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Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

▶ 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*.

OMB No 1545-0047

2014

Open to Public Inspection

A For the 2014 calendar year, or tax year beginning and ending

B Check if applicable:
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Final return/ terminated
- ☐ Amended return
- ☐ Application pending

C Name of organization
USA CARES, INC.

Doing business as

Number and street (or P.O. box if mail is not delivered to street address) 562B N. DIXIE BLVD. Room/suite 3

City or town, state or province, country, and ZIP or foreign postal code
RADCLIFF, KY 40160

F Name and address of principal officer PETER GIUSTI
SAME AS C ABOVE

D Employer identification number
05-0588761

E Telephone number
270-352-5451

G Gross receipts $ 2,438,474.

H(a) Is this a group return for subordinates? ☐ Yes ☒ No

H(b) Are all subordinates included? ☐ Yes ☐ No
If "No," attach a list (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status ☒ 501(c)(3) ☐ 501(c) ( ) ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ WWW.USACARES.ORG

K Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation: 2003 M State of legal domicile: KY

Part I Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities. USA CARES EXISTS TO HELP BEAR THE BURDENS OF SERVICE BY PROVIDING MILITARY FAMILIES WITH FINANCIAL	
	2	Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets	
	3	Number of voting members of the governing body (Part VI, line 1a)	14
	4	Number of independent voting members of the governing body (Part VI, line 1b)	14
	5	Total number of individuals employed in calendar year 2014 (Part V, line 2a)	30
	6	Total number of volunteers (estimate if necessary)	260
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	0.
	b	Net unrelated business taxable income from Form 990-T, line 34	0.

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		Prior Year	Current Year
Revenue	8 Contributions and grants (Part VIII, line 1h)	3,012,075.	2,106,073.
	9 Program service revenue (Part VIII, line 2g)	0.	0.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	2,098.	6,346.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-92,569.	178,651.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	2,921,604.	2,291,070.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	921,974.	836,430.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	1,019,924.	1,184,043.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 344,800.		
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	625,026.	620,703.
	18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	2,566,924.	2,641,176.
	19 Revenue less expenses Subtract line 18 from line 12	354,680.	-350,106.

		Beginning of Current Year	End of Year
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	1,326,376.	1,041,518.
	21 Total liabilities (Part X, line 26)	96,738.	164,019.
	22 Net assets or fund balances. Subtract line 21 from line 20	1,229,638.	877,499.

Part II Signature Block

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

Sign Here

▶ Signature of officer — Date 5/16/2015

▶ PETER GIUSTI, PRESIDENT
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
BARBARA A. LASKY	Barbara Lasky	5-12-15		P00015280

Firm's name ▶ ANDERSON, BRYANT, LASKY & WINSLOW, PSC — Firm's EIN ▶ 61-1227965

Firm's address ▶ 943 SOUTH FIRST STREET, LOUISVILLE, KY 40203 — Phone no. (502)584-9793

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

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

921

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission

USA CARES EXISTS TO HELP BEAR THE BURDENS OF SERVICE BY PROVIDING MILITARY FAMILIES WITH FINANCIAL AND ADVOCACY SUPPORT IN THEIR TIME OF NEED.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [ ] Yes [X] No

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

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [ ] Yes [X] No

If "Yes," describe these changes on Schedule O

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

4a (Code _____) (Expenses $ 836,430. including grants of $ 836,430.) (Revenue $ _____)

THE EMERGENCY ASSISTANCE PROGRAM AT USA CARES PAYS IMMEDIATE, ESSENTIAL BILLS, INCLUDING FOOD AND UTILITIES. OUR FOCUS IS ON CASES WHERE THE FINANCIAL HARDSHIPS ARE RELATED TO MILITARY SERVICE FOR POST 9-11 VETERANS, ACTIVE DUTY AND THEIR IMMEDIATE FAMILY.

4b (Code _____) (Expenses $ 561,969. including grants of $ _____) (Revenue $ _____)

THE HOUSING ASSISTANCE PROGRAM PROVIDES GRANT ASSISTANCE TO PREVENT FORECLOSURE AND EVICTION. THE PROGRAM OFFERS BUDGETARY COUNSELING TO RENTERS AND HOME OWNERS, ADDITIONALLY, FOR HOME OWNERS, COUNSELORS CAN HELP TO NEGOTIATE THE TERMS TO REINSTATE THE MORTGAGE OR PUT IT ON A PAYMENT PLAN. THESE SERVICES ARE FREE FOR POST 9-11 VETERANS, ACTIVE DUTY AND THEIR FAMILIES.

4c (Code _____) (Expenses $ 638,602. including grants of $ _____) (Revenue $ _____)

THE USA CARES COMBAT INJURED PROGRAM PROVIDES GRANT ASSISTANCE TO POST 9-11 VETERANS REFERRED TO IN-PATIENT TREATMENT FOR POST TRAUMATIC STRESS, TRAUMATIC BRAIN INJURY AND MILITARY SEXUAL TRAUMA. THE PROGRAM COVERS THE COST OF BASIC NEEDS SUCH AS HOUSING, FOOD AND UTILITIES. THE MISSION OF THE COMBAT INJURED PROGRAM IS TO PROVIDE ACCESS TO CARE THAT WILL ULTIMATELY PREVENT SUICIDE, HOMELESSNESS AND JOBLESSNESS. ASSISTANCE IS PAID DIRECTLY TO THE PROVIDER, SUCH AS A MORTGAGE OR UTILITY PROGRAM.

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

(Expenses $ 76,632. including grants of $ _____) (Revenue $ _____)

4e Total program service expenses ▶ 2,113,633.

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	1	X	
2	Is the organization required to complete *Schedule B, Schedule of Contributors*?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If "Yes," complete Schedule C, Part I*	3		X
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? *If "Yes," complete Schedule C, Part II*	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? *If "Yes," complete Schedule C, Part III*	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? *If "Yes," complete Schedule D, Part I*	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? *If "Yes," complete Schedule D, Part II*	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV*	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? *If "Yes," complete Schedule D, Part V*	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? *If "Yes," complete Schedule D, Part VI*	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VII*	11b	X	
c	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VIII*	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part IX*	11d		X
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? *If "Yes," complete Schedule D, Part X*	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI and XII*	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional*	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at $100,000 or more? *If "Yes," complete Schedule F, Parts I and IV*	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or other assistance to or for any foreign organization? *If "Yes," complete Schedule F, Parts II and IV*	15		X
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or other assistance to or for foreign individuals? *If "Yes," complete Schedule F, Parts III and IV*	16		X
17	Did the organization report a total of more than $15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If "Yes," complete Schedule G, Part I*	17		X
18	Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*	18	X	
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		X
20a	Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H*	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Part IV Checklist of Required Schedules *(continued)*

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

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

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

				Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a	15		
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		1c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	30		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to *e-file* (see instructions)				
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?		3a		X
b	If "Yes," has it filed a Form 990-T for this year? *If "No," to line 3b, provide an explanation in Schedule O*		3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		4a		X
b	If "Yes," enter the name of the foreign country ▶ _____				
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		5b		X
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		5c		
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		6b		
7	**Organizations that may receive deductible contributions under section 170(c).**				
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?		7a	X	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b	X	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		7h		
8	**Sponsoring organizations maintaining donor advised funds.** Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		8		
9	**Sponsoring organizations maintaining donor advised funds.**				
a	Did the sponsoring organization make any taxable distributions under section 4966?		9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9b		
10	**Section 501(c)(7) organizations.** Enter				
a	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	**Section 501(c)(12) organizations.** Enter				
a	Gross income from members or shareholders	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b			
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?		12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**				
a	Is the organization licensed to issue qualified health plans in more than one state?		13a		
	Note. See the instructions for additional information the organization must report on Schedule O				
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b			
c	Enter the amount of reserves on hand	13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?		14a		X
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O*		14b		

