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Form **990**

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

OMB No 1545-0047 2014

	mai Revenue Se		► Information about Form 990 and		•		Inspection
A	For the 201	4 calendar		and ending			
В	Check if applicable		organization			D Employe	r identification number
П	Address change		Bismarck Marathon				
\exists	Name change	Doing b	siness as			┨20-8	441757
H	·		nd street (or P O box if mail is not delivered to street address)		Room/suite	E Telephor	
닏	Initial return Final return/		ox 7023 vn, state or province, country, and ZIP or foreign postal code			1/01-	222-4136
	terminated			•			1.00 000
	Amended return		arck ND 5850 daddress of principal officer	2	1	G Gross red	eipts\$ 163,889
$\overline{\sqcap}$	Application pendi		address of principal officer		H(a) Is this a	group return for	subordinates Yes X No
ш	, 4P	9			H/b) Ass oll o		luded? Yes No
						ubordinates inc o " attach a list	(see instructions)
_	-	itus X			─- " "	o, amorrano	(oco monaciona)
<u>+</u>	Tax-exempt sta		on(c)(3) 501(c) () ◀ (insert no) 4 smarckmarathon.com	1947(a)(1) or 527	─		
<u>-</u>	Website -			··· ·	L Year of formation	xemption numb	
<u>`</u>	Form of organiza	Summar	oration Trust Association Other	<u>.</u> J.	L rear or formation	2009	M State of legal domicile ND
<u>-</u>			organization's mission or most significant activ	ution			· · · · · · · · · · · · · · · · · · ·
ø			romote and support athletes		a properet	orw als	seese and
ä	CO		race. The race can qualif	_		_	
& Governance	in		nal marathons.	1 bar crerbane	5 101 00		muz unu
Š	2 Check		if the organization discontinued its operation	s or disposed of more t	than 25% of its n	at accete	
<u>ග</u>	3 Numb		nembers of the governing body (Part VI, line 1a		111411 25 76 01 115 11	3	10
Se	1		dent voting members of the governing body (P			4	8
į	l .		lividuals employed in calendar year 2014 (Part	· ·		5	0
Activities	1		lunteers (estimate if necessary)	¥, iiio 2a)		6	300
⋖			siness revenue from Part VIII, column (C), line	12		7a	0
- 5	1		ness taxable income from Form 990-T, line 34	12		7b	0
; 	211014	in olatou but	isso taxasic mostic from 1 on 1 on 1, inic 64		Prior Y		Current Year
5 <u>o</u>	8 Contri	butions and	grants (Part VIII, line 1h)		4	3,618	67,538
Revenue	9 Progra	am service	venue (Part VIII, line 2g)		8	0,543	96,247
) §	10 Invest	lment incom	(Part VIII, column (A), lines 3, 4 and 7d)			157	104
Ľ	11 Other	revenue (P	t VIII, column (A), lines 5, 60, 8¢, 9c, 10c, and	11e)		1,165	0
_			d lines 8 through 11 (must equal Part VIII, colu			5,483	<u>163,889</u>
			amounts paro (Part IX, column (A), 10 as 1-3)		1	2,250	22,500
			for members (Part IX, column XA), line 4)				<u> </u>
es	15 Saları		pensation, employee benefits (Part-IX, collumn	(A), lines 5–10)			<u>0</u>
Expenses	16aProfes		using fees (Part\X, column (A), line 19e	_			0
ă. X	b Total t		penses (Part IX.\column (D), line 25) ▶	0			
щ	17 Other		art IX, column (A), lines 14a-11d, 11f-24e)			0,474	113,671
			ld lines 13–17 (must equal Part IX, column (A),	line 25)		2,724	136,171
- 5	19 Rever	nue less exp	nses Subtract line 18 from line 12		Beginning of C	2,759	27,718
Net Assets or	20 Total	assets (Par	(line 16)			6,269	End of Year 133,792
Ass	21 Total	liabilities (P				0,209	133,132
Š	22 Net as	-	balances Subtract line 21 from line 20		10	6,269	133,792
		Signatur				0,200	1007.02
			eclare that I have examined this return, including acc	rompanying schedules an	d statements, and	to the best of	my knowledge and helief it is
tr	ue, correct, ar	nd complete	eclaration of preparer (other than officer) is based or	all information of which i	preparer has any ki	nowledge	my knowledge and beller, it is
							·
Sig	gn 🖊	Signature of	ficer t			Date	-1 /
He		\ W \	whare hearing	_			8/13/15
		ype er print	ame and title				
	Print	Type preparer:	ame Preparer's signature		Date	Check	f PTIN
Pai	d Ter	ry L. Daf	inrud CPA Terry L. Daf	finrud CPA	08/0	7/15 self-en	ployed P01232941
Pre	narer	s name	Daffinrud & Heinert Po			Firm's EIN	71-0893549
Us	e Only		400 E Broadway Ave Ste				
_	Firm's	s address	Bismarck, ND 58501-40	072		Phone no	701-250-5203
Ма	y the IRS dis	cuss this re	irn with the preparer shown above? (see instru				X Yes No
For	Panerwork F	Peduction A	Notice see the senarate instructions				5 990 (2014)

