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

**2013**

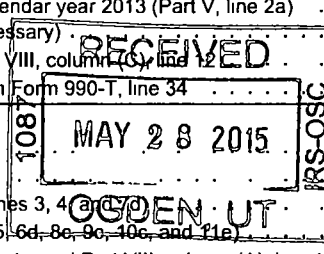
**Open to Public Inspection**

Department of the Treasury  
 Internal Revenue Service

**A For the 2013 calendar year, or tax year beginning** Oct 1, 2013, and ending Sep 30, 2014

<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization THE TOMORROW FUND		<b>D</b> Employer Identification Number 05-0450569
	Doing Business As		<b>E</b> Telephone number (401) 444-8811
	Number and street (or P.O. box if mail is not delivered to street address) Room/suite RI HOSPITAL CAMPUS; 593 EDDY STREET		
	City or town, state or province, country, and ZIP or foreign postal code PROVIDENCE RI 02903-4947		<b>G</b> Gross receipts \$1,850,656.
<b>F</b> Name and address of principal officer DAVID WHITNEY 593 EDDY ST. PROVIDENCE RI 02903		<b>H(a)</b> Is this a group return for subsidiaries? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<b>H(b)</b> Are all subsidiaries included? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If No, attach a list (see instructions)
<b>I</b> Tax-exempt status	<input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) (insert no) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527	<b>H(c)</b> Group exemption number	
<b>J</b> Website: WWW.TOMORROWFUND.ORD			
<b>K</b> Form of organization	<input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other	<b>L</b> Year of formation 1985	<b>M</b> State of legal domicile RI

Part I Summary		Prior Year	Current Year
<b>Activities &amp; Governance</b>	1 Briefly describe the organization's mission or most significant activities THE TOMORROW FUND PROVIDES A COMPREHENSIVE PROGRAM OF CONTINUING DAILY FINANCIAL AND EMOTIONAL SUPPORT TO CHILDREN WITH CANCER, SURVIVORS, AND THEIR FAMILIES WHO ARE TREATED AT HASBRO CHILDREN'S HOSPITAL IN PROVIDENCE, RI AND DILIGENTLY STRIVES TO ENSURE ACCESS TO THE HIGHEST LEVEL OF CARE, WHILE PROMOTING PUBLIC AWARENESS OF CHILDHOOD CANCER.		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	10
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	10
	5 Total number of individuals employed in calendar year 2013 (Part V, line 2a)	5	7
	6 Total number of volunteers (estimate if necessary)	6	150
	7a Total unrelated business revenue from Part VIII, column (A), line 12	7a	0.
7b Net unrelated business taxable income from Form 990-T, line 34	7b	-2,007.	
<b>Revenue</b>	8 Contributions and grants (Part VIII, line 1h)	1,009,012.	974,507.
	9 Program service revenue (Part VIII, line 2g)	0.	
	10 Investment income (Part VIII, column (A), lines 3, 4, and 5)	239,600.	209,373.
	11 Other revenue (Part VIII, column (A), lines 6d, 8e, 9c, 10c, and 11e)	4,797.	-16,614.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,253,409.	1,167,266.
<b>Expenses</b>	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	25,000.	28,500.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0.	
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	296,276.	325,284.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	
	b Total fundraising expenses (Part IX, column (D), line 25)	121,545.	
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	465,743.	572,768.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	787,019.	926,552.	
19 Revenue less expenses Subtract line 18 from line 12	466,390.	240,714.	
<b>Net Assets or Fund Balances</b>	20 Total assets (Part X, line 16)	3,013,753.	3,221,591.
	21 Total liabilities (Part X, line 26)	394,340.	351,074.
	22 Net assets or fund balances. Subtract line 21 from line 20	2,619,413.	2,870,517.



**Part II Signature Block**

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

<b>Sign Here</b>	Signature of officer: <i>[Signature]</i>	Date: 4/27/13
	DAVID WHITNEY, TREASURER	TREASURER

<b>Paid Preparer Use Only</b>	Preparer's name: Nancy L Mancini, CPA	Preparer's signature: Nancy L Mancini, CPA	Date: 04/15/15	Check <input type="checkbox"/> if self-employed	PTIN: P01207473
	Firm's name: CALIRI MANCINI & BARBIERI, PC	Firm's address: 1 Worthington Rd Cranston RI 02920		Firm's EIN: 26-2227576	Phone no: (401) 268-3926

May the IRS discuss this return with the preparer shown above? (see instructions)  Yes  No

SCANNED JUN 24 2015

617 2

Part III Statement of Program Service Accomplishments

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

Input box for Schedule O check

1 Briefly describe the organization's mission:

THE TOMORROW FUND PROVIDES A COMPREHENSIVE PROGRAM OF CONTINUING DAILY FINANCIAL AND EMOTIONAL SUPPORT TO CHILDREN WITH CANCER, SURVIVORS, AND THEIR See Form 990, Page 2, Part III, Line 1 (continued)

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

Yes No input boxes

If 'Yes,' describe these new services on Schedule O.

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

Yes No input boxes

If 'Yes,' describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4 a (Code: ) (Expenses \$ 549,775. including grants of \$ 28,500. ) (Revenue \$ 0. )

FAMILY SERVICES PROGRAM - EMOTIONAL, PSYCHOLOGICAL AND FINANCIAL SUPPORT FOR CHILDREN WITH CANCER AND THEIR FAMILIES. IN EXCESS OF 100 FAMILIES ARE PROVIDED SERVICES AT ANY GIVEN TIME.

4 b (Code: ) (Expenses \$ 106,723. including grants of \$ 0. ) (Revenue \$ 0. )

CLINICAL SUPPORT - FUNDS FOR MEDICAL & PSYCHOLOGICAL RESEARCH FOR CHILDHOOD CANCER AND PUBLIC EDUCATION. IN EXCESS OF 200 PEDIATRIC PATIENTS WERE SERVED THROUGH THIS PROGRAM IN THE CURRENT YEAR.

4 c (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )

4 d Other program services. (Describe in Schedule O.)

(Expenses \$ including grants of \$ ) (Revenue \$ )

4 e Total program service expenses 656,498.

**Part IV Checklist of Required Schedules**

	Yes	No
<b>1</b> 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>	X	
<b>2</b> Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)?	X	
<b>3</b> Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If 'Yes,' complete Schedule C, Part I.</i>		X
<b>4 Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If 'Yes,' complete Schedule C, Part II.</i>		X
<b>5</b> 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? <i>If 'Yes,' complete Schedule C, Part III.</i>		X
<b>6</b> 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>		X
<b>7</b> Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If 'Yes,' complete Schedule D, Part II.</i>		X
<b>8</b> Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If 'Yes,' complete Schedule D, Part III.</i>		X
<b>9</b> 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? <i>If 'Yes,' complete Schedule D, Part IV.</i>		X
<b>10</b> 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>	X	
<b>11</b> 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.		
<b>a</b> Did the organization report an amount for land, buildings and equipment in Part X, line 10? <i>If 'Yes,' complete Schedule D, Part VI.</i>	X	
<b>b</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? <i>If 'Yes,' complete Schedule D, Part VII.</i>		X
<b>c</b> 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? <i>If 'Yes,' complete Schedule D, Part VIII.</i>		X
<b>d</b> 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? <i>If 'Yes,' complete Schedule D, Part IX.</i>		X
<b>e</b> Did the organization report an amount for other liabilities in Part X, line 25? <i>If 'Yes,' complete Schedule D, Part X.</i>		X
<b>f</b> 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)? <i>If 'Yes,' complete Schedule D, Part X.</i>	X	
<b>12a</b> Did the organization obtain separate, independent audited financial statements for the tax year? <i>If 'Yes,' complete Schedule D, Parts XI, and XII.</i>	X	
<b>b</b> Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional.</i>		X
<b>13</b> Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If 'Yes,' complete Schedule E.</i>		X
<b>14a</b> Did the organization maintain an office, employees, or agents outside of the United States?.		X
<b>b</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? <i>If 'Yes,' complete Schedule F, Parts I and IV.</i>		X
<b>15</b> 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? <i>If 'Yes,' complete Schedule F, Parts II and IV.</i>		X
<b>16</b> 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 'Yes,' complete Schedule F, Parts III and IV.</i>		X
<b>17</b> 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? <i>If 'Yes,' complete Schedule G, Part I (see instructions).</i>		X
<b>18</b> 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>	X	
<b>19</b> Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If 'Yes,' complete Schedule G, Part III.</i>		X
<b>20 a</b> Did the organization operate one or more hospital facilities? <i>If 'Yes,' complete Schedule H.</i>		X
<b>b</b> If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?		