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

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

Section A. Governing Body and Management

				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	14		
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.				
b	Enter the number of voting members included in line 1a, above, who are independent	1b	14		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		X	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?	3			X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X	
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5			X
6	Did the organization have members or stockholders?	6			X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a			X
b	*Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or* persons other than the governing body?	7b			X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
a	The governing body?	8a		X	
b	Each committee with authority to act on behalf of the governing body?	8b		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*	9			X

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

			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	X	
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	X	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? *If "No," go to line 13*	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe in Schedule O how this was done*	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a	X	
b	*Other officers or key employees of the organization*	15b	X	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ▶KY,AK,AL,AR,AZ,CA,CO,CT,DC,FL,GA,KS

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

[X] Own website [ ] Another's website [X] Upon request [ ] Other *(explain in Schedule O)*

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

20 State the name, address, and telephone number of the person who possesses the organization's books and records ▶

THE ORGANIZATION - 270-352-5481

562B N. DIXIE BLVD., NO. 3, RADCLIFF, KY 40160

SEE SCHEDULE O FOR FULL LIST OF STATES

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

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

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

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

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below 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) JOHN TINDALL DIRECTOR	5.00	X						0.	0.	0.
(2) RON STEPTOE DIRECTOR	5.00	X						0.	0.	0.
(3) LEE D. GROZA, CPA TREASURER	5.00	X		X				0.	0.	0.
(4) DICK MCLANE DIRECTOR	5.00	X						0.	0.	0.
(5) MARK HAINER DIRECTOR	5.00	X						0.	0.	0.
(6) BILL ROBY, SR. BOARD CHAIRMAN	5.00	X		X				0.	0.	0.
(7) JANE MOSBACHER MORRIS DIRECTOR	5.00	X						0.	0.	0.
(8) TERRY SCARIOT VICE-CHAIRMAN	5.00	X		X				0.	0.	0.
(9) TIM MCCLAIN DIRECTOR	5.00	X						0.	0.	0.
(10) VELMA HART SECRETARY	5.00	X		X				0.	0.	0.
(11) LINDSAY BOYLAN DIRECTOR	5.00	X						0.	0.	0.
(12) DALJIT HUNDAL DIRECTOR	5.00	X						0.	0.	0.
(13) RICHARD V. HOPPLE DIRECTOR	5.00	X						0.	0.	0.
(14) ELIZABETH EVERETT DIRECTOR	5.00	X						0.	0.	0.
(15) PETER GIUSTI PRESIDENT	40.00			X				125,505.	0.	0.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below 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			
1b Sub-total ▶								125,505.	0.	0.
c Total from continuation sheets to Part VII, Section A ▶								0.	0.	0.
d Total (add lines 1b and 1c) ▶								125,505.	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 ▶ 1

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
NONE		

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

Part VIII Statement of Revenue

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

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c	116,000.				
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above	1f	1,990,073.				
	g Noncash contributions included in lines 1a-1f $ 74,398.						
	h **Total.** Add lines 1a-1f		▶	2,106,073.			
Program Service Revenue		**Business Code**					
	2a						
	b						
	c						
	d						
	e						
	f All other program service revenue						
	g **Total.** Add lines 2a-2f		▶				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		▶	6,346.			6,346.
	4 Income from investment of tax-exempt bond proceeds		▶				
	5 Royalties		▶				
		(i) Real	(ii) Personal				
	6a Gross rents						
	b Less: rental expenses						
	c Rental income or (loss)						
	d Net rental income or (loss)		▶				
		(i) Securities	(ii) Other				
	7a Gross amount from sales of assets other than inventory						
	b Less: cost or other basis and sales expenses						
	c Gain or (loss)						
	d Net gain or (loss)		▶				
	8a Gross income from fundraising events (not including $ 116,000. of contributions reported on line 1c). See Part IV, line 18	a	326,055.				
	b Less direct expenses	b	147,404.				
	c Net income or (loss) from fundraising events		▶	178,651.			178,651.
	9a Gross income from gaming activities. See Part IV, line 19	a					
	b Less. direct expenses	b					
	c Net income or (loss) from gaming activities		▶				
	10a Gross sales of inventory, less returns and allowances	a					
	b Less cost of goods sold	b					
	c Net income or (loss) from sales of inventory		▶				
	Miscellaneous Revenue	**Business Code**					
	11a						
	b						
	c						
	d All other revenue						
	e **Total.** Add lines 11a-11d		▶				
	12 **Total revenue.** See instructions.		▶	2,291,070.	0.	0.	184,997.

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 domestic organizations and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic individuals See Part IV, line 22	836,430.	836,430.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	116,882.	91,168.	25,714.	
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	906,904.	670,845.	71,533.	164,526.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits	87,135.	64,855.	8,277.	14,003.
10 Payroll taxes	73,122.	54,425.	6,946.	11,751.
11 Fees for services (non-employees):				
a Management				
b Legal	1,313.	1,313.		
c Accounting	12,300.		12,300.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	154,281.	63,332.	17,936.	73,013.
12 Advertising and promotion				
13 Office expenses	23,664.	16,104.	3,570.	3,990.
14 Information technology	23,080.	16,539.	1,663.	4,878.
15 Royalties				
16 Occupancy	89,338.	77,261.	8,771.	3,306.
17 Travel	123,559.	98,532.	6,360.	18,667.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	58,961.	52,360.	21.	6,580.
20 Interest	2,850.		2,850.	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	2,013.	1,443.	191.	379.
23 Insurance				
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 BUSINESS DEVELOPMENT	47,567.	29,102.	4,985.	13,480.
b TELECOMMUNICATIONS	30,143.	18,393.	7,876.	3,874.
c POSTAGE	21,838.	11,677.	2,105.	8,056.
d MISCELLANEOUS	21,400.	3,134.	917.	17,349.
e All other expenses	8,396.	6,720.	728.	948.
25 **Total functional expenses.** Add lines 1 through 24e	2,641,176.	2,113,633.	182,743.	344,800.
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 ▶ [X] if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

				(A) Beginning of year		(B) End of year
Assets	1	Cash - non-interest-bearing		469,488.	1	350,961.
	2	Savings and temporary cash investments			2	
	3	Pledges and grants receivable, net		445,074.	3	255,746.
	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 instr). Complete Part II of Sch L			6	
	7	Notes and loans receivable, net			7	
	8	Inventories for sale or use		15,629.	8	6,563.
	9	Prepaid expenses and deferred charges		20,758.	9	8,725.
	10a	Land, buildings, and equipment. cost or other basis Complete Part VI of Schedule D	10a 552,953.			
	b	Less accumulated depreciation	10b 248,388.	264,622.	10c	304,565.
	11	Investments - publicly traded securities			11	
	12	Investments - other securities See Part IV, line 11		110,805.	12	114,958.
	13	Investments - program-related. See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11			15	
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)		1,326,376.	16	1,041,518.
Liabilities	17	Accounts payable and accrued expenses		96,738.	17	164,019.
	18	Grants payable			18	
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D			21	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L			22	
	23	Secured mortgages and notes payable to unrelated third parties			23	
	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	**Total liabilities.** Add lines 17 through 25		96,738.	26	164,019.
Net Assets or Fund Balances		**Organizations that follow SFAS 117 (ASC 958), check here ▶ [X] and complete lines 27 through 29, and lines 33 and 34.**				
	27	Unrestricted net assets		506,487.	27	280,943.
	28	Temporarily restricted net assets		642,123.	28	515,528.
	29	Permanently restricted net assets		81,028.	29	81,028.
		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds			30	
	31	Paid-in or capital surplus, or land, building, or equipment fund			31	
	32	Retained earnings, endowment, accumulated income, or other funds			32	
	33	Total net assets or fund balances		1,229,638.	33	877,499.
	34	Total liabilities and net assets/fund balances		1,326,376.	34	1,041,518.

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	2,291,070.
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,641,176.
3	Revenue less expenses. Subtract line 2 from line 1	3	-350,106.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,229,638.
5	Net unrealized gains (losses) on investments	5	-2,033.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	877,499.