Form 990 (2014)]	Bismarck Maratho	on 20-	8441757	Page 2
	atement of Program Sei neck if Schedule O contai	vice Accomplishments ns a response or note to any line in t	his Part III	
1 Briefly descr Support national	ibe the organization's mission and develop ama Land/or interna	teur athletes/marathon tional amateur sport o inars that educate mar	competition. To sompetition. Suppose	
prior Form 99 If "Yes," desc Did the organiservices?	90 or 990-EZ? cribe these new services on Sci	ake significant changes in how it conducts, ar		Yes X No
4 Describe the expenses S	organization's program service	accomplishments for each of its three largest organizations are required to report the amount		
marathor night pr	ed Annual Marath n relay and 5k r receding the rac	24,831 including grants of\$ ion event which include run walk as well as a f re. 1498 registrations ring events were held for	ree kids mini mara representing 33 s	athon the
4b (Code) (Expenses \$	including grants of\$) (Revenue \$)
4c (Code) (Expenses \$	including grants of\$) (Revenue \$)
· -	m services (Describe in Schedi	•	(Pavague ¢	
(Expenses \$ 4e Total program	m service expenses ▶	uding grants of\$)	(Revenue \$	

Form 990 (2014) Bismarck Marathon 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,"		.	
2	complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		
J	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	ļ	X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,		1	
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,		1	
	Part III	5	ļ	X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors	Ť		
	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		1	
	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			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"	اءمدا	┰	
	complete Schedule D, Part VI	11a	Х	
D	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
_	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more	110	\dashv	
·	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	-110		
	reported in Part X, line 16° If "Yes," complete Schedule D, Part IX	11d	ļ	X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
	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
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
þ	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			7.5
46	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	46	1	v
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	16		<u> </u>
• •	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	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		х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?		\neg	
-	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
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
			000	10044

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 19 If "Yes," complete Schedule I, Parts I and II	21	Х	
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	j		
	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	1		
	through 24d and complete Schedule K. If "No," go to line 25a	24a		X
þ	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		L
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	1		
	to defease any tax-exempt bonds?	24c	<u> </u>	
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	İ		
	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	ſ		
	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)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
þ	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		х
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? 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		Х
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, Parts 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	İ	
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_	L_	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,	İ		
	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	L	Х
		Eon	990	(2014)

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Pa	art 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 0		162	NO
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0	1 1		
C	Did the organization comply with backup withholding rules for reportable payments to vendors and	1 1		
_	reportable gaming (gambling) winnings to prize winners?	1c		l
2a				
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	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		Х
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).			
а	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		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	l _		
_	required to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year Did the consequence of Forms 8282 filed during the year	, ,		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7 <u>g</u> 7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	///		-
٠	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	<u> </u>		
а	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			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	1		ļ
11	Section 501(c)(12) organizations. Enter	1		
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them)]		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		<u> </u>
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			<u> </u>
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		<u> </u>
	Note. See the instructions for additional information the organization must report on Schedule O			
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	4		
C	Enter the amount of reserves on hand	1	I	I

Form 990 (2014)

14a Did the organization receive any payments for indoor tanning services during the tax year?

DAA

Forn	990 (2014) Bismarck Marathon 20-8441757		F	age 6
Pa	art VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b bel	ow, and	for a "	No"
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedul	e O. See	instru	uction
	Check if Schedule O contains a response or note to any line in this Part VI			_X_
Sec	ction 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 10			
	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	1		
þ	Enter the number of voting members included in line 1a, above, who are independent 1b 8			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with		l	
	any other officer, director, trustee, or key employee?	2	X	<u> </u>
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?	<u>7a</u>		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,		1	l
	stockholders, or persons other than the governing body?	7b	1	X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the f	1 -		
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		İ	.,
500	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	<u> </u>	X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	<u>renue C</u>		
10a	Did the erganization have lead shorters broughed as officetor?	40-	Yes	No X
_	Did the organization have local chapters, branches, or affiliates?	10a	4	<u> </u>
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	401		
110	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	_	x
b	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	' 11a	+	┢┻
12a	Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13	40-		x
b		12a	+	 ^
C	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflict Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	ts? 12b	+	
·	describe in Schedule O how this was done	120		
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?			
а	The organization's CEO, Executive Director, or top management official	15a	.	x
	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)	100		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			1
	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	1.50	1	
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			ł
	organization's exempt status with respect to such arrangements?	166		1
Sec	tion C. Disclosure		-	
17	List the states with which a copy of this Form 990 is required to be filed ▶None			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s of the section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s of the section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s of the section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s of the section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s of the section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s of the section 6104 requires and 6104 requi	nly)		
	available for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy,	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			

411 W Wachter

Bismarck

Carol Beiswanger

ND 58504

Form	aan	(2014)	Ri	smarc	ŀ	Mэ	rat	⊦h	\sim t	_
LOH!!	990	(2014)	$\mathbf{D}\mathbf{I}$	Smarc	K.	Ma	Ia.	ш	OI	. 1

20-8441757

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

K 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	(do	o not o	Pos check ess pe	C) ation more erson	than or	ne an	(D) Reportable compensation from the	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	hours for related organizations below dotted line)	or director		Officer			Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(1)David Nash	1 00					П				
President	1.00	x		x				o	o	o
(2) Bryan Wetch	0.00	^	\vdash	┢						<u> </u>
(0,000	1.00									
Vice president	0.00	X		x				o	0	0
(3) Mark Zimmerman										
	1.00			l						
Secretary	0.00	X		X				0	0	0
(4) Carol Beiswange				l	Î	1 1				
_	1.00	l		l						
Treasurer	0.00	X	<u> </u>	X		\vdash		0	0	0
(5) Lynn Beiswanger						1 1				
Race Director	1.00	x				1 1		o	0	o
(6) Tanner Blair	0.00	┢	┢	├─	\vdash	╁		0	0	- 0
(o) ranice braze	1.00									
Director	0.00	$ \mathbf{x} $						l o	0	0
(7) Ross Espeseth				İ		1-1				
	1.00			İ						
Director	0.00	X						O	0	0
(8) Vance Krebs									-	
	1.00				l	١, ١				
Director	0.00	X	_	L_				0	0	0
(9) Faye Miller						1 1				
	1.00			l		1			_	
Director (10) Kevin Stankiewi	0.00	X	 	<u> </u>	<u> </u>	1		0	0	0
(10)Revin Stanklewi	1.00			İ						
Director	0.00	$ \mathbf{x} $						o	0	o
(11)Marnie Walth	0.00	 ^		\vdash	-				U	
i /	1.00									
Director	0.00	x						o	0	O
DAA	·									Form 990 (2014)