**Part IV Checklist of Required Schedules (continued)**

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

BAA

**Part V Statements Regarding Other IRS Filings and Tax Compliance**

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

		Yes	No
<b>1 a</b>	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		
<b>1 b</b>	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
<b>1 c</b>	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		
<b>2 a</b>	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		
<b>2 b</b>	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <i>Note.</i> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	X	
<b>3 a</b>	Did the organization have unrelated business gross income of \$1,000 or more during the year?	X	
<b>3 b</b>	If 'Yes' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule O	X	
<b>4 a</b>	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X
<b>4 b</b>	If 'Yes,' enter the name of the foreign country. See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
<b>5 a</b>	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
<b>5 b</b>	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
<b>5 c</b>	If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?		
<b>6 a</b>	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		X
<b>6 b</b>	If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
<b>7</b>	<b>Organizations that may receive deductible contributions under section 170(c).</b>		
<b>7 a</b>	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?	X	
<b>7 b</b>	If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	X	
<b>7 c</b>	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
<b>7 d</b>	If 'Yes,' indicate the number of Forms 8282 filed during the year		
<b>7 e</b>	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
<b>7 f</b>	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
<b>7 g</b>	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
<b>7 h</b>	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
<b>8</b>	<b>Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		
<b>9</b>	<b>Sponsoring organizations maintaining donor advised funds.</b>		
<b>9 a</b>	Did the organization make any taxable distributions under section 4966?		
<b>9 b</b>	Did the organization make a distribution to a donor, donor advisor, or related person?		
<b>10</b>	<b>Section 501(c)(7) organizations.</b> Enter:		
<b>10 a</b>	Initiation fees and capital contributions included on Part VIII, line 12.		
<b>10 b</b>	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
<b>11</b>	<b>Section 501(c)(12) organizations.</b> Enter:		
<b>11 a</b>	Gross income from members or shareholders.		
<b>11 b</b>	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)		
<b>12 a</b>	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?		
<b>12 b</b>	If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year		
<b>13</b>	<b>Section 501(c)(29) qualified nonprofit health insurance issuers.</b>		
<b>13 a</b>	Is the organization licensed to issue qualified health plans in more than one state? <i>Note.</i> See the instructions for additional information the organization must report on Schedule O.		
<b>13 b</b>	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans		
<b>13 c</b>	Enter the amount of reserves on hand		
<b>14 a</b>	Did the organization receive any payments for indoor tanning services during the tax year?		X
<b>14 b</b>	If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O		

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

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

**Section A. Governing Body and Management**

		Yes	No
1 a	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	10	
1 b	Enter the number of voting members included in line 1a, above, who are independent . . . . .	10	
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? . . . . .		X
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? . . . . .		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? . . . . .		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets? . . . . .		X
6	Did the organization have members or stockholders? . . . . .		X
7 a	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? . . . . .		X
7 b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or other persons other than the governing body? . . . . .		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
8 a	a The governing body? . . . . .	X	
8 b	b Each committee with authority to act on behalf of the governing body? . . . . .	X	
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 . . . . .		X

**Section B. Policies** (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10 a	Did the organization have local chapters, branches, or affiliates? . . . . .		X
10 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? . . . . .		
11 a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? . . . . .		X
11 b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12 a	Did the organization have a written conflict of interest policy? If 'No,' go to line 13 . . . . .		X
12 b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? . . . . .		
12 c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this was done . . . . .		
13	Did the organization have a written whistleblower policy? . . . . .		X
14	Did the organization have a written document retention and destruction policy? . . . . .		X
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?		
15 a	a The organization's CEO, Executive Director, or top management official . . . . .	X	
15 b	b Other officers of key employees of the organization . . . . . If 'Yes' to line 15a or 15b, describe the process in Schedule O. (See instructions.)		X
16 a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? . . . . .		X
16 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 taken steps to safeguard the organization's exempt status with respect to such arrangements? . . . . .		

**Section C. Disclosure**

- 17 List the states with which a copy of this Form 990 is required to be filed ▶ Rhode Island
- 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.  
 Own website     Another's website     Upon request     Other (explain in Schedule O)
- 19 Describe in Schedule O whether (and if so, how) the organization makes 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.  
 ▶ BARBARA DUCHARME, EXECUTIVE DIRECTOR RI HOSPITAL CAMPUS; 593 EDDY ST PROVIDENCE RI 02903-4947 (401) 444-8811

**Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**

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

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

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

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) MR. DANIEL BELHUMEUR DIRECTOR	0.50	X					0.	0.	0.	
(2) MS. KATHY CLARKIN DIRECTOR	1.00	X					0.	0.	0.	
(3) DR. EDWIN N. FORMAN FOUNDER / DIRECTOR	0.50	X					0.	0.	0.	
(4) DR. DOUGLAS HARRISON DIRECTOR	0.50	X					0.	0.	0.	
(5) MR. EDWARD LAKE DIRECTOR	0.50	X					0.	0.	0.	
(6) MS. MARY E. MCGINN DIRECTOR	1.00	X					0.	0.	0.	
(7) MS. RACHAEL ROGOVIN DIRECTOR	0.50	X					0.	0.	0.	
(8) MR. JOHN S. TKACH DIRECTOR	1.00	X					0.	0.	0.	
(9) MS. LISA ABBENANTE PRESIDENT	2.00	X		X			0.	0.	0.	
(10) MR. ROBERT MARKARIAN VICE PRESIDENT	2.00	X		X			0.	0.	0.	
(11) MR. JAMES R. MESSIER TREASURER	0.50	X		X			0.	0.	0.	
(12) MS. NINA UNSWORTH SECRETARY	0.50	X		X			0.	0.	0.	
(13) MS. BARBARA DUCHARME EXECUTIVE DIRECTOR	40.00			X			77,037.	0.	0.	
(14)										

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee			
(15) -----									
(16) -----									
(17) -----									
(18) -----									
(19) -----									
(20) -----									
(21) -----									
(22) -----									
(23) -----									
(24) -----									
(25) -----									
<b>1 b Sub-total</b> . . . . .						77,037.	0.	0.	
<b>c Total from continuation sheets to Part VII, Section A</b> . . . . .									
<b>d Total (add lines 1b and 1c)</b> . . . . .						77,037.	0.	0.	

