | SURROUNDED BY MAJESTIC MOUNTAIN RANGES, THE RESORT ENCO | | |
| | SQUARE MILES JUST SOUTH OF WELLS, NEVADA, AND PROVIDES | | AN |
| | UNFORGETTABLE SAFARI ADVENTURE. THE RANCH IS DESIGNED T | | |
| | SANCTUARY FOR UP TO A THOUSAND WILD HORSES AND GIVES A | CHANCE FOR T | HE_ |
| | PUBLIC TO LEARN ABOUT THEM. | | |
| | | | |
| | | | |
| | | | |
| 4d | Other program services (Describe in Schedule O.) | | |
| | (Expenses \$ including grants of \$) (Revenue \$ | | |
| <u>4e</u> | Total program service expenses ► 1,749,831. | | |
| | | Form | 990 (2013 |

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Form 990 (2013) C/O WARM CREEK RANCH
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 | X | |
| 2 | Is the organization required to complete Schedule B, Schedule of Contributors | 2 | X | |
| 3 | Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for | | | |
| | public office? If "Yes," complete Schedule C, Part I | 3_ | | <u> </u> |
| 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 | 4 | | <u> </u> |
| 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 | | <u> </u> |
| 6 | Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to | I | | |
| | provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I | 6 | | 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 | 7 | | X |
| 8 | Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete | | | |
| | Schedule D, Part III | 8_ | | 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 | 9 | | 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 | _10 | | X |
| 11 | If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X | | | |
| | as applicable | | | |
| а | Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, | | | |
| | Part VI | 11a | X | <u> </u> |
| b | Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total | | 3,5 | |
| | assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII | 11b | X | |
| 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 |
| a | 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 | | | x |
| _ | Part X, line 16? If "Yes," complete Schedule D, Part IX Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X | 11d | Х | _^_ |
| | Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses | 11e | | <u> </u> |
| f | the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X | 11f | | X |
| 100 | Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete | 1,,11 | | A. |
| 124 | Schedule D, Parts XI and XII | 12a | | x |
| h | Was the organization included in consolidated, independent audited financial statements for the tax year? | 120 | | |
| • | 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 | 13 | | X |
| 14a | Did the organization maintain an office, employees, or agents outside of the United States? | 14a | | X |
| | Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, | | | <u> </u> |
| _ | 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 | | 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 | 16 | | 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 | 17 | | 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 | 18 | | 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 | 19 | ļ | Х |
| 20a | Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H | 20a | <u> </u> | X |
| b | If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? | 20b | <u> </u> | <u> </u> |
| | | Form | 990 | (2013) |

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Page 4 Part IV | Checklist of Required Schedules (continued) Yes No Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or Х government on Part IX, column (A), line 19 If "Yes," complete Schedule I, Parts I and II 21 Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, Х column (A), line 2? If "Yes," complete Schedule I, Parts I and III 22 Did the organization answer "Yes" to Part VII. Section A. line 3, 4, or 5 about compensation of the organization's current 23 and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Х Schedule J 23 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 X Schedule K If "No", go to line 25a 24a b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b 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? 24c d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a X disqualified person during the year? If "Yes," complete Schedule L, Part I 2<u>5a</u> 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 Х 25b 26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, Х complete Schedule L, Part II 26 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 X of any of these persons? If "Yes," complete Schedule L, Part III 27 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV 28 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 28a Х b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28b c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, X director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV 28c X Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation Х contributions? If "Yes," complete Schedule M 30 Did the organization liquidate, terminate, or dissolve and cease operations? Х If "Yes," complete Schedule N, Part I 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Х Schedule N. Part II 32 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 33 X Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and X Part V, line 1 34 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a 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 35b Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? 36 X_ If "Yes," complete Schedule R, Part V, line 2 36 Did the organization conduct more than 5% of its activities through an entity that is not a related organization Х and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 37

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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

94<u>-346</u>0086 C/O WARM CREEK RANCH Form 990 (2013) 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 21 1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 0 1b b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1c 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return X b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? X За b If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O 3b 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a X financial account in a foreign country (such as a bank account, securities account, or other financial account)? 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 5a X b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b c If "Yes," to line 5a or 5b, did the organization file Form 8886-T? 5c 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit Х any contributions that were not tax deductible as charitable contributions? 6a b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts 6b were not tax deductible? 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? 7a Х b If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required X to file Form 8282? 7с 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? 7e Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h 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? 8 Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? 9a 9b b Did the organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter-10 10a 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 10b Section 501(c)(12) organizations. Enter 11 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? 12a b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? 13a Note, See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b c Enter the amount of reserves on hand 13c X 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

C/O WARM CREEK RANCH

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Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions

| | Check if Schedule O contains a response or note to any line in this Part VI | | | X |
|-------|---|-----------|--------------|----------|
| Sec | tion A. Governing Body and Management | | | |
| | | | Yes | No |
| 1a | Enter the number of voting members of the governing body at the end of the tax year | 3 | | |
| | 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 1b | 2 | | |
| 2 | 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? | 2 | | X |
| 3 | Did the organization delegate control over management duties customarily performed by or under the direct supervision | -4 | | |
| | of officers, directors, or trustees, or key employees to a management company or other person? | 3 | | <u>X</u> |
| 4 | Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? | 4 | | <u>X</u> |
| 5 | Did the organization become aware during the year of a significant diversion of the organization's assets? | 5 | | X |
| 6 | Did the organization have members or stockholders? | 6_ | | X |
| 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 | | <u> </u> |
| b | Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or | | | |
| | persons other than the governing body? | 7b | | <u>X</u> |
| 8 | Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: | | | |
| а | The governing body? | 8a | Х | |
| b | Each committee with authority to act on behalf of the governing body? | 8b | Х | |
| 9 | 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 | 9 | | <u> </u> |
| Sec | tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code) | | | |
| | | | Yes | No |
| | Did the organization have local chapters, branches, or affiliates? | 10a | | <u>X</u> |
| b | If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, | 1 | | |
| | and branches to ensure their operations are consistent with the organization's exempt purposes? | 10b | 7 | |
| | Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? | 11a | X | |
| | Describe in Schedule O the process, if any, used by the organization to review this Form 990 | 400 | x | |
| | Did the organization have a written conflict of interest policy? If "No," go to line 13 | 12a | X | |
| | Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? | 12b | | |
| 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 | х | |
| 13 | Did the organization have a written whistleblower policy? | 13 | | X |
| 14 | Did the organization have a written document retention and destruction policy? | 14 | | X |
| 15 | Did the process for determining compensation of the following persons include a review and approval by independent | '- | | |
| 15 | persons, comparability data, and contemporaneous substantiation of the deliberation and decision? | | | |
| а | The organization's CEO, Executive Director, or top management official | 15a | | <u> </u> |
| b | | 15b | | X |
| ~ | 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 | | X |
| 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? | 16b | , | |
| Sec | tion C. Disclosure | | | |
| 17 | List the states with which a copy of this Form 990 is required to be filed ► NONE | | | |
| 18 | Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only |) availat | le | |
| | for public inspection. Indicate how you made these available. Check all that apply | | | |
| | Own website Another's website X Upon request Other (explain in Schedule O) | | | |
| 19 | Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, a | ınd fınaı | ncial | |
| | statements available to the public during the tax year | | | |
| 20 | State the name, physical address, and telephone number of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person of | ation. | _ | |
| | BETH HOUSE - 858-759-5500 | | | |
| | 2683 VIA DE LA VALLE, #G-313, DEL MAR, CA 92014 | | 000 | |
| 33200 | 6 10-29-13 | Forn | 1 990 | (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

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

| X Check this box if neither the organization n | or any related | orga | nıza | tion | cor | nper | nsat | ed any current officer, of | director, or trustee | |
|--|--|--------------------------------|-----------------------|----------|--------------|------------------------------|----------|----------------------------|----------------------|-----------------------------|
| (A) | (B) | | | (0 | 2) | | | (D) | (E) | (F) |
| Name and Title | Average | (de | | Posi | ition | than (| one : | Reportable | Reportable | Estimated |
| | hours per | box, | unle | ss pe | rson | ıs botl | h an | compensation | compensation | amount of |
| | week | | cer an | aac | recto | r/trus | tee) | from | from related | other |
| | (list any | recto | | | | | | the | organizations | compensation |
| | hours for | or di | 8 | | | sated | | organization | (W-2/1099-MISC) | from the |
| | related organizations | ustee | trust | | 8 | ubeu | | (W-2/1099-MISC) | | organization and related |
| | below | lalt | trona | | 를 출 | yee | _ | | | organizations |
| | line) | Individual trustee or director | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | | | 0.9 |
| (1) MADELEINE A. PICKENS | 60.00 | | | | | | | | | |
| CHAIRPERSON PRESIDENT | | X | | Х | | | | 0. | 0. | 0. |
| (2) MONTY HUMBLE | 4.00 | | | | | | | | | |
| TREASURER, DIRECTOR | | X | <u> </u> | X | | <u> </u> | <u> </u> | 0. | 0. | 0. |
| (3) DONALD DAVID | 0.50 | | | | | | | | _ | _ |
| SECRETARY, DIRECTOR | | Х | _ | Х | | | | 0. | 0. | 0. |
| | <u> </u> | | | | | | | İ | | |
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| | · | - | | - | - | - | | <u> </u> | | Form 990 (2012) |

Form **990** (2013)

| (| Officers, Directors, Trus (A) and title | (B) Average hours per week | (C) Position (do not check more that box, unless person is b officer and a director/tr | | | than | one h an | (D) Reportable compensation from | (E) Reportable compensation from related | | (F) Estimated amount of other | | | |
|--------------------------|---|--|--|-----------------------|----------|--------------|------------------------------|----------------------------------|--|-------------------------------|-------------------------------|------------------|--|----------------|
| | | (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 | | fr org and | pensa om the anizati d relati inizatie | e ion ed |
| | | | | | | | | | | | | | | |
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| | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| 1b Sub-total | nuation sheets to Part V | II. Section A | <u> </u> | <u> </u> | | <u> </u> | | <u> </u> | 0. | | 0. | | | 0. |
| d Total (add lines of in | 1b and 1c) ndividuals (including but r | | nose | liste | ed al | bove | e) wh | no re | 0. | 0,000 of reportab | 0. | | | 0. |
| | m the organization | | | | | | | | | | | | Yes | No |
| line 1a? If "Yes," o | ion list any former officer complete Schedule J for s I listed on line 1a, is the si | such individual | | | • | | | | | • • | | 3 | | х |
| and related organ | nizations greater than \$15 sted on line 1a receive or | 0,000? If "Yes, | " co | mple | ete S | Sche | edule | e J 1 | for such individual | • | | 4 | | X |
| rendered to the o | rganization? If "Yes," con | nplete Schedul | e J 1 | for s | uch | pers | son | | | | | 5 | | X |
| · | ole for your five highest co Report compensation for | - | | | | | | | | | npens | ation f | rom | |
| | (A) Name and business | address | N | INC | Ξ | | | | (B) Description of s | services | С | (Compe | | n |
| | - - | | | | | | | | | _ | | _ | - | |
| | <u></u> | | | | | | | - | | | | | | |
| | | | | | | | | | | | | | _ | |
| <u> </u> | | | | | | | | | | | | | | |
| | ndependent contractors (pensation from the organ | | ot li | mite | d to | | se li: | stec | d above) who received in | nore than | | | | |
| | | | | | | | | | | | | Form | 990 (| 2013 |

| | | Check if Schedule O conta | ains a response | or note to any line | e 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 |
| tt st | 1 a | Federated campaigns | 1a | | | | | |
| <u> </u> | b | Membership dues | 1b | | | | | |
| A, (| C | Fundraising events | 1c | | | | | |
| 트링 | d | Related organizations | 1d | | | | | |
| S.E | е | Government grants (contributi | ions) 1e | | | | | |
| Contributions, Gifts, Grants and Other Similar Amounts | f | All other contributions, gifts, grant | | | | | | |
| 혈취 | | similar amounts not included abov | ve 1f | 489,151. | | | | |
| 50 | g | Noncash contributions included in tines | 1a-1f \$ | 12,640. | | | | |
| <u>5 6</u> | h | 1 Total. Add lines 1a-1f | | ▶ | 489,151. | | | |
| | | | | Business Code | | | | |
| ice | 2 a | a | ··· | | *** | | | |
| e e | b | · | | | | | | |
| e a | C | | | | | | | |
| Re | d | d | | | - | - | | + |
| Program Service Revenue | e | | | | | | | |
| _ | | All other program service reve | enue | | | | | |
| | | Total. Add lines 2a-2f | duidondo intoro | not and | | | | |
| | 3 | Investment income (including | dividends, intere | est, and | | | | |
| | | other similar amounts) Income from investment of tax | v avamet band r | | | | | + |
| | 4 5 | Royalties | x-exempt bond p | noceeus - | | · · | | |
| | 3 | noyaliles | (ı) Real | (II) Personal | | - | | |
| | 6 a | a Gross rents | Willean | (ii) i cisonai | | | | |
| | | b Less rental expenses | | | | | | |
| | | c Rental income or (loss) | | | | | | |
| | | d Net rental income or (loss) | | • | | | | |
| | | a Gross amount from sales of | (i) Securities | (ii) Other | | | | |
| | | assets other than inventory | | 1 | | | | |
| | Ŀ | b Less cost or other basis | | | | | | |
| | | and sales expenses | | | | | | |
| | c | c Gain or (loss) | | | | | | |
| | c | d Net gain or (loss) | | | | | | |
| ne | 8 8 | a Gross income from fundraising | g events (not | | | | | T |
| an. | | ıncludıng \$ | of | | | | | |
| Other Reven | | contributions reported on line | | | | | | |
| ᇤ | | Part IV, line 18 | а | | | | | |
| 흎 | t | b Less direct expenses | b | | | | | |
| • | | c Net income or (loss) from fund | - | _ | | | | |
| | 9 8 | a Gross income from gaming ac | ctivities See | | | | | |
| | | Part IV, line 19 | а | | | | | |
| | 1 | b Less direct expenses | b | | | | | |
| | ı | c Net income or (loss) from gam | - | | | | <u> </u> | |
| | 10 a | a Gross sales of inventory, less | | 6 150 | | | | |
| | | and allowances | a | | | | | |
| | | b Less. cost of goods sold | b | 15,728. | 0 576 | 0 576 | | |
| | <u> </u> | c Net income or (loss) from sale | | P . | -9,576. | -9,576. | | |
| | - | Miscellaneous Revenu | | Business Code | 20 027 | 39,927. | | |
| | | a GRAZING RIGHTS | | 531390 | 39,927. | 39,341. | - | |
| | İ | b | | | | | | + |
| | · | d All other revenue | | | | | | |
| | 1 | d All other revenue e Total, Add lines 11a-11d | | | 39,927. | | | - |
| | 12 | Total revenue. See instructions. | • | | 519,502. | | 0 | . 0. |
| 33200 10-29 | | | | <u> </u> | | | | Form 990 (2013) |