	(A) Name and title	(B) Average hours per week (list any hours for	box	c, unle	Pos check ess pe	erson	than o	an	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)		(F) Estimat amount other compens	of ation	
		related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/10 99-M ISC)	(V-21033-MIGO)		organiza and rela organizat	tion ted	
(12) L O	nna Willer-Sm	ith 1.00												
Direc	ctor	0.00	x						0	0				0
(13)														
(14)												_		
(15)														
(16)														
(17)			Ì											
(18)		_												
(19)														
с То	ib-total otal from continuation sho	eets to Part VII	, Se	ction	n A	<u> </u>	Li	>						
2 To	tal (add lines 1b and 1c) tal number of individuals (incortable compensation from				to th	ose	listed	d ab	ove) who received more	l than \$100,000 of]			
	d the organization list any t				or tri	ıster	e ke	v en	nniovee or highest comp	ensated		\dashv	Yes	No
en 4 Fo	nployee on line 1a? If "Yes or any individual listed on lii ganization and related orga	," complete Sch ne 1a, is the sui	edul m of	e J f repo	or sortab	uch Ie c	indivi ompe	idua ensa	al ation and other compensa	tion from the		3		X
5 D	dividual d any person listed on line services rendered to the	1a receive or a organization? If	ccrue "Yes	e co	mpe ompl	nsat	ion fi Sche	rom dule	any unrelated organization	on or individual		5		x x
	B. Independent Contractor properties this table for your factor in the contractor in				4					than \$100,000 of				
	mpensation from the organ	nization Report	com	pen	satio	on fo	r the	cal	endar year ending with or	within the organization's	tax year		(C)	
	Name and	(A) I business address							Descrip	(B) puon of services		Con	(C) npensat	ion
														
		-							<u></u> .					
					-				-					
			_											
2 To	tal number of independent beived more than \$100,000	contractors (inc	cludi	ng b	ut no	ot lin	nited	to t	hose listed above) who	0				
DAA	solved more than \$100,000	- or compensal	<u> </u>	J111 (/iyal	112all	VII		u		Form	990	(2014)

P	art \	/III Statement of Rev Check if Schedule	enue O co	ntains	a response	or note to any lu	ne in this Part VII	I	П
W 11						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Program Service Revenue Contributions, Gifts, Grants	1a	Federated campaigns	1a						
ؿٙۊ	b	Membership dues	1b						
ff.	c	Fundraising events	1c						
<u>.</u>	d	Related organizations	1d						
Sig.	е	Government grants (contributions)	1e						
er.	f	All other contributions, gifts, grants,							
듗		and similar amounts not included above	1f		67,538				
Ž	g	Noncash contributions included in lines 1	a-1f	\$	18,788				
ನ್ನೌ	h	Total. Add lines 1a-1f			•	67,538			
au n					Busn. Code				
Š	2a	Registrations			711300	96,210	96,210		
8	b	Other			711300	37	37		
ž	С								
Š	d								
Пап	е								
ē	f	All other program service rev	enue		L				
<u>-</u>	<u> </u>					96,247			
	3	Investment income (including	divide	ends, inte	erest,				
	١.	and other similar amounts)		_	. ▶ ⊦	104			104
	4	Income from investment of ta	x-exe	npt bond	proceed				
	5	Royalties	_						
	_ ا	(i) Real		(11) 1	Personal				
	Ι.	Gross rents							
	b	Less rental exps							
	ء ا	Rental inc or (loss							
	d 7a	Net rental income or (loss) Gross amount from (i) Securities		1	Other				·····-
	ľ	sales of assets		<u> </u>) Other				
	Ь	other than inventory	-						•
	"	Less cost or other basis & sales exps			1	}			
	_ ا	Gain or (loss)							
	ď	Net gain or (loss)							
Ф		Gross income from fundraising ev	ents [
Other Revenue	ا	(not including \$	ا ^{دانی}						
eVe		of contributions reported on line 1	3)						
æ		See Part IV, line 18	" a						
the	Ь	Less direct expenses	ь						
ō		Net income or (loss) from fun		a events	<u>.</u> ▶				
		Gross income from gaming activiti							
		See Part IV, line 19	а						
	ь	Less direct expenses	ь						
		Net income or (loss) from gar	nıng a	ctivities	•				
		Gross sales of inventory, less	٠,						
		returns and allowances	а		İ				
	ь	Less cost of goods sold	b						
	С	Net income or (loss) from sale	es of i	nventory					
		Miscellaneous Revenue			Busn Code	-			
	11a								
	b								
	С								
j	d	All other revenue							
	е	Total. Add lines 11a-11d			▶ [
	12	Total revenue. See instruction	ons		_ ▶ [163,889	96,247	0	104