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

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

**Section B. Independent Contractors**

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

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

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

**Part VIII Statement of Revenue**

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

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
<b>CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS</b>	<b>1 a</b> Federated campaigns . . . . .	<b>1 a</b> 16,234.				
	<b>b</b> Membership dues . . . . .	<b>1 b</b>				
	<b>c</b> Fundraising events . . . . .	<b>1 c</b> 402,894.				
	<b>d</b> Related organizations . . . . .	<b>1 d</b>				
	<b>e</b> Government grants (contributions) . . . . .	<b>1 e</b>				
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above . . . . .	<b>1 f</b> 555,379.				
	<b>g</b> Noncash contributions included in lines 1a-1f \$ . . . . .	80,458.				
<b>h Total.</b> Add lines 1a-1f . . . . .		974,507.				
<b>PROGRAM SERVICE REVENUE</b>	<b>2 a</b> _____	<b>Business Code</b>				
	<b>b</b> _____					
	<b>c</b> _____					
	<b>d</b> _____					
	<b>e</b> _____					
	<b>f</b> All other program service revenue . . . . .					
	<b>g Total.</b> Add lines 2a-2f . . . . .					
<b>OTHER REVENUE</b>	<b>3</b> Investment income (including dividends, interest and other similar amounts) . . . . .		91,347.	0.	0.	91,347.
	<b>4</b> Income from investment of tax-exempt bond proceeds . . . . .					
	<b>5</b> Royalties . . . . .					
	<b>6 a</b> Gross rents . . . . .	(i) Real				
		(ii) Personal				
		<b>b</b> Less rental expenses				
		<b>c</b> Rental income or (loss) . . . . .				
	<b>d</b> Net rental income or (loss) . . . . .					
	<b>7 a</b> Gross amount from sales of assets other than inventory . . . . .	(i) Securities	679,291.			
		(ii) Other	0.			
		<b>b</b> Less cost or other basis and sales expenses . . . . .	560,617.	648.		
		<b>c</b> Gain or (loss) . . . . .	118,674.	-648.		
	<b>d</b> Net gain or (loss) . . . . .		118,026.	0.	0.	118,026.
	<b>8 a</b> Gross income from fundraising events (not including . . \$ 402,894. of contributions reported on line 1c). See Part IV, line 18. . . . .	<b>a</b>	96,300.			
		<b>b</b> Less direct expenses . . . . .	122,125.			
<b>c</b> Net income or (loss) from fundraising events . . . . .			-25,825.	0.	-25,825.	
<b>9 a</b> Gross income from gaming activities See Part IV, line 19. . . . .	<b>a</b>					
	<b>b</b> Less direct expenses . . . . .					
	<b>c</b> Net income or (loss) from gaming activities . . . . .					
<b>10 a</b> Gross sales of inventory, less returns and allowances . . . . .	<b>a</b>					
	<b>b</b> Less cost of goods sold . . . . .					
	<b>c</b> Net income or (loss) from sales of inventory . . . . .					
<b>Miscellaneous Revenue</b>		<b>Business Code</b>				
<b>11 a</b> MISCELLANEOUS . . . . .	900099	9,211.	9,211.	0.	0.	
<b>b</b> _____						
<b>c</b> _____						
<b>d</b> All other revenue . . . . .						
<b>e Total.</b> Add lines 11a-11d . . . . .		9,211.				
<b>12 Total revenue.</b> See instructions . . . . .		1,167,266.	9,211.	0.	183,548.	

**Part IX Statement of Functional Expenses**

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the United States. See Part IV, line 21 . . . . .				
2 Grants and other assistance to individuals in the United States. See Part IV, line 22 . . . . .	28,500.	28,500.		
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 . . . . .	82,570.	45,414.	18,578.	18,578.
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. . . . .	193,659.	87,349.	48,747.	57,563.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions). . . . .				
9 Other employee benefits . . . . .	24,664.	11,072.	3,331.	10,261.
10 Payroll taxes . . . . .	24,391.	11,723.	5,945.	6,723.
11 Fees for services (non-employees):				
a Management . . . . .				
b Legal . . . . .				
c Accounting . . . . .	11,292.	0.	11,292.	0.
d Lobbying . . . . .				
e Professional fundraising services. See Part IV, line 17 . . . . .				
f Investment management fees . . . . .	24,074.	0.	24,074.	0.
g Other (If line 11g amt exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O). . . . .				
12 Advertising and promotion . . . . .	30,411.	15,441.	0.	14,970.
13 Office expenses . . . . .	22,690.	12,248.	5,501.	4,941.
14 Information technology . . . . .				
15 Royalties . . . . .				
16 Occupancy . . . . .				
17 Travel . . . . .				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials . . . . .				
19 Conferences, conventions, and meetings . . . . .				
20 Interest . . . . .				
21 Payments to affiliates . . . . .				
22 Depreciation, depletion, and amortization . . . . .	3,997.	0.	3,997.	0.
23 Insurance . . . . .	4,727.	0.	4,727.	0.
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) . . . . .				
a <u>CONTRACT LABOR</u> . . . . .	189,358.	189,358.	0.	0.
b <u>DIRECT ASSISTANCE</u> . . . . .	126,500.	126,500.	0.	0.
c <u>IN-PATIENT SUPPORT</u> . . . . .	43,465.	43,465.	0.	0.
d <u>OTHER PATIENT &amp; FAMILY SUPPORT</u> . . . . .	70,281.	70,281.	0.	0.
e All other expenses . . . . .	45,973.	15,147.	22,317.	8,509.
25 Total functional expenses. Add lines 1 through 24e. . . . .	926,552.	656,498.	148,509.	121,545.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720). . . . .				

**Part X Balance Sheet**

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

		(A) Beginning of year		(B) End of year	
ASSETS	1	Cash — non-interest-bearing . . . . .	348,645.	1	108,598.
	2	Savings and temporary cash investments . . . . .		2	
	3	Pledges and grants receivable, net . . . . .		3	
	4	Accounts receivable, net . . . . .		4	
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L . . . . .		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L . . . . .		6	
	7	Notes and loans receivable, net . . . . .		7	
	8	Inventories for sale or use . . . . .		8	
	9	Prepaid expenses and deferred charges . . . . .	14,098.	9	13,110.
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D . . . . .	10a 42,392.		
	b	Less accumulated depreciation . . . . .	10b 34,963.	7,982.	10c 7,429.
	11	Investments — publicly traded securities . . . . .	2,643,028.	11	3,092,454.
	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	<b>Total assets.</b> Add lines 1 through 15 (must equal line 34) . . . . .	3,013,753.	16	3,221,591.	
LIABILITIES	17	Accounts payable and accrued expenses. . . . .	11,606.	17	34,780.
	18	Grants payable. . . . .	233,334.	18	166,669.
	19	Deferred revenue . . . . .	149,400.	19	149,625.
	20	Tax-exempt bond liabilities . . . . .		20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D . . . . .		21	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L . . . . .		22	
	23	Secured mortgages and notes payable to unrelated third parties . . . . .		23	
	24	Unsecured notes and loans payable to unrelated third parties . . . . .		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D . . . . .		25	
	26	<b>Total liabilities.</b> Add lines 17 through 25 . . . . .	394,340.	26	351,074.
NET ASSETS OR FUND BALANCES	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.				
	27	Unrestricted net assets . . . . .	1,924,654.	27	2,007,816.
	28	Temporarily restricted net assets . . . . .	7,268.	28	175,210.
	29	Permanently restricted net assets . . . . .	687,491.	29	687,491.
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds . . . . .		30	
	31	Paid-in or capital surplus, or land, building, or equipment fund . . . . .		31	
	32	Retained earnings, endowment, accumulated income, or other funds . . . . .		32	
	33	<b>Total net assets or fund balances.</b> . . . . .	2,619,413.	33	2,870,517.
34	<b>Total liabilities and net assets/fund balances</b> . . . . .	3,013,753.	34	3,221,591.	

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Form 990 (2013)

**Part XI Reconciliation of Net Assets**

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

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12)	<b>1</b>	1,167,266.
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	926,552.
<b>3</b>	Revenue less expenses. Subtract line 2 from line 1	<b>3</b>	240,714.
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	<b>4</b>	2,619,413.
<b>5</b>	Net unrealized gains (losses) on investments	<b>5</b>	10,390.
<b>6</b>	Donated services and use of facilities	<b>6</b>	
<b>7</b>	Investment expenses	<b>7</b>	
<b>8</b>	Prior period adjustments	<b>8</b>	
<b>9</b>	Other changes in net assets or fund balances (explain in Schedule O)	<b>9</b>	
<b>10</b>	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	<b>10</b>	2,870,517.

**Part XII Financial Statements and Reporting**

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

		Yes	No
<b>1</b>	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.		
<b>2 a</b>	Were the organization's financial statements compiled or reviewed by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
<b>2 b</b>	Were the organization's financial statements audited by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
<b>2 c</b>	If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	X	
<b>3 a</b>	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		X
<b>3 b</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		

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Form 990 (2013)

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

**Public Charity Status and Public Support**

OMB No 1545-0047

**2013**

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

► Attach to Form 990 or Form 990-EZ.