Part XII Financial Statements and Reporting

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

			Yes	No
1	Accounting method used to prepare the Form 990 ☐ Cash ☒ Accrual ☐ Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	2b	X	
	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: ☒ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization	Employer identification number
USA CARES, INC.	05-0588761

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

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

1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**

2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)

3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state·

5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II)

8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II)

9 ☐ An organization that normally receives. (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)

10 ☐ An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**

11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)** See **section 509(a)(3).** Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g

a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization **You must complete Part IV, Sections A and B.**

b ☐ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) **You must complete Part IV, Sections A and C.**

c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) **You must complete Part IV, Sections A, D, and E.**

d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) **You must complete Part IV, Sections A and D, and Part V.**

e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization

f Enter the number of supported organizations

g 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 listed in your governing document? Yes	(iv) No	(v) Amount of monetary support (see Instructions)	(vi) Amount of other support (see Instructions)
Total						

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) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants")	1,571,710.	3,230,449.	981,696.	2,824,346.	2,106,073.	10,714,274.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 **Total.** Add lines 1 through 3	1,571,710.	3,230,449.	981,696.	2,824,346.	2,106,073.	10,714,274.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						933,427.
6 **Public support.** Subtract line 5 from line 4						9,780,847.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7 Amounts from line 4	1,571,710.	3,230,449.	981,696.	2,824,346.	2,106,073.	10,714,274.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	4,574.	6,071.	4,278.	2,098.	6,346.	23,367.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 **Total support.** Add lines 7 through 10						10,737,641.

12 Gross receipts from related activities, etc (see instructions)	12	865,688.
13 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**		▶ ☐

Section C. Computation of Public Support Percentage

14 Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f))	14	91.09 %
15 Public support percentage from 2013 Schedule A, Part II, line 14	15	90.02 %

16a **33 1/3% support test - 2014.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☒

b **33 1/3% support test - 2013.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

17a **10% -facts-and-circumstances test - 2014.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ ☐

b **10% -facts-and-circumstances test - 2013.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ ☐

18 **Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶ ☐

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 **Total.** Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 **Public support** (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
13 **Total support** (Add lines 9, 10c, 11, and 12)						

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

Section C. Computation of Public Support Percentage

15 Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2013 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for **2014** (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from **2013** Schedule A, Part III, line 17	18	%

19a **33 1/3% support tests - 2014.** 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 - 2013.** 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 Supporting Organizations

(Complete only if you checked a box on line 11 of Part I If you checked 11a of Part I, complete Sections A and B If you checked 11b of Part I, complete Sections A and C If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V)

Section A. All Supporting Organizations

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? *If "No" describe in* **Part VI** *how the supported organizations are designated If designated by class or purpose, describe the designation. If historic and continuing relationship, explain*	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? *If "Yes," explain in* **Part VI** *how the organization determined that the supported organization was described in section 509(a)(1) or (2).*	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If "Yes," answer (b) and (c) below*	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? *If "Yes," describe in* **Part VI** *when and how the organization made the determination*	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? *If "Yes," explain in* **Part VI** *what controls the organization put in place to ensure such use.*	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? *If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below*	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? *If "Yes," describe in* **Part VI** *how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.*	4b		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If "Yes," explain in* **Part VI** *what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes*	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? *If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in* **Part VI,** *including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)*	5a		
b	**Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
c	**Substitutions only.** Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in* **Part VI.**	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? *If "Yes," complete Part I of Schedule L (Form 990)*	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? *If "Yes," complete Part I of Schedule L (Form 990)*	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? *If "Yes," provide detail in* **Part VI.**	9a		
b	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? *If "Yes," provide detail in* **Part VI.**	9b		
c	Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If "Yes," provide detail in* **Part VI.**	9c		
10a	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If "Yes," answer (b) below.*	10a		
b	Did the organization have any excess business holdings in the tax year? *(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)*	10b		

Part IV Supporting Organizations *(continued)*

			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
a	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
c	A 35% controlled entity of a person described in (a) or (b) above? *If "Yes" to a, b, or c, provide detail in* ***Part VI.***	11c		

Section B. Type I Supporting Organizations

			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? *If "No," describe in* ***Part VI*** *how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year*	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? *If "Yes," explain in* ***Part VI*** *how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.*	2		

Section C. Type II Supporting Organizations

			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? *If "No," describe in* ***Part VI*** *how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s)*	1		

Section D. Type III Supporting Organizations

			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? *If "No," explain in* ***Part VI*** *how the organization maintained a close and continuous working relationship with the supported organization(s)*	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? *If "Yes," describe in* ***Part VI*** *the role the organization's supported organizations played in this regard.*	3		

Section E. Type III Functionally-Integrated Supporting Organizations

1 *Check the box next to the method that the organization used to satisfy the Integral Part Test during the year* ***(see instructions):***

a ☐ The organization satisfied the Activities Test *Complete* ***line 2*** *below.*

b ☐ The organization is the parent of each of its supported organizations. *Complete* ***line 3*** *below.*

c ☐ The organization supported a governmental entity *Describe in Part VI how you supported a government entity (see instructions).*

			Yes	No
2	Activities Test ***Answer (a) and (b) below.***			
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? *If "Yes," then in* ***Part VI identify those supported organizations and explain*** *how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.*	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? *If "Yes," explain in* ***Part VI*** *the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.*	2b		
3	Parent of Supported Organizations ***Answer (a) and (b) below.***			
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in ***Part VI.***	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in ***Part VI*** *the role played by the organization in this regard*	3b		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 **Adjusted Net Income** (subtract lines 5, 6 and 7 from line 4)	8		

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d **Total** (add lines 1a, 1b, and 1c)	1d		
e **Discount** claimed for blockage or other factors (explain in detail in **Part VI**).			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035	6		
7 Recoveries of prior-year distributions	7		
8 **Minimum Asset Amount** (add line 7 to line 6)	8		

Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3	4		
5 Income tax imposed in prior year	5		
6 **Distributable Amount.** Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		

7 ☐ Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)

Part V **Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations** *(continued)*

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in **Part VI**). See instructions.	
7 **Total annual distributions.** Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in **Part VI**) See instructions	
9 Distributable amount for 2014 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1 Distributable amount for 2014 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2014 (reasonable cause required-see instructions)			
3 Excess distributions carryover, if any, to 2014			
a			
b			
c			
d			
e From 2013			
f **Total** of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2014 distributable amount			
i Carryover from 2009 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2014 from Section D, line 7: $			
a Applied to underdistributions of prior years			
b Applied to 2014 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2014, if any. Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2014. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions).			
7 **Excess distributions carryover to 2015.** Add lines 3j and 4c			
8 Breakdown of line 7			
a			
b			
c			
d Excess from 2013			
e Excess from 2014			

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

SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
▶ Attach to Form 990.
▶ Information about Schedule D (Form 990) and its instructions is at *www.irs.gov/form990.*

OMB No 1545-0047
2014
Open to Public Inspection

Name of the organization
USA CARES, INC.

Employer identification number
05-0588761

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply)
- ☐ Preservation of land for public use (e g , recreation or education)
- ☐ Preservation of a historically important land area
- ☐ Protection of natural habitat
- ☐ Preservation of a certified historic structure
- ☐ Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

		Held at the End of the Tax Year
a	Total number of conservation easements	2a
b	Total acreage restricted by conservation easements	2b
c	Number of conservation easements on a certified historic structure included in (a)	2c
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

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? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ $ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

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

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

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenue included in Form 990, Part VIII, line 1 ▶ $ _____

(ii) Assets included in Form 990, Part X ▶ $ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a Revenue included in Form 990, Part VIII, line 1 ▶ $ _____

b Assets included in Form 990, Part X ▶ $ _____

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

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

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

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

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

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

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

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

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

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ☐ Yes ☐ No

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

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	110,805.	94,800.	89,053.	92,535.	81,028.
b Contributions					
c Net investment earnings, gains, and losses	4,153.	16,005.	5,747.	-3,482.	11,507.
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance	114,958.	110,805.	94,800.	89,053.	92,535.

