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DLN: 93493196011015

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)

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

► Information about Form 990 and its instructions is at <u>www.IRS.gov/form990</u>

OMB No 1545-0047

2013

Open to Public Inspection

۸ E	rtha "	2012 654	endar year, or tax year beginning 09-01-2013 , 2013, and ending 08-31	-2014			
			C Name of organization	-2014	D Employ	ver ide	entification number
_	еск іт ар dress ch	pplicable	RUN WILD MISSOULA INC			•	
_		_	Doing Business As		20-57	9411	. 4
_	me char	-					
Init	ıal retur	ım	Number and street (or P O box if mail is not delivered to street address) Room/suit	e	E Telepho	ne nur	mber
— Tei	mınated	:d	PO BOX 1573		· ·		
— _{Am}	ended r	return	City or town, state or province, country, and ZIP or foreign postal code		(406)	544-	3150
_ _{Ani}	nlication	n pending	MISSOULA, MT 59806		3		+ 72C 027
, , ,	Jileacion	r pending	F. Names and address of names and officers			•	\$ 736,837
			F Name and address of principal officer TONY BANOVICH		this a group ibordinates?	retur	n for □ Yes 🔽 No
			PO BOX 1573	Su	ibolulliates		Tes + 110
			MISSOULA,MT 59806	H(b) Ar	re all subordıı	nates	┌ Yes ┌ No
					cluded?		
T a	x-exem	npt status	▼ 501(c)(3)	If	"No," attach	a lıst	(see instructions)
ı w	ebsite	e: ► WW	/W RUNWILDMISSOULA ORG	H(c) G	roup exempti	ion nu	ımber ►
V	6		✓ Corporation Trust Association Other ►	1	of formation 200		
	rt I		mary	L feal o	or ioiiiiation 200	06 1	State of legal domicile MT
Га			escribe the organization's mission or most significant activities				
Activities & Governance	2 (3 N 4 N 5 T 6 T	Check the Number Number Total number Total number Total number Total number Total number Total number Number Total number Numbe	ES A CALENDAR OF EVENTS, ARTICLES, AND RESULTS OF LOCAL ES GENERAL RUN WILD MISSOULA INFORMATION AND RUNNING his box I fithe organization discontinued its operations or disposed of of voting members of the governing body (Part VI, line 1a) of independent voting members of the governing body (Part VI, line 1b) mber of individuals employed in calendar year 2013 (Part V, line 2a)	f more tha	ING EVEN	TS	
			lated business taxable income from Form 990-T, line 34				
	, D	ivet unite	rated business taxable income from Form 550-1, line 54		• •	7b	0
					Prior Voar		Current Vear
	.	Contri	hutions and grants (Part VIII, line 1h)	P	Prior Year	369	Current Year
ā	8		butions and grants (Part VIII, line 1h)	P	79,8	_	115,937
enne	9	Progra	m service revenue (Part VIII, line 2g)	P	79,8 366,7	779	115,937 579,584
Rayenue	9 10	Progra Invest	m service revenue (Part VIII, line 2g)	P	79,8 366,7 3	779	115,937 579,584 369
Rayenne	9 10 11	Progra Invest Other	m service revenue (Part VIII, line 2g)		79,8 366,7	779	115,937 579,584
Revenue	9 10	Progra Invest Other Total 1	m service revenue (Part VIII, line 2g)		79,8 366,7 3	779 300 322	115,937 579,584 369 20,398
Revenue	9 10 11 12	Progra Invest Other Total 1 12) .	m service revenue (Part VIII, line 2g)		79,8 366,7 3 12,3 459,2	779 300 322 270	115,937 579,584 369 20,398 716,288
Revenue	9 10 11	Progra Invest Other Total (12). Grants	Im service revenue (Part VIII, line 2g)		79,8 366,7 3 12,3 459,2	779 300 322	115,937 579,584 369 20,398
	9 10 11 12 13 14	Progra Invest Other Total r 12) . Grants Benefi	Im service revenue (Part VIII, line 2g)		79,8 366,7 3 12,3 459,2	779 300 322 270 520	115,937 579,584 369 20,398 716,288 51,880
	9 10 11 12	Progra Invest Other Total r 12) . Grants Benefi	Imm service revenue (Part VIII, line 2g)		79,8 366,7 3 12,3 459,2	779 300 322 270 520	115,937 579,584 369 20,398 716,288 51,880
	9 10 11 12 13 14	Progra Invest Other Total (12) . Grants Benefi Salarie 5-10)	Imm service revenue (Part VIII, line 2g)		79,8 366,7 3 12,3 459,2 9,5	779 300 322 270 520	115,937 579,584 369 20,398 716,288 51,880
	9 10 11 12 13 14 15	Progra Invest Other Total r 12) . Grants Benefi Salarie 5-10) Profes	Immservice revenue (Part VIII, line 2g)		79,8 366,7 3 12,3 459,2 9,5	779 300 322 270 520 0	115,937 579,584 369 20,398 716,288 51,880 0
Expenses Revenue	9 10 11 12 13 14 15	Progra Invest Other Total (12) . Grants Benefi Salar(65-10) Profes Total fu	Immoservice revenue (Part VIII, line 2g)		79,8 366,7 3 12,3 459,2 9,5	779 300 322 270 520 0 754	115,937 579,584 369 20,398 716,288 51,880 0
	9 10 11 12 13 14 15 16a b	Progra Invest Other Total r 12) . Grants Benefi Salaric 5-10) Profes Total fu Other	Immoservice revenue (Part VIII, line 2g)		79,8 366,7 3 12,3 459,2 9,5	779 300 322 270 520 0 754 0	115,937 579,584 369 20,398 716,288 51,880 0 93,540
	9 10 11 12 13 14 15 16a b	Progra Invest Other Total r 12) . Grants Benefi Salaris 5-10) Profes Total fu Other	Im service revenue (Part VIII, line 2g)		79,8 366,7 3 12,3 459,2 9,5 52,7	779 300 322 270 520 0 754 0	115,937 579,584 369 20,398 716,288 51,880 0 93,540 0
Expenses	9 10 11 12 13 14 15 16a b 17	Progra Invest Other Total r 12) . Grants Benefi Salaris 5-10) Profes Total fu Other	Immorror revenue (Part VIII, line 2g)		79,8 366,7 3 12,3 459,2 9,5 52,7 437,2 499,4 -40,2 ning of Currer	779 300 322 270 520 0 754 0	115,937 579,584 369 20,398 716,288 51,880 0 93,540 0 525,712 671,132
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Expenses	9 10 11 12 13 14 15 16a b 17 18 19	Progra Invest Other Total (12) . Grants Benefi Salarie 5-10) Profes Total fu Other Total e Reven	Imm service revenue (Part VIII, line 2g)	Beginn	79,8 366,7 3 12,3 459,2 9,5 52,7 437,2 499,4 -40,2 ning of Currer Year 272,4	779 300 322 270 520 0 754 0 200 474 204 nt	115,937 579,584 369 20,398 716,288 51,880 0 93,540 0 525,712 671,132 45,156 End of Year 358,169
Expenses	9 10 11 12 13 14 15 16a b 17 18 19	Progra Invest Other Total (12) . Grants Benefi Salarie 5-10) Profes Total fu Other Total e Reven	Immservice revenue (Part VIII, line 2g)	Beginn	79,8 366,7 3 12,3 459,2 9,5 52,7 437,2 499,4 -40,2 ning of Currer Year 272,4 1,6	779 300 322 270 520 0 754 0 200 174 204 nt 148 583	115,937 579,584 369 20,398 716,288 51,880 0 93,540 0 525,712 671,132 45,156 End of Year 358,169 42,248
Net Assets or Expenses Fund Balances	9 10 11 12 13 14 15 16a b 17 18 19	Progra Invest Other Total (12) . Grants Benefi Salario 5-10) Profes Total fu Other Total 6 Reven Total 1 Net as	Immservice revenue (Part VIII, line 2g)	Beginn	79,8 366,7 3 12,3 459,2 9,5 52,7 437,2 499,4 -40,2 ning of Currer Year 272,4	779 300 322 270 520 0 754 0 200 174 204 nt 148 583	115,937 579,584 369 20,398 716,288 51,880 0 93,540 0 525,712 671,132 45,156 End of Year 358,169
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n of Assets of Expenses a fund Balances	9 10 11 12 13 14 15 16a b 17 18 19	Progra Invest Other Total (1) Grants Benefi Salar(6) 5-10) Profes Total fu Other Total 6 Reven Total 6 Net as Sign alties of dge and	Imment income (Part VIII, line 2g)	Beginn	79,8 366,7 3 12,3 459,2 9,5 52,7 437,2 499,4 -40,2 ning of Currer Year 272,4 1,6 270,7	779 300 322 270 520 0 754 0 200 474 204 nt 148 583 765	115,937 579,584 369 20,398 716,288 51,880 0 93,540 0 525,712 671,132 45,156 End of Year 358,169 42,248 315,921
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Form **990** (2013)

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)? <i>If "Yes," complete Schedule A</i>	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏	2	Yes	
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		No
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		No
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		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>	6		No
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		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 2	8		No
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^{\square}	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		No
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part χ^{\bullet}	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No
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		No
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? <i>If</i> "Yes," complete Schedule F, Parts III and IV	16		No
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 $11e^{\gamma}$ If "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18		No
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		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Νo
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J.</i>	23		No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No
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 disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	Yes	
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c	Yes	
29	Did the organization receive more than $$25,000$ in non-cash contributions? If "Yes," complete Schedule M	29		Νo
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		N o
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
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		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	
		F	orm 990	(2013)

	Chack if Schodule O contains a response or note to any line in this Bart V			
	Check if Schedule O contains a response or note to any line in this Part V		Yes	No
la	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 13			
	Enter the number of Forms W-2G included in line 1a Enter-0- if not applicable 1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	1		
_	gaming (gambling) winnings to prize winners?	1c	Yes	
а	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			
	by this return	1		
,	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
1	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
)	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
1	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
)	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	-		
ì	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
)	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
:	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
	, , , , , , , , , , , , , , , , , , , ,	5c		
a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
•	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	6b		
	were not tax deductible?	OD		
	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		N
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to			
	file Form 8282?	7c		Ν
l	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
!	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		N
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		N
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as	<u> </u>		
,	required?	7g		No
1	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		No
	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			1
	business holdings at any time during the year?	8		No
	Sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?	9a		No
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		N (
	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a	_		
)	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	1		
	Section 501(c)(12) organizations. Enter			
l	Gross income from members or shareholders			
)	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
ı	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	1	
)	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
1	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
)	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			
	Enter the amount of reserves on hand	Ţ	<u> </u>	
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		N
	If "Yes " has it filed a Form 720 to report these payments? <i>If "No " provide an explanation in Schedule O</i>	14h		

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 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							▽
---	--	--	--	--	--	--	---

Se	ection 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			
	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			
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		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?.	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		No
	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		No
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		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
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		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ıe Cod	e.)
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		Νo
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b		No
	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		No
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		
Se	ection C. Disclosure			
Se 17				

- Own website
 ✓ Another's website
 ✓ 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, and financial 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 ►THE ORGANIZATION PO BOX 1573
 MISSOULA, MT 59806 (406) 544-3150