94-3460086 Page 10

Form 990 (2013) C/O WARM CREE
Part IX Statement of Functional Expenses

| Secti | on 501(c)(3) and 501(c)(4) organizations must com | plete all columns. All oth | er organizations must co | mplete column (A) | |
|----------|--|----------------------------|------------------------------|-------------------------------------|----------------------------------|
| | Check if Schedule O contains a respon | | | <u> </u> | |
| | not include amounts reported on lines 6b, 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 United States See Part IV, line 21 | | | | |
| 2 | Grants and other assistance to individuals in | | <u></u> | - | |
| | the United States See Part IV, line 22 | | | | |
| 3 | Grants and other assistance to governments, | | | | |
| | organizations, and individuals outside the | i | | | |
| | United States See Part IV, lines 15 and 16 | İ | | | |
| 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 | 279,240. | 192,621. | 86,619. | |
| 8 | Pension plan accruals and contributions (include | 217,240. | | 00,013. | |
| o | section 401(k) and 403(b) employer contributions) | | | | |
| 9 | Other employee benefits | 3,445. | | 3,445. | |
| _ | Payroll taxes | 20,952. | 12,969. | 7,983. | • • |
| 10 11 | Fees for services (non-employees) | 20,332. | 12,505. | 7,303. | |
| | | | | • | |
| a | Management | 57,186. | 32,191. | 24,995. | |
| b | Legal | 37,100. | 36,1310 | 24,333. | |
| C | Accounting | | | | |
| d | Lobbying Professional fundrausing converse Con Part IV Iron 17 | | | | |
| e | Professional fundraising services See Part IV, line 17 | | | | |
| f | Investment management fees | | | | |
| g | Other. (If line 11g amount exceeds 10% of line 25, | 127 262 | 127 262 | | |
| | column (A) amount, list line 11g expenses on Sch O.) | 127,262. | 127,262. | | |
| 12 | Advertising and promotion | 39,725. | 39,725. | 12 510 | |
| 13 | Office expenses | 33,938. | 20,419. | 13,519. | |
| 14 | Information technology | 34,371. | 29,435. | 4,936. | |
| 15 | Royalties | 202 010 | 056 141 | 15.000 | |
| 16 | Occupancy | 293,210. | 276,141. | 17,069. | |
| 17 | Travel | 250,504. | 243,632. | 6,872. | |
| 18 | Payments of travel or entertainment expenses | | | | |
| | for any federal, state, or local public officials | 05.404 | 05.404 | | |
| 19 | Conferences, conventions, and meetings | 37,481. | 37,481. | | |
| 20 | Interest | 1,142. | | 1,142. | |
| 21 | Payments to affiliates | 044 540 | 044 | | |
| 22 | Depreciation, depletion, and amortization | 341,513. | 341,513. | | |
| 23 | Insurance | 70,230. | 63,120. | 7,110. | |
| 24 | Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) | | | | |
| а | HORSE SANTUARY EXPENSES | 217,782. | 217,782. | | |
| b | MUSTANG MONUMENT | 57,918. | 57,918. | | |
| c | RENT - PASTURE AGREEMEN | 37,500. | 37,500. | | |
| d | VIDEOS AND OTHER SOCIAL | 15,654. | 15,654. | | |
| | All other expenses | 4,468. | 4,468. | | |
| 25 | Total functional expenses. Add lines 1 through 24e | 1,923,521. | 1,749,831. | 173,690. | 0 |
| 26 | Joint costs. Complete this line only if the organization | _,,, | <u>,,</u> | | |
| | reported in column (B) joint costs from a combined | | | ŀ | |
| | educational campaign and fundraising solicitation | | | | |
| | Check here If following SOP 98-2 (ASC 958-720) | | | | |
| 22201 | 0 10-29-13 | | | | Form 990 (2013) |

| | Check if Schedule O contains a response or note to any line in this Part X | | | |
|------------------|---|--------------------------|----------|---------------------|
| | | (A) Beginning of year | | (B) End of year |
| 1 | Cash - non-interest-bearing | 800,148. | 1 | 320,632 |
| 2 | Savings and temporary cash investments | | 2 | |
| 3 | Pledges and grants receivable, net | _ | 3 | |
| 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 | | | |
| ł | 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 instr) Complete Part II of Sch L | | 6 | |
| 7 | Notes and loans receivable, net | | 7 | |
| 8 | Inventories for sale or use | 0. | 8 | 100,50 |
| 9 | Prepaid expenses and deferred charges | | 9 | |
| 10a | Land, buildings, and equipment cost or other | | . | |
| | basis Complete Part VI of Schedule D 10a 7,805,473. | | | |
| b | Less accumulated depreciation 10b 543,329. | 5,165,543. | 10c | 7,262,14 |
| 11 | Investments - publicly traded securities | | 11 | |
| 12 | Investments - other securities See Part IV, line 11 | 673,500. | 12 | 673,50 |
| 13 | Investments - program-related See Part IV, line 11 | | 13 | |
| 14 | Intangible assets | 31,693. | 14 | 37,45 |
| 15 | Other assets See Part IV, line 11 | 1,241. | 15 | 5,44 |
| 16 | Total assets. Add lines 1 through 15 (must equal line 34) | 6,672,125. | 16 | 8,399,67 |
| 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 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 | 2 224 524 | | 5 006 06 |
| | Complete Part II of Schedule L | 3,021,731. | 22 | 5,996,06 |
| 23 | Secured mortgages and notes payable to unrelated third parties | | 23 | 125 05 |
| 24 | Unsecured notes and loans payable to unrelated third parties | 0. | 24 | 135,85 |
| 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 | _ | | 21 20 |
| | Schedule D | 3,021,731. | 25 | 21,38 |
| 26 | Total liabilities. Add lines 17 through 25 | 3,041,731. | 26 | 6,153,30 |
| | Organizations that follow SFAS 117 (ASC 958), check here ▶ | | | |
| | complete lines 27 through 29, and lines 33 and 34. | | | |
| 27 | Unrestricted net assets | | 27 | |
| 28 | Temporarily restricted net assets | | 28 | |
| 29 | Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here | | 29 | |
| | | | | |
| 20 | and complete lines 30 through 34. | 0. | 20 | |
| 30 | Capital stock or trust principal, or current funds | 3,650,394. | | 2,246,37 |
| 31 | Paid-in or capital surplus, or land, building, or equipment fund | 3,650,394. | 31 | 2,240,37 |
| 32 | Retained earnings, endowment, accumulated income, or other funds Total net assets or fund balances | 3,650,394. | 33 | 2,246,37 |
| 33 | Total liabilities and net assets/fund balances | 6,672,125. | | 8,399,67 |
| ابن ا | Total habilities and not associationa balances | <u> </u> | <u> </u> | Form 990 (20 |

| Form | 990 (2013) C/O WARM CREEK RANCH | <u>94-3</u> | 460086 | Pag | <u>e 12</u> |
|------|---|-------------|--------|---------------|-------------|
| Pai | t 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 | | 5,50 | |
| 2 | Total expenses (must equal Part IX, column (A), line 25) | 2 | 1,923 | | |
| 3 | Revenue less expenses. Subtract line 2 from line 1 | 3 | -1,404 | | |
| 4 | Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) | 4 | 3,650 |),39 | <u> 34.</u> |
| 5 | Net unrealized gains (losses) on investments | 5 | | | |
| 6 | Donated services and use of facilities | 6 | | | |
| 7 | Investment expenses | 7 | | | |
| 8 | Prior period adjustments . | 8 | | | |
| 9 | Other changes in net assets or fund balances (explain in Schedule O) | 9 | | | 0. |
| 10 | Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, | | | | |
| | column (B)) | 10 | 2,246 | 5 <u>,3</u> ' | <u>75.</u> |
| Pa | t XII Financial Statements and Reporting | | | | ··· |
| | Check if Schedule O contains a response or note to any line in this Part XII | | | | <u>Ш</u> |
| | | | | Yes | No |
| 1 | Accounting method used to prepare the Form 990. X Cash Accrual Other | | _ | | |
| | If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule | 0 | | | |
| 2a | Were the organization's financial statements compiled or reviewed by an independent accountant? | | 2a | | <u>X</u> |
| | If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewe | d on a | | | |
| | separate basis, consolidated basis, or both | | | | |
| | Separate basis Consolidated basis Both consolidated and separate basis | | | į | |
| b | Were the organization's financial statements audited by an independent accountant? | | 2b | | <u>X</u> |
| | If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separa | te basis, | | | |
| | consolidated basis, or both | | | | |
| | Separate basis Consolidated basis Both consolidated and separate basis | | | | |
| C | If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the | ne audıt, | 1 1 | | |
| | review, or compilation of its financial statements and selection of an independent accountant? | | 2c | | |
| | If the organization changed either its oversight process or selection process during the tax year, explain in Sch | edule O. | | Į | |
| За | As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the S | ngle Audi | t | | ı |
| | Act and OMB Circular A-133? | | 3a | | <u>X</u> |
| b | If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required | ired audit | : | | ı |
| | or audits, explain why in Schedule O and describe any steps taken to undergo such audits | | 3b | | |

332012 10-29-13

SCHEDULE A

(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

OMB No 1545-0047

Open to Public

Department of the Treasury Inspection Internal Revenue Service ▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. Employer identification number Name of the organization SAVING AMERICA'S MUSTANGS 94-3460086 C/O WARM CREEK RANCH 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) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 2 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 X 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) 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.) An organization organized and operated exclusively to test for public safety See section 509(a)(4). 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 L Type I c ____ Type III - Functionally integrated d ____ Type III - Non-functionally integrated **b** Type II J By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, Yes No the governing body of the supported organization? 11g(ı) (ii) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) h Provide the following information about the supported organization(s) (vi) Is the organization in col. (iv) is the organization (v) Did you notify the (i) Name of supported (iii) Type of organization (vii) Amount of monetary (ii) EIN in col. (i) listed in your organization in col. (described on lines 1-9 (i) organized in the organization support laovernina document? (i) of your support? above or IRC section U.S.? (see instructions)) Yes

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

Schedule A (Form 990 or 990-EZ) 2013

Schedule A (Form 990 or 990-EZ) 2013 C/O WARM CREEK RANCH 94-34600 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 | tion A. Public Support | , | | | ·· | | |
|------|--|-----------------------------|-----------------------|---------------------------|----------------------|----------------------|------------------|
| | | (=) 2000 | (b) 2010 | (a) 2011 | (4) 2012 | (a) 2012 | (6) Total |
| | 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") | 544,054. | 3837069. | 551,454. | 4414249. | 489,151. | 9835977. |
| 2 | Tax revenues levied for the organ- | 311/0311 | 30370031 | 002/1011 | | | |
| _ | ization'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 | 544,054. | 3837069. | 551,454. | 4414249. | 489,151. | 9835977. |
| 5 | The portion of total contributions | i 1 | | | | | |
| | 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) | | | | | | <u>8571559.</u> |
| | Public support. Subtract line 5 from line 4 | | | | | | <u> 1264418.</u> |
| Sec | tion B. Total Support | | | | | | |
| Cale | ndar year (or fiscal year beginning in) 🕨 | (a) 2009 | (b) 2010 | (c) 2011 | (d) 2012 | (e) 2013 | (f) Total |
| 7 | Amounts from line 4 | 544,054. | 3837069. | 551,454. | 4414249. | 489,151. | <u>9835977.</u> |
| 8 | Gross income from interest, | | | ! | | | |
| | dividends, payments received on | | | | | | |
| | securities loans, rents, royalties | | | | | | |
| | and income from similar sources | | | | | | <u>.</u> . |
| 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 | | | | | | <u>9835977.</u> |
| 12 | Gross receipts from related activities, | etc (see instruction | ons) | | | 12 | |
| 13 | First five years. If the Form 990 is for | r the organization's | s first, second, thir | d, fourth, or fifth ta | ax year as a sectio | n 501(c)(3) | |
| | organization, check this box and stop | here | | | | | <u> </u> |
| Sec | ction C. Computation of Publ | ic Support Pe | rcentage | | | , -, | |
| 14 | Public support percentage for 2013 (| line 6, column (f) d | ivided by line 11, o | column (f)) | | 14 | % |
| 15 | Public support percentage from 2012 | Schedule A, Part | II, line 14 | | | _15 | <u>%</u> |
| 16a | 33 1/3% support test - 2013. If the | | | | 14 is 33 1/3% or r | nore, check this bo | x and |
| | stop here. The organization qualifies | | | | | | ▶□ |
| b | 33 1/3% support test - 2012, If the | organization did no | ot check a box on | line 13 or 16a, and | l line 15 is 33 1/3% | or more, check th | nis box |
| | and stop here. The organization qua | lifies as a publicly : | supported organiz | ation | | | ▶□ |
| 17a | 10% -facts-and-circumstances tes | t - 2013. If the org | anization did not o | check a box on line | e 13, 16a, or 16b, | and line 14 is 10% | or more, |
| | and if the organization meets the "fac | cts-and-circumstan | ces" test, check t | his box and stop h | nere. Explain in Pa | rt IV how the orgar | nization |
| | meets the "facts-and-circumstances" | test The organiza | ition qualifies as a | publicly supported | d organization | | ▶∟ |
| t | 10% -facts-and-circumstances tes | t - 2012. If the org | anization did not d | check a box on line | e 13, 16a, 16b, or | 17a, and line 15 is | 10% or |
| | more, and if the organization meets t | he "facts-and-circu | ımstances" test, c | heck this box and | stop here. Explair | n in Part IV how the | |
| | organization meets the "facts-and-cire | cumstances" test | The organization of | qualifies as a publi | cly supported org | anization | ▶□ |
| 18 | Private foundation. If the organization | on did not check a | box on line 13, 16 | a, 16b, 17a, or 17 | b, check this box a | and see instruction | s 🕨 |
| | | | | | Cab | dula A /Form 990 | 000 E71 0040 |