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

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

Name of the organization

THE TOMORROW FUND

Employer identification number

05-0450569

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

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

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

	Yes	No
(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?	11 g (i)	
(ii) A family member of a person described in (i) above?	11 g (ii)	
(iii) A 35% controlled entity of a person described in (i) or (ii) above?	11 g (iii)	

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

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

**Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received (Do not include any 'unusual grants') . . . . .	816,076.	1,016,907.	978,945.	1,127,227.	974,507.	4,913,662.
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . . . .						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge. . . . .						
<b>4 Total.</b> Add lines 1 through 3 . . . . .	816,076.	1,016,907.	978,945.	1,127,227.	974,507.	4,913,662.
<b>5</b> 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) . . . . .						111,040.
<b>6 Public support.</b> Subtract line 5 from line 4 . . . . .						4,802,622.

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
<b>7</b> Amounts from line 4 . . . . .	816,076.	1,016,907.	978,945.	1,127,227.	974,507.	4,913,662.
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources . . . . .	89,854.	88,130.	92,384.	92,752.	91,347.	454,467.
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on . . . . .						
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) . . . . .	8,819.	7,039.		4,797.	9,211.	29,866.
<b>11 Total support.</b> Add lines 7 through 10 . . . . .						5,397,995.
<b>12</b> Gross receipts from related activities, etc (see instructions) . . . . .					<b>12</b>	96,300.
<b>13</b> First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> . . . . . ▶ <input type="checkbox"/>						

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

<b>14</b> Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f)) . . . . .	<b>14</b>	88.97 %
<b>15</b> Public support percentage from 2012 Schedule A, Part II, line 14 . . . . .	<b>15</b>	88.99 %
<b>16a 33-1/3% support test – 2013.</b> If the organization did not check the box on line 13, and the line 14 is 33-1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization . . . . . ▶ <input checked="" type="checkbox"/>		
<b>b 33-1/3% support test – 2012.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33-1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization . . . . . ▶ <input type="checkbox"/>		
<b>17a 10%-facts-and-circumstances test – 2013.</b> If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and <b>stop here.</b> Explain in Part IV how the organization meets the 'facts-and-circumstances' test The organization qualifies as a publicly supported organization . . . . . ▶ <input type="checkbox"/>		
<b>b 10%-facts-and-circumstances test – 2012.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and <b>stop here.</b> Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization . . . . . ▶ <input type="checkbox"/>		
<b>18 Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions . . . . . ▶ <input type="checkbox"/>		

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

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

**Section A. Public Support**

Calendar year (or fiscal yr beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
<b>1</b> Gifts, grants, contributions and membership fees received. (Do not include any 'unusual grants'.)						
<b>2</b> 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						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge						
<b>6 Total.</b> Add lines 1 through 5						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons						
<b>b</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						
<b>c</b> Add lines 7a and 7b						
<b>8 Public support.</b> (Subtract line 7c from line 6.)						

**Section B. Total Support**

Calendar year (or fiscal yr beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
<b>9</b> Amounts from line 6						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
<b>c</b> Add lines 10a and 10b						
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
<b>13 Total Support.</b> (Add lns 9 10c, 11 and 12)						

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

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

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

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

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

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

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

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

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

Pt II Line 10: Description: MISCELLANEOUS

Pt II Line 10: 2009: 8819.

Pt II Line 10: 2010: 7039.

Pt II Line 10: 2012: 4797.

Pt II Line 10: 2013: 9211.

Multiple horizontal dashed lines for supplemental information.

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No 1545-0047

2013

Department of the Treasury Internal Revenue Service

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

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

Open to Public Inspection

Name of the organization

Employer identification number

THE TOMORROW FUND

05-0450569

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

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

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include: 1 Total number at end of year, 2 Aggregate contributions to (during year), 3 Aggregate grants from (during year), 4 Aggregate value at end of year, 5 Did the organization inform all donors...?, 6 Did the organization inform all grantees...?

Part II Conservation Easements.

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

Table with 2 columns: Held at the End of the Tax Year. Rows include: 1 Purpose(s) of conservation easements held by the organization, 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution, 3 Number of conservation easements modified, transferred, released, extinguished, or terminated, 4 Number of states where property subject to conservation easement is located, 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?, 6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year, 7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year, 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?, 9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

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

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

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

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

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

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

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

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

**Part IV Escrow and Custodial Arrangements.** Complete if the organization answered 'Yes' to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

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

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

	Amount
c Beginning balance . . . . .	1 c
d Additions during the year . . . . .	1 d
e Distributions during the year . . . . .	1 e
f Ending balance . . . . .	1 f

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

b If 'Yes,' explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII  Yes  No

**Part V Endowment Funds.** Complete if the organization answered 'Yes' to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1 a Beginning of year balance . . . . .	2,193,679.	2,042,014.	1,801,685.	1,826,010.	1,702,249.
b Contributions . . . . .	309,958.	10,028.	9,869.	9,859.	9,906.
c Net investment earnings, gains, and losses . . . . .	165,147.	153,810.	258,710.	4,686.	164,590.
d Grants or scholarships . . . . .	22,500.				
e Other expenditures for facilities and programs . . . . .	25,152.	12,173.	28,250.	38,870.	50,735.
f Administrative expenses . . . . .					
g End of year balance . . . . .	2,621,132.	2,193,679.	2,042,014.	1,801,685.	1,826,010.

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

- a Board designated or quasi-endowment ▶ 67.49 %
  - b Permanent endowment ▶ 26.23 %
  - c Temporarily restricted endowment ▶ 6.28 %
- The percentages in lines 2a, 2b, and 2c should equal 100%.

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

	Yes	No
(i) unrelated organizations . . . . .	3a(i)	X
(ii) related organizations . . . . .	3a(ii)	X
b If 'Yes' to 3a(ii), are the related organizations listed as required on Schedule R? . . . . .	3b	

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

**Part VI Land, Buildings, and Equipment.**

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1 a Land . . . . .				
b Buildings . . . . .				
c Leasehold improvements . . . . .		14,993.	13,617.	1,376.
d Equipment . . . . .		27,399.	21,346.	6,053.
e Other . . . . .				

**Total.** Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c) ) ▶ 7,429.

**Part VII Investments – Other Securities.**

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

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

**Part VIII Investments – Program Related.**

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

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

**Part IX Other Assets.**

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

(a) Description	(b) Book value
(1) _____	
(2) _____	
(3) _____	
(4) _____	
(5) _____	
(6) _____	
(7) _____	
(8) _____	
(9) _____	
(10) _____	
Total. (Column (b) must equal Form 990, Part X, column (B), line 15) . . . . . ▶	

**Part X Other Liabilities.**

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

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

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

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

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

<b>1</b>	Total revenue, gains, and other support per audited financial statements . . . . .	<b>1</b>	1,275,707.
<b>2</b>	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
	<b>a</b> Net unrealized gains on investments . . . . .	<b>2 a</b>	10,390.
	<b>b</b> Donated services and use of facilities . . . . .	<b>2 b</b>	
	<b>c</b> Recoveries of prior year grants . . . . .	<b>2 c</b>	
	<b>d</b> Other (Describe in Part XIII.) . . . . .	<b>2 d</b>	122,125.
	<b>e</b> Add lines 2a through 2d . . . . .	<b>2 e</b>	132,515.
<b>3</b>	Subtract line 2e from line 1 . . . . .	<b>3</b>	1,143,192.
<b>4</b>	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
	<b>a</b> Investment expenses not included on Form 990, Part VIII, line 7b. . . . .	<b>4 a</b>	24,074.
	<b>b</b> Other (Describe in Part XIII.) . . . . .	<b>4 b</b>	
	<b>c</b> Add lines 4a and 4b . . . . .	<b>4 c</b>	24,074.
<b>5</b>	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) . . . . .	<b>5</b>	1,167,266.