<u>Part VIII</u> Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- ◆ List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- ◆ List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) Average hours per week (list any hours	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	from the organization and related organizations
(1) JEN VON SEHLEN	2 00	x		l _x				0	0	
SECRETARY										
(2) MEGAN TIFFIN TREASURER	2 00	x		х				0	0	ı
(3) CAROL LIPP	3 00	х		х				0	0	(
PRESIDENT		^		^				Ŭ.		
(4) PAT CROSS	2 00	×		х				0	0	
VICE-PRESIDENT (5) STEPHEN BROWN	1 50	├──								
MEMBER		х						0	0	
(6) TORREY HOLMQUIST	1 50	X						0	0	
MEMBER		^						0		·
(7) RYAN SNYDER	1 00	х						0	0	
MEMBER										
(8) SUZANNE ELFSTROM MEMBER	1 50	x						0	0	
(9) BOB HOMER	1 50	-					\vdash			
MEMBER		X						0	0	ı
(10) EVA DUNN-FROEBIG	40 00			V				26.750	0	(
FORMER EXECUTIVE DIRECTOR				Х				36,750	0	
		<u> </u>								

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

		,												
	(A) Name and Title	(B) Average hours per week (list any hours	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						Report compens from organizat	able sation the ion (W-	(E) Reportable compensation from related organization	- (ted other ation he	
		for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-	MISC)	2/1099-MISC)		ganizati relate organiza	d
												+		
												+		
												+		
												1		
												+		
												+		
1b	Sub-Total		<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>	▶				+		
c	Total from continuation sheet	s to Part VII, S	ection A	١.				Þ						
d	Total (add lines 1b and 1c) .							►		36,750		0		0
2	Total number of individuals (in \$100,000 of reportable compe						d abov	e) w	ho received	d more th	an	·		
													Yes	No
3	Did the organization list any fo on line 1a? <i>If "Yes," complete S</i>								or highest	compen	sated employee	3		No
4	For any individual listed on line organization and related organ individual											_		
5	Did any person listed on line 1									• • anızatıon	or individual for	4		<u> No</u>
	services rendered to the organ	nization? <i>If "Yes</i>	," compl	ete S	ched	ule J	for su	ch pe	erson .		[5		No
Se	ction B. Independent Co	ntractors												
1	Complete this table for your five compensation from the organization												ax vear	
		(A) ame and business	-					, c			(B) cription of services	(C) Compensation		
	IV	anc and publics5	uuu1C33							Des	Chiption of Scivices		соптреп	Ja tiOH
												\dashv		
												#		
									1					

2 Total number of independent contractors (including but not limited to those listed above) who received more than

\$100,000 of compensation from the organization $\blacktriangleright 0$

			ule O contains a respon	ise of noce to any in	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
छ छ	1a	Federated cam	paigns 1a					
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership du	es 1b	32,312				
ן <u>שֿ</u> כֿ	c	Fundraising eve	ents 1c					
ar.	d	Related organiz	zations 1d					
inbutions, Gins, Grants Other Similar Amounts	e	Government grants	s (contributions) 1e					
S	f		ons, gifts, grants, and 1f	83,625				
를 흘	g	similar amounts no	ons included in lines	12.500				
<u> </u>	_	1a-1f \$		13,500				
and	h	Total. Add lines	s 1 a - 1 f	· · · · •	115,937			
e l				Business Code				
Program Serwoe Revenue	2a	MARATHON INCOM	1E	711300	440,110	440,110		
æ	b	RACE INCOME	SEC INC	711300	111,332	111,332		
Š.	c d	TRAINING & CLASS	SES INC	711300	28,142	28,142		
<u> </u>	u e							
E E	f	All other progra	am service revenue					
္ ငို								
_	<u>g</u> 3		ome (including divident		579,584			
	,		ar amounts)		369			36
	4		stment of tax-exempt bond p	proceeds -				
	5	Royalties	() Dool	(··) Paragrah				
	6a	Gross rents	(ı) Real 350	(II) Personal				
	b	Less rental	0					
	c	expenses Rental income	350					
	d	or (loss) Net rental incoi	me or (loss)		350	350		
			(ı) Securities	(II) Other				
	7a	Gross amount from sales of assets other						
	b	than inventory Less cost or other basis and sales expenses						
	c	Gain or (loss)						
	d		ss)	· · · · •				
# E	8a	Gross income f events (not inc	luding 					
Omer nevenue		of contributions See Part IV, lin	reported on line 1c) ie 18 a					
# 5	b	Less direct ex	penses b					
)	c		loss) from fundraising (ا	events 🛌				
	9a	Gross income f See Part IV, lin	rom gaming activities le 19 a					
	b	Less direct ex	penses b					
		Gross sales of		vities≱-				
	b	returns and allo	owances . a oods sold b	37,529				
			(loss) from sales of inve	20,549 entory p -	16,980	16,980		
		Miscellaneous		Business Code				
	11a	OTHER REVEN	IUE	711300	3,068	3,068		
	b							
	C							
	d		ue					
	e	Total. Add lines	s 11a-11d	· · · •	3,068			
	12	Total revenue.	See Instructions		716,288	599,982	0	36

Part IX Statement of Functional Expenses

section 501(c)(3) and 501(c)(4)) organizations must complete all colum	ns All other organizations must com	plete column (A)

	Check if Schedule O contains a response or note to any line in this	Part IX	<u> </u>	<u> </u>	<u> </u>
	ot include amounts reported on lines 6b, o, 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	51,880	51,880		
2	Grants and other assistance to individuals in the United States See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	30,742	15,776	14,966	
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	54,541	43,400	10,860	281
8	Pension plan accruals and contributions (include section $401(k)$ and $403(b)$ employer contributions)				
9	Other employee benefits				
10	Payroll taxes	8,257	5,795	2,461	1
11	Fees for services (non-employees)				
а	Management				
b	Legal	954	817	137	
c	Accounting	7,970		7,970	
d	Lobbying				
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	8,871	4,140	4,731	
12	Advertising and promotion	60,320	44,519	5,663	10,138
13	Office expenses	2,407	14	2,393	10,138
	Information technology	2,407	17	2,393	
14 15	Royalties				
16	·	7.250	4.050	3,300	
17	Occupancy	7,350 6,787	4,050	· •	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	6,787	5,761	1,026	
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	6,079	5,595	484	
23	Insurance	0,073	3,333	404	
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	RACE EXPENSES	306,237	302,276	3,961	
b	MEMBERSHIP DUES	25,770	25,770		
С	SECTION 481(A) ADJUSTME	19,695	19,695		
d	VOLUNTEER EXPENSE	18,882	18,804	78	
е	All other expenses	54,390	38,707	15,683	
25	Total functional expenses. Add lines 1 through 24e	671,132	586,999	73,713	10,420
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this	s Part X .				
					(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing			30,392	1	15,432
	2	Savings and temporary cash investments			236,233	2	306,602
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net				4	18,330
	5	Loans and other receivables from current and former officers, dire employees, and highest compensated employees Complete Part Schedule L	ectors, trus	tees, key			
its	6	Loans and other receivables from other disqualified persons (as d $4958(f)(1)$), persons described in section $4958(c)(3)(B)$, and corand sponsoring organizations of section $501(c)(9)$ voluntary emporganizations (see instructions) Complete Part II of Schedule L	ntrıbutıng e	mployers		6	
Assets	7	Notes and loans receivable, net				7	
₹	8	Inventories for sale or use		•		8	
	9	Prepaid expenses and deferred charges		•		9	11,364
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	18,629			11,004
	ь	Less accumulated depreciation	10b	12,188	5,823	10c	6,441
	11	Investments—publicly traded securities		,	,	11	,
	12	Investments—other securities See Part IV, line 11				12	
	13	Investments—program-related See Part IV, line 11				13	
	14	Intangible assets	•			14	
	15	Other assets See Part IV, line 11	• •			15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)			272,448		358,169
	17	Accounts payable and accrued expenses		•	272,440	17	5,388
	18					18	3,366
		Grants payable		•		19	33,575
	19						33,373
	20	Tax-exempt bond liabilities				20	
ities	21	Escrow or custodial account liability Complete Part IV of Schedu				21	
Liabiliti	22	Loans and other payables to current and former officers, directors key employees, highest compensated employees, and disqualified	ď				
<u>ia</u>		persons Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third parties				23	
	24	Unsecured notes and loans payable to unrelated third parties .				24	
	25	Other liabilities (including federal income tax, payables to related and other liabilities not included on lines 17-24) Complete Part 2	X of Sched	,	1,683	25	3,285
	26	D			1,683	26	42,248
	20	Total liabilities. Add lines 17 through 25			1,003	20	42,240
φ O		Organizations that follow SFAS 117 (ASC 958), check here ► lines 27 through 29, and lines 33 and 34.	and comple	ete			
Ë	27	Unrestricted net assets			270,765	27	315,921
<u>ର</u>	28	Temporarily restricted net assets				28	
or Fund Balance	29	Permanently restricted net assets				29	
Ĭ	23	Organizations that do not follow SFAS 117 (ASC 958), check here		ı			
<u>ш</u>		complete lines 30 through 34.	- j aliu	'			
0 .0	30	Capital stock or trust principal, or current funds				30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund .				31	
2 S	32	Retained earnings, endowment, accumulated income, or other fun				32	
	33	Total net assets or fund balances			270,765	33	315,921
Š	34	Total liabilities and net assets/fund balances			272,448		358,169
	, , , ,	rotar nabilities and net assets/fully balances			Z12,440	24	330, 109

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the

required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

3b

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493196011015

OMB No 1545-0047

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. ► See separate instructions.

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

Open to Public **Inspection**

Name of the organization RUN WILD MISSOULA INC

SCHEDULE A

(Form 990 or 990EZ)