Form 990 (2014) Bismarck Marathon
Part IX Statement of Functional Expenses

Sect	on 501(c)(3) and 501(c)(4) organizations must Check if Schedule O contains a res			t complete column (A)	
	ot include amounts reported on lines 6b,	(A)	(B)	(C)	(D)
	b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1					···
	and domestic governments. See Part IV, line 21	22,500	22,500		
2	Grants and other assistance to domestic				
	individuals See Part IV, line 22				
3	Grants and other assistance to foreign		· · · · · · · · · · · · · · · · · · ·		
	organizations, foreign governments, and foreign			i	
	individuals See Part IV, lines 15 and 16				<u> </u>
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include				
_	section 401(k) and 403(b) employer contributions)	<u> </u>			
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)				
a	Management				
þ	Legal Accounting	995		995	
d	Lobbying				
u	Professional fundraising services See Part IV, line 1	7			
f	Investment management fees	<u></u>			
	Other (If line 11g amount exceeds 10% of line 25, column				
9	(A) amount, list line 11g expenses on Schedule (O)				
12	Advertising and promotion	10,181	6,660	3,521	
13	Office expenses	5,282	3,250	2,032	
14	Information technology	684		684	
15	Royalties				
16	Occupancy	1,680		1,680	
17	Travel	792		792	
18	Payments of travel or entertainment expense	s			
	for any federal, state, or local public officials			<u></u>	
19	Conferences, conventions, and meetings				<u></u>
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	1,636		1,636	
23	insurance	1,762	1,762		
24	• • • • • • • • • • • • • • • • • • • •			į	
	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.) Participant Costs	37,328	37,328		
a	Race Day Food & Hydration		15,907		
b	Awards	13,047	13,047		
d	Security	11,086	11,086		
_	All other expenses	13,291	13,291		
25	Total functional expenses. Add lines 1 through 24e	136,171	124,831	11,340	0
26		130,111	123,031	11,540	<u> </u>

_	Check if Schedule O contains a response or no	te to any line in this Part X	·		
	· · · · · · · · · · · · · · · · · · ·		(A) Beginning of year		(B) End of year
1	Cash—non-interest bearing		106,269	1	125,02
2	Savings and temporary cash investments	<u> </u>		2	
3	Pledges and grants receivable, net			3	
4	Accounts receivable, net			4	
5	Loans and other receivables from current and former	officers, directors,			
	trustees, key employees, and highest compensated e	employees			
	Complete Part II of Schedule L			5	
6	Loans and other receivables from other disqualified p	ersons (as defined under section			
	4958(f)(1)), persons described in section 4958(c)(3)(l	3), and contributing employers ah	d		
1	sponsoring organizations of section 501(c)(9) volunta	ry employees' beneficiary			
	organizations (see instructions) Complete Part II of S	Schedule L		6	
7	Notes and loans receivable, net			7	
8	Inventories for sale or use			8	
9	Prepaid expenses and deferred charges	[9	
10	a Land, buildings, and equipment cost or				
	other basis Complete Part VI of Schedule D	10a 10,403			
t	Less accumulated depreciation	10b 1,636		10c	8,76
11	Investments—publicly traded securities			11	
12	Investments—other securities See Part IV, line 11			12	
13	Investments—program-related See Part IV, line 11			13	
14	Intangible assets			14	
15	Other assets See Part IV, line 11			15	
16	Total assets. Add lines 1 through 15 (must equal line	e 34)	106,269	16	133,792
17	Accounts payable and accrued expenses			17	
18	Grants payable	L		18	
19	Deferred revenue	L		19	
20	Tax-exempt bond liabilities	L		20	
21	Escrow or custodial account liability Complete Part IV	V of Schedule D		21	
22	Loans and other payables to current and former office	ers, directors,			
	trustees, key employees, highest compensated employees	oyees, and		- 1	
	disqualified persons Complete Part II of Schedule L	L		22	
23	Secured mortgages and notes payable to unrelated the	hird parties		23	
24	Unsecured notes and loans payable to unrelated third	d parties		24	
25	Other liabilities (including federal income tax, payable	es to related third		į	
	parties, and other liabilities not included on lines 17-2	4) Complete Part X		j	
	of Schedule D	L		25	
26			0	26	(
	Organizations that follow SFAS 117 (ASC 958), ch	eck here ▶ and		1	
	complete lines 27 through 29, and lines 33 and 34			1	
27	Unrestricted net assets	L		27	
28	• • • • • • • • • • • • • • • • • • • •	L		28	
29	Permanently restricted net assets	<u></u>		29	
ŀ	Organizations that do not follow SFAS 117 (ASC 9	958), check here ▶ <mark>X</mark> and		- 1	
1	complete lines 30 through 34.			- 1	
30	Capital stock or trust principal, or current funds	L		30	
31	, , , , , , , , , , , , , , , , , , , ,	les de la companya de la companya de la companya de la companya de la companya de la companya de la companya d		31	
32	Retained earnings, endowment, accumulated income	e, or other funds	106,269	32	133,792
33			106,269		133,792
34	Total liabilities and net assets/fund balances		106,269	34	133,792

<u>Forn</u>	n 990 (2014) B1smarck Marathon 20-8441/5/			P	age 12
Pa	art 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		163	889
2	Total expenses (must equal Part IX, column (A), line 25)	2		136	,171
3	Revenue less expenses Subtract line 2 from line 1	3	Ĵ	27	718
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		106	,269
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6		64	, 686
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9		-64	,881
10					
		10		<u> 133</u>	,792
Pa	art XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Ye	s No
1	Accounting method used to prepare the Form 990. X Cash Accrual Other				İ
	If the organization changed its method of accounting from a prior year or checked "Other," explain in				Ì
	Schedule O			ļ	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		<u></u>	a	<u> </u>
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				1
	reviewed on a separate basis, consolidated basis, or both:			ļ	1
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		_ 2	b d	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			- 1	
	Separate basis Consolidated basis Both consolidated and separate basis			1	1
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?		_2	<u>!c</u>	
	If the organization changed either its oversight process or selection process during the tax year, explain in				ĺ
	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?		<u> </u>	a	X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the			- 1	
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3	b	
				Form 99	(2014)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

▶ Attach to Form 990 or Form 990-EZ.