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

a Board designated or quasi-endowment ▶ _____ %
b Permanent endowment ▶ 70.48 %
c Temporarily restricted endowment ▶ 29.52 %

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

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

	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
1a Land		247,500.		247,500.
b Buildings				
c Leasehold improvements				
d Equipment		193,115.	185,016.	8,099.
e Other		112,338.	63,372.	48,966.
Total. Add lines 1a through 1e *(Column (d) must equal Form 990, Part X, column (B), line 10c.)* ▶				304,565.

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) INVESTMENTS	114,958.	END-OF-YEAR MARKET VALUE
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total (Col (b) must equal Form 990, Part X, col. (B) line 12.) ▶	114,958.	

Part VIII Investments - Program Related.

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

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

Part IX Other Assets.

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

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

Part X Other Liabilities.

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

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

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

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

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

1	Total revenue, gains, and other support per audited financial statements			1	2,289,037.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a	Net unrealized gains (losses) on investments	2a	-2,033.		
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d			
e	Add lines 2a through 2d			2e	-2,033.
3	Subtract line 2e from line 1			3	2,291,070.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
c	Add lines 4a and 4b			4c	0.
5	Total revenue. Add lines 3 and 4c. *(This must equal Form 990, Part I, line 12.)*			5	2,291,070.

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

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

1	Total expenses and losses per audited financial statements			1	2,641,176.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25.				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII.)	2d			
e	Add lines 2a through 2d			2e	0.
3	Subtract line 2e from line 1			3	2,641,176.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
c	Add lines 4a and 4b			4c	0.
5	Total expenses. Add lines 3 and 4c. *(This must equal Form 990, Part I, line 18.)*			5	2,641,176.

Part XIII Supplemental Information.

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

PART X, LINE 2:

USA CARES, INC. IS EXEMPT FROM FEDERAL INCOME TAX UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE. USA CARES, INC. QUALIFIED FOR THE CHARITABLE CONTRIBUTION DEDUCTION UNDER SECTION 170(B)(1)(A) AND HAS BEEN CLASSIFIED AS AN ORGANIZATION THAT IS NOT A PRIVATE FOUNDATION UNDER SECTION 509(A)(2).

MANAGEMENT HAS CONCLUDED THAT ANY TAX POSITIONS THAT WOULD NOT MEET THE MORE-LIKELY-THAN-NOT CRITERION OF FASB ASC 740-10 WOULD BE IMMATERIAL TO THE FINANCIAL STATEMENTS TAKEN AS A WHOLE. ACCORDINGLY, THE ACCOMPANYING FINANCIAL STATEMENTS DO NOT INCLUDE ANY PROVISION FOR UNCERTAIN TAX POSITIONS, AND NO RELATED INTEREST OR PENALTIES HAVE BEEN RECORDED IN THE

Part XIII Supplemental Information *(continued)*

OPERATING STATEMENT OR ACCRUED IN THE BALANCE SHEET. FEDERAL AND STATE TAX RETURNS OF THE ENTITY ARE GENERALLY OPEN TO EXAMINATION BY THE RELEVANT TAXING AUTHORITIES FOR A PERIOD OF THREE YEARS FROM THE DATE THE RETURNS ARE FILED.

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.**

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

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization

USA CARES, INC.

Employer identification number

05-0588761

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? Yes	(iii) No	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
Total ▶						

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

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

		(a) Event #1 GALA (event type)	(b) Event #2 RUNS (event type)	(c) Other events 9 (total number)	(d) Total events (add col (a) through col (c))
Revenue	1 Gross receipts	229,660.	55,727.	156,668.	442,055.
	2 Less Contributions	105,000.		11,000.	116,000.
	3 Gross income (line 1 minus line 2)	124,660.	55,727.	145,668.	326,055.
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages	36,551.	468.		37,019.
	8 Entertainment	1,000.			1,000.
	9 Other direct expenses	39,752.	20,457.	49,176.	109,385.
	10 Direct expense summary. Add lines 4 through 9 in column (d)			▶	147,404.
	11 Net income summary. Subtract line 10 from line 3, column (d)			▶	178,651.

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

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Revenue	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 conducts gaming activities: _____

a Is the organization licensed to conduct gaming activities in each of these states? ☐ Yes ☐ No

b If "No," explain _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☐ No

b If "Yes," explain _____

11 Does the organization conduct 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 conducted in:

a The organization's facility	13a	%
b An outside facility	13b	%

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

Name ▶ _____

Address ▶ _____

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? ☐ Yes ☐ No

b If "Yes," enter the amount of gaming revenue received by the organization ▶ $ _____ and the amount of gaming revenue retained by the third party ▶ $ _____

c If "Yes," enter name and address of the third party:

Name ▶ _____

Address ▶ _____

16 Gaming manager information

Name ▶ _____

Gaming manager compensation ▶ $ _____

Description of services provided ▶ _____

☐ Director/officer ☐ Employee ☐ Independent contractor

17 Mandatory distributions:

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☐ Yes ☐ No

b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ $ _____

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

Part IV **Supplemental Information** *(continued)*

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

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

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

▶ **Attach to Form 990.**

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

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization

USA CARES, INC.

Employer identification number

05-0588761

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? .. [X] 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 Domestic Organizations and Domestic Governments.** 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

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 ▶

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

Schedule I (Form 990) (2014)

432101
10-15-14

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
PAYMENTS FOR AUTOMOBILE RELATED EXPENSES	0	247,593.	0.		
FOR THE PURCHASE OF FOOD AND FUEL	0	51,833.	0.		
MORTGAGE PAYMENTS AND OTHER HOUSING ASSISTANCE	0	322,413.	0.		
FOR THE PAYMENT OF UTILITIES AND OTHER PERSONAL EXPENSES	0	214,591.	0.		

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

PART I, LINE 2:

USA CARES WORKS CLOSELY WITH EACH INDIVIDUAL REQUESTING ASSISTANCE. ONCE APPLICANTS ARE APPROVED THROUGH THE APPLICATION PROCESS, GRANT FUNDS ARE PAID DIRECTLY TO THE SERVICE PROVIDER (I.E. THE UTILITY COMPANY, AUTO REPAIR FACILITY, MORTGAGE COMPANY, ETC.). ALL INFORMATION CONCERNING EACH CASE IS KEPT IN THE ORGANIZATION'S DATABASE FOR ONE YEAR BEFORE BEING FILED AWAY AND KEPT FOR FIVE YEARS.

SCHEDULE M (Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

▶ 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.*

OMB No 1545-0047

2014

Open To Public Inspection

Name of the organization: USA CARES, INC.

Employer identification number: 05-0588761

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				
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 ▶ (BUILDING PLAN)	X	1	34,416.	FMV
26	Other ▶ (ADVERTISING)	X	1	29,691.	FMV
27	Other ▶ (COMPUTER)	X	1	8,330.	FMV
28	Other ▶ (OFFICE SPACE)	X	1	1,050.	FMV

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 through 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		

Part II **Supplemental Information.** Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

PART I, OTHER TYPES OF PROPERTY:

SOFTWARE

(A) CHECK IF APPLICABLE = X

(B) NUMBER OF CONTRIBUTIONS = 1

(C) REVENUE REPORTED ON FORM 990, PART VIII $ 803.

(D) METHOD OF DETERMINING REVENUE: FMV

FOOD

(A) CHECK IF APPLICABLE = X

(B) NUMBER OF CONTRIBUTIONS = 1

(C) REVENUE REPORTED ON FORM 990, PART VIII $ 108.

(D) METHOD OF DETERMINING REVENUE:

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization

USA CARES, INC.

Employer identification number

05-0588761

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

AND ADVOCACY SUPPORT IN THEIR TIME OF NEED.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

THE JOBS ASSISTANCE PROGRAM REMOVES BARRIERS TO SECURING FULL-TIME PERMANENT EMPLOYMENT. THE PROGRAM PROVIDES AID BY PROVIDING FUNDS FOR MOVES, UNIFORMS, TOOLS, BOOTS. ASSISTANCE WITH TRAVEL TO INTERVIEWS MAY BE CONSIDERED. THESE SERVICES ARE FREE FOR POST 9-11 VETERANS, ACTIVE DUTY AND SPOUSES/CAREGIVERS.