Schedule A (Form 990 or 990 EZ) 2013 Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II If the organization fails to

| Section A. Public Support alendar year (or fiscal year beginning in) 1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") 2 Cross receives from administration. | <u> </u> |
|---|--------------|
| 1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") | · |
| membership fees received (Do not include any "unusual grants") | |
| include any "unusual grants ") | |
| | |
| 2 Gross receipts from admissions, | |
| merchandise sold or services per- | |
| formed, or facilities fumished in | |
| any activity that is related to the organization's tax-exempt purpose | |
| 3 Gross receipts from activities that | |
| are not an unrelated trade or bus- | |
| iness under section 513 | |
| 4 Tax revenues levied for the organ- | |
| ization'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 | |
| 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) | |
| Section B. Total Support | |
| alendar year (or fiscal year beginning in) ▶ (a) 2009 (b) 2010 (c) 2011 (d) 2012 (e) 2013 (f) Tota | |
| 9 Amounts from line 6 | |
| 10a Gross income from interest, dividends, payments received on | |
| secunties loans, rents, royalties | |
| and income from similar sources | |
| b Unrelated business taxable income | |
| (less section 511 taxes) from businesses | |
| acquired after June 30, 1975 | |
| c Add lines 10a and 10b 11 Net income from unrelated business | |
| activities not included in line 10b, | |
| whether or not the business is | |
| regularly carried on 12 Other income Do not include gain | |
| or loss from the sale of capital | |
| assets (Explain in Part IV) | |
| 13 Total support. (Add lines 9, 10c, 11, and 12) 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)) | % |
| 16 Public support percentage from 2012 Schedule A, Part III, line 15 | % |
| Section D. Computation of Investment Income Percentage | |
| 17 Investment income percentage for 2013 (line 10c, column (f) divided by line 13, column (f)) | % |
| 18 Investment income percentage from 2012 Schedule A, Part III, line 17 | % |
| 19a 33 1/3% support tests - 2013. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not | |
| more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization | |
| b 33 1/3% support tests - 2012. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and | |
| line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization | |
| 20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions | $\cdot \Box$ |

| Schedule A (Form 990 or 990 EZ) 2013 C/O WARM CREEK RANCH 94-3460086 Page 4 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 A, PART II, SECTION B, LINE 13: |
| THE ORGANIZATION HAS BEEN WORKING WITH THE BUREAU OF LAND |
| MANAGEMENT (BLM) IN AN ATTEMPT TO PLACE MUSTANGS GATHERED FROM WESTERN |
| PUBLIC RANGELANDS INTO A PRIVATE SANCTUARY. THE BLM HAS COMPLETED THE |
| NORTHEAST NEVADA WILD HORSE ECO-SANCTUARY RESOURCE MANAGEMENT PLAN |
| AMENDMENT AND ENVIRONMENTAL IMPACT STATEMENT SCOPING SUMMARY REPORT. THE |
| NORTHEAST NEVADA WILD HORSE ECO-SANCTUARY PROPOSAL IS TO CREATE A WILD |
| HORSE ECO-SANTUARY OF A NON-REPRODUCTIVE HERD ON MOST OF THE EXISTING |
| SPRUCE GRAZING ALLOTMENT, INCLUDING ABOUT 14,000 ACRES OF PRIVATE LAND AND |
| 508,000 ACRES OF PUBLIC LAND. AS OF THE END OF 2014, THE BLM HAS DECIDED |
| NOT TO PROCEED WITH THE PROPOSED PLAN. IN ADDITION, THE ORGANIZATION |
| MAINTAINS A CONTINUOUS, SUBSTANTIAL FUND-RAISING PROGRAM THROUGH ITS |
| WIDELY CIRCULATED INTERNET WEBSITE AND THROUGH EMAILED PUBLIC INFORMATION |
| AND EDUCATIONAL VIDEOS. THE CIRCULATION OF THESE MATERIALS CURRENTLY |
| REACHES THOUSANDS OF PEOPLE AND HAS WIDESPREAD VISIBILITY AND SUPPORT. |
| |
| AS OF JANUARY 1, 2014, THE ORGANIZATION QUALIFIED AS A PRIVATE OPERATING |
| FOUNDATION UNDER SECTION 4942(J)(3) OF THE CODE. SEE ATTACHED INTERNAL |
| REVENUE SERVICE APPROVAL LETTER. |
| |
| THE ORGANIZATION ALSO HAS AN ADVISORY BOARD WHICH CONSISTS OF MANY |
| RECOGNIZED CELEBRITIES AND WHICH INCLUDES LEADERS FROM THE BUSINESS, |
| CHARITABLE GIVING, ENTERTAINMENT, FASHION, AND PROFESSIONAL SPORTS |
| ENDEAVORS. |
| |
| |
| |
| |

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.

2013
Open to Public Inspection

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

Inspection

| Nam | e of the organization SAVING AMERICA'S M C/O WARM CREEK RAN | | Em | ployer identification number 94-3460086 |
|-----|---|--|--------------|---|
| Par | | | or Accou | |
| | organization answered "Yes" to Form 990, Part IV, lin | | | arrae Compicto II tilo |
| | organization anowered Too to Form 500, Farety, in | (a) Donor advised funds | (b) Fur | nds 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 | d funde | |
| 3 | are the organization's property, subject to the organization's | _ | a lulius | Yes No |
| 6 | Did the organization inform all grantees, donors, and donor a | | sed only | LI Tes LII NO |
| U | for chantable purposes and not for the benefit of the donor of | 9 9 | • | |
| | impermissible private benefit? | or donor advisor, or for any other purpose of | omeming | Yes No |
| Pai | | ganization answered "Yes" to Form 990. Pa | rt IV line 7 | i les live |
| 1 | Purpose(s) of conservation easements held by the organizat | | , | |
| • | Preservation of land for public use (e.g., recreation or e | | nically imp | ortant land area |
| | Protection of natural habitat | Preservation of a certific | | |
| | Preservation of open space | Troopivation of a continu | 00111010110 | Straditare |
| 2 | Complete lines 2a through 2d if the organization held a quali | fied conservation contribution in the form of | a conserv | ation easement on the last |
| - | day of the tax year | | u 001100. 1 | |
| | au) or the tax your | | | Held at the End of the Tax Year |
| а | Total number of conservation easements | | 2a | Troid de dio End of dio Tax Todi |
| b | Total acreage restricted by conservation easements | | 2b | |
| c | Number of conservation easements on a certified historic sti | ructure included in (a) | 2c | |
| d | Number of conservation easements included in (c) acquired | ` ' | | |
| ŭ | listed in the National Register | and of 17700, and not on a motorio obligation | 2d | |
| 3 | Number of conservation easements modified, transferred, re | eleased, extinguished, or terminated by the o | | n during the tax |
| • | year > | | . 3 | |
| 4 | Number of states where property subject to conservation ea | asement is located > | | |
| 5 | Does the organization have a written policy regarding the pe | | | |
| | violations, and enforcement of the conservation easements | | | Yes No |
| 6 | Staff and volunteer hours devoted to monitoring, inspecting, | | ing the yea | |
| 7 | Amount of expenses incurred in monitoring, inspecting, and | _ | | |
| 8 | Does each conservation easement reported on line 2(d) abo | | ·= | |
| | and section 170(h)(4)(B)(ii)? | | | Yes No |
| 9 | In Part XIII, describe how the organization reports conservat | tion easements in its revenue and expense s | statement, | and balance sheet, and |
| | include, if applicable, the text of the footnote to the organiza | ation's financial statements that describes th | ne organiza | tion's accounting for |
| | conservation easements | | | |
| Pa | rt III Organizations Maintaining Collections o | of Art, Historical Treasures, or Otl | ner Simi | lar Assets. |
| | Complete if the organization answered "Yes" to Form | 990, Part IV, line 8 | | |
| 1a | If the organization elected, as permitted under SFAS 116 (A | SC 958), not to report in its revenue stateme | ent and bal | ance sheet works of art, |
| | historical treasures, or other similar assets held for public ex | thibition, education, or research in furtherand | ce of public | service, provide, in Part XIII, |
| | the text of the footnote to its financial statements that descri | ribes these items | | |
| b | If the organization elected, as permitted under SFAS 116 (A | SC 958), to report in its revenue statement a | and balanc | e sheet works of art, historical |
| | treasures, or other similar assets held for public exhibition, e | education, or research in furtherance of publ | ic 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 tre | easures, or other similar assets for financial (| | |
| | the following amounts required to be reported under SFAS | 116 (ASC 958) relating to these items | | |
| а | Revenues included in Form 990, Part VIII, line 1 | | > | \$ |
| b | Assets included in Form 990. Part X | | • | \$ |

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. $^{332051}_{09\text{-}25\text{-}13}$

Schedule D (Form 990) 2013

| | chedule D (Form 990) 2013 C/O WARM CREEK RANCH 94-3460086 Page 2 | | | | | | | | | |
|----------|---|-----------------------|--------------|----------------|----------------|------------|--------------|----------------|--------------------|----------------|
| Par | t III Organizations Maintaining Co | ollections of Ar | t, Hist | orical Tre | easures, o | r Othe | er Simil | ar Asse | ts (continu | ed) |
| 3 | 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) | | | | | | | | | |
| а | Public exhibition | d | اليا | Loan or excl | nange progra | ms | | | | |
| b | Scholarly research | е | | Other | | | | | | |
| С | Preservation for future generations | | | | | | | | | |
| 4 | Provide a description of the organization's co | llections and explair | n how th | ey further th | ne organizatio | on's exe | mpt purp | ose in Parl | XIII | |
| 5 | During the year, did the organization solicit or | receive donations | of art, his | storical treas | sures, or othe | er sımılaı | assets | | _ | |
| _ | to be sold to raise funds rather than to be ma | intained as part of t | he orgar | nization's co | llection? | | | | Yes | No_ |
| Par | t IV Escrow and Custodial Arrang | | ete if the | organization | n answered " | Yes" to | Form 990 | , Part IV, I | ine 9, or | |
| | reported an amount on Form 990, Part | t X, line 21 | | | | | | | | |
| 1a | Is the organization an agent, trustee, custodia | an or other intermed | liary for | contribution | s or other as: | sets not | ıncluded | | - | |
| | on Form 990, Part X? | | | | | | | | Yes | └ No |
| b | If "Yes," explain the arrangement in Part XIII a | and complete the fo | llowing t | able | | | | | | |
| | | | | | | | | | Amount | |
| С | Beginning balance | | | | | | 1c | | | |
| d | Additions during the year | | | | | | 1d | | | |
| е | Distributions during the year | | | | | | 1e | | | |
| f | Ending balance | | | | | | 1f | | | |
| 2a | Did the organization include an amount on Fo | orm 990, Part X, line | 217 | | | | | | Yes | ∐_ No |
| | If "Yes," explain the arrangement in Part XIII. | | | | | | | | | |
| Par | t V Endowment Funds. Complete if | the organization an | swered | "Yes" to Fo | rm 990, Part | | | | I | |
| | | (a) Current year | (b) P | rior year | (c) Two year | s back | (d) Three | years back | (e) Four y | ears back |
| 1a | Beginning of year balance | | | | | | | | | |
| b | Contributions | | <u> </u> | | | | | | | |
| С | Net investment earnings, gains, and losses | | | | | | | | | |
| d | Grants or scholarships | _ | | | | <u>i</u> | | | | |
| е | Other expenditures for facilities | | | | | l | | | ļ | |
| | and programs | | | | | | | | | |
| f | Administrative expenses | | | | | - | | | | |
| g | End of year balance | | | | | | | | | |
| 2 | Provide the estimated percentage of the curr | ent year end baland | e (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 shou | • | | | | | | | | |
| 3a | Are there endowment funds not in the posse | ssion of the organiz | ation tha | at are held a | nd administe | red for t | he organi | zation | _ | |
| | by | | | | | | | | | res No |
| | (i) unrelated organizations | | | | | | | | 3a(i) | |
| | (ii) related organizations | | | | | | | | 3a(ii) | |
| b | (), | • | | | | | | | 3b | |
| 4 | Describe in Part XIII the intended uses of the | | owment | funds | | | | | | |
| Pai | t VI Land, Buildings, and Equipm | | | | | | | | | |
| | Complete if the organization answered | | | | | | | <u>, i</u> | | |
| | Description of property | (a) Cost or o | | 1 '' | or other | ٠, | ccumulat | | (d) Book | value |
| | | basis (investi | nent) | - | (other) | ae | preciation | | 0 100 | 000 |
| 1a | Land | | | | 0,000. | - | 202 | 77 | | ,000. |
| þ | Buildings | | | <u> </u> | 3,779. | | <u>299,2</u> | 11. | <u>∠,534</u> | <u>,502.</u> |
| C | Leasehold improvements | | | 1 70 | 2 000 | | 244 2 | <u> </u> | 1 520 | 754 |
| d | Equipment | | _ | Y | 2,806. | | 244,0 | 34. | | ,754. |
| <u>е</u> | ·· · · · · · · · · · · · · · · · · · · | | | | 8,888. | | | | | ,888. ,144. |
| ıota | Add lines 1a through 1e (Column (d) must e | quai rorm 990, Part | A, COIUI | un (७), Ilne 🛚 | ι U(C).) | | | | 1,404 | <u>, 144.</u> |