Internal Revenue Service

Department of the

Treasury

Employer identification number

Pa	rt I	Reas	on for Pu	blic Charity Sta	tus (All ord	ganizations	must comi	olete this	20-5794 part.) See ı			
				e foundation becaus								
1	Г	A churc	h, conventi	on of churches, or as	ssociation of	f churches d	escribed in s e	ection 170	(b)(1)(A)(i).			
2	Г	A scho	ol described	in section 170(b)(1	.)(A)(ii). (At	tach Sched	ule E)					
3	\sqcap	A hosp	ital or a coo	perative hospital se	rvice organiz	zatıon descr	ibed in sectio	n 170(b)(1	L)(A)(iii).			
4	Г	A medi	cal researcl	n organization operat	ted ın conjun	ction with a	hospital desc	cribed in s e	ection 170(b)	(1)(A)(iii). I	nter the	
	_			ty, and state								
5		An orga	anızatıon op	erated for the benefi	t of a college	or universi	ty owned or o	perated by	a governmen	tal unit desc	ribed in	
	_	sect ion	170(b)(1)(A)(iv). (Complete P	art II)							
6				local government or	5			` '	. , , , ,			
7	Γ	_		at normally receives		•	support from	a governm	nental unit or i	rom the gen	eral public	
8	Г			n 170(b)(1)(A)(vi). described in section			nplete Part II)				
9	Ţ.			at normally receives			•	-	ibutions, mem	bership fees	s, and gross	
		_		ities related to its ex	-				•		-	
		ıts supı	port from gr	oss investment inco	me and unre	lated busine	ess taxable in	come (less	s section 511	tax) from bu	ısınesses	
		acquire	d by the org	janızatıon after June	30,1975 S	ee section	509(a)(2). (C	omplete P	art III)			
10	Γ	An orga	anization or	ganized and operated	dexclusively	to test for	public safety	See secti	on 509(a)(4).			
11	Γ	An orga	anızatıon org	ganized and operated	dexclusively	for the ben	efit of, to perf	orm the fu	nctions 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). Chec									509(a)(3). Check	
				bes the type of supp						6	. 11	
	_			b Type II c								
е	ı	•	_	ox, I certify that the on managers and otl	_		,		, ,	•	•	
			i 509(a)(2)	on managers and ou	ner than one	or more pur	onery support	eu organiz	ations describ	red III Sectio	11 30 3 (a)(1) 01	
f		If the o	rganization	received a written de	etermination	from the IR	S that it is a	Type I, Ty	pe II, or Type	III support	ıng organızatıo <u>n,</u>	
			his box					•	6.1		Γ	
g			Nugust 1 / , 2 ng persons?	2006, has the organi	zation accep	oted any gift	or contributi	on from an	y of the			
			-	rectly or indirectly o	ontrols, eith	er alone or	together with	persons d	escribed in (ii)	Yes No	
		and (III)) below, the	governing body of th	e supported	organizatio	n?	•	•	110	ı(i)	
				er of a person descri		=				11g	* * *	
				lled entity of a perso			above?			11g		
h				ng information about							· · · · · · · · · · · · · · · · · · ·	
				-		-						
(i) Nan	ne of	(ii) EIN	(iii) Type of	(iv) Is	the	(v) Did you	notify	(vi) Is	the	(vii) A mount of	
	suppoi			organization	organızatı		the organiz		organizat		monetary	
0	rganiz	ation		(described on	col (i) lis		ın col (i) d	•	col (i) org		support	
			lines 1 - 9 abov		your gove docume	_	- ' '		ın the U	5 /		
				(see	docume	TIC.						
				instructions))	Vac	Ne	Vac	Ne	Ver	Ne	┥	
					Yes	No	Yes	No	Yes	No	 	
											<u> </u>	
T-4-	. •				1		11			1	1	

Sch	edule A (Form 990 or 990-EZ) 2013						Page 2
Pa	(Complete only if you o	hecked the bo	x on line 5, 7,	or 8 of Part I o	r if the organiza	ation failed	to qualify under
_	Part III. If the organiza ection A. Public Support	tion fails to qu	alify under the	tests listed bel	low, please con	iplete Part .	.111.)
	endar year (or fiscal year beginning	(-) 2000	(1-) 2010	(-) 2011	(4) 2012	(-) 201	(5) T. I.
	in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 201:	3 (f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not include any "unusual						
	grants ")						
2	Tax revenues levied for the						
	organization's benefit and either						
	paid to or expended on its						
3	behalf The value of services or facilities						
3	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly supported organization) included on						
	line 1 that exceeds 2% of the						
	amount shown on line 11, column						
	(f)						
6	Public support. Subtract line 5 from line 4						
S	ection B. Total Support	I	<u> </u>		I		I
	endar year (or fiscal year beginning	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
	in) ►	(a) 2009	(6) 2010	(6) 2011	(u) 2012	(e) 2013	(I) I otal
7	A mounts from line 4						
8	Gross income from interest,						
	dividends, payments received on securities loans, rents, royalties						
	and income from similar						
	sources						
9	Net income from unrelated						
	business activities, whether or not the business is regularly carried						
	on						
10	Other income Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV)						
11	Total support (Add lines 7 through 10)						
12	Gross receipts from related activities	es, etc (see inst	ructions)	•		12	1
13	First five years. If the Form 990 is i	for the organizati	on's first, second	l, thırd, fourth, or	fifth tax year as a	501(c)(3) o	rganızatıon, check
	this box and stop here				<u> </u>	<u> </u>	<u></u>
	ection C. Computation of Pub			4.4 1 (5)			
14	Public support percentage for 2013			11, column (f))		14	
15	Public support percentage for 2012	· ·	•			15	_
16a	33 1/3% support test—2013. If the condition have				line 14 is 33 1/3%	or more, che	ck this box
b	and stop here. The organization qua 33 1/3% support test—2012. If the				and line 15 is 33	8 1/3% or more	
	box and stop here. The organization				, 10 00	. 40.001111011	► F
17a	10%-facts-and-circumstances test-	-2013. If the org	anızatıon dıd not	check a box on lı			
	is 10% or more, and if the organizat						
	in Part IV how the organization mee	ts the "facts-and	d-circumstances'	test The organ	ızatıon qualıfıes a	s a publicly s	
Ь	organization 10%-facts-and-circumstances test-	-2012 . If the ora	anization did not	check a hov on li	ne 13 16a 16b	or 17a and L	▶ ┌
	15 is 10% or more, and if the organ						
	Explain in Part IV how the organizat						ublicly
	supported organization				4-71		▶ □
18	Private foundation. If the organizat instructions	ion aid not check	k a box on line 13	, 16a, 16b, 1/a,	or 1/p, check thi	s pox and se	e ▶□
							г,

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

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

	ction A. Public Support							
Cale	ndar year (or fiscal year beginning in) 🟲	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2	013	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	96,002	69,201	87,790	79,869		117,687	450,549
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	348,734	388,345	553,188	391,231		595,728	2,277,226
3	Gross receipts from activities that are not an unrelated trade or business under section 513							
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							
5	The value of services or facilities furnished by a governmental unit to the organization without charge							
6	Total. Add lines 1 through 5	444,736	457,546	640,978	471,100		713,415	2,727,775
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						6,000	6,000
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							0
c	Add lines 7a and 7b						6,000	6,000
8	Public support (Subtract line 7c from line 6)							2,721,775
Se	ection B. Total Support							
	ndar year (or fiscal year beginning	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 20)13	(f) Total
•	in) ►	444,736	457,546	640,978	471,100		713,415	2,727,775
9 10a	A mounts from line 6 Gross income from interest,	444,730	437,340	040,978	471,100		713,413	2,727,773
	dividends, payments received on securities loans, rents, royalties and income from similar sources		404	529	300		369	1,602
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975							
C	Add lines 10a and 10b		404	529	300		369	1,602
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)						3,068	3,068
13	Total support. (Add lines 9, 10c, 11, and 12)	444,736	457,950	641,507	471,400		716,852	2,732,445
14	First five years. If the Form 990 is for check this box and stop here	or the organizatio	n's first, second,	third, fourth, or f	ifth tax year as a	501(c)(3) organi	ızatıon, ▶□
Se	ction C. Computation of Publ							·
15	Public support percentage for 2013		•	13, column (f))		15		99 610 %
16	Public support percentage from 201					16		99 950 %
	ction D. Computation of Inve				n /f\\	T	Г	
17	Investment income percentage for 2		* *		II (f))	17		0 060 %
18	Investment income percentage from				lina 1 F	18	20/ - :	0 050 %
198	33 1/3% support tests—2013. If the more than 33 1/3%, check this box a							line 1 / is not ► ▼

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

Part IV Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a (17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).							
Facts And Circumstances Test							
Return Reference Explanation							
		Schodulo A / Form 0	000 er 000 E7) 201				

Schedule A (Form 990 or 990-EZ) 2013

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DLN: 93493196011015

OMB No 1545-0047

SCHEDULE D

(Form 990)

Department of the Treasury

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. ► See separate instructions. ► Information about Schedule D (Form 990)

Open to Public

nal Revenue Service and its	s instructions is at <u>www.irs.gov/10riii990</u> .	Inspection
ame of the organization JN WILD MISSOULA INC		Employer identification number
		20-5794114
	nor Advised Funds or Other Similar F	unds or Accounts. Complete if the
organization answered "Yes" to Fo		405
Tatal sumbayat and afterna	(a) Donor advised funds	(b) Funds and other accounts
Total number at end of year		
Aggregate contributions to (during year)		
Aggregate grants from (during year) Aggregate value at end of year		
funds are the organization's property, subject		☐ Yes ☐ No
	rs, and donor advisors in writing that grant funds the benefit of the donor or donor advisor, or for a	
	nplete if the organization answered "Yes"	to Form 990, Part IV, line 7.
Purpose(s) of conservation easements held b Preservation of land for public use (e g , re Protection of natural habitat	ecreation or education) $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$	n historically important land area certified historic structure
Preservation of open space		
Complete lines 2a through 2d if the organizat easement on the last day of the tax year	ion held a qualified conservation contribution in	the form of a conservation
,		Held at the End of the Year
Total number of conservation easements		2a
Total acreage restricted by conservation ease	ements	2b
Number of conservation easements on a certi	fied historic structure included in (a)	2c
Number of conservation easements included historic structure listed in the National Regist		2d
Number of conservation easements modified,	transferred, released, extinguished, or terminat	ed by the organization during
the tax year ►		
Number of states where property subject to co	onservation easement is located 🗠	
	garding the periodic monitoring, inspection, han	
Staff and volunteer hours devoted to monitori	ng, inspecting, and enforcing conservation ease	ments during the year
	nspecting, and enforcing conservation easement	ts during the year
Does each conservation easement reported o and section 170(h)(4)(B)(II)?	n line 2(d) above satisfy the requirements of se	ction 170(h)(4)(B)(i)
In Part XIII, describe how the organization re	ports conservation easements in its revenue an text of the footnote to the organization's financia n easements	
t III Organizations Maintaining Col	lections of Art, Historical Treasures, vered "Yes" to Form 990, Part IV, line 8.	or Other Similar Assets.
If the organization elected, as permitted unde works of art, historical treasures, or other sim	r SFAS 116 (ASC 958), not to report in its revenuer assets held for public exhibition, education,	, or research in furtherance of public
If the organization elected, as permitted unde	ootnote to its financial statements that describe or SFAS 116 (ASC 958), to report in its revenue nilar assets held for public exhibition, education, g to these items	statement and balance sheet
(i) Revenues included in Form 990, Part VIII	, line 1	▶ \$
(ii) Assets included in Form 990, Part X	•	· · · · <u></u>
If the organization received or held works of a	rt, historical treasures, or other similar assets f ler SFAS 116 (ASC 958) relating to these items	for financial gain, provide the
Revenues included in Form 990, Part VIII, lir	· · · · ·	. ►\$
Assets included in Form 990, Part X		▶ \$