EXPENSES $ 76,632. INCLUDING GRANTS OF $ 0. REVENUE $ 0.

FORM 990, PART VI, SECTION A, LINE 2:

RON STEPTOE (BOARD MEMBER) HAS A BUSINESS RELATIONSHIP WITH BEDROCK PRIME

JOHN TINDALL (CHAIR EMERITUS) IS THE LANDLORD FOR USA CARES, STOCKHOLDER IN BEDROCK PRIME

FORM 990, PART VI, SECTION A, LINE 4:

USA CARES, INC. REVISED THEIR BYLAWS IN FEBRUARY 2014. REVISED BYLAWS ATTACHED.

FORM 990, PART VI, SECTION B, LINE 11:

A COPY OF THE FORM 990 WILL BE PROVIDED TO MANAGEMENT AND BOARD TREASURER. THE FINANCE COMMITTEE WILL PRESENT A REPORT ON THE FORM 990 TO THE FULL BOARD OF DIRECTORS AT THE NEXT MEETING. THE FULL BOARD MAY ALSO RECEIVE A COPY OF FORM 990 VIA E-MAIL.

Name of the organization: USA CARES, INC.

Employer identification number: 05-0588761

FORM 990, PART VI, SECTION B, LINE 12C:

ALL BOARD MEMBERS ARE PRESENTED WITH THE CONFLICT OF INTEREST POLICY ANNUALLY AT A BOARD OF DIRECTORS MEETING. EACH MEMBER REVIEWS AND SIGNS THE CONFLICT OF INTEREST POLICY. THE BOARD SECRETARY RETAINS THE ORIGINAL SIGNED DOCUMENTS.

FORM 990, PART VI, SECTION B, LINE 15:

THE EXECUTIVE DIRECTOR'S SALARY IS DETERMINED BY RECOMMENDATIONS BY THE HR & EXECUTIVE COMMITTEE TO THE FULL BOARD.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:

KY,AK,AL,AR,AZ,CA,CO,CT,DC,FL,GA,KS,LA,MA,MN,MO,MS,ND,NH,NJ,OH,OK,OR,PA,RI SC,TN,TX,UT,WA,WI,HI,IL,MD,MI,ME,NM,NY,NC,VI,WV

FORM 990, PART VI, SECTION C, LINE 19:

THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST.

FORM 990, PART XI, LINE 2C

USA CARES' PROCESS OF OVERSEEING THE AUDIT OF THE FINANCIAL STATEMENTS AND THE SELECTION OF AN INDEPENDENT ACCOUNTANT HAS NOT CHANGED FROM THE PRIOR YEAR.

BY-LAWS OF
USA CARES, INC.
(Hereinafter "USA Cares" is used interchangeably with "USA Cares Inc" unless otherwise specified)

ARTICLE I
OFFICES

The principal office of the corporation shall be located at 562B North Dixie Blvd, Suite 3, Radcliff, Kentucky 40160 or at future locations as determined by the Board of Directors. The corporation may have such other offices, either within or without the Commonwealth of Kentucky, as the business of the corporation may require from time to time.

ARTICLE II
MEMBERSHIP

A. **Eligibility**. Any reputable business, firm, individual, association, corporation, partnership, or limited liability company who subscribes to the purposes, objectives, and policies of USA Cares may become a member of USA Cares, subject only to compliance with these By-Laws. All members agree to abide by all the rules, regulations and by-laws of USA Cares or as hereafter may be determined by amendment or resolution of the Board of Directors. Membership shall be open to any person who endorses the overall mission of USA Cares, regardless of gender, race, creed, citizenship, sexual orientation, or sensory/physical challenge.

B. **Dues.** Membership dues shall be at such a rate or rates, schedules or formulas as may be from time prescribed by USA Cares, payable annually or in advance. An individual's membership dues may be paid for them by a third party.

C. **Termination.**

1. Any member may resign from USA Cares upon written request for the Board of Directors.

2. Any member shall be terminated for non-payment of dues after ninety (90) days from the due date unless otherwise extended by the Board of Directors.

3. Any member may be terminated by a two-thirds (2/3) vote of the Board of Directors present at a regularly-scheduled or other properly called meeting for conduct unbecoming a member, or conduct prejudicial to the aims or repute of USA Cares.

D. **Membership Privileges**. Benefits of membership shall include a quarterly newsletters and periodic updates on the activities of USA Cares, as well as other benefits of membership that shall be designated by the Board of Directors from time to time. Any officers of the Board of Directors and local chapters must be dues-paying members.

E. **Term**. Each membership in USA Cares, Inc., shall be for a period of twelve months.

F. **Voting Memberships**: Members shall have the opportunity to vote and serve as officers of the Chapter and if selected by the officers of all the Chapters across the country, they can represent all Chapters and serve as a member of the National Board of Directors.

ARTICLE III
BOARD OF DIRECTORS

A. **Board of Directors**: The Board of Directors of USA Cares (hereinafter "Board of Directors of USA Cares", "Board of Directors" and "Board" are used interchangeably unless otherwise specified) shall consist of not less than 7 and not more than 21 individuals elected by a majority vote of at least a quorum of the existing Board meeting in session or by telephonic or other commonly used electronic means. No full or part time employee is eligible for election to the Board of Directors. The terms of the Directors shall be three years renewable by re-election(s). Any member of the Board may be removed by a vote of two thirds of at least a quorum of the then existing Board meeting in session or by telephonic or other commonly used electronic means. A quorum is defined as a majority of the then existing Board of Directors members. Removal may be based on any reason (or no reason) in conformance with law, but shall be considered in the event that a Board member consistently cannot, or does not, carry out the duties set forth below. Should a vacancy occur on the Board before completion of a term, such vacancy may be filled by the affirmative vote of a majority of a quorum of the remaining Board of Directors meeting in session or by telephonic or other commonly used electronic means.

B. **Primary Duties and Responsibilities of the Board of Directors:**

1. General: Provide governance to USA Cares, represent it to the community and accept ultimate legal authority and responsibility for it.

2. Planning and Operations:

- Articulate and approve USA Cares' long term plans and aspirations; review and guide staff's performance in achieving them.

- Annually reassess USA Cares' operating environment and approve adjustments to its strategy and operations in relation thereto.
- Annually review and approve USA Cares budget and operational plans; review semi-annually conformance with these plans and oversee necessary adjustments. Between semi-annual reviews, the Board's Executive Committee (see below) shall undertake these reviews on an on-going basis.
- Approve major actions of USA Cares, such as budget variations in excess of $20,000 and major program and service changes. With respect to staff fund raising activities, approve expenditures in excess of $20,000.00 per event.
- Through its joint and individual member efforts, support the fund raising goals of USA Cares.

3. Organization:

- Approve major financial, operational and planning policies.
- Appoint, evaluate, reward and, when necessary, change top administrative management.
- Assure that administrative management succession is provided for.
- Assure that personnel capacity (both paid staff and volunteer) is equal to the needs of the Board's plans and directives.
- Manage and secure the membership and operations of the Board of Directors.
- Appoint Board standing committees as set forth in these By-Laws and Board ad-hoc committees as requested by the Chairman of the Board (see below).

4. Control and Audit

- Assure that the Board of Directors and its committees are accurately and currently informed by staff of the conditions, finances and operations of USA Cares.
- Undertake reasonable reviews to assure that the published reports of USA Cares properly reflect the conditions, finances and operations of the organization.
- Approve staff compensation and benefits on an annual budgetary basis. Review individual compensation and benefits through the Chairman of the Human Resources Committee (see below).
- Assure that the staff management (and the Chairman of the Board) has appropriate means of defining, identifying and correcting conflicts of interests and other ethical or behavioral breaches throughout USA Cares and is diligently enforcing these policies.

- Appoint and support independent auditors.
- With the assistance of the President, review and enforce compliance with applicable laws and regulations affecting USA Cares.
- Undertake reasonable reviews to assure that the Board of Directors abides by the conflict of interest policy previously adopted by the Board. To ultimately enforce, interpret, and decide issues concerning conflicts of interest.