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

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

<b>1</b>	Total expenses and losses per audited financial statements. . . . .	<b>1</b>	1,024,603.
<b>2</b>	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
	<b>a</b> Donated services and use of facilities . . . . .	<b>2 a</b>	
	<b>b</b> Prior year adjustments . . . . .	<b>2 b</b>	
	<b>c</b> Other losses . . . . .	<b>2 c</b>	
	<b>d</b> Other (Describe in Part XIII.) . . . . .	<b>2 d</b>	122,125.
	<b>e</b> Add lines 2a through 2d . . . . .	<b>2 e</b>	122,125.
<b>3</b>	Subtract line 2e from line 1 . . . . .	<b>3</b>	902,478.
<b>4</b>	Amounts included on Form 990, Part IX, line 25, but not on line 1		
	<b>a</b> Investment expenses not included on Form 990, Part VIII, line 7b. . . . .	<b>4 a</b>	24,074.
	<b>b</b> Other (Describe in Part XIII.) . . . . .	<b>4 b</b>	
	<b>c</b> Add lines 4a and 4b . . . . .	<b>4 c</b>	24,074.
<b>5</b>	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) . . . . .	<b>5</b>	926,552.

**Part XIII Supplemental Information.**

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

Pt V Line 4 THE ENDOWMENT FUNDS ARE RESTRICTED TO PAY FOR SCHOLARSHIPS  
 Pt V Line 4 AND TO SUPPORT THE NEEDS OF THE PATIENTS AND FAMILIES.  
 Pt X Line 2 THE TOMORROW FUND EVALUATES ALL SIGNIFICANT TAX POSITIONS AS  
 Pt X Line 2 REQUIRED BY ACCOUNTING PRINCIPLES GENERALLY ACCEPTED IN THE  
 Pt X Line 2 UNITED STATES OF AMERICA. AS OF YEAR-END, THE FUND DOES NOT  
 Pt X Line 2 BELIEVE IT HAS TAKEN ANY TAX POSITIONS THAT WOULD REQUIRE  
 Pt X Line 2 THE RECOGNITION OF A TAX LIABILITY OR ANY UNREALIZED TAX  
 Pt X Line 2 BENEFIT THAT WOULD EITHER INCREASE OR DECREASE WITHIN THE

BAA



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

Department of the Treasury  
Internal Revenue Service

**Supplemental Information Regarding  
Fundraising or Gaming Activities**

Complete if the organization answered 'Yes' to Form 990, Part IV, lines 17, 18,  
or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.  
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.  
▶ Information about Schedule G (Form 990 or 990-EZ) and its instructions is  
at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No 1545-0047

**2013**

**Open to Public  
Inspection**

Name of the organization

THE TOMORROW FUND

Employer identification number

05-0450569

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

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

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

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

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

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

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

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

REVENUE		(a) Event #1 FANTASY BALL (event type)	(b) Event #2 THE STROLL (event type)	(c) Other events 1 (total number)	(d) Total events (add column (a) through column (c))	
	1	Gross receipts . . . . .	367,021.	89,058.	43,115.	499,194.
2	Less: Charitable contributions . . . . .	302,021.	89,058.	11,815.	402,894.	
3	Gross income (line 1 minus line 2). . . . .	65,000.	0.	31,300.	96,300.	
DIRECT EXPENSES	4	Cash prizes . . . . .				
	5	Noncash prizes . . . . .				
	6	Rent/facility costs . . . . .	4,701.	745.	14,303.	19,749.
	7	Food and beverages . . . . .	64,195.		10,663.	74,858.
	8	Entertainment . . . . .	3,500.			3,500.
	9	Other direct expenses . . . . .	16,981.	4,599.	2,438.	24,018.
	10	Direct expense summary. Add lines 4 through 9 in column (d) . . . . . ▶				122,125.
11	Net income summary. Subtract line 10 from line 3, column (d) . . . . . ▶				-25,825.	

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

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

9 Enter the state(s) in which the organization operates gaming activities: \_\_\_\_\_  
 a Is the organization licensed to operate gaming activities in each of these states?  Yes  No  
 b If 'No,' explain: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

10 a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?  Yes  No  
 b If 'Yes,' explain: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

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

13 Indicate the percentage of gaming activity operated in.

a The organization's facility . . . . .	<b>13 a</b>	%
b An outside facility. . . . .	<b>13 b</b>	%

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ \_\_\_\_\_

Address ▶ \_\_\_\_\_

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

Name ▶ \_\_\_\_\_

Address ▶ \_\_\_\_\_

16 Gaming manager information:

Name ▶ \_\_\_\_\_

Gaming manager compensation ▶ \$ \_\_\_\_\_

Description of services provided ▶ \_\_\_\_\_

Director/officer       Employee       Independent contractor

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

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

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**SCHEDULE I**  
**(Form 990)**

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

OMB No 1545-0047

**2013**

Department of the Treasury  
Internal Revenue Service

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

**Open to Public  
Inspection**

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

Name of the organization

Employer identification number

THE TOMORROW FUND

05-0450569

**Part I** **General Information on Grants and Assistance**

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  Yes  No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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

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

- 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . . ▶ \_\_\_\_\_
- 3 Enter total number of other organizations listed in the line 1 table . . . . . ▶ \_\_\_\_\_



**SCHEDULE M  
(Form 990)**

**Noncash Contributions**

OMB No 1545-0047

**2013**

**Open To Public  
Inspection**

Department of the Treasury  
Internal Revenue Service

- ▶ Complete if the organizations answered 'Yes' on Form 990, Part IV, lines 29 or 30.
- ▶ Attach to Form 990.
- ▶ Information about Schedule M (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

Name of the organization

Employer identification number

THE TOMORROW FUND

05-0450569

**Part I Types of Property**

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art – Works of art . . . . .				
2 Art – Historical treasures . . . . .				
3 Art – Fractional interests . . . . .				
4 Books and publications . . . . .				
5 Clothing and household goods . . . . .				
6 Cars and other vehicles . . . . .				
7 Boats and planes . . . . .				
8 Intellectual property . . . . .				
9 Securities – Publicly traded . . . . .	X	1	9,958.	FAIR VALUE
10 Securities – Closely held stock . . . . .				
11 Securities – Partnership, LLC, or trust interests . . . . .				
12 Securities – Miscellaneous . . . . .				
13 Qualified conservation contribution – Historic structures . . . . .				
14 Qualified conservation contribution – Other . . . . .				
15 Real estate – Residential . . . . .				
16 Real estate – Commercial . . . . .				
17 Real estate – Other . . . . .				
18 Collectibles . . . . .				
19 Food inventory . . . . .				
20 Drugs and medical supplies . . . . .				
21 Taxidermy . . . . .				
22 Historical artifacts . . . . .				
23 Scientific specimens . . . . .				
24 Archeological artifacts . . . . .				
25 Other ▶ (EVENT AUCTION ITEMS) . . . . .			70,500.	SALES VALUE
26 Other ▶ ( ) . . . . .				
27 Other ▶ ( ) . . . . .				
28 Other ▶ ( ) . . . . .				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement . . . . . **29**

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? . . . . .		X
b If 'Yes,' describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? . . . . .		X
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? . . . . .		X
b If 'Yes,' describe in Part II.		
33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		



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

**Supplemental Information to Form 990 or 990-EZ**

OMB No 1545-0047

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

**2013**

▶ Attach to Form 990 or 990-EZ.