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

OMB No 1545-0047

Vame	of the	organization	Bismarck Man	rathon			· · · · · · · · · · · · · · · · · · ·	ployer (den) – 8 4 4	tification number	
P	art I	Reas		Status (All organization	ns mus	t compl				
The	orga	nızatıon ıs no	t a private foundation beca	use it is (For lines 1 through 1	1, check	only one	box)			
1		A church, co	invention of churches, or as	ssociation of churches describe	ed in sec	tion 170	(b)(1)(A)(i).			
2		A school des	scribed in section 170(b)(1)(A)(ii). (Attach Schedule E)						
3		A hospital or	a cooperative hospital sen	vice organization described in	section	170(b)(1)	(A)(iii).			
4		A medical re	search organization operat	ed in conjunction with a hospit	tal descri	bed in se	ction 170(b)(1)(A)(i	ii). Enter	the hospital's nam	ne,
		city, and stat	te [.]							
5		-	tion operated for the benefi (b)(1)(A)(iv). (Complete Pa	t of a college or university own	ed or ope	erated by	a governmental uni	t describe	ed in	
6	\Box			governmental unit described i	n contin	a 470/b)/	1\/4\/\/\			
7	Н		· •	a substantial part of its support		` ''	· · · ·	general r	aublic.	
•	ш	-	section 170(b)(1)(A)(vi). (, , , , , , , , , , , , , , , , , , , ,	t itom a g	Jovernine	intal unit of from the	general p	Jabiic	
8				170(b)(1)(A)(vi). (Complete F	Part II \					
9	X	•		(1) more than 33 1/3% of its s	•	nm contri	hutions membershir	n fees an	nd aross	
-				empt functions—subject to cert						
				and unrelated business taxable	•		• •			
			•	30, 1975 See section 509(a)		•	,			
10			-	d exclusively to test for public		•	•			
11	П			exclusively for the benefit of,	-			out the p	ourposes of	
	_			ations described in section 50						
		the box in lin	es 11a through 11d that de	scribes the type of supporting	organiza	tion and	complete lines 11e,	11f, and	11g	
а		Type I. A su	pporting organization opera	ated, supervised, or controlled	by its sup	pported o	rganization(s), typica	ally by giv	/ing	
		the supporte	d organization(s) the power	r to regularly appoint or elect a	majority	of the di	rectors or trustees of	f the supp	oorting	
	_	organızatıon	You must complete Part	IV, Sections A and B.						
b		Type II. A su	apporting organization supe	rvised or controlled in connect	tion with i	its suppo	rted organization(s),	by having	g	
		control or ma	anagement of the supportin	g organization vested in the sa	ame pers	ons that	control or manage th	e suppor	ted	
		organization	(s) You must complete Pa	art IV, Sections A and C.						
С				porting organization operated			-	tegrated	with,	
			•	ictions) You must complete	-					
d				A supporting organization opei						
			· •	rganization generally must sat	•		•	attentiver	ness	
_				st complete Part IV, Section		•		111		
е				ved a written determination from			salypei, lypeii, i	уре III		
f		•	rregrated, or Type in non-in or of supported organization	unctionally integrated supporti	ng organ	ization				
'n			wing information about the							
_ <u>34</u>		of supported	(ii) EIN	(iii) Type of organization	(iv) is the o	organization	(v) Amount of mone	etany	(vi) Amount of	,
•		anızatıon	(··/, <u>-</u> ···	(described on lines 1–9	1.7	ur governing	support (see	,,	other support (se	
				above or IRC section (see instructions))	docui	ment?	instructions)	i	instructions)	
				(see instructions))	Yes	No				
A)										
_					ļ					
B)								i		
C)	٠									
D)		-								
E)		· · · · · · · · · · · · · · · · · · ·						_		
					<u> </u>					
ota	1									

Sch	edule A (Form 990 or 990-EZ) 2014 Bis	marck Ma	rathon		20	-84417	57	Page 2
	art II Support Schedule for C	Organizations	Described in	Sections 17	0(b)(1)(A)(iv)	and 170/h	7/1 1/	A)(vi)
	(Complete only if you ch	ecked the box	on line 5. 7.	or 8 of Part I o	r if the organiz	zation failed	oot b	aualify under
	Part III If the organization	n fails to qual	ify under the t	ests listed bel	ow, please co	mplete Par	t III.)	, a, aa.
Sec	tion A. Public Support				•			
Cale	ndar 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	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						\longrightarrow	
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)							
6	Public support. Subtract line 5 from line 4						\longrightarrow	
	etion B. Total Support	L		<u> </u>		1	 J.	
	ndar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	$\overline{}$	(f) Total
7	Amounts from line 4	<u> </u>	(-,, -	(0) = 0 :=	(0, 20.0	(0) 2011	\dashv	(1) 10141
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources							
9	Net income from unrelated business activities, whether or not the business is regularly carried on							
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI)							
11	Total support. Add lines 7 through 10		<u> </u>					
12	Gross receipts from related activities, etc	•	•			Ĺ	12	
13	First five years. If the Form 990 is for the		first, second, third	, fourth, or fifth ta	x year as a section	on 501(c)(3)		
500	organization, check this box and stop he tion C. Computation of Public S		ontono					<u> </u>
14				l (D)	.		44 T	
15	Public support percentage for 2014 (line Public support percentage from 2013 Sc		-	iumii (1 <i>))</i>		-	14	<u>%</u> %
16a	·			ine 13 and line 1	1 is 33 1/3% or m	L Ore check th		76
	box and stop here . The organization qu				4 15 00 17570 01 11	iore, check th	13	▶ □
b	33 1/3% support test—2013. If the orga				line 15 is 33 1/3%	or more.		
	check this box and stop here. The organ					,		▶ □
17a		014. If the organia	zation did not che I-circumstances" (ck a box on line 1 est, check this bo	13, 16a, or 16b, a ox and stop here	. Explain in		. □
ь	10%-facts-and-circumstances test—2	013. If the organi	zation did not che	ck a hox on line 1	13 16a 16h or 1	7a and line		▶ _
-	15 is 10% or more, and if the organization							
	Explain in Part VI how the organization in							
	supported organization				4	,		▶ □
18	Private foundation. If the organization of	did not check a bo	ox on line 13, 16a	, 16b, 17a, or 17b	, check this box a	and see		

instructions

Page 3

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.)