5. Communications:

- Board members shall respect the time constraints of the staff and abide by communication channels established by the Chairman of the Board for collecting information.
- Board members, as well as staff, shall abide by the guidelines established by the Chairman of the Board in communicating with the media and other outside organizations.

ARTICLE IV
OFFICERS OF THE BOARD OF DIRECTORS

The Officers of the Board shall be the following: Chairman, Vice-Chairman, Secretary, and Treasurer. Each Officer shall be elected by a quorum of the existing Board meeting in session or by telephonic or other electronic means. The term of office of the officers of the board shall be two years renewable by reelection(s) by at least a quorum of the existing Board meeting in session or by telephonic or other commonly used electronic means. Any Officer may be removed by a majority vote of at least a quorum of the existing Board meeting in session or by telephonic or other commonly used electronic means. Removal may be based on any reason (or no reason) in conformance with law, but shall be considered in the event that an Officer consistently cannot or does not carry out the duties set forth below.

A. Duties of the Board of Directors:

1. Chairman of the Board: The duties of the Chairman of the Board shall be as follows:

- Oversee Board and Executive Committee meetings.
- Provide general oversight, with the assistance of the other Board Officers, of the administration of USA Cares with particular reference to the "Primary Duties and Responsibilities of the Board of Directors" set forth below.
- Appoint the Chairman of all Board committees and monitor and assist the ongoing activities of such committees.

- Work with the President of USA Cares, the Executive Committee of the Board, and the Chairman of each of the Board's committees to make sure the Board's resolutions, directives, and planning are carried out.
- Call and schedule all meetings of the Board.
- Prepare or delegate to the appropriate person the preparation of Board meeting agendas.
- Oversee the annual reviews of the primary administrative officers of USA Cares.
- Designate and set forth guidelines for permanent and ad hoc spokespersons for USA Cares.
- Serve on the Board's Executive Committee.

2. Vice-Chairman of the Board: The duties of the Vice-Chairman of the Board shall be as follows:

- Substitute for the Chairman at the Board of Directors meetings and other official functions when necessary.
- Otherwise perform the duties of the Chairman of the Board in the event of his/her inability or refusal to perform such duties until the Chairman is able to return to performance or the Board of Directors acts to replace him/her.
- Serve on the Board's Executive Committee.
- Carry out special assignments as requested by the Chairman of the Board.
- Assist the Chairman in ensuring that all Board resolutions, policies and directives are carried out.
- Act as the Board's resource on fundraising initiatives. Work with the Treasurer and Finance Committee in assessing the viability and profitability of staff and Board fund raising activities.

3. Secretary: The duties of the Secretary of the Board shall be as follows:

- Maintain all Board and Executive Committee minutes and ensure their accuracy and safekeeping. Review, correct and/or supplement Board of Directors and Executive Committee meetings minutes prior to submission to the Board or the Executive Committee. See that all notices are duly given in accordance with the provisions of these by-laws or as required by law.
- Work with the President and staff of USA Cares to ensure that all the necessary files and records of the organization are properly maintained.
- Serve on the Board's Executive Committee.
- Substitute for the Chairman and Vice-Chairman at Board of Directors meetings and other official functions when necessary.

- Work with the President of USA Cares to ensure that the necessary "review ahead" materials are provided to members of the Board in a timely manner prior to board meeting.

4. Treasurer: The duties of the Treasurer of the Board shall be as follows:

   - Serve as Chairman of the Board's Finance Committee (see below)
   - Act as the Board's resource with respect to financial accounting as it is applied to non-profit organizations, and specifically, to USA Cares.
   - Work with the Vice-Chairman and the Finance Committee to assess the fund raising activities of the organization.
   - Work with the President and staff to ensure that appropriate financial records are maintained and appropriate financial reports are prepared and circulated on a timely basis.
   - Assist the President and staff in preparing the annual budget and presenting it to the Board of Directors for approval.
   - Along with the Finance Committee and President provide the Board and/or Executive Committee with quarterly assessments of the organization's conformity with the annual budget.
   - Working with the President and staff, review the annual audit, answer Board of Director questions concerning the audit and provide recommendations concerning actions to be taken in response to the audit.
   - Serve on the Board Executive Committee.

ARTICLE V
MEETINGS OF THE BOARD OF DIRECTORS

A. **Meetings**: The Board of Directors shall meet at least three times per year in person or by teleconference and may meet more frequently in person or by teleconference or other commonly used electronic means at the direction of the Chairman of the Board or on a "special" basis as set forth below. A quorum of the existing Board shall be necessary to proceed with a meeting or to effect binding votes. The semi-annual meetings of the Board of Directors shall be held upon at least one week's notice by written, telephonic or other commonly used electronic means by the Chairman of the Board, or in his/her absence or disability, by the Vice-Chairman of the Board, at a time and place designated by him/her.

B. **Special Meetings**: Special meetings of the Board of Directors may be called by or at the request of the Chairman of the Board or by a majority of the Directors. The person or persons so authorized to call a special meeting of the Board of Directors may fix any time and place for holding such meetings either within or without the Commonwealth of Kentucky. Such meetings may be in session or by telephonic or other commonly used electronic means.

Notice of any special meetings of the Board of Directors shall be given at least one week prior thereto by written notice delivered personally, mailed, telegrammed or e-mailed to each Director at his/her home, business or e-mail address registered with the Secretary of the Board of Directors (see below). If mailed, such notice shall be deemed to be delivered when deposited in the United States mail in a sealed envelope so addressed, with first class postage thereon prepaid. If telegrammed, such notice shall be deemed to be delivered when the telegram is delivered to the telegraph company. If e-mailed, such notice is deemed to be received upon normal transmission to the registered e-mail address and confirmation of a "delivery receipt". Notice of any special meeting shall set forth the time, date, place and/or means of such meeting and shall further set forth in, summary fashion, the subject(s) to be covered. Any Director may waive notice of any meeting. The attendance of a Director at any meeting shall constitute a waiver of notice of such meeting, except where a Director attends for the express purpose of objecting to the transaction of any business because the meeting was not lawfully called or convened.

ARTICLE VI
COMPENSATION

No Director shall receive compensation for his/her services as Director; however, any expenses incurred by any Director by reason of his/her duties or responsibilities as such may be paid by USA Cares if requested, authorized, and appropriately documented.

ARTICLE VII
COMMITTEES OF THE BOARD OF DIRECTORS

The Board of Directors shall have authority to establish such committees as it may consider necessary or convenient for the conduct of its business. As set forth below, these By-Laws establish an Executive Committee in accordance with and subject to the restrictions set out in the statutes of the Commonwealth of Kentucky. Subject to amendments of these by-laws, other standing committees of the Board of Directors, and their functions, are set forth below.

A. **Executive Committee of the Board**: The officers of the Board shall constitute its Executive Committee. The President of USA Cares shall be an ex-officio, non-voting member. Ex-officio members and other staff shall attend meetings of the Executive Committee at the invitation of the Chairman. When the Board of Directors is not in session all Board authority and responsibility shall be vested in the Executive Committee except where specifically reserved by the Board. The Executive Committee shall formulate long range strategic plans for USA Cares in consultation with the Board of Directors.

B. **Standing Committees of the Board of Directors**: There shall be three standing committees of the Board of Directors: The Executive Committee, the Finance Committee, and the Human Resources Committee.

All other Committee activity will be on an ad hoc basis at the discretion of the Chairman of the Board or a majority of the Board.

C. Duties of the Committees:

1. Executive Committee: (See Above)
2. Finance Committee:
   - Support and assist the Treasurer in carrying out his/her designated duties (see description of Treasurer's duties set forth above).
   - Assist the Vice Chairman in assessing fund raising initiatives.
3. Human Resources Committee:
   - Act as advisor to the Board of Directors on recruitment and evaluation of key personnel in filling vacancies. This includes identifying and assessing candidates to be new or re-elected members of the Board of Directors, candidates for key executive positions on USA Cares' staff, and candidates to be future or re-appointed Board of Directors Officers.
   - Act as the interface between the Board and staff with respect to personnel issues inclusive of compensation, benefits, legal compliance, recruiting and retention, morale, volunteers and like-related issues. Make reports and recommendations to the Board in these categories.