Schedule D (Form 990) 2013

| | ERICA 5 MUSIA | NGS | 04 0460006 |
|--|----------------------------|------------------------------------|----------------------------------|
| | CREEK RANCH | | 94-3460086 Page 3 |
| Part VII Investments - Other Securities | | | |
| Complete if the organization answered "Y | | | |
| (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) CLEAN ENERGY STOCK | 673,50 | 0. COST | |
| (B) | | | |
| (C) | | | |
| (D) | | | |
| (E) | | | |
| (F) | | | |
| (G) | | | |
| (H) | | | |
| Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12. | 673,50 | 0. | |
| Part VIII Investments - Program Related | | | |
| Complete if the organization answered " | | ine 11c. See Form 990. Part X. lin | e 13 |
| (a) Description of investment | (b) Book value | | Cost or end-of-year market value |
| (1) | ,, | | • |
| | | | |
| (2) | | | |
| (3) | | | |
| (4) | | | |
| (5) | | | |
| (6) | | | |
| (7) | | | |
| (8) | | | |
| (9) | | | |
| Total (Col. (b) must equal Form 990, Part X, col. (B) line 13 Part IX Other Assets. |) P 1 | 1 | |
| | /# +- E 000 D+ N/ I | | . 15 |
| Complete if the organization answered " | | ine 11d See Form 990, Part X, III | (b) Book value |
| | (a) Description | | (b) Book value |
| (1) | | | |
| (2) | | | |
| (3) | | | |
| (4) | | | |
| (5) | | · - | |
| (6) | | | |
| (7) | | | |
| (8) | | | |
| (9) | | | |
| Total. (Column (b) must equal Form 990, Part X, col (l | 3) line 15) | | _ |
| Part X Other Liabilities. | | | |
| Complete if the organization answered " | Yes" to Form 990, Part IV, | | rt X, line 25 |
| 1. (a) Description of liability | | (b) Book value | |
| (1) Federal income taxes | | | |
| (2) SECURITY DEPOSITS | | 4,200. | |
| (3) CREDIT CARD PAYABLES | | 17,180. | |
| (4) | | | |
| (5) | | | |
| (6) | | | |
| (7) | | | |
| (8) | | | |

332053 09-25-13

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

Schedule D (Form 990) 2013

21,380.

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

332054 09-25-13

SCHEDULE L

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

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.

OMB No 1545-0047

2013

Open To Public Inspection

| Name of the organization SAVING AMERIC. C/O WARM CREE | | | GS | | | - | identi1 6008 | fication 36 | num | nber |
|---|---|------------------|--------------------------|-----------------------|------------|----------|-------------------|----------------|--------|-------|
| Part I Excess Benefit Transactions (se | | | section 501(c)(4) orga | inizations only). | | | | | | |
| Complete if the organization answered "Y | | | | , or Form 990-EZ, Pa | art V, lin | e 401 | <u> </u> | 1 | | |
| | (b) Relationship between disqualified person and organization | | |) Description of tran | saction | | | (d) Corrected? | | |
| person | and organiza | ation | (0) | , occompany, or area. | | | | Yes | | No |
| | | | | | | | | + | | |
| | | | | | | | | ļ | - | |
| | | | | | | | | | - | |
| | | | | | | | • | - | | |
| | | | | | | | | | + | |
| 2 Enter the amount of tax incurred by the organization | on monogoro | or dice | ruplified persons duri | ing the year under | | | | | | |
| section 4958 | ion managers | or disc | qualilled persons duri | ing the year under | | . 4 | | | | |
| 3 Enter the amount of tax, if any, on line 2, above, re | aimhuread hy | the or | nanization | | | | | | | |
| 3 Enter the amount of tax, if any, or line 2, above, if | elilibursed by | ine or | gariization | | | Ψ_ | | | | |
| Part II Loans to and/or From Intereste | d Persons | · · | | | | | | | | |
| Complete if the organization answered "Y | es" on Form 9 | 990-EZ | . Part V. line 38a or F | orm 990. Part IV. lin | e 26. or | r if the | e orgai | nızatıon | 1 | |
| reported an amount on Form 990, Part X, | | | , | ,,,,,,,, | , - | | | | | |
| (a) Name of (b) Relationship (c) Pu | rpose (d) Lo | an to or | (e) Original | (f) Balance due | (g) li | ,, , | (h) App by boa | | (ı) Wr | ıtten |
| interested person with organization of k | | n the zation? | principal amount | ., | defau | lt? | commi | ittee? | green | nent? |
| | То | From | | | Yes | No | Yes | No Y | res | No |
| MADELEINE A. PI PROV | IDE X | | 100,000. | 100,000. | | Х | Х | | х | |
| MADELEINE A. PI PROV | IDE X | | 25,000. | 25,000. | | Х | Х | | x | |
| MADELEINE A. PI PROV | IDE X | | 100,000. | 100,000. | | X | Х | | X | |
| MADELEINE A. PI PROV | | | 65,000. | <u>65,000.</u> | | X | Х | | X | |
| MADELEINE A. PI PROV | | <u> </u> | 100,000. | 100,000. | | X | X | | X | |
| MADELEINE A. PI PROV | | | 90,000. | 90,000. | | X | Х | | X | |
| MADELEINE A. PI PROV | | | 35,000. | 35,000. | | Х | Х | | X | |
| MADELEINE A. PI PROV | | | 116,000. | 116,000. | <u> </u> | Х | Х | | X | |
| MADELEINE A. PI PROV | | | 20,000. | 20,000. | | X | X | | X | |
| MADELEINE A. PI PROV | IDE X | | 70,000. | 70,000. | | X | х | | X | |
| Total | | al Da | | <u>5,996,069.</u> | | | | | | |
| Part III Grants or Assistance Benefiting | - | | | | | | | | | |
| Complete if the organization answered "Y | | | | (0.7 | | | | D | | _ |
| | ionship betwe ted person ar | | (c) Amount of assistance | (d) Type assistan | | | ٠, | Purpos | | |
| | organization | iu | 200,014,100 | assistan | | | _ | | | |
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LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule L (Form 990 or 990-EZ) 2013

SEE PART V FOR CONTINUATIONS

94-3460086 Page 2 Schedule'L (Form 990 or 990-EZ) 2013 C/O WARM CREEK RANCH Part IV Business Transactions Involving Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c (e) Sharing of (a) Name of interested person (b) Relationship between interested (c) Amount of (d) Description of organization's person and the organization transaction transaction revenues? Yes No 37,500.PASTURE AGR MADELEINE PICKENS 99.9% LIMITED PARTN Х Part V | Supplemental Information Provide additional information for responses to questions on Schedule L (see instructions). SCHEDULE L, PART II, LOANS TO AND FROM INTERESTED PERSONS: (A) NAME OF PERSON: MADELEINE A. PICKENS (C) PURPOSE OF LOAN: PROVIDE FUNDS TO USE IN THE FURTHERANCE OF ITS CHARITABLE ACTIVITIES. (D) LOAN TO OR FROM ORGANIZATION? = TO (E) ORIGINAL PRINCIPAL AMOUNT \$ 100,000. (F) BALANCE DUE \$ 100,000. (G) LOAN IN DEFAULT? = NO (H) APPROVED BY BOARD OR COMMITTEE? = YES (I) WRITTEN AGREEMENT? = YES (A) NAME OF PERSON: MADELEINE A. PICKENS (C) PURPOSE OF LOAN: PROVIDE FUNDS TO USE IN THE FURTHERANCE OF ITS CHARITABLE ACTIVITIES. (D) LOAN TO OR FROM ORGANIZATION? = TO (E) ORIGINAL PRINCIPAL AMOUNT \$ 25,000. (F) BALANCE DUE \$ 25,000. (G) LOAN IN DEFAULT? = NO APPROVED BY BOARD OR COMMITTEE? = YES

(I) WRITTEN AGREEMENT? = YES

Schedule L (Form 990 or 990-EZ) 2013

332132 09-25-13

94-3460086 Page 2 Schedule L (Form 990 or 990-EZ) C/O WARM CREEK RANCH Part V Supplemental Information Complete this part to provide additional information for responses to questions on Schedule L (see instructions) (A) NAME OF PERSON: MADELEINE A. PICKENS (C) PURPOSE OF LOAN: PROVIDE FUNDS TO USE IN THE FURTHERANCE OF ITS CHARITABLE ACTIVITIES. (D) LOAN TO OR FROM ORGANIZATION? = TO (E) ORIGINAL PRINCIPAL AMOUNT \$ 100,000. (F) BALANCE DUE \$ 100,000. (G) LOAN IN DEFAULT? = NO (H) APPROVED BY BOARD OR COMMITTEE? = YES (I) WRITTEN AGREEMENT? = YES (A) NAME OF PERSON: MADELEINE A. PICKENS (C) PURPOSE OF LOAN: PROVIDE FUNDS TO USE IN THE FURTHERANCE OF ITS CHARITABLE ACTIVITIES. (D) LOAN TO OR FROM ORGANIZATION? = TO (E) ORIGINAL PRINCIPAL AMOUNT \$ 65,000. (F) BALANCE DUE \$ 65,000. (G) LOAN IN DEFAULT? = NO (H) APPROVED BY BOARD OR COMMITTEE? = YES (I) WRITTEN AGREEMENT? = YES (A) NAME OF PERSON: MADELEINE A. PICKENS (C) PURPOSE OF LOAN: PROVIDE FUNDS TO USE IN THE FURTHERANCE OF ITS CHARITABLE ACTIVITIES. (D) LOAN TO OR FROM ORGANIZATION? = TO (E) ORIGINAL PRINCIPAL AMOUNT \$ 100,000. (F) BALANCE DUE \$ 100,000. (G) LOAN IN DEFAULT? = NO 332461 05-01-13 Schedule L (Form 990 or 990-EZ)

C/O WARM CREEK RANCH 94-3460086 Page 2 Schedule L (Form 990 or 990-EZ) Part V | Supplemental Information Complete this part to provide additional information for responses to questions on Schedule L (see instructions) (H) APPROVED BY BOARD OR COMMITTEE? = YES (I) WRITTEN AGREEMENT? = YES (A) NAME OF PERSON: MADELEINE A. PICKENS (C) PURPOSE OF LOAN: PROVIDE FUNDS TO USE IN THE FURTHERANCE OF ITS CHARITABLE ACTIVITIES. (D) LOAN TO OR FROM ORGANIZATION? = TO (E) ORIGINAL PRINCIPAL AMOUNT \$ 90,000. (F) BALANCE DUE \$ 90,000. (G) LOAN IN DEFAULT? = NO (H) APPROVED BY BOARD OR COMMITTEE? = YES (I) WRITTEN AGREEMENT? = YES (A) NAME OF PERSON: MADELEINE A. PICKENS (C) PURPOSE OF LOAN: PROVIDE FUNDS TO USE IN THE FURTHERANCE OF ITS CHARITABLE ACTIVITIES. (D) LOAN TO OR FROM ORGANIZATION? = TO (E) ORIGINAL PRINCIPAL AMOUNT \$ 35,000. (F) BALANCE DUE \$ 35,000. (G) LOAN IN DEFAULT? = NO (H) APPROVED BY BOARD OR COMMITTEE? = YES (I) WRITTEN AGREEMENT? = YES (A) NAME OF PERSON: MADELEINE A. PICKENS (C) PURPOSE OF LOAN: PROVIDE FUNDS TO USE IN THE FURTHERANCE OF ITS CHARITABLE ACTIVITIES. (D) LOAN TO OR FROM ORGANIZATION? = TO

Schedule L (Form 990 or 990-EZ)

332461 05-01-13

| Part V Supplemental Information 94-3460086 Page 2 |
|--|
| Complete this part to provide additional information for responses to questions on Schedule L (see instructions) |
| (E) ORIGINAL PRINCIPAL AMOUNT \$ 116,000. (F) BALANCE DUE \$ 116,000. |
| (G) LOAN IN DEFAULT? = NO |
| (H) APPROVED BY BOARD OR COMMITTEE? = YES |
| (I) WRITTEN AGREEMENT? = YES |
| (A) NAME OF PERSON: MADELEINE A. PICKENS |
| (C) PURPOSE OF LOAN: PROVIDE FUNDS TO USE IN THE FURTHERANCE OF ITS |
| CHARITABLE ACTIVITIES. |
| (D) LOAN TO OR FROM ORGANIZATION? = TO |
| (E) ORIGINAL PRINCIPAL AMOUNT \$ 20,000. (F) BALANCE DUE \$ 20,000. |
| (G) LOAN IN DEFAULT? = NO |
| (H) APPROVED BY BOARD OR COMMITTEE? = YES |
| (I) WRITTEN AGREEMENT? = YES |
| |
| (A) NAME OF PERSON: MADELEINE A. PICKENS |
| |
| (C) PURPOSE OF LOAN: PROVIDE FUNDS TO USE IN THE FURTHERANCE OF ITS |
| CHARITABLE ACTIVITIES. |
| (D) LOAN TO OR FROM ORGANIZATION? = TO |
| (E) ORIGINAL PRINCIPAL AMOUNT \$ 70,000. (F) BALANCE DUE \$ 70,000. |
| (G) LOAN IN DEFAULT? = NO |
| (H) APPROVED BY BOARD OR COMMITTEE? = YES |
| (I) WRITTEN AGREEMENT? = YES |
| |
| (A) NAME OF PERSON: MADELEINE A. PICKENS |
| |