Par	t III Organizations Maintaining Co	llections of Art, I	Histor	ical 1	<u> Treasur</u>	es, or Ot	<u>:her</u>	Similar Ass	sets (c	ontinued)
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other records	, check	any o	f the follo	wing that a	re a s	significant use	of its	
а	Public exhibition		d $ egthankspace egthankspa$	Loa	n or exch	ange progra	ams			
b	Scholarly research		е Г	Oth	er					
c	Preservation for future generations									
4	Provide a description of the organization's co Part XIII	ollections and explain	how the	y furt	her the or	ganızatıon'	sexe	empt purpose ir	ı	
5	During the year, did the organization solicit								,	
Da	assets to be sold to raise funds rather than t rt IV							<u>'</u>	Yes	No
	Part IV, line 9, or reported an an					answered	1 10	.5 (0 101111)		
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ian or other intermedi	ary for (ontril	outions or	rother asse	ets n		_ Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	I and complete the fo	llowing	table		_				
								Am	ount	
с	Beginning balance						1c			
d	Additions during the year					<u> </u>	1d			
e	Distributions during the year					⊢	1e			
f	Ending balance						1f			
2a	Did the organization include an amount on Fo	orm 990, Part X, line 2	217					J	Yes	Г No
_ь	If "Yes," explain the arrangement in Part XII		-		-					<u> </u>
Pa	rt V Endowment Funds. Complete	f the organization a	answer (b)Prior						(a)Eour	years back
1a	Beginning of year balance	(a)Curient year	(U)PHOI	уеаг	D (C) W	o years back	(u)	lifee years back	(e)rour	years back
ь	Contributions									
c	Net investment earnings, gains, and losses									
d	Grants or scholarships				+			+		
e	Other expenditures for facilities				+			+		
_	and programs									
f	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of the cur	rent year end balance	(line 1g	, colu	mn (a)) h	eld as				
а	Board designated or quasi-endowment ►									
b	Permanent endowment ►									
c	Temporarily restricted endowment ►									
	The percentages in lines 2a, 2b, and 2c sho	uld equal 100%								
3a	Are there endowment funds not in the posses	ssion of the organizati	on that	are he	eld and ad	lmınıstered	for t	he		T
	organization by (i) unrelated organizations							3a(i	Yes	No
	(ii) related organizations							3a(i		+
b	If "Yes" to 3a(II), are the related organization							3b		
4	Describe in Part XIII the intended uses of th	ne organization's endo	wment 1	unds					<u> </u>	
Pai	rt VI Land, Buildings, and Equipme		e orgai	nızatı	on answ	ered 'Yes'	to F	orm 990, Pa	rt IV, I	ine
	11a. See Form 990, Part X, line : Description of property	10.		(a) Cos	t or other	(b)Cost or o	other	(c) Accumulate	d (d)	Book value
	5 334 Tipelott of property				vestment)	basis (oth		depreciation	`"/	
	Land		-+							
	Buildings								_	
	Leasehold improvements		. $dash$							
	Equipment		. $dash$			18	3,629	12,1	88	6,441
	Other									<u> </u>
Tota	ıl. Add lınes 1a through 1e <i>(Column (d) must e</i>		column (B), Iın	e 10(c).)					6,441
		,		,,	/ - /	<u> </u>		Schedule D	(Form	-

Part VII	See Form 990, Part X, line 12.	omplete if the organization	answered Yes to Form 990, Part IV, line 11b.
((a) Description of security or category	(b)Book value	(c) Method of valuation
(1)Financia	(including name of security) al derivatives		Cost or end-of-year market value
	-held equity interests		
Other	,		
Total (Colum	nn (b) must equal Form 990, Part X, col (B) line 12)	p	
Part VIII			J n answered 'Yes' to Form 990, Part IV, line 11c.
r di C VIII	See Form 990, Part X, line 13.	complete if the organization	ranswered res to rollin 550, rate iv, line rie.
	(a) Description of investment	(b) Book value	(c) Method of valuation
			Cost or end-of-year market value
Total. (Colum	nn (b) must equal Form 990, Part X, col (B) line 13)	•	
Part IX		on answered 'Yes' to Form 990	, Part IV, line 11d See Form 990, Part X, line 15
	(a) Desc	cription	(b) Book value
	mm (b) must equal Form 990, Part X, col.(B) line		
Part X	Other Liabilities. Complete if the org Form 990, Part X, line 25.	yanızadon answered 'Yes' to	o Form 990, Part IV, line 11e or 11f. See
1	(a) Description of liability	(b) Book value	
Federal inc	ome taxes		
	LIABILITIES	2,845	
WAGESPA		440	
	mn (b) must equal Form 990, Part X, col (B) line 25)	3,285	
2. Liability	for uncertain tax positions In Part XIII, provide	the the text of the footnote to th	e organization's tinancial statements that

Par		evenue per Audited Financial Stat vered 'Yes' to Form 990, Part IV, line 1		is with kevenue	per ĸ	eturn Complete i
1		r support per audited financial statements			1	
2	Amounts included on line 1 bu	it not on Form 990, Part VIII, line 12				
а	Net unrealized gains on invest	ments	2a			
b	Donated services and use of f	acılıtıes	2b			
c	Recoveries of prior year grant	s	2c			
d	Other (Describe in Part XIII)		2d			
е	Add lines 2a through 2d .				2e	
	Subtract line ${f 2e}$ from line ${f 1}$.				3	
	Amounts included on Form 99	0, Part VIII, line 12, but not on line 1				
а	Investment expenses not incl	uded on Form 990, Part VIII, line 7b .	4a			
b	Other (Describe in Part XIII)		4b			
С	Add lines 4a and 4b				4c	
	Total revenue Add lines 3 and	d 4c. (This must equal Form 990, Part I, line	12).		5	
art		xpenses per Audited Financial Sta		nts With Expense	s per	Return. Complet
		swered 'Yes' to Form 990, Part IV, line			1 .	T
	· ·	raudited financial statements			1	
		t not on Form 990, Part IX, line 25	1 -	I		
3		acilities	2a		_	
b			2b		_	
c			2c			
d	Other (Describe in Part XIII)		2d		4 _	
е	_				2e	
					3	
		0, Part IX, line 25, but not on line 1:	1	I		
a	·	uded on Form 990, Part VIII, line 7b			_	
b			4b		4	
C					4c	
		nd 4c. (This must equal Form 990, Part I, lin	e 18)		5	
	Supplemental Inf					
art		Part II, lines 3, 5, and 9, Part III, lines 1a, lines 2d and 4b, and Part XII, lines 2d and				de any addıtıonal
	Return Reference	Explanation				

	<u> </u>	
Part XIII	Supplemental Info	ormation (continued)
Ret	turn Reference	Explanation

Schedule D (Form 990) 2013

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Schedule I (Form 990)

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

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

DLN: 93493196011015

Department of the Treasury Internal Revenue Service

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

Name of the organization						Employer identif	ication number		
RUN WILD MISSOULA INC						20-5794114	20-5794114		
Part I General Inform	nation on Grants	and Assistance				•			
	d to award the grants of grants of grants of grants and grants and grants are to grants are grants a	orassistance?	e of grant funds in the l Organizations in		s. Complete ıf the or	ganızatıon answere	∀ Yes ☐		
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
(1) PARTNERSHIP HEALTH CENTER 323 WALDER ST MISSOULA,MT 59802	36-3843543	CODE SECTION 115	6,553		CASH		FOR USE BY PARTNERSHIP HEALTH CENTER TO PROVIDE FUNDS FOR MEN IN FINANCIAL NEED FOR DIAGNOSIS AND TREATMENT OF MEN'S CANCERS (PROSTATE, TESTICULAR, ETC)		
(2) UNIVERSITY OF MONTANA FOUNDATION PO BOX 7159 MISSOULA, MT 59807	81-0362989	501(C)3	16,000		CASH		DONATION TO FRIENDS OF THE "M" TRAIL FUND FOR IMPROVEMENTS TO THE TRAIL AND TRAIL HEAD		
(3) MISSOULA XCTFINC PO BOX 7909 MISSOULA,MT 59807	46-5195825	501(C)3	20,000		CASH		DONATION TOWARDS ALL- WEATHER SURFACING OF TRACK AT TOOLE PARK		

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

1	Grants and Other Assistance to Individuals in the United States. Complete	ıf the organization answered	"Yes" to Form 990,	Part IV, line 22.
	Part III can be duplicated if additional space is needed.			

(a)Type of grant or assistanc	e	(b) Number of recipients	(c) A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
Part IV Supplemental Ir	nforma	tion. Provide the in	formation required in P	Part I, line 2, Part III, co	lumn (b), and any other a	dditional information.
Return Reference	Explanation					
PART I, LINE 2	THE ORGANIZATION PROVIDES UNRESTRICTED CONTRIBUTIONS TO OTHER TAX-EXEMPT ORGANIZATIONS WITH SIMILAR MISSIONS					

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DLN: 93493196011015

Schedule L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Transactions with Interested Persons

► Complete if the organization answered "Yes" on Form 990, Part IV, lines 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

Open to Public Inspection

RUN WILD MISSOL								"	mpioy	er ident	iricatio	n numbe	г
								2	20-57	94114			
) and section							
						O, Part IV, line							
1 (a) Nam	e of disquali	fied person	(ship between n and organiz		(c) Des	cription	of tra	nsaction	י -	(d) Corr	
			-	регзог	Tana organiz	dion						Yes	No
2 Enterthe a	mount of ta	x incurred b	ov ord	anızatıon n	nanagers or o	disqualified per	rsons durina 1	he vea	r unde	rsectioi	า		
4958 .			•							► \$			
3 Enterthe a	mount of ta	x, ıf any, on	lıne	2, above, re	eimbursed by	the organizati	ion			► \$			
		., -									'		
					d Persons	• 190-EZ, Part V	/ line 38a or	Form 0	an D	art IV li	ne 26	or if the	
						ine 5, 6, or 22		FUIIII 9	90, F	aic I V , ii	ne zo,	or ii tile	
(a) Name of	(b)	(c		(d) Loan t		(e)Original	(f)Balance	(g) In		(h)		(i)Wrı	tten
ınterested	Relationsh					principal	due	defaul	t?	A pprov	'ed	agreen	nent?
person	with organizati	on loa	n	organızatıd	n?	amount				by board			
	organizati									or			
						1				commi	ttee?		
				То	From			Yes	No	Yes	No	Yes	No
												_	
										1	1	_	
						-		<u> </u>		1	<u> </u>	_	
											1	_	
											1	_	
Total		▶	•				l				1	7	
Part III Gra	ants or As			nefittina	Intereste	d Persons.							
						Form 990, P	art IV, line :	27.					
(a) Name of ir	nterested			ıp between		nt of assistanc	е (d) Тур	e of ass	istanc	:e (e) Purpo	se of ass	ıstance
perso	n		l pers anıza	on and the									
		org	alliZa	ition									
							_						

Part IV business Transactions					
Complete if the organization	<u>on answered "Yes" on </u>	<u>Form 990, Part IV, lır</u>	ne 28a, 28b, or 28c.		
(a) Name of interested person	(b) Relationship between interested person and the organization	(c) A mount of transaction	(d) Description of transaction	(e) Sh of organiz reven	: zation's
				Yes	No
(1) RUNNERS EDGE	FORMER BOARD MEMBER, ANDERS BROOKER, IS THE OWNER OF RUNNERS EDGE	, ,	CASH PAID TO RUNNERS EDGE FOR OFFICE RENT, MERCHANDISE FOR RESALE, VOLUNTEER GIFTS, RACE AND TRAINING CLASS GIFTS AND REIMBURSEMENTS		No
(2) ANDERS BROOKER	FORMER BOARD MEMBER, CURRENT EMPLOYEE	1	SALARY PAID TO FORMER BOARD MEMBER WHO IS CURRENTLY AN EMPLOYEE		No

Part V Supplemental Information

Provide additional information for responses to questions on Schedule L (see instructions)

Return Reference Explanation

Schedule L (Form 990 or 990-EZ) 2013

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SCHEDULE 0

(Form 990 or 990-EZ)

Name of the organization RUN WILD MISSOULA INC

Department of the Treasury

Internal Revenue Service

As Filed Data -

DLN: 93493196011015

Employer identification number

OMB No 1545-0047

Open to Public Inspection

Supplemental Information to Form 990 or 990-EZ

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

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at

www.irs.gov/form990.