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

Open to Public  
Inspection

Department of the Treasury  
Internal Revenue Service

Name of the organization

Employer identification number

THE TOMORROW FUND

05-0450569

Pt VI, Line 11b THE FORM 990 IS REVIEWED IN DETAIL BY MEMBERS OF THE FINANCE  
 Pt VI, Line 11b COMMITTEE AND THE EXECUTIVE DIRECTOR BEFORE ITS FILING. THE FULL  
 Pt VI, Line 11b BOARD IS MADE AWARE OF ITS COMPLETION AND THIS DOCUMENT IS SUBMITTED  
 Pt VI, Line 11b TO MEMBERS OF THE GOVERNING BODY VIA EMAIL UPON REQUEST.  
 Pt VI, Line 15a THE FINANCE COMMITTEE REVIEWS AND DETERMINES THE COMPENSATION  
 Pt VI, Line 15a PACKAGE FOR THE EXECUTIVE DIRECTOR ON AN ANNUAL BASIS.  
 Pt VI, Line 15a ECONOMIC AND PERFORMANCE BASED FACTORS ARE USED BY THE  
 Pt VI, Line 15a BOARD OF DIRECTORS IN THE DETERMINATION OF APPROPRIATE CONSIDERATION.  
 Pt VI, Line 19 GOVERNING DOCUMENTS ARE MADE AVAILABLE TO THE PUBLIC THROUGH  
 Pt VI, Line 19 PRESENTATION AT THE ANNUAL MEETING AS WELL AS UPON REQUEST.

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Schedule O (Form 990), Supplemental Information to Form 990  
**Form 990, Page 2, Part III, Line 1 (continued)**

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**Briefly describe the organization's mission:**

FAMILIES WHO ARE TREATED AT HASBRO CHILDREN'S HOSPITAL IN PROVIDENCE, RI AND DILIGENTLY STRIVES TO ENSURE ACCESS TO THE HIGHEST LEVEL OF CARE, WHILE PROMOTING PUBLIC AWARENESS OF CHILDHOOD CANCER.

## Application for Extension of Time To File an Exempt Organization Return

▶ **File a separate application for each return.**

▶ **Information about Form 8868 and its instructions is at [www.irs.gov/form8868](http://www.irs.gov/form8868).**

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

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

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

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

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

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

Enter filer's identifying number, see instructions

<b>Type or print</b>	Name of exempt organization or other filer, see instructions  <b>THE TOMORROW FUND</b>	Employer identification number (EIN) or  <b>05-0450569</b>
File by the due date for filing your return. See instructions.	Number, street, and room or suite number. If a P. O. box, see instructions  <b>RI HOSPITAL CAMPUS; 593 EDDY STREET</b>	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions.  <b>PROVIDENCE RI 02903-4947</b>	

Enter the Return code for the return that this application is for (file a separate application for each return)  **07**

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

● The books are in the care of ▶ BARBARA DUCHARME, EXECUTIVE DIRECTOR

Telephone No. ▶ (401) 444-8811 Fax No. ▶ (401) 444-4542

- If the organization does not have an office or place of business in the United States, check this box
- If this is for a **Group Return**, enter the organization's four digit Group Exemption Number (GEN) \_\_\_\_\_ . If this is for the whole group, check this box  . If it is for part of the group, check this box  and attach a list with the names and EINs of all members the extension is for.

**1** I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until Aug 17, 2015, to file the exempt organization return for the organization named above.

The extension is for the organization's return for:

- ▶  calendar year 20\_\_\_\_ or
- ▶  tax year beginning Oct 1, 2013, and ending Sep 30, 2014.

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

3 a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See Instructions . . . . .	<b>3 a</b>	\$	
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit . . . . .	<b>3 b</b>	\$	200.
c <b>Balance due.</b> Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See Instructions. . . . .	<b>3 c</b>	\$	0.

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

**THE TOMORROW FUND**

***Financial Statements***

***September 30, 2014 and 2013***



**CALIRI, MANCINI & BARBIERI, PC**

*Certified Public Accountants and Valuation Analysts*

**THE TOMORROW FUND**  
**Index to Financial Statements**  
**September 30, 2014 and 2013**

	<b><u>Page No.</u></b>
Independent Auditors' Report	1
Statements of Financial Position	2
Statements of Activities	3
Statements of Functional Expenses	4 - 5
Statements of Cash Flows	6
Notes to Financial Statements	7 - 20



**INDEPENDENT AUDITORS' REPORT**

To the Board of Directors  
The Tomorrow Fund  
Providence, Rhode Island

We have audited the accompanying financial statements of The Tomorrow Fund (a non-profit organization), which comprise the statement of financial position as of September 30, 2014, and the related statements of activities, functional expenses, and cash flows for the year then ended, and the related notes to the financial statements.

***Management's Responsibility for the Financial Statements***

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

***Auditors' Responsibility***

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

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

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

***Opinion***

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of The Tomorrow Fund as of September 30, 2014, and the changes in its net assets and its cash flows for the year then ended in accordance with accounting principles generally accepted in the United States of America.

***Report on Comparative Information***

The prior year information has been derived from The Tomorrow Fund's 2013 financial statements that were audited by other auditors. Those auditors expressed an unqualified opinion on those financial statements in their report dated January 17, 2014.

*Caliri, Mancini & Barbieri, PC*

Exeter, Rhode Island  
April 14, 2015

**THE TOMORROW FUND**  
**Statements of Financial Position**  
**September 30, 2014 and 2013**

	<u>2014</u>	<u>2013</u>
<b>ASSETS</b>		
Cash	\$ 108,598	\$ 348,645
Prepaid Expenses and Other Assets	13,110	14,098
Investments, at Fair Value	3,092,454	2,643,028
Property and Equipment, Net	<u>7,429</u>	<u>7,982</u>
<b>Total Assets</b>	<b>\$ <u>3,221,591</u></b>	<b>\$ <u>3,013,753</u></b>
<b>LIABILITIES AND NET ASSETS</b>		
Accounts Payable and Accrued Expenses	\$ 34,780	\$ 11,606
Deferred Revenue	149,625	149,400
Grant Payable	<u>166,669</u>	<u>233,334</u>
<b>Total Liabilities</b>	<b><u>351,074</u></b>	<b><u>394,340</u></b>
Unrestricted - General Operations	238,706	424,055
Unrestricted - Board Designated for Endowment	<u>1,769,110</u>	<u>1,500,599</u>
<b>Total Unrestricted</b>	<b>2,007,816</b>	<b>1,924,654</b>
Temporarily Restricted	175,210	7,268
Permanently Restricted	<u>687,491</u>	<u>687,491</u>
<b>Total Net Assets</b>	<b><u>2,870,517</u></b>	<b><u>2,619,413</u></b>
<b>Total Liabilities and Net Assets</b>	<b>\$ <u>3,221,591</u></b>	<b>\$ <u>3,013,753</u></b>

*See independent auditors' report and accompanying notes to financial statements.*

**THE TOMORROW FUND**  
**Notes to Financial Statements**  
**September 30, 2014 and 2013**

**1. Nature of Activities and Summary of Significant Accounting Policies:**

**Nature of Activities**

The Tomorrow Fund ("the Fund") provides a comprehensive program of continuing daily financial and emotional support to children with cancer, survivors and their families who are treated at Hasbro Children's Hospital in Providence, Rhode Island and diligently strives to ensure access to the highest level of care, while promoting public awareness of childhood cancer.

**Summary of Significant Accounting Policies**

*A. Basis of Accounting:*

The accompanying financial statements of the Fund have been prepared using the accrual basis of accounting in accordance with accounting principles generally accepted in the United States of America (U.S. GAAP).

*B. Basis of Financial Statement Presentation:*

In order to ensure observance of limitations and restrictions placed on the use of resources available to the Fund, the net assets and activities that increase or decrease net assets are classified as unrestricted, temporarily restricted, or permanently restricted, depending on the existence and nature of any donor restrictions:

Unrestricted net assets are those without donor-imposed purpose or time restrictions as to their use and are available for the general operations of the Fund.

Temporarily restricted net assets are those whose use has been restricted by donors to a specific time period or purpose.

Permanently restricted net assets are those restricted by donors to be maintained in perpetuity. Income from the related investments may be used to fund operations or may be temporarily restricted by donor stipulations.

*C. Contributions, Net Assets Released from Restrictions, and Promises to Give:*

All donor-restricted contributions are reported as increases in temporarily or permanently restricted net assets depending on the nature of the restrictions. When a restriction expires, that is, when a stipulated time restriction ends or purpose restriction is accomplished, temporarily restricted net assets are reclassified to unrestricted net assets and reported in the statement of activities as net assets released from restrictions.