Sec	tion A. Public Support	quality under	the tests liste	d below, picas	se complete i	art ii j	
	ndar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and membership	(a) 2010	(b) 2011	(0) 2012	(u) 2013	(6) 2014	(I) Total
	fees received. (Do not include any "unusual grants")	16,855	18,500	25,000	51,418	132,224	243,997
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	77,278	76,768	95,279	81,708	96,247	427,280
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	94,133	95,268	120,279	133,126	228,471	671,277
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						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c from						
<u></u>	line 6)					l	671,277
	tion B. Total Support	(=) 2040 T	(b) 2044	(-) 2042	(4) 2042	(-) 0044	(6) T-4-1
9	Amounts from line 6	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
	ľ	94,133	95,268	120,279	133,126	228,471	671,277
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	239	191	112	157	104	803
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975		:				
c	Add lines 10a and 10b	239	191	112	157	104	803
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carned 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)	94,372	95,459		133,283	228,575	672,080
14	First five years. If the Form 990 is for the organization, check this box and stop he		rst, second, third,	fourth, or fifth tax	year as a section	n 501(c)(3)	. ┌
Sec	tion C. Computation of Public S		ntage				<u> </u>
15	Public support percentage for 2014 (line			tume (6)		15	00.00%
16	Public support percentage from 2013 Sc.			iuitiii (i))		16	99.88% 99.82%
	tion D. Computation of Investm					1 10 1	99.62 70
17	Investment income percentage for 2014			13 column (fl)		17	%
18	Investment income percentage from 201		-	10, 00.0 (1))		18	18 %
	33 1/3% support tests—2014. If the org			line 14, and line 1	5 is more than 33		
b	17 is not more than 33 1/3%, check this I 33 1/3% support tests—2013. If the org	box and stop here	e. The organization	on qualifies as a p	ublicly supported	organization	▶ X
-	line 18 is not more than 33 1/3%, check to						▶ □
20	Private foundation. If the organization of				-	-	

20-8441757

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 co	mplete Pa	art V)	
Sect	ion A. All Supporting Organizations			
1	Are all of the organization's supported organizations listed by name in the organization's governing		Yes	No
	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	1		
	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	i		
	organization made the determination	3b		
С	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	1	
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	l	
С	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	[-		Į
	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		i	
	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		
С	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		L
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	L	<u></u>
С	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		

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

Sched	dule A (Form 990 or 990-EZ) 2014 BISMARCK MARATHON 20	<u> </u>	7		Page 8
<u>Pa</u>	rt IV Supporting Organizations (continued)				
44	Healtha assessments a second of a Garage to be the first and of the fellows and the fellows as	Г		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?				
h			11a		
	A family member of a person described in (a) above? A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Par		11b 11c		
Sect	tion B. Type I Supporting Organizations	ι νι.	116		L
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			Yes	No
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the	Г	-		
	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 supporte	ed			
	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	Γ			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Pai	rt			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,	1			
	supervised, or controlled the supporting organization		2		
Sect	ion 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		l		
	or management of the supporting organization was vested in the same persons that controlled or managed				
Saat	the supported organization(s)		1		
Seci	ion D. All Type III Supporting Organizations				
4	Did the ergonization provide to each of the evented event the built lead down fithe fifth would of the	Г		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 pyear, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of	1			
	organization's governing documents in effect on the date of notification, to the extent not previously provide		1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supporter	—	-		
-	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI	1			
	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		
Sect	ion 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 yea	r (see instruction	ns).		-
а	The organization satisfied the Activities Test Complete line 2 below				
þ	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	it entity (see inst	ructio	ons).	
	Activities Test Answer (a) and (b) below.	_		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of	of	- 1		
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify		ļ		
	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 determine	∍d			
_	that these activities constituted substantially all of its activities.	<u>-</u>	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or mo	1			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the	9			
	reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement		25		
3	Parent of Supported Organizations Answer (a) and (b) below.	-	2b		
a			l		
u	trustees of each of the supported organizations? Provide details in Part VI.		3a		
ь	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of	each	Ja		
_	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard		3b		
	and a second of the second of the organization in this regard				

eme	rgency temporary reduction (see instructions)	6		
7 [Check here if the current year is the organization's first as a non-functionally-integrate	d Typ	e III supporting organizat	ion (see
	instructions)			