20-5794114

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11	THE BOARD OF DIRECTORS REVIEWS AND APPROVES THE ORGANIZATION'S FORM 990 BEFORE IT IS FILED WITH THE IRS
FORM 990, PART VI, SECTION B, LINE 12C	THE BOARD OF DIRECTORS ARE REQUIRED TO SIGN A FORM DISCLOSING INTEREST THAT WOULD GIVE RISE TO CONFLICT
FORM 990, PART VI, SECTION B, LINE 15A	THE PERSONNEL COMMITTEE IS RESPONSIBLE FOR REVIEWING THE PERFORMANCE AND COMPENSATION OF T HE EXECUTIVE DIRECTOR THEY MAKE A RECOMMENDATION TO THE BOARD OF DIRECTORS WHO VOTE ON FI NAL APPROVAL
FORM 990, PART VI, SECTION C, LINE 18	THE ORGANIZATION MAKES ITS FORM 990 AVAILABLE TO THE PUBLIC UPON REQUEST, AND IT IS AVAILABLE ON GUIDESTAR COM
FORM 990, PART VI, SECTION C, LINE 19	THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, POLICIES, AND FINANCIAL STATEMENTS AVAILAB LE TO THE PUBLIC UPON REQUEST THEY ARE ALSO AVAILABLE ON GUIDESTAR COM
FORM 990, PART XII, LINE 1	THE ORGANIZATION CHANGED ITS METHOD OF ACCOUNTING FROM CASH TO ACCRUAL

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -DLN: 93493196011015 OMB No 1545-0172 Depreciation and Amortization (Including Information on Listed Property) Department of the Treasury Internal Revenue Service (99) See separate instructions. ► Attach to your tax return. Sequence No 179 Business or activity to which this form relates **Identifying number** FORM 990 PAGE 10 Name(s) shown on return RUN WILD MISSOULA INC 20-5794114 Part I **Election To Expense Certain Property Under Section 179** Note: If you have any listed property, complete Part V before you complete Part I. 500,000 1 Total cost of section 179 property placed in service (see instructions) • • • • • • 2 3 Threshold cost of section 179 property before reduction in limitation (see instructions) 2,000,000 4 Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0- · · · · · · Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married 5 (b) Cost (business use 6 (a) Description of property (c) Elected cost only) 7 Listed property Enter the amount from line 29 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 8 9 Carryover of disallowed deduction from line 13 of your 2012 Form 4562 10 11 Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see 11 12 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11 13 Carryover of disallowed deduction to 2014 Add lines 9 and 10, less line 12 . | 13 Note: Do not use Part II or Part III below for listed property. Instead, use Part V. Special Depreciation Allowance and Other Depreciation (Do not include listed property) (See instructions) Special depreciation allowance for qualified property (other than listed property) placed in service during 14 3,349 Property subject to section 168(f)(1) election 15 MACRS Depreciation (Do not include listed property.) (See instructions.) MACRS deductions for assets placed in service in tax years beginning before 2013 · · · · · · 2.505 If you are electing to group any assets placed in service during the tax year into one or more general Section B—Assets Placed in Service During 2013 Tax Year Using the General Depreciation System (c) Basis for (b) Month and depreciation (a) Classification of (d) Recovery (g)Depreciation year placed in (business/investment (e) Convention (f) Method deduction period property service only—see instructions) 19a 3-year property 5 0 200 DB 225 **b** 5-year property 3.349 МО c 7-year property d 10-year property e 15-year property f 20-year property S/L g 25-year property 25 yrs 27 5 yrs MM S/L h Residential rental property 27 5 yrs ΜМ S/L ΜМ i Nonresidential real 39 yrs property ΜМ Section C—Assets Placed in Service During 2013 Tax Year Using the Alternative Depreciation System 20a Class life S/L **b** 12-year 12 yrs S/L **c** 40-year MMS/L 40 yrs Summary (see instructions.) Part IV 21 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 Enter 22 here and on the appropriate lines of your return Partnerships and S corporations—see instructions • • 6.079 23 For assets shown above and placed in service during the current year, enter the 23 portion of the basis attributable to section 263A costs

Part V Listed Property (Include automobiles, certain other vehicles, certain computers, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A—Depre	ciation a	<u>nd Other I</u>	<u>nforma</u>	tion (C	aution	: See	the i	<u>instruc</u>	tions i	for lim	rits i	or pa	isseng	er au	tomol	oiles.)
24a Doyou have evider	nce to support	the business/in	vestment ι	ise claime	d? F Yes	Гио		2	4b If "Y	es," is t	the ev	ıdence	written?	Гүе	s F N	0
(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	Cost o	i) r other sıs	(busines	(e) r depreca ss/investr e only)		(f) Recover period	y Me	(g) thod/ /ention		(h Deprec dedu	iation/		(i) Electe section cost	179
25 Special depreciation allo 50% in a qualified busi	•		erty placed	in service (during the	tax year	and u	ısed mor	e than	25						
6 Property used more	e than 50%	ın a qualıfıed	business	use						-				<u> </u>		
		%														
		% %									+					
7 Property used 50%	orless in a		siness us	<u> </u>	<u>I</u>			l			<u> </u>					
' '		%							S/L -							
		% %							S/L - S/L -		+-					
28 Add amounts in co	l olumn (h), lır	,,,	jh 27 En	ter here a	and on li	ne 21,	page	1	28							
29 Add amounts in co	olumn (ı), lın	e 26 Enterh	ere and c	n line 7,	page 1								29			
			ction B									•				
complete this section														o vobic	loc	
you provided vehicles to					a)		пеес а b)	Пехсер	(c)	ompieun 	ig triis (C		_	e)		f)
30 Total business/inv year (do not inclu			ring the •	Vehi	•	Vehi		V	ehicle	3 \	V ehi	-	Vehi	-		icle 6
31 Total commuting i	mıles drıven	during the ye	ear .													
32 Total other persor	nal(noncomn	nuting) miles	drıven													
33 Total miles driven	during the y	ear Add line	s 30													
34 Was the vehicle a	vailable for r	ersonal use	•	Yes	No	Yes	No	Yes	s N	lo Y	es	No	Yes	No	Yes	No
during off-duty ho					1	1	ļ	+							1	+
35 Was the vehicle up owner or related p	sed primarily	by a more t	han 5%													
36 Is another vehicle		r personal us	se? .													1
Section	on C—Que	stions for	Emplo	yers W	ho Pro	vide \	Vehi	cles 1	or Us	e by	The	ir Er	nploy	ees		
nswer these questio % owners or related				eption to	comple	tıng Se	ction	B for v	ehicles	s used	by e	mploy	ees wh	o are 1	not mo	re thar
37 Do you maintain a employees?	written poli	y statement	that prof	nibits all	personal	use of	vehi	cles, ın	cluding	comn	nutın	g, by	your	Y	es	No
														<u> </u>		
38 Do you maintain a employees? See t												your •				
39 Do you treat all us	se of vehicle	s by employe	es as pe	rsonal us	e?											
40 Do you provide movehicles, and reta				oyees, ol	btaın ınfo	ormatio	n froi	m your	employ	ees al	bout	the us	se of			
41 Do you meet the r				automobi	le demor	nstratio	n us	e? (See	ınstru	ctions) .					
Note: If your answ	ver to 37.38	.39.40.or4	I1 ıs "Ye	s." do no	t comple	te Sect	tion E	· 3 for the	cover	ed veh	ncles	5				
	rtization	<u>, , , , , , , , , , , , , , , , , , , </u>		<u>, </u>	•											
		(b)			-\			(4)		(e)				(f)		
(a) Description of c	costs	Date amortizatio begins	n	A mort amo	ızable			(d) Code ection		nortiza period ercenta	or			rtızatı hıs ye		
42 A mortization of co	sts that bec	ins during yo	ur 2013	tax year	(see ins	truction	ns)									
	T	3,7-		•	<u> </u>	T	•		\Box							
									-							
43 Amortization of co	sts that bec	an before yo	ur 2013 1	tax year							43					
44 Total Add amoun	_	•		-	ere to re	nort				<u> </u>	44					

Form **3115**

(Rev December 2009)
Department of the Treasury
Internal Revenue Service

Application for Change in Accounting Method

OMB No 1545-0152

Internal Revenue Service				111			
Name of filer (name of parent corpora	ation if a consolidated	d group) (see instructions)		Identification number (see	instructions)		
Run Wild Missoula Inc.					20-5794114		
				Principal business activity of	code number (see	instructions	;)
					813000		
Number, street, and room or suite no	IT a P O box, see tr	ne instructions		Tax year of change begins		0901	12013
PO Box 1573 City or town, state, and ZIP code				Tax year of change ends (N Name of contact person (se			
					e instructions)		
Missoula, MT 59806 Name of applicant(s) (if different than	filer) and identification	on number(s) (see instructions)		Tony Banovich	Contact perso	n's telenho	ne number
Traine of applicant(s) (if amerent than	mery and racinimodic	on namber(o) (see metraetions)			·	·	
If the applicant is a member	of a consolidate	d aroun check this box			406	6-544-3150 •	
If Form 2848, Power of Atto			ıs attache	ed (see instructions for	when Form 28	 348 is	
required), check this box		,		((▶ [
Check the box to indicate t	he type of appl	icant.	C	heck the appropriate	box to indica	ate the ty	 /pe
☐ Individual	Г	Cooperative (Sec 138		of accounting method			
☐ Corporation		Partnership	(\$	see instructions)			
Controlled foreign corpor	ation [☐ S corporation		Depreciation or Amo	rtization		
(Sec 957)] Insurance co (Sec 81	6(a)) [☐ Financial Products a	ınd/or Fınancı	al Activitie	es of
☐ 10/50 corporation (Sec. 9)04(d)(2)(E))] Insurance co (Sec 83	1)	Financial Institutions	;		
Qualified personal service		☐ Other (specify) ►		✓ Other (specify) ► (Cash to Accrua	al	
corporation (Sec 448(d)(•••						
Exempt organization Ent	er Code section	► 501(c)3					
Caution. To be eligible for ap							
relevant to the taxpayer or to the					ormation reque	ested on ti	his
Form 3115 (including its instru The taxpayer must attach							
		• •					
		change Request		bay fay the year rested or		- Cutar	W N-
•	-	itic accounting method ch ing method change numb	-	-	_		Yes No
		signated automatic accoun	-		•	-	
	_	ation of the IRS guidance	_	=			
▶ (a) Change No	122 (b	o) Other 🔲 Description	n 🏲				
` '		cribed in section 4 02 of		c 2008-52 cause auto	matic conser	nt to be	
•		ted change? If "Yes," att					✓
Note. Complete Part II below	w and then Part	IV, and also Schedules A	\ through	gh $\stackrel{.}{E}$ of this form (if applicable).			
Part II Information Fo	r All Requests	3					Yes No
3 Did or will the applic	ant cease to er	ngage in the trade or b	ousiness	to which the requeste	d change rela	ates, or	
		r of change (see instructi	,		<u>.</u>		✓
If "Yes," the applican	ı ıs not eligible to	o make the change unde	r automat	tic change request prod	cedures		
		former consolidated gro				ing the	
	have any Feder	ral income tax return(s) u	nder exar	mination (see instructio	ns)?		✓
If "No," go to line 5				, II			
		icant is requesting to cha	-				
		roup in which the applic iced in suspense (see ins			эрпсавіе тах	year(s))	
entrier (i) dirider corrisid		Signature (see					✓
Under penalties of periury I declare	that I have examined	• •		•	nd to the best of n	nv knowled	ide and helief
	Under penalties of perjury, I declare that I have examined this application, including accompanying schedules and statements, and to the best of my knowledge and belief, the application contains all the relevant facts relating to the application, and it is true, correct, and complete Declaration of preparer (other than applicant) is based on all						
mornation of which preparer has an	Filer			Preparer (other t	han filer/app	licant)	
				, ,			
Signa	ature and date			Signature of individual prep	aring the applica	ation and da	ate
Tony Banovich, Executive Dire	ector						
-	l title (prınt or type)			Name of individual preparin	g the application	(print or ty	pe)
			Anderso	n ZurMuehlen & Co., P.C			
				Name of firm pren	varing the annlies	ation	