**THE TOMORROW FUND**  
**Notes to Financial Statements**  
**September 30, 2014 and 2013**

**1. Nature of Activities and Summary of Significant Accounting Policies: (Continued)**

Summary of Significant Accounting Policies (Continued)

*C. Contributions, Net Assets Released from Restrictions, and Promises to Give: (Continued)*

Gifts of long-lived assets with explicit restrictions that specify how the assets are to be used and gifts of cash or other assets that must be used to acquire long-lived assets are reported as restricted support. Absent explicit donor stipulations about how long those long-lived assets must be maintained, the Fund reports expirations of donor restrictions when the donated or acquired long-lived assets are placed in service.

The Fund reports unconditional promises to give as contribution revenue. Receipts of unconditional promises to give with payments due in future periods are reported as temporarily restricted net assets unless explicit donor stipulations or circumstances make clear that the donor intended the promise to be used to support activities of the current period. Conditional promises to give are not recognized until they become unconditional, that is, when the conditions on which they depend are substantially met. If the contribution is made in assets other than cash, the amount of the contribution is measured at the fair value of the asset contributed at the date of the contribution.

*D. Revenue and Support Recognition:*

The Fund's primary sources of revenue consist of contributions and fees relating to specific events and donations. All contributions are considered to be available for use by the various programs and general operations of the Fund unless specifically restricted by the donor.

Any sponsorship or fees received in advance of an event are recognized as deferred revenue until the period in which the event takes place.

*E. Contributed Materials and Services:*

Contributions of materials are reflected in the accompanying financial statements at their estimated fair values at the dates of receipt to the extent that, if not provided by donation, they would have to be purchased by the Fund.

Contributions of services are recognized if the services received create or enhance nonfinancial assets or require specialized skills and are provided by individuals possessing those skills, and would have to be purchased if not provided by donation. Contributed services are recognized at their estimated fair values at the dates of donation.

**THE TOMORROW FUND**  
**Notes to Financial Statements**  
**September 30, 2014 and 2013**

**1. Nature of Activities and Summary of Significant Accounting Policies: (Continued)**

Summary of Significant Accounting Policies (Continued)

*E. Contributed Materials and Services: (Continued)*

Rhode Island Hospital provides office space to the Fund free of charge. An estimation of the value of such space was determined to be impractical to measure by management and, therefore, this in-kind donated service has not been recognized in the accompanying financial statements.

The fair values, when ascertainable, of contributed materials and services are reflected in the financial statements. For the years ended September 30, 2014 and 2013, there were no contributed materials or services recognized in the statements of activities.

Many individuals volunteer time and perform a variety of tasks that assist the Fund in accomplishing its purposes, but since those services do not require specialized skills and would not have been purchased by the Fund if they had not been provided by contribution, they do not meet the criteria for recognition as contributed services in accordance with U.S. GAAP.

*F. Contributed Assets:*

Contributions of securities and other assets are recorded at their fair values on the dates of the contributions.

*G. Investments:*

Investments are valued at their fair values in the accompanying statements of financial position, with investment income, including unrealized gains and losses, included in the changes in net assets in the accompanying statements of activities.

Included in investments are cash and cash equivalents which are held for the express purpose of investment.

*H. Property and Equipment:*

Property and equipment is carried at cost, when purchased, and at fair value, when donated, and depreciated using the straight-line method over estimated useful lives as follows:

Leasehold Improvements	10 years
Computer Equipment and Software	3 years
Furniture and Fixtures	7 years

It is the Fund's policy to capitalize assets with useful lives of greater than one year and with costs that exceed \$500. Expenditures for maintenance and repair, if any, are expensed as incurred.

**THE TOMORROW FUND**  
**Notes to Financial Statements**  
**September 30, 2014 and 2013**

**1. Nature of Activities and Summary of Significant Accounting Policies: (Continued)**

Summary of Significant Accounting Policies (Continued)

**I. Advertising Costs:**

The Fund expenses advertising costs as incurred. For the years ended September 30, 2014 and 2013, advertising costs amounted to approximately \$12,000 and \$14,000, respectively.

**J. Income Tax Status:**

The Internal Revenue Service has determined the Fund is exempt from federal income taxes under section 501(c)(3) of the Internal Revenue Code, and it has been classified as a non-private foundation under section 509(a).

The Fund evaluates all significant tax positions as required U.S. GAAP. As of September 30, 2014, the Fund does not believe it has taken any tax positions that would require the recognition of a tax liability or any unrealized tax benefit that would either increase or decrease within the next twelve months. Tax years that are open for examination by taxing authorities are generally the last three years from the date filed with each taxing jurisdiction.

**K. Concentrations of Credit and Market Risk:**

Financial instruments which potentially subject the Fund to a concentration of credit and/or market risk consist of cash and investments.

At various times, the Fund's cash deposits, including cash and cash equivalents included with investments, exceed the Federal Deposit Insurance Corporation (FDIC) insurance limit of \$250,000. Management considers such circumstances to be a normal business risk.

The Fund invests in a variety of investment securities. Investment securities are exposed to various risks, such as interest rate, market and credit risks. Due to the level of risk associated with certain investment securities and the level of uncertainty related to changes in the value of investment securities, it is at least reasonably possible that changes in risk factors in the near term would materially affect amounts reported in the statements of financial position and the statements of activities.

**L. Allocation of Indirect Costs:**

The Fund's policy is to allocate indirect costs of administrative overhead to the Fund's programs. Administrative salaries and benefits are allocated based on the estimated time administrative staff worked on each program benefited.

**THE TOMORROW FUND**  
**Notes to Financial Statements**  
**September 30, 2014 and 2013**

**1. Nature of Activities and Summary of Significant Accounting Policies: (Continued)**

**Summary of Significant Accounting Policies (Continued)**

*M. Financial Instruments:*

U.S. GAAP requires disclosure of fair value of certain financial instruments. Management believes all financial instruments have been recorded at amounts that approximate their fair values.

*N. Use of Estimates:*

The preparation of the financial statements in conformity with U.S. GAAP requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

*O. Reclassifications:*

Certain amounts in the 2013 financial statements have been reclassified to conform with the 2014 presentation.

*P. Subsequent Events Evaluation:*

Management of the Fund has evaluated subsequent events through April 14, 2015, the date the financial statements were available to be issued.

**2. Property and Equipment, Net:**

Property and equipment, net, consists of the following at September 30:

	<u>2014</u>	<u>2013</u>
Leasehold Improvements	\$14,993	\$18,043
Computer Equipment and Software	15,420	12,461
Furniture and Fixtures	<u>11,980</u>	<u>11,755</u>
	42,393	42,259
Less: Accumulated Depreciation	<u>(34,964)</u>	<u>(34,277)</u>
Property and Equipment, Net	<u>\$ 7,429</u>	<u>\$ 7,982</u>

Depreciation expense was \$3,997 and \$5,725 for the years ended September 30, 2014 and 2013, respectively.

**THE TOMORROW FUND**  
**Notes to Financial Statements**  
**September 30, 2014 and 2013**

**3. Investments:**

Investments are recorded at fair value in the accompanying statements of financial position. The cost, net appreciation, and approximate fair values of the Fund's investments at September 30, 2014 and 2013 are as follows:

	<u>Cost</u>	<u>Net Appreciation</u>	<u>Fair Value</u>
<u>2014</u>			
Cash and Cash Equivalents	\$ 271,643	\$ -	\$ 271,643
Equity Securities	202,538	64,551	267,089
Exchange Traded Funds	345,862	48,959	394,821
Mutual Funds	<u>2,057,908</u>	<u>100,993</u>	<u>2,158,901</u>
Totals	<u>\$2,877,951</u>	<u>\$ 214,503</u>	<u>\$3,092,454</u>
<u>2013</u>			
Cash and Cash Equivalents	\$ 246,574	\$ -	\$ 246,574
Fixed Income Funds	205,106	21,965	227,071
Equity Securities and Exchange Traded Funds	562,574	111,021	673,595
Mutual Funds	<u>1,424,407</u>	<u>71,381</u>	<u>1,495,788</u>
Totals	<u>\$2,438,661</u>	<u>\$ 204,367</u>	<u>\$2,643,028</u>

The following is a summary of investment earnings for the years ended September 30:

	<u>2014</u>	<u>2013</u>
Interest and Dividend Income	\$ 67,273	\$ 70,832
Net Realized Gain	118,674	146,848
Net Unrealized Gain (Loss)	<u>10,390</u>	<u>(63,870)</u>
Total Net Appreciation	<u>129,064</u>	<u>82,978</u>
Total Investment Income	<u>\$ 196,337</u>	<u>\$ 153,810</u>

Interest and dividend income is reported net of investment advisory fees of approximately \$24,000 and \$22,000 for the years ended September 30, 2014 and 2013, respectively.