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(C) PURPOSE OF LOAN: PROVIDE FUNDS TO USE IN THE FURTHERANCE OF ITS

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| Schedule L (Form 990 or 990-EZ) C/O WARM CREEK RANCH | 94-3460086 Page 2 |
|--|-------------------|
| Part V Supplemental Information | |
| Complete this part to provide additional information for responses to questions on Schedule L (see | nstructions) |
| CHARITABLE ACTIVITIES. | |
| (D) LOAN TO OR FROM ORGANIZATION? = TO | |
| (E) ORIGINAL PRINCIPAL AMOUNT \$ 60,000. (F) BALANCE DUE | \$ 60,000. |
| (G) LOAN IN DEFAULT? = NO | |
| (H) APPROVED BY BOARD OR COMMITTEE? = YES | |
| (I) WRITTEN AGREEMENT? = YES | |
| (1) WRITTEN AGREEMENT: - TES | |
| | |
| (A) NAME OF PERSON: MADELEINE A. PICKENS | |
| | |
| (C) PURPOSE OF LOAN: PROVIDE FUNDS TO USE IN THE FURTHER | ANCE OF ITS |
| | |
| CHARITABLE ACTIVITIES. | |
| (D) LOAN TO OR FROM ORGANIZATION? = TO | |
| (E) ORIGINAL PRINCIPAL AMOUNT \$ 95,000. (F) BALANCE DUE | \$ 95,000. |
| (G) LOAN IN DEFAULT? = NO | |
| (H) APPROVED BY BOARD OR COMMITTEE? = YES | |
| | |
| (I) WRITTEN AGREEMENT? = YES | |
| | |
| (A) NAME OF PERSON: MADELEINE A. PICKENS | |
| | |
| (C) PURPOSE OF LOAN: PROVIDE FUNDS TO USE IN THE FURTHER | ANCE OF ITS |
| CHARITABLE ACTIVITIES. | |
| | |
| (D) LOAN TO OR FROM ORGANIZATION? = TO | |
| (E) ORIGINAL PRINCIPAL AMOUNT \$ 25,000. (F) BALANCE DUE | \$ 25,000. |
| (G) LOAN IN DEFAULT? = NO | |
| (H) APPROVED BY BOARD OR COMMITTEE? = YES | |
| (I) WRITTEN AGREEMENT? = YES | |
| | |
| | |

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16031113 739847 PAU113

(A) NAME OF PERSON: MADELEINE A. PICKENS

C/O WARM CREEK RANCH 94-3460086 Page 2 Schedule L (Form 990 or 990-EZ) Part V | Supplemental Information Complete this part to provide additional information for responses to questions on Schedule L (see instructions) (C) PURPOSE OF LOAN: PROVIDE FUNDS TO USE IN THE FURTHERANCE OF ITS CHARITABLE ACTIVITIES. (D) LOAN TO OR FROM ORGANIZATION? = TO (E) ORIGINAL PRINCIPAL AMOUNT \$ 75,000. (F) BALANCE DUE \$ 75,000. (G) LOAN IN DEFAULT? = NO (H) APPROVED BY BOARD OR COMMITTEE? = YES (I) WRITTEN AGREEMENT? = YES (A) NAME OF PERSON: MADELEINE A. PICKENS (C) PURPOSE OF LOAN: PROVIDE FUNDS TO USE IN THE FURTHERANCE OF ITS CHARITABLE ACTIVITIES. (D) LOAN TO OR FROM ORGANIZATION? = TO (E) ORIGINAL PRINCIPAL AMOUNT \$ 60,000. (F) BALANCE DUE \$ 60,000. (G) LOAN IN DEFAULT? = NO (H) APPROVED BY BOARD OR COMMITTEE? = YES (I) WRITTEN AGREEMENT? = YES (A) NAME OF PERSON: MADELEINE A. PICKENS (C) PURPOSE OF LOAN: PROVIDE FUNDS TO USE IN THE FURTHERANCE OF ITS CHARITABLE ACTIVITIES. (D) LOAN TO OR FROM ORGANIZATION? = TO (E) ORIGINAL PRINCIPAL AMOUNT \$ 25,000. (F) BALANCE DUE \$ 25,000. (G) LOAN IN DEFAULT? = NO (H) APPROVED BY BOARD OR COMMITTEE? = YES (I) WRITTEN AGREEMENT? = YES Schedule L (Form 990 or 990-EZ) 332461 05-01-13

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2013.04030 SAVING AMERICA'S MUSTANGS C PAU113 1

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Schedule L (Form 990 or 990-EZ) C/O WARM CREEK RANCH 94-3460086 Page 2 Supplemental Information Complete this part to provide additional information for responses to questions on Schedule L (see instructions) (A) NAME OF PERSON: MADELEINE A. PICKENS (C) PURPOSE OF LOAN: PROVIDE FUNDS TO USE IN THE FURTHERANCE OF ITS CHARITABLE ACTIVITIES. (D) LOAN TO OR FROM ORGANIZATION? = TO (E) ORIGINAL PRINCIPAL AMOUNT \$ 115,000. (F) BALANCE DUE \$ 115,000. (G) LOAN IN DEFAULT? = NO (H) APPROVED BY BOARD OR COMMITTEE? = YES (I) WRITTEN AGREEMENT? = YES (A) NAME OF PERSON: MADELEINE A. PICKENS (C) PURPOSE OF LOAN: PROVIDE FUNDS TO USE IN THE FURTHERANCE OF ITS CHARITABLE ACTIVITIES. (D) LOAN TO OR FROM ORGANIZATION? = TO (E) ORIGINAL PRINCIPAL AMOUNT \$ 125,000. (F) BALANCE DUE \$ 125,000. (G) LOAN IN DEFAULT? = NO (H) APPROVED BY BOARD OR COMMITTEE? = YES (I) WRITTEN AGREEMENT? = YES (A) NAME OF PERSON: MADELEINE A. PICKENS (C) PURPOSE OF LOAN: PROVIDE FUNDS TO USE IN THE FURTHERANCE OF ITS CHARITABLE ACTIVITIES. (D) LOAN TO OR FROM ORGANIZATION? = TO (E) ORIGINAL PRINCIPAL AMOUNT \$ 238,631. (F) BALANCE DUE \$ 238,631. (G) LOAN IN DEFAULT? = NO

Schedule L (Form 990 or 990-EZ)

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SAVING AMERICA'S MUSTANGS Schedule'L (Form 990 or 990 EZ) C/O WARM CREEK RANCH

| Schedule L (Form 990 or 990-EZ) C/O WARM CREEK RANCH | 94-3460086 Page 2 |
|--|---------------------------------|
| Part V Supplemental Information Complete this part to provide additional information for responses to questions on Schedu | ile L (see instructions) |
| | |
| (H) APPROVED BY BOARD OR COMMITTEE? = YES | |
| (I) WRITTEN AGREEMENT? = YES | |
| | |
| (A) NAME OF PERSON: MADELEINE A. PICKENS | |
| | |
| (C) PURPOSE OF LOAN: PROVIDE FUNDS TO USE IN THE FUN | RTHERANCE OF ITS |
| CHARITABLE ACTIVITIES. | |
| (D) LOAN TO OR FROM ORGANIZATION? = TO | |
| (E) ORIGINAL PRINCIPAL AMOUNT \$ 62,000. (F) BALANCI | E DUE \$ 62,000. |
| (G) LOAN IN DEFAULT? = NO | |
| (H) APPROVED BY BOARD OR COMMITTEE? = YES | |
| (I) WRITTEN AGREEMENT? = YES | |
| | |
| (A) NAME OF PERSON: MADELEINE A. PICKENS | |
| | |
| (C) PURPOSE OF LOAN: PROVIDE FUNDS TO USE IN THE FU | RTHERANCE OF ITS |
| CHARITABLE ACTIVITIES. | |
| (D) LOAN TO OR FROM ORGANIZATION? = TO | |
| | E DITE & EO OOO |
| (E) ORIGINAL PRINCIPAL AMOUNT \$ 50,000. (F) BALANCE | E DOE \$ 50,000. |
| (G) LOAN IN DEFAULT? = NO | |
| (H) APPROVED BY BOARD OR COMMITTEE? = YES | |
| (I) WRITTEN AGREEMENT? = YES | |
| | |
| (A) NAME OF PERSON: MADELEINE A. PICKENS | |
| | |
| (C) PURPOSE OF LOAN: PROVIDE FUNDS TO USE IN THE FU | RTHERANCE OF ITS |
| CHARITABLE ACTIVITIES. | <u></u> |
| (D) LOAN TO OR FROM ORGANIZATION? = TO | |
| 332461 05-01-13 | Schedule L (Form 990 or 990-EZ) |

| Schedule L (Form 990 or 990-EZ) C/O WARM CREEK RANCH | 94-3460086 Page 2 |
|--|-------------------------------|
| Part V Supplemental Information | Cabadula I (and material) |
| Complete this part to provide additional information for responses to questions on | Schedule L (see instructions) |
| (E) ORIGINAL PRINCIPAL AMOUNT \$ 50,000. (F) BAI | LANCE DUE \$ 50,000. |
| (G) LOAN IN DEFAULT? = NO | |
| (H) APPROVED BY BOARD OR COMMITTEE? = YES | |
| (I) WRITTEN AGREEMENT? = YES | |
| | |
| (A) NAME OF PERSON: MADELEINE A. PICKENS | |
| (C) PURPOSE OF LOAN: PROVIDE FUNDS TO USE IN THE | E FIIRTHERANCE OF ITS |
| CHARITABLE ACTIVITIES. | D TORTHDIANCE OF TID |
| (D) LOAN TO OR FROM ORGANIZATION? = TO | |
| (E) ORIGINAL PRINCIPAL AMOUNT \$ 50,000. (F) BAI | LANCE DUE \$ 50,000. |
| (G) LOAN IN DEFAULT? = NO | |
| (H) APPROVED BY BOARD OR COMMITTEE? = YES | |
| (I) WRITTEN AGREEMENT? = YES | |
| | |
| (A) NAME OF PERSON: MADELEINE A. PICKENS | |
| | |
| (C) PURPOSE OF LOAN: PROVIDE FUNDS TO USE IN THE | E FURTHERANCE OF ITS |
| CHARITABLE ACTIVITIES. | |
| (D) LOAN TO OR FROM ORGANIZATION? = TO | |
| (E) ORIGINAL PRINCIPAL AMOUNT \$ 60,000. (F) BAI | LANCE DUE \$ 60,000. |
| (G) LOAN IN DEFAULT? = NO | |
| (H) APPROVED BY BOARD OR COMMITTEE? = YES | |
| (I) WRITTEN AGREEMENT? = YES | |
| | |
| (A) NAME OF PERSON: MADELEINE A. PICKENS | |
| | |

(C) PURPOSE OF LOAN: PROVIDE FUNDS TO USE IN THE FURTHERANCE OF ITS

332461 05-01-13

C/O WARM CREEK RANCH 94-3460086 Page 2 Schedule L (Form 990 or 990-EZ) Part V | Supplemental Information Complete this part to provide additional information for responses to questions on Schedule L (see instructions) CHARITABLE ACTIVITIES. (D) LOAN TO OR FROM ORGANIZATION? = TO (E) ORIGINAL PRINCIPAL AMOUNT \$ 65,000. (F) BALANCE DUE \$ 65,000. (G) LOAN IN DEFAULT? = NO (H) APPROVED BY BOARD OR COMMITTEE? = YES (I) WRITTEN AGREEMENT? = YES (A) NAME OF PERSON: MADELEINE A. PICKENS (C) PURPOSE OF LOAN: PROVIDE FUNDS TO USE IN THE FURTHERANCE OF ITS CHARITABLE ACTIVITIES. (D) LOAN TO OR FROM ORGANIZATION? = TO (E) ORIGINAL PRINCIPAL AMOUNT \$ 60,000. (F) BALANCE DUE \$ 60,000. (G) LOAN IN DEFAULT? = NO (H) APPROVED BY BOARD OR COMMITTEE? = YES (I) WRITTEN AGREEMENT? = YES (A) NAME OF PERSON: MADELEINE A. PICKENS (C) PURPOSE OF LOAN: PROVIDE FUNDS TO USE IN THE FURTHERANCE OF ITS CHARITABLE ACTIVITIES. (D) LOAN TO OR FROM ORGANIZATION? = TO (E) ORIGINAL PRINCIPAL AMOUNT \$ 50,000. (F) BALANCE DUE \$ 50,000. (G) LOAN IN DEFAULT? = NO (H) APPROVED BY BOARD OR COMMITTEE? = YES (I) WRITTEN AGREEMENT? = YES (A) NAME OF PERSON: MADELEINE A. PICKENS

Schedule L (Form 990 or 990-EZ)

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SAVING AMERICA'S MUSTANGS Schedule L (Form 990 or 990-EZ) C/O WARM CREEK RANCH 94-3460086 Page 2 Supplemental Information Complete this part to provide additional information for responses to questions on Schedule L (see instructions) (C) PURPOSE OF LOAN: PROVIDE FUNDS TO USE IN THE FURTHERANCE OF ITS CHARITABLE ACTIVITIES. (D) LOAN TO OR FROM ORGANIZATION? = TO (E) ORIGINAL PRINCIPAL AMOUNT \$ 50,000. (F) BALANCE DUE \$ 50,000. (G) LOAN IN DEFAULT? = NO(H) APPROVED BY BOARD OR COMMITTEE? = YES (I) WRITTEN AGREEMENT? = YES (A) NAME OF PERSON: MADELEINE A. PICKENS (C) PURPOSE OF LOAN: PROVIDE FUNDS TO USE IN THE FURTHERANCE OF ITS CHARITABLE ACTIVITIES. (D) LOAN TO OR FROM ORGANIZATION? = TO (E) ORIGINAL PRINCIPAL AMOUNT \$ 25,000. (F) BALANCE DUE \$ 25,000. (G) LOAN IN DEFAULT? = NO (H) APPROVED BY BOARD OR COMMITTEE? = YES (I) WRITTEN AGREEMENT? = YES (A) NAME OF PERSON: MADELEINE A. PICKENS (C) PURPOSE OF LOAN: PROVIDE FUNDS TO USE IN THE FURTHERANCE OF ITS CHARITABLE ACTIVITIES. (D) LOAN TO OR FROM ORGANIZATION? = TO (E) ORIGINAL PRINCIPAL AMOUNT \$ 35,000. (F) BALANCE DUE \$ 35,000. (G) LOAN IN DEFAULT? = NO (H) APPROVED BY BOARD OR COMMITTEE? = YES (I) WRITTEN AGREEMENT? = YES