Form 3115 (Rev 12-2009) Page 2 Information For All Requests (continued) Part II Yes No 4c Is the method of accounting the applicant is requesting to change an issue pending (with respect to either the applicant or any present or former consolidated group in which the applicant was a member during the applicable tax year(s)) for any tax year under examination (see instructions)? d Is the request to change the method of accounting being filed under the procedures requiring that the operating division director consent to the filing of the request (see instructions)? If "Yes," attach the consent statement from the director e Is the request to change the method of accounting being filed under the 90-day or 120-day window period? If "Yes," check the box for the applicable window period and attach the required statement (see instructions) ☐ 90 day ☐ 120 day Date examination ended ▶ f If you answered "Yes" to line 4a, enter the name and telephone number of the examining agent and the tax year(s) under examination Name ▶ Telephone number ▶ Tax year(s) ▶ g Has a copy of this Form 3115 been provided to the examining agent identified on line 4f? 5a Does the applicant (or any present or former consolidated group in which the applicant was a member during the applicable tax year(s)) have any Federal income tax return(s) before Appeals and/or a Federal court? Appeals officer and/or counsel for the government, If "Yes," enter the name of the (check the box) telephone number, and the tax year(s) before Appeals and/or a Federal court Telephone number ▶ Name ► Tax year(s) b Has a copy of this Form 3115 been provided to the Appeals officer and/or counsel for the government identified on line 5a? c Is the method of accounting the applicant is requesting to change an issue under consideration by Appeals and/or a Federal court (for either the applicant or any present or former consolidated group in which the applicant was a ✓ member for the tax year(s) the applicant was a member) (see instructions)? If "Yes," attach an explanation If the applicant answered "Yes" to line 4a and/or 5a with respect to any present or former consolidated group, attach a statement that provides each parent corporation's (a) name, (b) identification number, (c) address, and (d) tax year(s) during which the applicant was a member that is under examination, before an Appeals office, and/or before a Federal court If, for federal income tax purposes, the applicant is either an entity (including a limited liability company) treated as a partnership or an S corporation, is it requesting a change from a method of accounting that is an issue under consideration in an examination, before Appeals, or before a Federal court, with respect to a Federal income tax return of a partner, member, or shareholder of that entity? ✓ If "Yes," the applicant is **not** eligible to make the change 8a Does the applicable revenue procedure (advance consent or automatic consent) state that the applicant does not 1 receive audit protection for the requested change (see instructions)? **b** If "Yes," attach an explanation 9a Has the applicant, its predecessor, or a related party requested or made (under either an automatic change procedure or a procedure requiring advance consent) a change in method of accounting within the past 5 years ✓ (including the year of the requested change)? b If "Yes," for each trade or business, attach a description of each requested change in method of accounting (including the tax year of change) and state whether the applicant received consent c If any application was withdrawn, not perfected, or denied, or if a Consent Agreement granting a change was not signed and returned to the IRS, or the change was not made or not made in the requested year of change, attach an explanation 10a Does the applicant, its predecessor, or a related party currently have pending any request (including any concurrently filed request) for a private letter ruling, change in method of accounting, or technical advice? 1 b If "Yes," for each request attach a statement providing the name(s) of the taxpayer, identification number(s), the type of request (private letter ruling, change in method of accounting, or technical advice), and the specific issue(s) in the request(s) ✓ | 11 Is the applicant requesting to change its **overall** method of accounting? If "Yes," check the appropriate boxes below to indicate the applicant's present and proposed methods of accounting Also, complete Schedule A on page 4 of this form

☐ Accrual

✓ Accrual

Present method:

Proposed method:

✓ Cash

☐ Cash

Hybrid (attach description)

Hybrid (attach description)

Page 3 Form 3115 (Rev 12-2009) Information For All Requests (continued) Part II Yes No If the applicant is either (i) not changing its overall method of accounting, or (ii) is changing its overall method of accounting and also changing to a special method of accounting for one or more items, attach a detailed and complete description for each of the following a The item(s) being changed **b** The applicant's present method for the item(s) being changed The applicant's proposed method for the item(s) being changed d The applicant's present overall method of accounting (cash, accrual, or hybrid) 13 Attach a detailed and complete description of the applicant's trade(s) or business(es), and the principal business activity code for each If the applicant has more than one trade or business as defined in Regulations section 1 446-1(d), describe whether each trade or business is accounted for separately, the goods and services provided by each trade or business and any other types of activities engaged in that generate gross income, the overall method of accounting for each trade or business, and which trade or business is requesting to change its accounting method as part of this application or a separate application. 14 Will the proposed method of accounting be used for the applicant's books and records and financial statements? For insurance companies, see the instructions ✓ If "No," attach an explanation 15a Has the applicant engaged, or will it engage, in a transaction to which section 381(a) applies (e.g., a reorganization, merger, or liquidation) during the proposed tax year of change determined without regard to any potential closing of the year under section 381(b)(1)? ✓ b If "Yes," for the items of income and expense that are the subject of this application, attach a statement identifying the methods of accounting used by the parties to the section 381(a) transaction immediately before the date of distribution or transfer and the method(s) that would be required by section 381(c)(4) or (c)(5) absent consent to the change(s) requested in this application 1 16 Does the applicant request a conference with the IRS National Office if the IRS proposes an adverse response? 17 If the applicant is changing to either the overall cash method, an overall accrual method, or is changing its method of accounting for any property subject to section 263A, any long-term contract subject to section 460, or inventories subject to section 474, enter the applicant's gross receipts for the 3 tax years preceding the tax year of change 1st preceding 2nd preceding 3rd preceding 08/31 2013 12/31 12/31 2011 2012 year ended mo year ended mo year ended mo \$ 459,270 \$ 630,222 \$ 457,825 Part III Information For Advance Consent Request Yes No Is the applicant's requested change described in any revenue procedure, revenue ruling, notice, regulation, or other published guidance as an automatic change request? If "Yes." attach an explanation describing why the applicant is submitting its request under advance consent request procedures 19 Attach a full explanation of the legal basis supporting the proposed method for the item being changed. Include a detailed and complete description of the facts that explains how the law specifically applies to the applicant's situation and that demonstrates that the applicant is authorized to use the proposed method. Include all authority (statutes, regulations, published rulings, court cases, etc.) supporting the proposed method. Also, include either a discussion of the contrary authorities or a statement that no contrary authority exists 20 Attach a copy of all documents related to the proposed change (see instructions) 21 Attach a statement of the applicant's reasons for the proposed change. If the applicant is a member of a consolidated group for the year of change, do all other members of the consolidated group use the proposed method of accounting for the item being changed? If "No," attach an explanation 23a Enter the amount of user fee attached to this application (see instructions) ▶ **b** If the applicant qualifies for a reduced user fee, attach the required information or certification (see instructions) Part IV Section 481(a) Adjustment Yes No Does the applicable revenue procedure, revenue ruling, notice, regulation, or other published guidance require the applicant to 1 implement the requested change in method of accounting on a cut-off basis rather than a section 481(a) adjustment? If "Yes," do not complete lines 25, 26, and 27 below 25 Enter the section 481(a) adjustment Indicate whether the adjustment is an increase (+) or a decrease (-) in -\$19,695.00 Attach a summary of the computation and an explanation of the methodology income ▶ \$ used to determine the section 481(a) adjustment If it is based on more than one component, show the computation for each component. If more than one applicant is applying for the method change on the same application, attach a list of the name, identification number, principal business activity code (see instructions), and the amount of the section 481(a) adjustment attributable to each applicant

Part IV Section 481(a) Adjustment (continued)

Yes No

16 If the section 481(a) adjustment is an increase to income of less than \$25,000, does the applicant elect to take the entire amount of the adjustment into account in the year of change?

Yes No

27 Is any part of the section 481(a) adjustment attributable to transactions between members of an affiliated group, a

Schedule A - Change in Overall Method of Accounting (If Schedule A applies, Part I below must be completed.)

Part I Change in Overall Method (see instructions)

If "Yes," attach an explanation

consolidated group, a controlled group, or other related parties?

1 Enter the following amounts as of the close of the tax year preceding the year of change If none, state "None" Also, attach a statement providing a breakdown of the amounts entered on lines 1a through 1g

а	Income accrued but not received (such as accounts receivable)	\$ +2000.00
b	Income received or reported before it was earned (such as advanced payments) Attach a description of the income and the legal basis for the proposed method	-21,735.00
С	Expenses accrued but not paid (such as accounts payable)	None
d	Prepaid expenses previously deducted	+40.00
е	Supplies on hand previously deducted and/or not previously reported	None
f	Inventory on hand previously deducted and/or not previously reported Complete Schedule D, Part II	None
g	Other amounts (specify) Attach a description of the item and the legal basis for its inclusion in the calculation of the section 481(a) adjustment ▶	None
h	Net section 481(a) adjustment (Combine lines 1a-1g) Indicate whether the adjustment is an increase (+)	

or decrease (-) in income Also enter the net amount of this section 481(a) adjustment amount on Part IV, line 25

-19,695

✓ No

☐ Yes

Amount

- 2 Is the applicant also requesting the recurring item exception under section 461(h)(3)?
- 3 Attach copies of the profit and loss statement (Schedule F (Form 1040) for farmers) and the balance sheet, if applicable, as of the close of the tax year preceding the year of change. Also attach a statement specifying the accounting method used when preparing the balance sheet. If books of account are not kept, attach a copy of the business schedules submitted with the Federal income tax return or other return (e.g., tax-exempt organization returns) for that period. If the amounts in Part I, lines 1a through 1g, do not agree with those shown on both the profit and loss statement and the balance sheet, attach a statement explaining the differences.

Part II Change to the Cash Method For Advance Consent Request (see instructions)

Applicants requesting a change to the cash method must attach the following information.

- 1 A description of inventory items (items whose production, purchase, or sale is an income-producing factor) and materials and supplies used in carrying out the business
- 2 An explanation as to whether the applicant is required to use the accrual method under any section of the Code or regulations

Schedule B - Change to the Deferral Method for Advance Payments (see instructions)

- 1 If the applicant is requesting to change to the Deferral Method for advance payments described in section 5 02 of Rev Proc 2004-34, 2004-1 C B 991, attach the following information:
- a A statement explaining how the advance payments meet the definition in section 4 01 of Rev. Proc. 2004-34
- **b** If the applicant is filing under the automatic change procedures of Rev Proc 2008-52, the information required by section 8 02(3)(a)-(c) of Rev Proc 2004-34
- c If the applicant is filing under the advance consent provisions of Rev Proc 97-27, the information required by section 8 03(2)(a)-(f) of Rev Proc 2004-34
- If the applicant is requesting to change to the deferral method for advance payments described in Regulations section 1 451-5(b)(1)(ii), attach the following
- a A statement explaining how the advance payments meet the definition in Regulations section 1 451-5(a)(1)
- **b** A statement explaining what portions of the advance payments, if any, are attributable to services, whether such services are integral to the provisions of goods or items, and whether any portions of the advance payments that are attributable to non-integral services are less than five percent of the total contract prices. See Regulations sections 1 451-5(a)(2)(i) and (3)
- c A statement explaining that the advance payments will be included in income no later than when included in gross receipts for purposes of the applicant's financial reports. See Regulations section 1.451-5(b)(1)(ii)
- d A statement explaining whether the inventoriable goods exception of Regulations section 1 451-5(c) applies and if so, when substantial advance payments will be received under the contracts, and how the exception will limit the deferral of income

Form 3115 (Rev. 12-2009) Page **5**

Schedule C-Changes Within the LIFO Inventory Method (see instructions)

Part I General LIFO Information

Complete this section if the requested change involves changes within the LIFO inventory method. Also, attach a copy of all **Forms 970,** Application To Use LIFO Inventory Method, filed to adopt or expand the use of the LIFO method.