**THE TOMORROW FUND**  
**Notes to Financial Statements**  
**September 30, 2014 and 2013**

**4. Fair Value Measurements:**

The Financial Accounting Standards Board Accounting Standards Codification (ASC 820) establishes a framework for measuring fair value, and establishes a fair value hierarchy which prioritizes the inputs to valuation techniques. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. A fair value measurement assumes the transaction to sell the asset or transfer the liability occurs in the principal market for the asset or liability, or, in the absence of a principal market, the most advantageous market. Valuation techniques that are consistent with the market, income or cost approaches, as specified by ASC 820, are used to measure fair value.

The fair value hierarchy prioritizes the inputs to valuation techniques used to measure fair value into three broad levels as described below:

Level 1 inputs are quoted prices (unadjusted) in active markets for identical assets or liabilities that the reporting entity has the ability to access at the measurement date. The fair value hierarchy gives highest priority to Level 1 inputs.

Level 2 inputs are observable prices, other than quoted prices included within Level 1, including:

- Quoted prices for similar assets or liabilities in active markets.
- Quoted prices for identical or similar assets or liabilities in markets that are not active, that is, markets in which there are few transactions for the asset or liability, the prices are not current, or the price quotations vary substantially either over time or among market makers, or in which little information is released publicly.
- Inputs other than quoted prices that are observable for the asset or liability.
- Inputs that are derived principally from or corroborated by observable market data by correlation or other means.

Level 3 inputs are unobservable inputs for the asset or liability. Unobservable inputs are used to measure fair value when little or no market activity is available at the measurement date. These inputs rely on management's assumptions that are developed based on the best information available in the circumstances, which may include the entity's own data. The fair value hierarchy gives the lowest priority to Level 3 inputs.

In determining fair value, the Fund utilizes valuation techniques that maximize the use of observable inputs to the extent possible.

**THE TOMORROW FUND**  
**Notes to Financial Statements**  
**September 30, 2014 and 2013**

**9. Endowment: (Continued)**

In accordance with R.I. UPMIFA, the Fund considers the following factors in making a determination to appropriate or accumulate donor-restricted endowment funds:

- (1) The duration and preservation of the endowment fund;
- (2) The purposes of the Fund and the endowment funds;
- (3) General economic conditions;
- (4) The possible effect of inflation and deflation;
- (5) The expected total return from income and appreciation of investments;
- (6) Other available resources of the Fund; and
- (7) The investment policies of the Fund.

**Funds with Deficiencies**

From time to time, the fair value of the assets associated with individual donor-restricted endowment funds may fall below the level that the donor or R.I. UPMIFA requires the Fund to retain as a fund of perpetual duration. In accordance with the Fund's interpretation of R.I. UPMIFA, deficiencies of this nature, as applicable, are reported as unrestricted net assets.

**Return Objectives and Risk Parameters**

The Fund has adopted investment and spending policies for endowment assets that attempt to provide a predictable stream of funding to programs supported by its endowment while seeking to maintain the purchasing power of the endowment assets. Endowment assets include those assets of donor-restricted funds that the Fund must hold in perpetuity for a donor-specified purpose. Under this policy, as approved by the Board of Directors, the endowment assets are invested in a manner that is intended to produce results that exceed the price and yield results of the S&P 500 index while assuming a moderate level of investment risk. The Fund expects its endowment funds, over time, to provide an average rate of return of approximately 7% annually. Actual returns in any given year may vary from this amount.

**Strategies Employed for Achieving Objectives**

To satisfy its long-term rate-of-return objectives, the Fund relies on a total return strategy in which investment returns are achieved through both capital appreciation (realized and unrealized) and current yield (interest and dividends). The Fund targets a diversified asset allocation that places a greater emphasis on equity-based investments to achieve its long-term return objectives within prudent risk constraints.

**Spending Policy and How the Investment Objectives Relate to Spending Policy**

The Fund has a policy of reinvesting the earnings on the investments held within its endowment portfolio. Earnings on donor restricted endowment funds are earmarked for their donor-restricted purposes until their expenditure is approved by the Board. Earnings on board-designated endowment funds are not withdrawn unless specifically directed to do so by the Board.

**THE TOMORROW FUND**  
**Notes to Financial Statements**  
**September 30, 2014 and 2013**

**9. Endowment: (Continued)**

*Spending Policy and How the Investment Objectives Relate to Spending Policy* (Continued)

In the event board-designated endowment funds are required to be withdrawn, management will make a formal request to the Board for the withdrawal of such funds. The Board will take into consideration the Fund's cash needs as well as its long-term financial strategy in determining the amount to be distributed from the board-designated endowment portfolio.

*Endowment Net Asset Composition and Changes in Endowment Net Assets*

Endowment net asset composition and changes in endowment net assets as of and for the year ended September 30, 2014 are as follows:

	<u>Board- Designated Unrestricted</u>	<u>Temporarily Restricted</u>	<u>Permanently Restricted</u>	<u>Total</u>
Endowment Net Assets, Beginning of Year	\$ 1,500,599	\$ 5,589	\$ 687,491	\$ 2,193,679
Contributions	9,958	-	-	9,958
Assets Transferred from Operations	163,780	136,220	-	300,000
Investment Income:				
Investment Income	69,734	21,556	-	91,290
Investment Management Fees	(18,060)	(6,013)	-	(24,073)
Net Appreciation (Realized and Unrealized)	<u>75,937</u>	<u>21,993</u>	<u>-</u>	<u>97,930</u>
Net Investment Income	127,611	37,536	-	165,147
Appropriation of Assets for Expenditure	<u>(32,838)</u>	<u>(14,814)</u>	<u>-</u>	<u>(47,652)</u>
Endowment Net Assets, End of Year	<u>\$ 1,769,110</u>	<u>\$ 164,531</u>	<u>\$ 687,491</u>	<u>\$ 2,621,132</u>

**THE TOMORROW FUND**  
**Notes to Financial Statements**  
**September 30, 2014 and 2013**

**9. Endowment: (Continued)**

Endowment net asset composition and changes in endowment net assets as of and for the year ended September 30, 2013 are as follows:

	<u>Board- Designated Unrestricted</u>	<u>Temporarily Restricted</u>	<u>Permanently Restricted</u>	<u>Total</u>
Endowment Net Assets, Beginning of Year	\$ 1,351,933	\$ 2,590	\$ 687,491	\$ 2,042,014
Contributions	10,028	-	-	10,028
Investment Income:				
Investment Income	71,918	20,834	-	92,752
Investment Management Fees	(16,258)	(5,662)	-	(21,920)
Net Appreciation (Realized and Unrealized)	<u>82,978</u>	<u>-</u>	<u>-</u>	<u>82,978</u>
Net Investment Income	138,638	15,172	-	153,810
Appropriation of Assets for Expenditure	<u>-</u>	<u>(12,173)</u>	<u>-</u>	<u>(12,173)</u>
Endowment Net Assets, End of Year	\$ <u>1,500,599</u>	\$ <u>5,589</u>	\$ <u>687,491</u>	\$ <u>2,193,679</u>

**10. Concentration:**

Approximately 11 percent of the total public support and revenue for the year ended September 30, 2014 was received from one donor.