ARTICLE VIII
ADMINISTRATIVE MANAGEMENT

A. Role of the Administrative Staff of USA Cares:

1. General: Implement the planning goals of the Board of Directors. Develop, oversee, and maintain the human, material and financial resources necessary to do so under the guidance provided by the Board of Directors.

2. The President and Key Staff: The Board of Directors shall hire a President as its primary administrative executive and such other key executives of the organization as it deems fit. The President and other key executives will serve at the pleasure of the Board and may be removed for any or no reason, subject to the laws of the Commonwealth of Kentucky and other applicable laws and existing contractual agreements.

3. Delegation: The President shall delegate authority and responsibility to other members of USA Cares staff, in a manner consistent with the guidelines established by the Board of Directors, in order to most efficiently achieve the goals of the organization.

4. Organizational Structure: The President shall identify staff tasks and workload distribution and, along with other staff officers, insure an adequate and efficient work flow within the bounds of the resources available to USA Cares. The President shall make periodic

recommendations to the Board on staff levels, structure and compensation, as well as the means necessary to develop and maintain a volunteer component to the operating staff.

5. Policy Development:
   - Provide the Board and its committees with necessary data, analysis and, when requested, written reports to support its planning and assessment tasks.
   - Develop financial and human resource procedures to implement the plans and policies promulgated by the Board of Directors.
   - Provide the Board of Directors and its committees with frank and objective appraisals of resource availability (through the budgetary process and otherwise) and their adequacy to meet the plans and goals of the Board.
6. Fund Development:
   - Manage on-going fund development activities which are not managed by the Board of Directors, it members, committees or outside persons or entities.
   - Work with the Board of Directors' Vice Chairman, Treasurer and Financial Committee in developing data and analyses to evaluate the efficiency and viability of fundraising activity.
   - Recommend fundraising projects to the Board of Directors for its approval. Approval of the Board shall be mandatory when, in the estimation of the President, such projects require the expenditure of over $20,000.00 in cash, its equivalent in staff time and other USA Cares resources, or a combination of all.
   - Ensure that fundraising rules and controls established by the Board of Directors are implemented.
7. Public Relations:
   - Within the guidelines established by the Board of Directors, develop and implement plans for public information and education concerning USA Cares and interact with the media on a day-to-day basis.
   - Initiate and implement linkages with other organizations to further the operations and planning goals of USA Cares.
   - Provide information and assessments to the Board of Directors regarding upcoming legislation, regulations, and/or the activities of major outside organizations which affect USA Cares or its operations.
8. Planning:
   - Support the Board of Directors' annual and long range planning through proposals, recommendations and provision of financial and operational information.

- Provide intermediate and short range planning for USA Cares operations and budgeting.
- Provide feedback to the Board of Directors on achievement of annual and long range plans.

9. Operations:
   - General: As the Executive arm of USA Cares, carry out all operations necessary to achieve the plans and goals identified by the Board. Ensure that all directives and prohibitions of the Board are carried out.
10. Staff and Personnel:
   - Staff Work Flow (see "Organizational Structure" above)
   - Recruitment: Oversee recruitment and selection of staff members (both paid and volunteer)
   - Pay and Benefits: Develop appropriate budgetary proposals for the Board of Directors incorporating the projected annual cost of staff compensation and benefits. With the exception of the compensation and benefits of the President, the President shall be responsible for individual changes in compensation and benefits for staff members within the parameters set forth in the annual budget. Such responsibility will be carried out in consultation with the Chairman of the Board's Human Relations Committee. The compensation and benefits of the President will be set annually directly by the Board of Directors through its Executive Committee.
   - Training and Supervision: Develop and administer orientation and training programs for staff and volunteers. Provide ongoing supervision to ensure staff performs according to the training programs and standards of USA Cares. Enforce all rules pertaining to conflicts of interest, courtesy to fellow employees, conformity with laws and regulations, etc. Provide support and mentoring to staff and volunteers to maintain morale and loyalty to the organization. Provide fair and objective evaluations of staff on a reasonably periodic basis. Where appropriate, educate and inform staff of the Board of Directors' planning and directives and take necessary measures to ensure that such planning and directives are carried out.

11. Physical Plant: Maintain necessary physical plant to support USA Cares operations, inclusive of equipment necessary to support such operations.

12. Records: Maintain all operational and financial records of USA Cares in compliance with Board directives, applicable laws, regulations and good practice.

13. Financial:

- Develop an annual budget to achieve the plans and objectives identified by the Board of Directors within the resources anticipated to be available.
- Prepare quarterly financial statements in an understandable form for the Board of Directors.
- Provide informal financial reporting to the Treasurer of the Board as requested or as necessary.
- Recommend to the Board of Directors adjustments in the operations and other activities of USA Cares to conform to the financial resources available.
- Carry out Board directives in response to financial reporting.
- Research and negotiate contracts prior to submission to the Board of Directors or its Executive Committee for approval. Where major contracts (excess of $20,000) are involved, keep the executive committee apprised of the research and negotiation process.
- Provide recommendations to the Board on fundraising activities. Carry out authorized fundraising activities, within the parameters set forth in these By-Laws, that are not directly managed by the Board of Directors, its members, or outside persons or organizations.
- Provide recommendations to the Board of Directors on capital improvements and manage the efficient utilization of funds authorized.
- Carry out sound financial procedures and controls for the running of USA Cares and conduct on-going objective reviews of such procedures and controls.
- Develop an appropriate risk management policy.

ARTICLE IX
MISCELLANEOUS
CONTRACTS, LOANS, CHECKS, DEPOSITS, ETC.

A. **Contracts**: The Board of Directors may authorize any of its members or designated staff members or any agent or agents, to enter into any contract or execute and deliver any instruments in the name of and on behalf of USA Cares and such authority may be general or confined to specific instances.

B. **Loans**: No loans shall be contracted on behalf of USA Cares and no evidences of indebtedness shall be issued in its name unless authorized by resolution of the Board of Directors. Such authority may be general or confined to specific instances.

C. **Checks, drafts, orders, etc.**: All checks, drafts or other orders for payment of money, notes or other evidences of indebtedness issued in the name of USA Cares shall be signed by such members of the Board, staff member(s) or agent(s) designated by the Board

and in such manner as shall from time to time be determined by resolution of the Board of Directors.

D. **Deposits**: All funds of USA Cares not otherwise employed shall be deposited from time to time to the credit of USA Cares in such banks, trust companies, or other depositories as the Board (or the President if so authorized by the Board) may select.

E. **Gifts**: Any Board member or designated staff member or agent may accept on behalf of USA Cares any contribution, gift, bequest, or device for the general purpose of, or for any special purpose of, USA Cares in a manner designated by the Board of Directors.

F. **Charitable Contributions**: No Board member or staff member shall make charitable contributions in the name of, from the funds of, or on behalf of, USA Cares without prior authorization by the Board of Directors.

ARTICLE X
BOOKS AND RECORDS

USA Cares shall keep correct and complete books and records of account and shall also keep minutes of the proceedings of its Board of Directors and Executive Committee, and shall keep same at its principal office of record, giving the names and addresses of the directors entitled to vote. All books and records of USA Cares may be inspected by any Director or his agent or attorney for any proper purpose at any reasonable time.

ARTICLE XI
FISCAL YEAR

The fiscal year of USA Cares shall January 1 to December 31.

ARTICLE XII
GUIDELINES FOR LOCAL CHAPTERS OF USA CARES, INC. AS ESTABLISHED BY NATIONAL BOARD OF DIRECTORS

A. **Establishment of local Chapters of USA Cares, Inc**. In various states and other authorized geographical areas of the United States, USA Cares, Inc. (hereinafter "USA Cares") shall promote and encourage the organization and operation of one or more local Chapters to help carry out the programs and policies of USA Cares in the manner set forth below.