- 1 Attach a description of the applicant's present and proposed LIFO methods and submethods for each of the following items
- **a** Valuing inventory (e.g., unit method or dollar-value method)
- **b** Pooling (e.g., by line or type or class of goods, natural business unit, multiple pools, raw material content, simplified dollar-value method, inventory price index computation (IPIC) pools, vehicle-pool method, etc.)
- c Pricing dollar-value pools (e.g., double-extension, index, link-chain, link-chain index, IPIC method, etc.)
- d Determining the current-year cost of goods in the ending inventory (i.e., most recent acquisitions, earliest acquisitions during the current year, average cost of current-year acquisitions, or other permitted method)
- 2 If any present method or submethod used by the applicant is not the same as indicated on Form(s) 970 filed to adopt or expand the use of the method, attach an explanation.
- 3 If the proposed change is not requested for all the LIFO inventory, attach a statement specifying the inventory to which the change is and is not applicable
- 4 If the proposed change is not requested for all of the LIFO pools, attach a statement specifying the LIFO pool(s) to which the change is applicable
- 5 Attach a statement addressing whether the applicant values any of its LIFO inventory on a method other than cost. For example, if the applicant values some of its LIFO inventory at retail and the remainder at cost, identify which inventory items are valued under each method.
- 6 If changing to the IPIC method, attach a completed Form 970

Part II Change in Pooling Inventories

- 1 If the applicant is proposing to change its pooling method or the number of pools, attach a description of the contents of, and state the base year for, each dollar-value pool the applicant presently uses and proposes to use
- 2 If the applicant is proposing to use natural business unit (NBU) pools or requesting to change the number of NBU pools, attach the following information (to the extent not already provided) in sufficient detail to show that each proposed NBU was determined under Regulations section 1 472-8(b)(1) and (2):
- a A description of the types of products produced by the applicant. If possible, attach a brochure
- b A description of the types of processes and raw materials used to produce the products in each proposed pool
- c If all of the products to be included in the proposed NBU pool(s) are not produced at one facility, state the reasons for the separate facilities, the location of each facility, and a description of the products each facility produces
- **d** A description of the natural business divisions adopted by the taxpayer State whether separate cost centers are maintained and if separate profit and loss statements are prepared
- e A statement addressing whether the applicant has inventories of items purchased and held for resale that are not further processed by the applicant, including whether such items, if any, will be included in any proposed NBU pool
- f A statement addressing whether all items including raw materials, goods-in-process, and finished goods entering into the entire inventory investment for each proposed NBU pool are presently valued under the LIFO method. Describe any items that are not presently valued under the LIFO method that are to be included in each proposed pool.
- **g** A statement addressing whether, within the proposed NBU pool(s), there are items both sold to unrelated parties and transferred to a different unit of the applicant to be used as a component part of another product prior to final processing
- If the applicant is engaged in manufacturing and is proposing to use the multiple pooling method or raw material content pools, attach information to show that each proposed pool will consist of a group of items that are substantially similar. See Regulations section 1 472-8(b)(3)
- 4 If the applicant is engaged in the wholesaling or retailing of goods and is requesting to change the number of pools used, attach information to show that each of the proposed pools is based on customary business classifications of the applicant's trade or business. See Regulations section 1 472-8(c)

Form 3115 (Rev 12-2009)

	Iule D—Change in the Treatment of Long-Term Contracts Und on 263A Assets (see instructions)	er Section 460,	Inventories, o	r Other		
Par	<u> </u>	s (Also complete	Part III on pag	es 7 and	8.)	
1	To the extent not already provided, attach a description of the applicant's and expenses from long-term contracts. Also, attach a representative achange. If the applicant is a construction contractor, attach a detailed des	s present and prop ctual contract (with	oosed methods for hout any deletion	or reportin n) for the r	g income	
2a b	Are the applicant's contracts long-term contracts as defined in section 46 If "Yes," do all the contracts qualify for the exception under section 460(e If line 2b is "No," attach an explanation	60(f)(1) (see instruc	tions)?	☐ Yes ☐ Yes	☐ No ☐ No	
С	If line 2b is "Yes," is the applicant requesting to use the percentage-of-cost under Regulations section 1 460-4(b)?			☐ Yes	□ No	
d	method under Regulations section 1 460-4(c)(2)?					
3a b	If line 2d is "Yes," attach an explanation of what cost comparison the a contract's completion factor. If line 2d is "No," attach an explanation of what method the applicant is u Does the applicant have long-term manufacturing contracts as defined in If "Yes," attach an explanation of the applicant's present and proposed in term manufacturing contracts	sing and the authorsection 460(f)(2)?	ority for its use	☐ Yes	□ No	
с 4 а	Attach a description of the applicant's manufacturing activities, including a To determine a contract's completion factor using the percentage-of-com Will the applicant use the cost-to-cost method in Regulations section 1.4	npletion method	ation of manufact	ured good	s □ No	
b	If line 4a is "No," is the applicant electing the simplified cost-to-cost management and the simplified cost-to		n 460(b)(3) and	Yes	□ No	
5	Attach a statement indicating whether any of the applicant's contracts contracts or Federal long-term contracts		_			
Part	Change in Valuing Inventories Including Cost Allocation Cha	anges (Also com	olete Part III on p	pages 7 ai	nd 8)	
1	Attach a description of the inventory goods being changed					
2	Attach a description of the inventory goods (if any) NOT being changed			_	_	
3a	Is the applicant subject to section 263A? If "No," go to line 4a			☐ Yes	✓ No	
b	Is the applicant's present inventory valuation method in compliance with If "No," attach a detailed explanation	section 263A (see	nstructions)?	Yes	✓ No	
4a	Check the appropriate boxes below	Inventory Be	ing Changed		ory Not Changed	
	Identification methods Specific identification FIFO LIFO Other (attach explanation) Valuation methods.	Present method	Proposed method	Presen	t method	
b	Cost Cost or market, whichever is lower Retail cost					
5	If the applicant is changing from the LIFO inventory method to a noninstructions)	n-LIFO method, at	tach the following	ng informa	ation (see	
a	Copies of Form(s) 970 filed to adopt or expand the use of the method	والمناسب والموارين ومراط		الحليم مريم	ا - حالاه معر	

- **b** Only for applicants requesting advance consent. A statement describing whether the applicant is changing to the method required by Regulations section 1 472-6(a) or (b), or whether the applicant is proposing a different method
- c Only for applicants requesting an automatic change. The statement required by section 22 01(5) of the Appendix of Rev Proc. 2008-52 (or its successor)

Form 3115 (Rev 12-2009)

Part III Method of Cost Allocation (Complete this part if the requested change involves either property subject to section 263A or long-term contracts as described in section 460 (see instructions)).

Section A-Allocation and Capitalization Methods

Attach a description (including sample computations) of the present and proposed method(s) the applicant uses to capitalize direct and indirect costs properly allocable to real or tangible personal property produced and property acquired for resale, or to allocate and, where appropriate, capitalize direct and indirect costs properly allocable to long-term contracts. Include a description of the method(s) used for allocating indirect costs to intermediate cost objectives such as departments or activities prior to the allocation of such costs to long-term contracts, real or tangible personal property produced, and property acquired for resale. The description must include the following

- 1 The method of allocating direct and indirect costs (i.e., specific identification, burden rate, standard cost, or other reasonable allocation method)
- 2 The method of allocating mixed service costs (i.e., direct reallocation, step-allocation, simplified service cost using the labor-based allocation ratio, simplified service cost using the production cost allocation ratio, or other reasonable allocation method)
- 3 The method of capitalizing additional section 263A costs (i.e., simplified production with or without the historic absorption ratio election, simplified resale with or without the historic absorption ratio election including permissible variations, the US ratio, or other reasonable allocation method)

Section B - Direct and Indirect Costs Required To Be Allocated

Check the appropriate boxes showing the costs that are or will be fully included, to the extent required, in the cost of real or tangible personal property produced or property acquired for resale under section 263A or allocated to long-term contracts under section 460 Mark "N/A" in a box if those costs are not incurred by the applicant. If a box is not checked, it is assumed that those costs are not fully included to the extent required. Attach an explanation for boxes that are not checked.

		T	г
		Present method	Proposed method
1	Direct material		
2	Direct labor		
3	Indirect labor		
4	Officers' compensation (not including selling activities)		
5	Pension and other related costs		
6	Employee benefits		
7	Indirect materials and supplies		
8	Purchasing costs		
9	Handling, processing, assembly, and repackaging costs		
10	Offsite storage and warehousing costs		
11	Depreciation, amortization, and cost recovery allowance for equipment and facilities		
	placed in service and not temporarily idle		
12	Depletion		
13	Rent		
14	Taxes other than state, local, and foreign income taxes		
15	Insurance		
16	Utilities		
17	Maintenance and repairs that relate to a production, resale, or long-term contract activity		
18	Engineering and design costs (not including section 174 research and experimental		
	expenses)		
19	Rework labor, scrap, and spoilage		
20	Tools and equipment		
21	Quality control and inspection		
22	Bidding expenses incurred in the solicitation of contracts awarded to the applicant		
23	Licensing and franchise costs		
24	Capitalizable service costs (including mixed service costs)		
25	Administrative costs (not including any costs of selling or any return on capital)		
26	Research and experimental expenses attributable to long-term contracts		
27	Interest		
28	Other costs (Attach a list of these costs)		