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Schedule L (Form 990 or 990-EZ)

Schedule L (Form 990 or 990 EZ) C/O WARM CREEK RANCH 94-3460086 Page 2 Part V | Supplemental Information Complete this part to provide additional information for responses to questions on Schedule L (see instructions). (A) NAME OF PERSON: MADELEINE A. PICKENS (C) PURPOSE OF LOAN: PROVIDE FUNDS TO USE IN THE FURTHERANCE OF ITS CHARITABLE ACTIVITIES. (D) LOAN TO OR FROM ORGANIZATION? = TO (E) ORIGINAL PRINCIPAL AMOUNT \$ 40,000. (F) BALANCE DUE \$ 40,000. (G) LOAN IN DEFAULT? = NO (H) APPROVED BY BOARD OR COMMITTEE? = YES (I) WRITTEN AGREEMENT? = YES (A) NAME OF PERSON: MADELEINE A. PICKENS (C) PURPOSE OF LOAN: PROVIDE FUNDS TO USE IN THE FURTHERANCE OF ITS CHARITABLE ACTIVITIES. (D) LOAN TO OR FROM ORGANIZATION? = TO (E) ORIGINAL PRINCIPAL AMOUNT \$ 125,000. (F) BALANCE DUE \$ 125,000. (G) LOAN IN DEFAULT? = NO (H) APPROVED BY BOARD OR COMMITTEE? = YES (I) WRITTEN AGREEMENT? = YES (A) NAME OF PERSON: MADELEINE A. PICKENS (C) PURPOSE OF LOAN: PROVIDE FUNDS TO USE IN THE FURTHERANCE OF ITS CHARITABLE ACTIVITIES. (D) LOAN TO OR FROM ORGANIZATION? = TO (E) ORIGINAL PRINCIPAL AMOUNT \$ 50,000. (F) BALANCE DUE \$ 50,000. (G) LOAN IN DEFAULT? = NO 332461 05-01-13 Schedule L (Form 990 or 990-EZ)

| | 1-3460086 Page 2 |
|--|----------------------------|
| Part V Supplemental Information Complete this part to provide additional information for responses to questions on Schedule L (see instructions | ;) |
| (H) APPROVED BY BOARD OR COMMITTEE? = YES | |
| (I) WRITTEN AGREEMENT? = YES | |
| 12/ 1111 1101111111111 - 110 | - |
| (A) NAME OF PERSON: MADELEINE A. PICKENS | |
| (C) PURPOSE OF LOAN: PROVIDE FUNDS TO USE IN THE FURTHERANCE O | OF ITS |
| CHARITABLE ACTIVITIES. | |
| (D) LOAN TO OR FROM ORGANIZATION? = TO | |
| (E) ORIGINAL PRINCIPAL AMOUNT \$ 85,000. (F) BALANCE DUE \$ 85, | ,000. |
| (G) LOAN IN DEFAULT? = NO | |
| (H) APPROVED BY BOARD OR COMMITTEE? = YES | |
| (I) WRITTEN AGREEMENT? = YES | |
| | |
| (A) NAME OF PERSON: MADELEINE A. PICKENS | |
| (C) PURPOSE OF LOAN: PROVIDE FUNDS TO USE IN THE FURTHERANCE OF | OF ITS |
| CHARITABLE ACTIVITIES. | |
| (D) LOAN TO OR FROM ORGANIZATION? = TO | |
| (E) ORIGINAL PRINCIPAL AMOUNT \$ 30,000. (F) BALANCE DUE \$ 30, | ,000. |
| (G) LOAN IN DEFAULT? = NO | |
| (H) APPROVED BY BOARD OR COMMITTEE? = YES | |
| (I) WRITTEN AGREEMENT? = YES | |
| | |
| (A) NAME OF PERSON: MADELEINE A. PICKENS | |
| (C) PURPOSE OF LOAN: PROVIDE FUNDS TO USE IN THE FURTHERANCE (| |
| CHARITABLE ACTIVITIES. | |
| (D) LOAN TO OR FROM ORGANIZATION? = TO 332461 05-01-13 Schedu | ile L (Form 990 or 990-EZ) |
| Scrieda | = (1 O1111 000 O1 000°EL) |

| Schedule L (Form 990 or 990 EZ) C/O WARM CREEK RANCH 94-3460 | 0086 Page 2 |
|---|-------------|
| Part V Supplemental Information Complete this part to provide additional information for responses to questions on Schedule L (see instructions) | |
| (E) ORIGINAL PRINCIPAL AMOUNT \$ 35,000. (F) BALANCE DUE \$ 35,000. | |
| | |
| (G) LOAN IN DEFAULT? = NO | |
| (H) APPROVED BY BOARD OR COMMITTEE? = YES | |
| (I) WRITTEN AGREEMENT? = YES | |
| (A) NAME OF PERSON: MADELEINE A. PICKENS | |
| (C) PURPOSE OF LOAN: PROVIDE FUNDS TO USE IN THE FURTHERANCE OF ITS | 5 |
| CHARITABLE ACTIVITIES. | |
| (D) LOAN TO OR FROM ORGANIZATION? = TO | |
| (E) ORIGINAL PRINCIPAL AMOUNT \$ 30,000. (F) BALANCE DUE \$ 30,000. | |
| (G) LOAN IN DEFAULT? = NO | |
| (H) APPROVED BY BOARD OR COMMITTEE? = YES | |
| (I) WRITTEN AGREEMENT? = YES | |
| (A) NAME OF PERSON: MADELEINE A. PICKENS | |
| (C) PURPOSE OF LOAN: PROVIDE FUNDS TO USE IN THE FURTHERANCE OF ITS | 3 |
| CHARITABLE ACTIVITIES. | |
| (D) LOAN TO OR FROM ORGANIZATION? = TO | |
| (E) ORIGINAL PRINCIPAL AMOUNT \$ 30,000. (F) BALANCE DUE \$ 30,000. | |
| (G) LOAN IN DEFAULT? = NO | |
| (H) APPROVED BY BOARD OR COMMITTEE? = YES | |
| (I) WRITTEN AGREEMENT? = YES | |
| (A) NAME OF PERSON: MADELEINE A. PICKENS | |
| (C) PURPOSE OF LOAN: PROVIDE FUNDS TO USE IN THE FURTHERANCE OF ITS | |

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332461 05-01-13

94-3460086 Page 2 Schedule L (Form 990 or 990-EZ) C/O WARM CREEK RANCH Part V Supplemental Information Complete this part to provide additional information for responses to questions on Schedule L (see instructions) CHARITABLE ACTIVITIES. (D) LOAN TO OR FROM ORGANIZATION? = TO (E) ORIGINAL PRINCIPAL AMOUNT \$ 25,000. (F) BALANCE DUE \$ 25,000. (G) LOAN IN DEFAULT? = NO (H) APPROVED BY BOARD OR COMMITTEE? = YES (I) WRITTEN AGREEMENT? = YES (A) NAME OF PERSON: MADELEINE A. PICKENS (C) PURPOSE OF LOAN: PROVIDE FUNDS TO USE IN THE FURTHERANCE OF ITS CHARITABLE ACTIVITIES. (D) LOAN TO OR FROM ORGANIZATION? = TO (E) ORIGINAL PRINCIPAL AMOUNT \$ 40,000. (F) BALANCE DUE \$ 40,000. (G) LOAN IN DEFAULT? = NO (H) APPROVED BY BOARD OR COMMITTEE? = YES (I) WRITTEN AGREEMENT? = YES (A) NAME OF PERSON: MADELEINE A. PICKENS (C) PURPOSE OF LOAN: PROVIDE FUNDS TO USE IN THE FURTHERANCE OF ITS CHARITABLE ACTIVITIES. (D) LOAN TO OR FROM ORGANIZATION? = TO (E) ORIGINAL PRINCIPAL AMOUNT \$ 35,000. (F) BALANCE DUE \$ 35,000. (G) LOAN IN DEFAULT? = NO (H) APPROVED BY BOARD OR COMMITTEE? = YES (I) WRITTEN AGREEMENT? = YES

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(A) NAME OF PERSON: MADELEINE A. PICKENS

94-3460086 Page 2 C/O WARM CREEK RANCH Schedule L (Form 990 or 990-EZ) Part V | Supplemental Information Complete this part to provide additional information for responses to questions on Schedule L (see instructions) (C) PURPOSE OF LOAN: PROVIDE FUNDS TO USE IN THE FURTHERANCE OF ITS CHARITABLE ACTIVITIES. (D) LOAN TO OR FROM ORGANIZATION? = TO (E) ORIGINAL PRINCIPAL AMOUNT \$ 4,500. (F) BALANCE DUE \$ 4,500. (G) LOAN IN DEFAULT? = NO (H) APPROVED BY BOARD OR COMMITTEE? = YES (I) WRITTEN AGREEMENT? = YES (A) NAME OF PERSON: MADELEINE A. PICKENS (C) PURPOSE OF LOAN: PROVIDE FUNDS TO USE IN THE FURTHERANCE OF ITS CHARITABLE ACTIVITIES. (D) LOAN TO OR FROM ORGANIZATION? = TO (E) ORIGINAL PRINCIPAL AMOUNT \$ 45,000. (F) BALANCE DUE \$ 45,000. (G) LOAN IN DEFAULT? = NO (H) APPROVED BY BOARD OR COMMITTEE? = YES (I) WRITTEN AGREEMENT? = YES (A) NAME OF PERSON: MADELEINE A. PICKENS (C) PURPOSE OF LOAN: PROVIDE FUNDS TO USE IN THE FURTHERANCE OF ITS CHARITABLE ACTIVITIES. (D) LOAN TO OR FROM ORGANIZATION? = TO (E) ORIGINAL PRINCIPAL AMOUNT \$ 100,000. (F) BALANCE DUE \$ (G) LOAN IN DEFAULT? = NO (H) APPROVED BY BOARD OR COMMITTEE? = YES (I) WRITTEN AGREEMENT? = YES Schedule L (Form 990 or 990-EZ) 332461 05-01-13

Schedule L (Form 990 or 990-EZ)

SAVING AMERICA'S MUSTANGS Schedule L (Form 990 or 990 EZ) C/O WARM CREEK RANCH

| Schedule L (Form 990 or 990-EZ) C/O WARM CREEK RANCH | 94-3460086 Page 2 |
|---|-------------------------------|
| Part V Supplemental Information Complete this part to provide additional information for responses to questions on Schedule L (see instruc | etions) |
| | LIUI 13) |
| (H) APPROVED BY BOARD OR COMMITTEE? = YES | |
| (I) WRITTEN AGREEMENT? = YES | |
| | |
| (A) NAME OF PERSON: MADELEINE A. PICKENS | |
| AND MARKE OF TEMPORY TREBURETY TO TEMPORE | |
| | |
| (C) PURPOSE OF LOAN: PROVIDE FUNDS TO USE IN THE FURTHERANC | E OF ITS |
| CHARITABLE ACTIVITIES. | |
| (D) LOAN TO OR FROM ORGANIZATION? = TO | |
| (E) ORIGINAL PRINCIPAL AMOUNT \$ 318. (F) BALANCE DUE \$ 318 | |
| | |
| (G) LOAN IN DEFAULT? = NO | • |
| (H) APPROVED BY BOARD OR COMMITTEE? = YES | |
| (I) WRITTEN AGREEMENT? = YES | |
| | |
| (A) NAME OF PERSON: MADELEINE A. PICKENS | |
| | - |
| | |
| (C) PURPOSE OF LOAN: PROVIDE FUNDS TO USE IN THE FURTHERANC | E OF ITS |
| CHARITABLE ACTIVITIES. | |
| (D) LOAN TO OR FROM ORGANIZATION? = TO | |
| (E) ORIGINAL PRINCIPAL AMOUNT \$ 200,000. (F) BALANCE DUE \$ | 200,000. |
| | |
| | |
| (H) APPROVED BY BOARD OR COMMITTEE? = YES | |
| (I) WRITTEN AGREEMENT? = YES | |
| | |
| (A) NAME OF PERSON: MADELEINE A. PICKENS | |
| | |
| | |
| (C) PURPOSE OF LOAN: PROVIDE FUNDS TO USE IN THE FURTHERANCE | E OF ITS |
| CHARITABLE ACTIVITIES. | - |
| (D) LOAN TO OR FROM ORGANIZATION? = TO | |
| 332461 05-01-13 Sc | hedule L (Form 990 or 990-EZ) |

| Schedule L (Form 990 or 990-EZ) C/O WARM CREEK RANCH | 94-3460086 Page 2 |
|--|-------------------|
| Part V Supplemental Information Complete this part to provide additional information for responses to questions on Schedule L (see instructions). | etions) |
| | |
| (E) ORIGINAL PRINCIPAL AMOUNT \$ 100,000. (F) BALANCE DUE \$ | 100,000. |
| (G) LOAN IN DEFAULT? = NO | |
| (H) APPROVED BY BOARD OR COMMITTEE? = YES | |
| (I) WRITTEN AGREEMENT? = YES | |
| | |
| (A) NAME OF PERSON: MADELEINE A. PICKENS | |
| | |
| (C) PURPOSE OF LOAN: PROVIDE FUNDS TO USE IN THE FURTHERANCE | E OF ITS |
| CHARITABLE ACTIVITIES. | |
| (D) LOAN TO OR FROM ORGANIZATION? = TO | |
| | 252 |
| (E) ORIGINAL PRINCIPAL AMOUNT \$ 8,252. (F) BALANCE DUE \$ 8 | , 454. |
| (G) LOAN IN DEFAULT? = NO | |
| (H) APPROVED BY BOARD OR COMMITTEE? = YES | |
| (I) WRITTEN AGREEMENT? = YES | |
| | |
| (A) NAME OF PERSON: MADELEINE A. PICKENS | |
| | |
| (C) PURPOSE OF LOAN: PROVIDE FUNDS TO USE IN THE FURTHERANC | ድ ሰም ተጥና |
| | |
| CHARITABLE ACTIVITIES. | |
| (D) LOAN TO OR FROM ORGANIZATION? = TO | |
| (E) ORIGINAL PRINCIPAL AMOUNT \$ 300,000. (F) BALANCE DUE \$ | 300,000. |
| (G) LOAN IN DEFAULT? = NO | |
| (H) APPROVED BY BOARD OR COMMITTEE? = YES | |
| (I) WRITTEN AGREEMENT? = YES | |
| | |
| (A) NAME OF PERSON: MADELEINE A. PICKENS | |
| | |
| | |