2

3

4

5

Schedule A (Form 990 or 990-EZ) 2014

Enter 85% of line 1

4 Enter greater of line 2 or line 3

Income tax imposed in prior year

3 Minimum asset amount for prior year (from Section B, line 8, Column A)

Distributable Amount. Subtract line 5 from line 4, unless subject to

Schedule A (Form 990 or 990-EZ) 2014 Bismarck Marathon 20-8441757 Page 7 Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) Section D - Distributions **Current Year** Amounts paid to supported organizations to accomplish exempt purposes Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity Administrative expenses paid to accomplish exempt purposes of supported organizations Amounts paid to acquire exempt-use assets Qualified set-aside amounts (prior IRS approval required) Other distributions (describe in Part VI) See instructions Total annual distributions. Add lines 1 through 6 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions Distributable amount for 2014 from Section C, line 6 10 Line 8 amount divided by Line 9 amount (i) (ii) (iii) **Excess Distributions** Section E - Distribution Allocations (see instructions) **Underdistributions** Distributable Pre-2014 Amount for 2014 Distributable amount for 2014 from Section C, line 6 Underdistributions, if any, for years prior to 2014 (reasonable cause required-see instructions) Excess distributions carryover, if any, to 2014 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) 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 Remaining underdistributions for years prior to 2014, if any. Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions) Remaining underdistributions for 2014 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions) Excess distributions carryover to 2015. Add lines 3j and 4c Breakdown of line 7 b d Excess from 2013

Schedule A (Form 990 or 990-EZ) 2014

e Excess from 2014

Schedule A (Form 990 or 990-EZ) 2014 Bismarck Marathon

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art 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.

10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990.

Open to F

2014
Open to Public Inspection

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990. Name of the organization Employer identification number Bismarck Marathon 20-8441757 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 Total number at end of year 2 Aggregate value of contributions to (during year) 3 Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Year a Total number of conservation easements 2a b Total acreage restricted by conservation easements 2b 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 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax vear Number of states where property subject to conservation easement is located > Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes No 6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? Yes 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) Revenues included in Form 990, Part VIII, line 1 \$ (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical 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

Schedule D (Form 990) 2014 Bismarck	<u>Marathon</u>			20-8	4417	57	Pa	age 2
Part III Organizations Maintainin	g Collections	of Art, Historica	l Treasur	es, or C	ther S	imilar As	sets (contin	ued)
3 Using the organization's acquisition, access collection items (check all that apply)	sion, and other rec	ords, check any of the	e following th	nat are a s	ignificar	it use of its		
a Public exhibition	d 🗍	Loan or exchange pr	rograms					
b Scholarly research	e 🗀	Other .	J					
c Preservation for future generations								
4 Provide a description of the organization's of	collections and exp	lain how they further	the organiza	ition's exe	mpt pur	pose in Part	:	
XIII		•	•					
5 During the year, did the organization solicit	or receive donation	ns of art, historical tre	easures, or o	ther simila	ar			
assets to be sold to raise funds rather than		s part of the organiza	ation's collec	tion?			Yes	No
Part IV Escrow and Custodial Ar								
Complete if the organizatio 990, Part X, line 21.	n answered "Y	es" to Form 990,	Part IV, li	ne 9, or	report	ed an am	ount on Forr	n
1a Is the organization an agent, trustee, custoo	dian or other interm	nediary for contribution	ns or other a	assets not				
included on Form 990, Part X?							Yes	No
b If "Yes," explain the arrangement in Part XII	I and complete the	following table						
							Amount	
c Beginning balance					ļ	1c	····	
d Additions during the year					ļ	1d		
e Distributions during the year						1e		
f Ending balance					Į	1f		
2a Did the organization include an amount on I							Yes _	No
b If "Yes," explain the arrangement in Part XII	I Check here if the	explanation has bee	en provided i	n Part XII	l			
Part V Endowment Funds.		"	D-407 b	40				
Complete if the organizatio							T	
As Bassass of washing	(a) Current year	(b) Prior year	(c) Two ye	ars back	(d) Thr	ee years back	(e) Four years I	back
1a Beginning of year balance b Contributions			<u> </u>				- 	
· · ·							<u> </u>	
c Net investment earnings, gains, and losses								
d Grants or scholarships			<u> </u>					
e Other expenditures for facilities and		···· <u> </u>	†			-		
programs								
f Administrative expenses			 	-				
g End of year balance		<u>-</u> :-						
2 Provide the estimated percentage of the cui	rrent vear end bala	nce (line 1a. column	(a)) held as				<u> </u>	
a Board designated or quasi-endowment ▶	%	((-//					
b Permanent endowment ▶ %								
c Temporarily restricted endowment ▶	%							
The percentages in lines 2a, 2b, and 2c sho	ould equal 100%							
3a Are there endowment funds not in the posse	ession of the organ	ization that are held	and adminis	tered for t	he			
organization by							Yes	No
(i) unrelated organizations							3a(i)	
(ii) related organizations							3a(ii)	
b If "Yes" to 3a(ii), are the related organization	ns listed as require	d on Schedule R?					3b	L
4 Describe in Part XIII the intended uses of th		ndowment funds						
Part VI Land, Buildings, and Equ					_			
Complete if the organization			Part IV, li	<u>ne 11a.</u>	See Fo	orm 990, I	Part X, line 1	10.
Description of property	(a) Cost or other I				ccumulate	ď,	(d) Book value	
-, 	(investment)	(oth	ier)	de	preciation			
1a Land							_	
b Buildings							<u> </u>	
c Leasehold improvements							 -	
d Equipment			10 400		- 4	626		767
e Other Total. Add lines 1a through 1e (Column (d) must	equal Form 000. F		10,403	L	Ι,	636		767
(Column (a) must	cquai FUIIII 990, F	art A, William (B), ill	ie iuc)		_	P	δ,	<u> 767</u>

mie 20.	
. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
otal. (Column (b) must equal Form 990, Part X, col (B) line 25)	>
Liability for uncertain tax positions. In Part XIII, provide the text	of the footnote to the organization

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.