Form 3115 (Rev 12-2009) Page 8 Method of Cost Allocation (see instructions) (continued) Section C-Other Costs Not Required To Be Allocated (Complete Section C only if the applicant is requesting to change its method for these costs) Present method Proposed method 1 Marketing, selling, advertising, and distribution expenses 2 Research and experimental expenses not included in Section B, line 26 3 Bidding expenses not included in Section B, line 22 General and administrative costs not included in Section B 4 5 Income taxes 6 Cost of strikes . 7 Warranty and product liability costs 8 Section 179 costs 9 On-site storage . 10 Depreciation, amortization, and cost recovery allowance not included in Section B. 11 Other costs (Attach a list of these costs) Schedule E - Change in Depreciation or Amortization (see instructions) Applicants requesting approval to change their method of accounting for depreciation or amortization complete this section Applicants must provide this information for each item or class of property for which a change is requested Note. See the List of Automatic Accounting Method Changes in the instructions for information regarding automatic changes under sections 56, 167, 168, 197, 1400l, 1400L, or former section 168. Do not file Form 3115 with respect to certain late elections and election revocations (see instructions). ☐ Yes ☐ No Is depreciation for the property determined under Regulations section 1 167(a)-11 (CLADR)? If "Yes," the only changes permitted are under Regulations section 1 167(a)-11(c)(1)(iii) 2 Is any of the depreciation or amortization required to be capitalized under any Code section (e.g., section 263A)? ☐ Yes ☐ No If "Yes," enter the applicable section ▶ Has a depreciation, amortization, or expense election been made for the property (e.g., the election under ☐ Yes No sections 168(f)(1), 179, or 179C)? If "Yes," state the election made ▶ 4a To the extent not already provided, attach a statement describing the property being changed Include in the description the type of property, the year the property was placed in service, and the property's use in the applicant's trade or business or income-producing activity ☐ Yes ☐ No b If the property is residential rental property, did the applicant live in the property before renting it? ☐ Yes c Is the property public utility property? ☐ No To the extent not already provided in the applicant's description of its present method, attach a statement explaining how the property is treated under the applicant's present method (e.g., depreciable property, inventory property, supplies under Regulations section 1 162-3, nondepreciable section 263(a) property, property deductible as a current expense, etc.) If the property is not currently treated as depreciable or amortizable property, attach a statement of the facts supporting the proposed change to depreciate or amortize the property 7 If the property is currently treated and/or will be treated as depreciable or amortizable property, provide the following information for both the present (if applicable) and proposed methods

- a The Code section under which the property is or will be depreciated or amortized (e.g., section 168(g))
- b The applicable asset class from Rev Proc 87-56, 1987-2 C B 674, for each asset depreciated under section 168 (MACRS) or under section 1400L, the applicable asset class from Rev Proc 83-35, 1983-1 C B 745, for each asset depreciated under former section 168 (ACRS), an explanation why no asset class is identified for each asset for which an asset class has not been identified by the applicant
- **c** The facts to support the asset class for the proposed method
- **d** The depreciation or amortization method of the property, including the applicable Code section (e.g., 200% declining balance method under section 168(b)(1))
- e The useful life, recovery period, or amortization period of the property
- f The applicable convention of the property
- **g** A statement of whether or not the additional first-year special depreciation allowance (for example, as provided by section 168(k), 168(l), 168(m), 168(n), 1400L(b), or 1400N(d)) was or will be claimed for the property. If not, also provide an explanation as to why no special depreciation allowance was or will be claimed.

Statement for Form 3115, Part II, line 13

Run Wild Missoula promotes and supports running and walking as sports for people of all ages and abilities by: educating the general public about the benefits of running and walking; sponsoring or supporting health and fitness workshops and clinics; publishing a regular newsletter that includes a calendar of events, articles, and results of local races; maintaining a web site that includes general Run Wild Missoula information and running and walking events.

Principal Business Activity Code: 813410

Statement for Form 3115, Part IV, line 25 and Form 3115, Schedule A, Part I

Run Wild Missoula, a fiscal year taxpayer, changes from the cash method of accounting to an overall accrual method of accounting on 9/1/2013. The section 481(a) adjustment is calculated as of 9/1/2013 as follows.

Accounts Receivable	\$2,000
Prepaid Expenses	\$40
Deferred Revenue	(\$21,735)
Section 481(a) adjustment	(\$19,695)

Statement for Form 3115, Schedule A, Part I, line 3

Run Wild Missoula BALANCE SHEET As of August 31, 2014

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	ı	OTAL
	AS OF AUG 31, 2014	AS OF AUG 31, 2013 (PY)
ASSETS		
Current Assets		
Bank Accounts		
1010 First Security Bank Checking - RWM	15,331 08	29,640 39
1020 First Security Bank Checking - MM	0 00	0 00
1025 US Bank Checking	100 00	100 00
1030 FSB Debit Card Account	0 00	652 25
1040 First Security Bank Money Market	156,339 80	86,196 08 150 036 78
1045 US Bank Money Market	150,261 93	150,036 78
Total Bank Accounts	\$322,032.81	\$266,625.50
Accounts Receivable	40.220.00	2 000 00
1400 Accounts Receivable (A/R)	18,330 00	2,000 00
Total Accounts Receivable	\$18,330.00	\$2,000.00
Other current assets		
1550 Prepaid Expenses	11,364 05	40 00
Total Other current assets	\$11,364.05 	\$40.00
Total Current Assets	\$351,726.86	\$268,665.50
Fixed Assets		
1600 Furniture & Fixtures	18,629 15	11,931 32
1610 Accumulated Depreciation	-12,188 00	-6,108 42
Total Fixed Assets	\$6,441.15	\$5,822.90
TOTAL ASSETS	\$358,168.01	\$274,488.40
LIABILITIES AND EQUITY		,
Liabilities		
Current Liabilities		
Accounts Payable	5.007.57	
1900 Accounts Payable (A/P)	5,387 57	
Total Accounts Payable	\$5,387.57	\$0.00
Other Current Liabilities		
1950 Wages Payable	440 00	
2000 Payroll Taxes Payable	43 33	4.044.40
2050 FWT/FICA Payable	2,429 44	1,314 49
2060 SWT Payable 2070 SUTA Payable	0 00 372 01	0 00 368 71
2080 FUTA Payable	0 00	0 00
•		
Total 2000 Payroll Taxes Payable	2,844.78	1,683.20
2100 Deferred Registration 2200 Deferred Sponsorship Revenue	29,675 00 3,900 00	
Total Other Current Liabilities	\$36,859.78	\$1,683.20
Total Current Liabilities		

TOTAL

	AS OF AUG 31, 2014	AS OF AUG 31, 2013 (PY)
	\$42,247.35	\$1,683.20
Total Liabilities	\$42,247.35	\$1,683.20
Equity		
3000 Retained Earnings	272,805 20	277,432 07
Net Income	43,115 46	-4,626 87
Total Equity	\$315,920.66	\$272,805.20
TOTAL LIABILITIES AND EQUITY	\$358,168.01	\$274,488.40

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Statement for Form 3115, Schedule A, Part I, line 3

Run Wild Missoula PROFIT AND LOSS

September 2013 - August 2014

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	7	TOTAL
	SEP 2013 - AUG 2014	SEP 2012 - AUG 2013 (PY)
Income		
4000 Membership Dues	32,537 14	30,623 82
4010 Race Income	110,454 83	97,440 08
4020 Training & Classes Income	28,999 75	31,090 00
4021 Registration - MM	432,581 00	374,645 94
4023 Deferred Registration - MM	-29,675 00	,
4024 Fees-Deferred MM Registration	9,500 00	
4025 Advertising Income	9,100 00	4,950 00
4043 Merchandise Sales	37,529 33	24,814 67
4045 Equipment Rental	350 00	335 00
4050 Sponsorships	90,700 00	62,965 00
4052 Deferred Sponsorships	-2,900 00	
4100 Other Income	13,864 97	3,757 89
4130 Contributions	1,406 06	1,693 00
4150 Interest Income	368 87	428 02
4200 Registration Refunds	-5,788 50	-3,290 00
Shipping Income (deleted-6)	73 50	101 30
Total Income	\$729,101.95	\$629,554.72
Gross Profit	\$729,101.95	\$629,554.72
Expenses		
5000 Advertising & Promotion	66,320 64	65,561 92
5010 Bank Charges	169 40	
5015 Credit Card Fees	18,075 11	13,111 93
5020 Charitable Contributions	51,880 42	15,467 51
5027 Depreciation	6,079 58	6,108 42
5030 Dues & Subscriptions	4,649 19	5,250 34
5035 Education & Training	389 00	1,665 00
5040 Gifts & Member Promotion	9,418 73	6,865 99
5050 Insurance	0 00	4,233 40
5050.01 Insuranceallocated (deleted)	3,520 76	
Total 5050 Insurance	3,520.76	4,233.40
5500 Professional Fees	1,065 00	4,347 50
5500.10 Accounting	7,970 00	5,755 04
5500.30 Instructors & Lecturers	5,614 00	5,975 00
5500.70 Legal	953 50	1 ,617 11
5500.90 Technology & Website	5,192 35	4,380 85
Total 5500 Professional Fees	20,794.85	22,075.50
5540 Merchandise	20,549 02	11,022 70
5545 Miscellaneous Expenses	0 00	1 00
5550 Meals & Entertainment	8,102 96	7,456 37
5560 Office Expense	2,406 87	3,901 86
5610 Newsletter		386 90

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		TOTAL
	SEP 2013 - AUG 2014	SEP 2012 - AUG 2013 (PY
5650 Payroll Expenses		
5650.30 Salaries & Wages	45,808 76	77,858 19
5650.31 Salaries & Wagesallocated (deleted)	43,812 52	
Total 5650.30 Salaries & Wages	89,621.28	77,858.19
5650.50 Payroll Taxes	4,527 89	7,676 6
5650.51 Payroll Taxesallocated (deleted)	4,144 75	,
Total 5650.50 Payroll Taxes	8,672.64	7,676.61
Total 5650 Payroll Expenses	98,293.92	85,534.80
5653 Petty Cash	0 00	0.00
5657 Permits & Fees	1,672 70	2,252 00
5660 Postage	4,820 41	2,131 92
5670 Printing & Reproduction	296 10	1,253 73
5680 Race Expenses		229 50
5680.10 Awards & Prizes	15,432 87	24,414 5
5680.20 Course	48,402 59	91,794 49
5680.30 Expo	1,299 58	3,064 27
5680.40 Gear Bags	11,186 58	9,508 08
5680.50 Goodie Bags	1,236 95	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
5680.60 Kids Marathon & Races	8,098 42	10,655 1 ⁻
5680.65 Medals	27,593 90	369 3
5680.70 Race Supplies	77,406 31	100,935 8
5680.80 Race Refreshments	10,340 68	9,528 2
5680.85 Registration Fees (deleted)	7,788 70	7,698 5
5680.90 Shirts, Apparel & Schwag	64,045 70	78,701 00
5680.95 Timing	41,639 87	70,7010
5680.97 Volunteer Expense	19,557 82	10,285 83
Total 5680 Race Expenses	334,029.97	347,184.78
5700 Rent or Lease		25 00
5700.10 Rent - Office	3,300 00	6,900 00
5700.20 Rent - Other	914 12	750 00
5700.21 Rent - Otherallocated (deleted)	3,850 00	
Total 5700.20 Rent - Other	4,764.12	750.00
Total 5700 Rent or Lease	8,064.12	7,675.00
5720 Telephone	1,408 83	700 57
5730 Training Classes		
5730.10 Refreshments	3,636 79	3,327 63
5730.20 Shirts & Apparel	2,939 04	2,934 0
5730.30 Supplies & Other Expenses	4,357 88	7,030 3
Total 5730 Training Classes	10,933.71	13,292.03
5740 Travel & Lodging	9,481 44	9,413 8
5750 Repairs & Maintenance	, 321 11	,
5760 Supplies	1,118 07	456 2
5790 Workman's Comp Insurance	1,189 58	1,177 8
Bad Debt Expense	2,000 00	1, 11 7 0
	· · · · · · · · · · · · · · · · · · ·	
otal Expenses	\$685,986.49	\$634,181.59

TOTAL

	SEP 2013 - AUG 2014	SEP 2012 - AUG 2013 (PY)
Net Operating Income	\$43,115.46	\$ -4,626.87
Net Income	\$43,115.46	\$ -4,626.87

Tuesday, Jul 14, 2015 10 29 45 AM PDT GMT-6 - Accrual Basis