(C) PURPOSE OF LOAN: PROVIDE FUNDS TO USE IN THE FURTHERANCE OF ITS

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Schedule L (Form 990 or 990-EZ) C/O WARM CREEK RANCH 94-3460086 Page 2 Part V | Supplemental Information Complete this part to provide additional information for responses to questions on Schedule L (see instructions) CHARITABLE ACTIVITIES. (D) LOAN TO OR FROM ORGANIZATION? = TO (E) ORIGINAL PRINCIPAL AMOUNT \$ 300,000. (F) BALANCE DUE \$ 300,000. (G) LOAN IN DEFAULT? = NO (H) APPROVED BY BOARD OR COMMITTEE? = YES (I) WRITTEN AGREEMENT? = YES (A) NAME OF PERSON: MADELEINE A. PICKENS (C) PURPOSE OF LOAN: PROVIDE FUNDS TO USE IN THE FURTHERANCE OF ITS CHARITABLE ACTIVITIES. (D) LOAN TO OR FROM ORGANIZATION? = TO (E) ORIGINAL PRINCIPAL AMOUNT \$ 200,000. (F) BALANCE DUE \$ 200,000. (G) LOAN IN DEFAULT? = NO (H) APPROVED BY BOARD OR COMMITTEE? = YES (I) WRITTEN AGREEMENT? = YES (A) NAME OF PERSON: MADELEINE A. PICKENS (C) PURPOSE OF LOAN: PROVIDE FUNDS TO USE IN THE FURTHERANCE OF ITS CHARITABLE ACTIVITIES. (D) LOAN TO OR FROM ORGANIZATION? = TO (E) ORIGINAL PRINCIPAL AMOUNT \$ 2,000. (F) BALANCE DUE \$ 2,000. (G) LOAN IN DEFAULT? = NO (H) APPROVED BY BOARD OR COMMITTEE? = YES (I) WRITTEN AGREEMENT? = YES

332461 05-01-13

(A) NAME OF PERSON: MADELEINE A. PICKENS

94-3460086 Page 2 C/O WARM CREEK RANCH Schedule L (Form 990 or 990-EZ) Part V Supplemental Information Complete this part to provide additional information for responses to questions on Schedule L (see instructions) (C) PURPOSE OF LOAN: PROVIDE FUNDS TO USE IN THE FURTHERANCE OF ITS CHARITABLE ACTIVITIES. (D) LOAN TO OR FROM ORGANIZATION? = TO (E) ORIGINAL PRINCIPAL AMOUNT \$ 200,000. (F) BALANCE DUE \$ 200,000. (G) LOAN IN DEFAULT? = NO (H) APPROVED BY BOARD OR COMMITTEE? = YES (I) WRITTEN AGREEMENT? = YES (A) NAME OF PERSON: MADELEINE A. PICKENS (C) PURPOSE OF LOAN: PROVIDE FUNDS TO USE IN THE FURTHERANCE OF ITS CHARITABLE ACTIVITIES. (D) LOAN TO OR FROM ORGANIZATION? = TO (E) ORIGINAL PRINCIPAL AMOUNT \$ 200,000. (F) BALANCE DUE \$ 200,000. (G) LOAN IN DEFAULT? = NO (H) APPROVED BY BOARD OR COMMITTEE? = YES (I) WRITTEN AGREEMENT? = YES (A) NAME OF PERSON: MADELEINE A. PICKENS (C) PURPOSE OF LOAN: PROVIDE FUNDS TO USE IN THE FURTHERANCE OF ITS CHARITABLE ACTIVITIES. (D) LOAN TO OR FROM ORGANIZATION? = TO (E) ORIGINAL PRINCIPAL AMOUNT \$ 100,000. (F) BALANCE DUE \$ 100,000. (G) LOAN IN DEFAULT? = NO (H) APPROVED BY BOARD OR COMMITTEE? = YES (I) WRITTEN AGREEMENT? = YES Schedule L (Form 990 or 990-EZ)

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SAVING AMERICA'S MUSTANGS C/O WARM CREEK RANCH

| Schedule L (Form 990 or 990-EZ) C/O WARM CREEK RANCH | 94-3460086 Page 2 |
|--|---------------------------------|
| Part V Supplemental Information Complete this part to provide additional information for responses to questions on Schedule | 1 (see instructions) |
| Complete this part to provide additional information for responses to questions on contended | E (See monachors). |
| (A) NAME OF PERSON: ROBERT MCGRATH | |
| (C) PURPOSE OF LOAN: PROVIDE FUNDS TO USE IN THE FURT | THERANCE OF ITS |
| CHARITABLE ACTIVITIES. | |
| (D) LOAN TO OR FROM ORGANIZATION? = TO | |
| (E) ORIGINAL PRINCIPAL AMOUNT \$ 2,000. (F) BALANCE I | DUE \$ 2,000. |
| (G) LOAN IN DEFAULT? = NO | |
| (H) APPROVED BY BOARD OR COMMITTEE? = YES | |
| (I) WRITTEN AGREEMENT? = YES | |
| | |
| (A) NAME OF PERSON: MADELEINE A. PICKENS | |
| (C) PURPOSE OF LOAN: PROVIDE FUNDS TO USE IN THE FURT | THERANCE OF ITS |
| CHARITABLE ACTIVITIES. | |
| (D) LOAN TO OR FROM ORGANIZATION? = TO | |
| (E) ORIGINAL PRINCIPAL AMOUNT \$ 9,980. (F) BALANCE I | DUE \$ 9,980. |
| (G) LOAN IN DEFAULT? = NO | |
| (H) APPROVED BY BOARD OR COMMITTEE? = YES | |
| (I) WRITTEN AGREEMENT? = YES | |
| (A) NAME OF PERSON: MADELEINE A. PICKENS | |
| (C) PURPOSE OF LOAN: PROVIDE FUNDS TO USE IN THE FURT | THERANCE OF ITS |
| CHARITABLE ACTIVITIES. | |
| (D) LOAN TO OR FROM ORGANIZATION? = TO | |
| (E) ORIGINAL PRINCIPAL AMOUNT \$ 200,000. (F) BALANCI | E DUE \$ 200,000. |
| (G) LOAN IN DEFAULT? = NO 332461 05-01-13 | Schedule L (Form 990 or 990-EZ) |
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SAVING AMERICA'S MUSTANGS or 990-EZ) C/O WARM CREEK RANCH

| Schedule L (Form 990 or 990 EZ) C/O WARM CREEK RAINCH 94-3400080 Page 2 |
|---|
| Part V Supplemental Information Complete this part to provide additional information for responses to questions on Schedule L (see instructions) |
| (H) APPROVED BY BOARD OR COMMITTEE? = YES |
| (I) WRITTEN AGREEMENT? = YES |
| |
| (A) NAME OF PERSON: MADELEINE A. PICKENS |
| |
| (C) PURPOSE OF LOAN: PROVIDE FUNDS TO USE IN THE FURTHERANCE OF ITS |
| CHARITABLE ACTIVITIES. |
| (D) LOAN TO OR FROM ORGANIZATION? = TO |
| (E) ORIGINAL PRINCIPAL AMOUNT \$ 100,000. (F) BALANCE DUE \$ 100,000. |
| (G) LOAN IN DEFAULT? = NO |
| (H) APPROVED BY BOARD OR COMMITTEE? = YES |
| (I) WRITTEN AGREEMENT? = YES |
| |
| (A) NAME OF PERSON: MADELEINE A. PICKENS |
| |
| (C) PURPOSE OF LOAN: PROVIDE FUNDS TO USE IN THE FURTHERANCE OF ITS |
| CHARITABLE ACTIVITIES. |
| (D) LOAN TO OR FROM ORGANIZATION? = TO |
| (E) ORIGINAL PRINCIPAL AMOUNT \$ 300,000. (F) BALANCE DUE \$ 300,000. |
| (G) LOAN IN DEFAULT? = NO |
| (H) APPROVED BY BOARD OR COMMITTEE? = YES |
| (I) WRITTEN AGREEMENT? = YES |
| |
| (A) NAME OF PERSON: MADELEINE A. PICKENS |
| |
| (C) PURPOSE OF LOAN: PROVIDE FUNDS TO USE IN THE FURTHERANCE OF ITS |
| CHARITABLE ACTIVITIES. |
| (D) LOAN TO OR FROM ORGANIZATION? = TO |
| 332461 05-01-13 Schedule L (Form 990 or 990-EZ) |

| Schedule L (Form 990 or 990-EZ) C/O WARM CREEK RANCH | 94-3460086 Page 2 |
|--|-------------------|
| Part V Supplemental Information | |
| Complete this part to provide additional information for responses to questions on Schedule L (see instruc | tions) |
| (E) ORIGINAL PRINCIPAL AMOUNT \$ 500. (F) BALANCE DUE \$ 500 | • |
| (G) LOAN IN DEFAULT? = NO | |
| | |
| (H) APPROVED BY BOARD OR COMMITTEE? = YES | |
| (I) WRITTEN AGREEMENT? = YES | |
| | |
| (1) WHE OF PERSON MARKETINE 1 PROVING | |
| (A) NAME OF PERSON: MADELEINE A. PICKENS | |
| | |
| (C) PURPOSE OF LOAN: PROVIDE FUNDS TO USE IN THE FURTHERANCE | E OF ITS |
| CHARITABLE ACTIVITIES. | |
| | |
| (D) LOAN TO OR FROM ORGANIZATION? = TO | |
| (E) ORIGINAL PRINCIPAL AMOUNT \$ 3,000. (F) BALANCE DUE \$ 3 | ,000. |
| (G) LOAN IN DEFAULT? = NO | |
| (H) APPROVED BY BOARD OR COMMITTEE? = YES | |
| | |
| (I) WRITTEN AGREEMENT? = YES | |
| | |
| (A) NAME OF PERSON: MADELEINE A. PICKENS | |
| | |
| | |
| (C) PURPOSE OF LOAN: PROVIDE FUNDS TO USE IN THE FURTHERANC | E OF ITS |
| CHARITABLE ACTIVITIES. | |
| (D) LOAN TO OR FROM ORGANIZATION? = TO | |
| | 100 000 |
| (E) ORIGINAL PRINCIPAL AMOUNT \$ 100,000. (F) BALANCE DUE \$ | |
| (G) LOAN IN DEFAULT? = NO | |
| (H) APPROVED BY BOARD OR COMMITTEE? = YES | |
| (I) WRITTEN AGREEMENT? = YES | |
| | - |
| | |
| (A) NAME OF PERSON: MADELEINE A. PICKENS | |
| | |

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(C) PURPOSE OF LOAN: PROVIDE FUNDS TO USE IN THE FURTHERANCE OF ITS

Schedule L (Form 990 or 990-EZ)

| Schedule L (Form 990 or 990-EZ) C/O WARM CREEK RANCH | 94-3460086 Page 2 |
|--|-------------------|
| Part V Supplemental Information | |
| Complete this part to provide additional information for responses to questions on Schedule L (see instruc | :tions) |
| CHARITABLE ACTIVITIES. | |
| (D) LOAN TO OR FROM ORGANIZATION? = TO | |
| | |
| (E) ORIGINAL PRINCIPAL AMOUNT \$ 200,000. (F) BALANCE DUE \$ | 200,000. |
| (G) LOAN IN DEFAULT? = NO | |
| (H) APPROVED BY BOARD OR COMMITTEE? = YES | |
| / T \ LOTORDA A OD DEWENDO YES | |
| (I) WRITTEN AGREEMENT? = YES | <u> </u> |
| | |
| (A) NAME OF PERSON: MADELEINE A. PICKENS | |
| | |
| | |
| (C) PURPOSE OF LOAN: PROVIDE FUNDS TO USE IN THE FURTHERANC | E OF ITS |
| CHARITABLE ACTIVITIES. | |
| (D) LOAN TO OR FROM ORGANIZATION? = TO | |
| | |
| (E) ORIGINAL PRINCIPAL AMOUNT \$ 1,500. (F) BALANCE DUE \$ 1 | ,500. |
| (G) LOAN IN DEFAULT? = NO | |
| (H) APPROVED BY BOARD OR COMMITTEE? = YES | |
| (I) WRITTEN AGREEMENT? = YES | |
| (I) WRITTEN AGREEMENT? = YES | |
| | |
| (A) NAME OF PERSON: MADELEINE A. PICKENS | |
| | |
| | |
| (C) PURPOSE OF LOAN: PROVIDE FUNDS TO USE IN THE FURTHERANCE | E OF ITS |
| CHARITABLE ACTIVITIES. | |
| (D) LOAN TO OR FROM ORGANIZATION? = TO | |
| (E) ORIGINAL PRINCIPAL AMOUNT \$ 3,000. (F) BALANCE DUE \$ 3 | . 000 |
| (E) ORIGINAL PRINCIPAL AMOUNT \$ 5,000. (F) BALLANCE DOE \$ 5 | ,000. |
| (G) LOAN IN DEFAULT? = NO | |
| (H) APPROVED BY BOARD OR COMMITTEE? = YES | |
| (I) WRITTEN AGREEMENT? = YES | |
| <u> </u> | |
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(A) NAME OF PERSON: MADELEINE A. PICKENS