B. **Organization and Operation of Chapters:** A Chapter shall be a group of not less than seven (7) individuals acting under a Charter from USA Cares. Each Chapter shall agree to use the name and carry out the programs and policies of USA Cares to the best of its ability. Each Chapter, by acceptance of a Charter, agrees to abide by the terms and conditions set forth within in the By-Laws, and the directions of the USA Cares Board of Directors and its designees.

C. Chapters shall operate under the 501(c) 3 status of USA Cares. The USA Cares Board of Directors shall regulate the requirements for chartering Chapters and for their operations based on the best interests of USA Cares and the requirements of law. The Board may suspend or terminate the Charter issued to a Chapter within its sole discretion. All assets and liabilities of the Chapters shall be immediately assumed by USA Cares.

D. With respect to territorial overlapping of Chapters, the USA Cares shall encourage the effected Chapters to negotiate their own resolutions. Failing voluntary resolution by agreement, disputes will be bindingly resolved by USA Cares.

E. **Requirements And Rules For The Establishment And Operation Of A Chapter:**

The following minimum requirements and rules shall apply to any local group wishing to be established and operate as a Chapter of USA Cares:

(l) Submit a letter of intent to USA Cares and agree to abide by the terms and conditions set forth in this document as well as in the Charter granted to the Chapter;

(2) Identify a minimum of seven (7) individuals who will serve on an Advisory Board of the proposed Chapter; designate one person to assume the role of Chairperson who will serve as liaison with USA Cares and who will assume responsibility to enforce Chapter compliance with its Charter and the terms and conditions of this document;

(3) Agree to hold monthly Advisory Board meetings during a twelve (12) month period following the date of the Chapter's establishment;

(4) Agree to hold not less than three (3) USA Cares events annually, at least two of which shall be fund raisers. Events and initiatives undertaken by the Chapter which are not part of the national programs of USA Cares must be submitted to USA Cares in advance for review and approval;

(5) Agree to submit a budget /financial report no later than the tenth (10) day of each month and general status reports monthly to USA Cares.

(6) Chapters are not authorized to secure financial loans and may only expend funds, self-generated or provided by USA Cares, in accordance with the terms of their Charters.

(7) The stationery, letterhead, business cards, literature and all other printed materials of a Chapter shall uniformly identify its affiliation with USA Cares. USA Cares shall provide a mandatory standard of design for all printed materials.

(8) All Chapter fund raising shall occur under the auspices of, and be identified with, USA Cares.

(9) The nature and scope of USA Cares' support for Chapters shall be determined by the Board of Directors of USA Cares in its sole discretion.

(10) Each Chapter shall contribute and annually remit to USA Cares, for the support of the national operation and mission, a minimum of seventy five percent (75%) of its gross revenues (contributions of a lesser amount must be approved by the President of USA Cares). With the exception of fund raising events, "gross revenues" shall mean all funds and other assets of any kind or description received by the Chapter. In the case of fund raising events, it shall mean the net proceeds of such events. The remaining twenty five percent (25%) may be used as operational expenses to support development, awareness initiatives, and outreach to military families. All expenses over and above $1,000 need approval from the Chapter Operations Officer at national headquarters.

(11) Checking Accounts: Each Chapter shall be authorized to establish a single checking account to support its operations. No savings accounts are permitted

Checking accounts are to be opened in the following names:

Name of the Chapter, USA Cares, Inc.
Example: Ohio Chapter, USA Cares, Inc.

(12) Signatories: The Chapter must have at least two Advisory Board members (who are not related) as signatories of its checking account. In addition, an officer of USA Cares or a member of its Board shall be identified as a signatory on the account.

(13) Chapters shall be entitled to create Operational Branches within their territories. Organizational requirements for Operational Branches shall be promulgated by USA Cares. Operational Branches shall be subject to the Chapters' requirements, as set forth in its Charter or in this document, unless modified by USA Cares. Operational Branches may not open their own checking accounts, but rather work with the Chapter leadership team to coordinate payments to vendors and/or reimbursements.

(14) Chapter Chairpersons will sign an initial agreement that outlines his/her commitment to the Chapter. Upon completion of the term, the Advisory Board will develop a slate in which all chapter members will be allowed a vote. Chapter members are defined as those who have played an active role in supporting the chapter within a twelve (12) month timeframe and have paid their annual membership dues. Chairpersons are eligible to serve consecutive terms if it is agreed upon by the Chapter Advisory Board and chapter members.

(15) Individuals who have paid annual membership dues within a chartered territory will be considered chapter members. As such, these individuals may participate in all activities as chapter members and are eligible to hold office within the Chapter.

ARTICLE XIII
SUPERCESSION

These By-Laws, once adopted, shall supersede all prior By-Laws adopted by USA Cares and/or its Board of Directors and shall likewise supersede any prior motions of the Board of Directors pertaining to the subjects covered hereunder.

ARTICLE XIV
AMENDMENTS OF BY-LAWS

These By-Laws shall be adopted and may later be amended. altered, changed. added to. or repealed by the affirmative vote of a two-thirds majority of the then existing Board of Directors.

ARTICLE XV
WAIVER OF NOTICE

Whenever any notice whatever is required to be given under the provisions of these By-Laws. or under the provisions of the Articles of Incorporation. or under the provisions of the corporation laws of the Commonwealth of Kentucky, waiver thereof in writing, signed by the person entitled to such notice, whether before or after the time stated therein, shall be deemed equivalent to the giving of such notice. Any Director may waive notice of any meeting. The attendance of a Director at any meeting shall constitute a waiver of notice of such meeting, except where a director attends a meeting for the express purpose of objecting to the transaction of any business because the meeting is not lawfully called or convened.

The foregoing By-Laws were duly approved and adopted by resolution of two-thirds of the Board of Directors of USA Cares Inc. at a meeting of the Board of Directors on the 3rd day of February, 2014.

William D. Roby

WILLIAM ROBY, SR., CHAIRMAN

KAREN VON DER BRUEGGE, SECRETARY

STATE OF KENTUCKY:

COUNTY OF HARDIN:

I, a Notary Public, do hereby certify that on this 3rd day of February, 2014, William Roby. Sr., Chairman, personally appeared before me who being by me first duly sworn. declared that he is a member of the corporation and that the statements therein contained are true.

Amy M. Callahan
Notary Public, Kentucky State at Large
My commission expires: AUG. 4, 2016
Notary ID: 471932

STATE OF KENTUCKY:
COUNTY OF HARDIN:

I, a Notary Public, do hereby certify that on this 3 day of FEBRUARY, 2014, Karen Von Der Bruegge, Secretary, personally appeared before me who being by me first duly sworn, declared that she is a member of the corporation and that the statements therein contained are true.

Amy M Callahan
Notary Public, Kentucky State at Large
My commission expires: AUG. 4, 2016
Notary ID: 471932

Form **8868** (Rev January 2014)

Department of the Treasury
Internal Revenue Service

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* .**

OMB No 1545-1709

- If you are filing for an **Automatic 3-Month Extension, complete only Part I** and check this box ▶ [X]
- 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* 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

Type or print File by the due date for filing your return See instructions	Name of exempt organization or other filer, see instructions	Enter filer's identifying number Employer identification number (EIN) or
	USA CARES, INC.	05-0588761
	Number, street, and room or suite no If a P O box, see instructions 562B N. DIXIE BLVD., NO. 3	Social security number (SSN)
	City, town or post office, state, and ZIP code For a foreign address, see instructions. RADCLIFF, KY 40160	

Enter the Return code for the return that this application is for (file a separate application for each return) 01

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 (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

THE ORGANIZATION

- The books are in the care of ▶ 562B N. DIXIE BLVD., NO. 3 - RADCLIFF, KY 40160
  Telephone No ▶ 270-352-5481 Fax No ▶
- 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 AUGUST 15, 2015 , to file the exempt organization return for the organization named above The extension is for the organization's return for.
▶ [X] calendar year 2014 or
▶ [ ] tax year beginning _____ , and ending _____

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

3a	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.	3a	$	0.
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.	3b	$	0.
c	**Balance due.** Subtract line 3b from line 3a Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions	3c	$	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*