Sche	edule D (Form 990) 2014 Bismarck Marathon	20-84417	57_	Page 4
Pa	art XI Reconciliation of Revenue per Audited Financial State	ements With Revenue po	er Ret	urn.
	Complete if the organization answered "Yes" to Form 990	0, Part IV, line 12a.		
1	Total revenue, gains, and other support per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
а	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b	7 1	
С	Recoveries of prior year grants	2c	7]	
d	Other (Describe in Part XIII)	2d	7	
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	l i	
b	Other (Describe in Part XIII)	4b	7	
С	Add lines 4a and 4b		7 4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		5	
Pa	Irt XII Reconciliation of Expenses per Audited Financial Sta	tements With Expenses	per R	eturn.
	Complete if the organization answered "Yes" to Form 990	0, Part IV, line 12a.	•	
1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			
а	Donated services and use of facilities	2a	_	
b	Prior year adjustments	2b		
С	Other losses	2c		
d	Other (Describe in Part XIII)	2d		
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	•• •
4	Amounts included on Form 990, Part IX, line 25, but not on line 1			
а	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	
_5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		5	
Pa	rt 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

Schedule D (Form 990) 2014 Bismarck Marathon
Part XIII Supplemental Information (continued)

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SCHEDULE 1 (Form 990)

Department of the Treasury Internal Revenue Service

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

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

OMB No 1545-0047 2014

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

Open to Public Inspection

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Form 990, % X Support program (h) Purpose of grant or assistance Employer identification number ☐ Yes 20-8441757 Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed non-cash assistance (g) Description of 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and (f) Method of valuation (book, FMV, appraisal, other) (e) Amount of noncash assistance 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States 6,000 (d) Amount of cash grant Enter total number of section 501(c)(3) and government organizations listed in the line 1 table (c) IRC section applicable 45-0431155 501c3 General Information on Grants and Assistance (p) EIN Enter total number of other organizations listed in the line 1 table the selection criteria used to award the grants or assistance? Bismarck Marathon ND 58504 (a) Name and address of organization (1) Big Brothers Big Sisters or government S 2nd St Name of the organization Bismarck Part II 009 Part I (2) <u>@</u> 3 3 9 3 8 6

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

Schedule I (Form 990) (2014)

Schedule I (F	Schedule I (Form 990) (2014) Bismarck Marathon	athon	2	20-8441757		Page 2
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	to Domestic Individitional space is neede	uals. Complete if the	he organization ansv	wered "Yes" to Form 990,	
	(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)	(e) Method of valuation (book, (f) Description of non-cash assistance FMV, appraisal, other)
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Part IV	Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.	vide the information	required in Part I, I	ine 2, Part III, colum	in (b), and any other addi	tional information.

SCHEDULE 0 (Form 990 or 990-EZ) Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

▶ 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.

Open to Public Inspection

Name of the organization

Employer identification number

Bismarck Marathon

20-8441757

Form 990, Part VI, Line 2 - Related Party Information Among Officers Carol Beiswanger Lynn Beiswanger

Treasurer

Director

Married

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990 No review was or will be conducted.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation No documents available to the public

Form 990, Part XI, Line 9 - Other Changes in Net Assets Explanation Timing differences \$ 195 Donated Services and Facilities \$ 64,686 Form **4562**

Department of the Treasury
Internal Revenue Service (99

Depreciation and Amortization

(Including Information on Listed Property)

Attach to your tax return.

▶ Information about Form 4562 and its separate instructions is at www.irs.gov/form4562.

OMB No 1545-0172

2014

ttachment sequence No

Name(s) shown on return Identifying number Bismarck Marathon 20-8441757 Business or activity to which this form relates Indirect Depreciation Part I **Election To Expense Certain Property Under Section 179** Note: If you have any listed property, complete Part V before you complete Part I. 500,000 1 Maximum amount (see instructions) 2 2 Total cost of section 179 property placed in service (see instructions) 2,000,000 3 Threshold cost of section 179 property before reduction in limitation (see instructions) 3 Reduction in limitation Subtract line 3 from line 2. If zero or less, enter -0-4 Dollar limitation for tax year Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions 5 6 (a) Description of property (b) Cost (business use only) (c) Elected cost Listed property. Enter the amount from line 29 7 8 8 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 9 Tentative deduction Enter the smaller of line 5 or line 8 9 Carryover of disallowed deduction from line 13 of your 2013 Form 4562 10 10 11 Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 12 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11 12 Carryover of disallowed deduction to 2015 Add lines 9 and 10, less line 12 13 Note: Do not use Part II or Part III below for listed property. Instead, use Part V Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions) Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions) 14 15 Property subject to section 168(f)(1) election 1,636 16 Other depreciation (including ACRS) Part III MACRS Depreciation (Do not include listed property.) (See instructions.) Section A 17 Õ 17 MACRS deductions for assets placed in service in tax years beginning before 2014 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B-Assets Placed in Service During 2014 Tax Year Using the General Depreciation System (b) Month and year (c) Basis for depreciation (d) Recovery (a) Classification of property (e) Convention (f) Method (g) Depreciation deduction period only-see instructions) service 19a 3-year property b 5-year property 7-year property C d 10-year property e 15-year property 20-year property S/L 25-year property 25 yrs Residential rental 27 5 vrs MM S/L property 27 5 yrs MM S/L MM Nonresidential real 39 yrs S/L property MM S/L Section C—Assets Placed in Service During 2014 Tax Year Using the Alternative Depreciation System 20a Class life b 12-year 12 yrs S/L 40-year S/L MM C 40 yrs Summary (See instructions.) Part IV Listed property Enter amount from line 28 21 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter 1,636 here and on the appropriate lines of your return Partnerships and S corporations—see instructions 23 For assets shown above and placed in service during the current year, enter the