94-3460086 Page 2 C/O WARM CREEK RANCH Schedule L (Form 990 or 990-EZ) Part V | Supplemental Information Complete this part to provide additional information for responses to questions on Schedule L (see instructions) (C) PURPOSE OF LOAN: PROVIDE FUNDS TO USE IN THE FURTHERANCE OF ITS CHARITABLE ACTIVITIES. (D) LOAN TO OR FROM ORGANIZATION? = TO (E) ORIGINAL PRINCIPAL AMOUNT \$ 50,000. (F) BALANCE DUE \$ 50,000. (G) LOAN IN DEFAULT? = NO (H) APPROVED BY BOARD OR COMMITTEE? = YES (I) WRITTEN AGREEMENT? = YES (A) NAME OF PERSON: MADELEINE A. PICKENS (C) PURPOSE OF LOAN: PROVIDE FUNDS TO USE IN THE FURTHERANCE OF ITS CHARITABLE ACTIVITIES. (D) LOAN TO OR FROM ORGANIZATION? = TO (E) ORIGINAL PRINCIPAL AMOUNT \$ 1,500. (F) BALANCE DUE \$ 1,500. (G) LOAN IN DEFAULT? = NO (H) APPROVED BY BOARD OR COMMITTEE? = YES (I) WRITTEN AGREEMENT? = YES (A) NAME OF PERSON: MADELEINE A. PICKENS (C) PURPOSE OF LOAN: PROVIDE FUNDS TO USE IN THE FURTHERANCE OF ITS CHARITABLE ACTIVITIES. (D) LOAN TO OR FROM ORGANIZATION? = TO (E) ORIGINAL PRINCIPAL AMOUNT \$ 2,100. (F) BALANCE DUE \$ 2,100. (G) LOAN IN DEFAULT? = NO(H) APPROVED BY BOARD OR COMMITTEE? = YES (I) WRITTEN AGREEMENT? = YES

Schedule L (Form 990 or 990-EZ)

Schedule L (Form 990 or 990-EZ) C/O WARM CREEK RANCH 94-3460086 Page 2 Part V | Supplemental Information Complete this part to provide additional information for responses to questions on Schedule L (see instructions) (A) NAME OF PERSON: MADELEINE A. PICKENS (C) PURPOSE OF LOAN: PROVIDE FUNDS TO USE IN THE FURTHERANCE OF ITS CHARITABLE ACTIVITIES. (D) LOAN TO OR FROM ORGANIZATION? = TO (E) ORIGINAL PRINCIPAL AMOUNT \$ 100,000. (F) BALANCE DUE \$ 100,000. (G) LOAN IN DEFAULT? = NO (H) APPROVED BY BOARD OR COMMITTEE? = YES (I) WRITTEN AGREEMENT? = YES (A) NAME OF PERSON: MADELEINE A. PICKENS (C) PURPOSE OF LOAN: PROVIDE FUNDS TO USE IN THE FURTHERANCE OF ITS CHARITABLE ACTIVITIES. (D) LOAN TO OR FROM ORGANIZATION? = TO (E) ORIGINAL PRINCIPAL AMOUNT \$ 100,000. (F) BALANCE DUE \$ 100,000. (G) LOAN IN DEFAULT? = NO (H) APPROVED BY BOARD OR COMMITTEE? = YES (I) WRITTEN AGREEMENT? = YES (A) NAME OF PERSON: MADELEINE A. PICKENS (C) PURPOSE OF LOAN: PROVIDE FUNDS TO USE IN THE FURTHERANCE OF ITS CHARITABLE ACTIVITIES. (D) LOAN TO OR FROM ORGANIZATION? = TO (E) ORIGINAL PRINCIPAL AMOUNT \$ 4,106. (F) BALANCE DUE \$ 4,106. (G) LOAN IN DEFAULT? = NO Schedule L (Form 990 or 990-EZ) 332461 05-01-13

SAVING AMERICA'S MUSTANGS C/O WARM CREEK RANCH

| Schedule L (Form 990 or 990-EZ) C/O WARM CREEK RANCH | 94-3460086 Page 2 |
|--|---------------------|
| Part V Supplemental Information Complete this part to provide additional information for responses to questions on Schedule L | (see instructions) |
| (H) APPROVED BY BOARD OR COMMITTEE? = YES | , |
| (I) WRITTEN AGREEMENT? = YES | |
| (1) WATITEN AGREEMENT: - TES | |
| | |
| (A) NAME OF PERSON: MADELEINE A. PICKENS | |
| | |
| (C) PURPOSE OF LOAN: PROVIDE FUNDS TO USE IN THE FURT | HERANCE OF ITS |
| CHARITABLE ACTIVITIES. | |
| (D) LOAN TO OR FROM ORGANIZATION? = TO | |
| (E) ORIGINAL PRINCIPAL AMOUNT \$ 200,000. (F) BALANCE | DUE \$ 200,000. |
| (G) LOAN IN DEFAULT? = NO | |
| (H) APPROVED BY BOARD OR COMMITTEE? = YES | |
| (I) WRITTEN AGREEMENT? = YES | |
| (1) WRITTEN AGREEMENT: - IBO | |
| ····· | |
| (A) NAME OF PERSON: MADELEINE A. PICKENS | |
| | |
| (C) PURPOSE OF LOAN: PROVIDE FUNDS TO USE IN THE FURT | HERANCE OF ITS |
| CHARITABLE ACTIVITIES. | |
| (D) LOAN TO OR FROM ORGANIZATION? = TO | |
| (E) ORIGINAL PRINCIPAL AMOUNT \$ 286,400. (F) BALANCE | DUE \$ 286,400. |
| (G) LOAN IN DEFAULT? = NO | |
| (H) APPROVED BY BOARD OR COMMITTEE? = YES | |
| (I) WRITTEN AGREEMENT? = YES | |
| | |
| SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTER | FOTED DEPONIC. |
| | EBIED FERSONS. |
| (A) NAME OF PERSON: MADELEINE PICKENS | |
| (B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANI | ZATION: |
| 99.9% LIMITED PARTNERSHIP INTEREST IN TOMMY, LLC. | |
| (D) DESCRIPTION OF TRANSACTION: PASTURE AGREEMENT BET | WEEN TOMMY, LLC AND |

332461 05-01-13

Schedule L (Form 990 or 990-EZ)

SAVING AMERICA'S MUSTANGS 94-3460086 Page 2 Schedule L (Form 990 or 990-EZ) C/O WARM CREEK RANCH Part V Supplemental Information Complete this part to provide additional information for responses to questions on Schedule L (see instructions) SAVING AMERICA'S MUSTANGS FOR PASTURE SERVICES AND FACILITIES PROVIDED BY TOMMY, LLC TO SAVING AMERICA'S MUSTANGS.

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

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

► Attach to Form 990 or 990-EZ.

OMB No 1545-0047

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

Open to Public Inspection

Name of the organization

SAVING AMERICA'S MUSTANGS

Employer identification number

| C/O WARM CREEK RANCH | 94-3460086 |
|--|----------------------------------|
| FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMEN | ITS: |
| ABOUT THE PRACTICES OF THE BLM AND PROVIDES LINKS TO GOVER | NMENT |
| OFFICIALS SO THE PUBLIC CAN VOICE THEIR CONCERN REGARDING | THIS ISSUE. |
| | |
| FORM 990, PART VI, SECTION B, LINE 11: | |
| FORM 990 IS PREPARED AND REVIEWED BY THE OFFICERS OF THE | |
| ORGANIZATION, IN HOUSE ACCOUNTANT, AND OUTSIDE ACCOUNTANTS | AND ATTORNEYS. |
| | |
| FORM 990, PART VI, SECTION B, LINE 12C: | |
| IN CONNECTION WITH ANY ACTUAL OR POSSIBLE CONFLICTS OF | |
| INTEREST, AN INTERESTED PERSON MUST DISCLOSE THE EXISTENCE | OF HIS OR HER |
| FINANCIAL INTEREST AND MUST BE GIVEN THE OPPORTUNITY TO DI | SCLOSE ALL |
| MATERIAL FACTS TO THE DIRECTORS CONSIDERING THE PROPOSED T | RANSACTION. |
| | |
| FORM 990, PART VI, SECTION C, LINE 19: | |
| DOCUMENTS ARE AVAILABLE UPON WRITTEN REQUEST TO THE | |
| ORGANIZATION AT C/O WARM CREEK RANCH, HC 60 BOX 300, WELLS | s, NV 89835. |
| | |
| FORM 990, PART VII CONTACT ADDRESSES FOR OFFICERS, DIRECTO | ORS, ETC: |
| MADELEINE A. PICKENS - C/O WARM CREEK RANCH, HC 60 BOX 300 |), WELLS, NV 89835 |
| MONTY HUMBLE - 903 FOREST VIEW DRIVE, WESTLAKE, TX 78746 | |
| DONALD DAVID - C/O WARM CREEK RANCH, HC 60 BOX 300, WELLS, | NV 89835 |
| | |
| 990, PART V, LINE 2A | |
| THE ORGANIZATION IS LOCATED IN NEVADA AND EMPLOYED ELEVEN | |
| PEOPLE DURING 2013. | No O /Form 200 or 200 F7) /2012) |

332211 09-04-13

| Schedule O (Form 990 or 9 | 990-EZ) (2013) | Page 2 |
|---------------------------------------|---------------------------|--------------------------------|
| Name of the organization | SAVING AMERICA'S MUSTANGS | Employer identification number |
| | C/O WARM CREEK RANCH | 94-3460086 |
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| Form 8868 (Rev. 1-2014) | | | | | Page 2 |
|---|--------------|---|------------------------------|----------------|-------------------|
| If you are filing for an Additional (Not Automatic) 3-Month Ext | tension, c | omplete only Part II and check this | box | | ▶ X |
| Note. Only complete Part II if you have already been granted an a | | - | | 3868 | |
| If you are filing for an Automatic 3-Month Extension, complet | | | | | |
| Part II Additional (Not Automatic) 3-Month Ex | ktensio | n of Time. Only file the origin | al (no co | pies need | ied). |
| | | Enter filer's | identifyin | g number, s | ee instructions |
| Type or Name of exempt organization or other filer, see instruc | ctions | | Employer | identification | n number (EIN) or |
| print SAVING AMERICA'S MUSTANGS | | | | 04 04 | |
| File by the C/O WARM CREEK RANCH | | | | | |
| Number, street, and room or suite no. If a P.O. box, se | e instruct | tions | Social security number (SSN) | | r (SSN) |
| return See HC 60 BOX 300 | | | | | |
| City, town or post office, state, and ZIP code. For a fo | reign add | ress, see instructions | | | |
| | | | | | |
| Enter the Return code for the return that this application is for (file | a separa | te application for each return) | | | 0 1 |
| Application | Return | Application | | | Return |
| Is For | Code | Is For | | | Code |
| Form 990 or Form 990-EZ | 01 | | | | |
| Form 990-BL | 02 | Form 1041-A | | | |
| Form 4720 (individual) | 03 | Form 4720 (other than individual) | | | 09 |
| Form 990-PF | 04 | Form 5227 | | | 10 |
| Form 990-T (sec 401(a) or 408(a) trust) | 05 | Form 6069 | | | 11 |
| Form 990-T (trust other than above) | 06 | Form 8870 | | | 12 |
| STOP! Do not complete Part II if you were not already granted | an auton | natic 3-month extension on a prev | iously file | d Form 8868 | 3. |
| BETH HOUSE | 773 T T 1 | B #0 212 DEL MA | n (13 | 02014 | |
| • The books are in the care of 2683 VIA DE LA | VALL | E, #G-313 - DEL MA Fax No ► (858) 759- | | 92014 | |
| Telephone No ► 858-759-5500 If the organization does not have an office or place of business | un tha life | | 3333 | | ightharpoonup |
| If this is for a Group Return, enter the organization's four digit (| | | f this is foi | the whole a | roup, check this |
| box If it is for part of the group, check this box | | ch a list with the names and EINs of | | | |
| | | BER 15, 2014 | an mornio | oro the oxter | 10101110101 |
| 5 For calendar year 2013, or other tax year beginning | 101211 | , and endin | a | | |
| 6 If the tax year entered in line 5 is for less than 12 months, cl | heck reas | | Final r | etum | |
| Change in accounting period | | | | | |
| 7 State in detail why you need the extension | | | | | |
| ADDITIONAL TIME IS NEEDED TO C | SATHE | R INFORMATION NECE | SSARY | TO_FI | LE A |
| COMPLETE AND ACCURATE RETURN. | | | | | |
| | | | | | |
| 8a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, | or 6069, | enter the tentative tax, less any | | | |
| nonrefundable credits See instructions | | | 8a | \$ | 0. |
| b If this application is for Forms 990-PF, 990-T, 4720, or 6069 | , enter an | y refundable credits and estimated | | | |
| tax payments made Include any prior year overpayment all | owed as a | a credit and any amount paid | | | • |
| previously with Form 8868 | | | 8b | \$ | 0. |
| C Balance due. Subtract line 8b from line 8a Include your pa | • | th this form, if required, by using | | | 0 |
| EFTPS (Electronic Federal Tax Payment System) See Instru | | et he completed for Part II e | 8c | | 0. |
| Under penalties of perjury, I declare that I have examined this form, includ | ing accomp | st be completed for Part II of completed for Part II of complete and statements, and to | - | f my knowledg | je and belief, |
| it is true, correct, and complete, and that I am authorized to prepare this fo | | | | | |
| Signature ► Title ► C | CHAIR | PERSON, PRESIDENT | Date | • | |
| | | | | Form 8 | 868 (Rev 1-2014) |