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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.

Open to Public Inspection

OMB No 1545 0047

Α	For th	ie 2014 calen	dar year, or tax year begin	ning , 2014	l, and ending		_,
В	Check if	f applicable	C			D Employer ide	ntification number
	∏Ad	dress change	Friends Of The H	amilton Schools		36-389	2303
	Na	me change	Foundation, Inc.			E Telephone nu	mber
	\vdash	tial return	PO Box 1514			406-39	6-7279
	\vdash		Hamilton, MT 598	40		100 33	0 1213
	\vdash	al return/terminated				G Gross receipt	. \$ 1 000 02F
	\vdash	nended return	<u> </u>		TH(2) to	this a group return for s	
	Ap	plication pending	ļ.	officer	1 * *	• •	□''63 □'''0
			Same As C Above			re all subordinates inclu- 'No,' attach a list (see	ded? Yes No
<u></u>	Tax-e	exempt status	X 501(c)(3) 501(c) () ◀ (insert no) 4947(a)(1) o	r 527		
J	Web	osite: > N/	'A		H(c) G	roup exemption number	<u> </u>
K	Form	of organization	X Corporation Trust	Association Other ► L	Year of formation 1	.993 M State o	of legal domicile MT
Pa	art I	Summar	ν				
	1	Briefly descri	be the organization's missi	on or most significant activities T	he foundat:	ion exists t	o create and
a		maintain	a financial base	to support the non fu	inded needs	of the Ham	ilton Schools
Activities & Governance	ł			erships for their gradu			
2 ₆ E		educatio		_			
%	2	Check this bo	ox F If the organization	n discontinued its operations or disp	posed of more that	an 25% of its net a	assets
<u>}</u> ;ၓ	3	Number of vo	oting members of the gover	ning body (Part VI, line 1a)		3	11
₹ %	4			s of the governing body (Part VI, lin-		4	11
É	5			calendar year 2014 (Part V, line 2a	a)	5	0
ੂ≅	6		of volunteers (estimate if	= :		6	0
8				Part VIII, column (C), line 12		7a	
) 	b	Net unrelated	business taxable income	from Form 990-T, line 34		71	<u> </u>
¬`	<u> </u>				<u> </u>	Prior Year	Current Year
=¹o			and grants (Part VIII, line			1,750	6,000.
øĔ.			rice revenue (Part VIII, line		<u> </u>		<u> </u>
ਤਿ∤ਮੁੰਨ ਲਾ Revenue			ncome (Part VIII, column (A			193,997	205,100.
ლ ლ				nes 5, 6d, 8c, 9c, 10c, and 11e)			
			`	(must equal Part VIII, column (A), I	line 12)	195,747	
	1		ımılar amounts paıd (Part I			54,057	. 62,965.
	14	Benefits paid	to or for members (Part I)	(, column (A), line 4)			<u></u>
	15	Salaries, othe	er compensation, employee	e benefits (Part IX, column (A), line:	s 5-10)		Ţ
Expenses	16a	Professional	fundraising fees (Part IX, o	olumn (A), line 11e)			
en	Ь.	Total fundrais	sing expenses (Part IX, col	umn (D) line 25) ►			
ᄍ			ses (Part IX, column (A), lir			40 100	F1 554
					<u> </u>	40,102	51,554.
				equal-Part X polumn (A); line 25)	<u> </u>	94,159	
- X A		Revenue less	expenses Subtract line 1	1		101,588	
Not Assets or Fund Balanco		T	(D 1)(1 10	(i)	Beç	inning of Current Yea	
Bag	20		(Part X, line 16)		<u> </u>	2,609,632	
2 5	21		s (Fart X, line 20)		ļ	90,901	. 108,114.
		Net assets or	fund balances. Subtract III	ne 31 from line 20 1 15/2		2,518,731	. 2,627,273.
Pa	rt II	Signatur	re Block				
Unde	r penalti	es of perjury, I de	eclare that I have examined this retu	irn, including accompanying schedules and state all information of which preparer has any knowledge.	ements, and to the bes	t of my knowledge and b	pelief, it is true, correct, and
comp	Diete De	ciaration of prepa	erer (other than officer) is based on a	all Information of which preparer has any knowled			
		J. St.	an Stule			11/16/15	· —— <u>— · -—</u> -
Sig	ın	Signatu	re of officer			Date / /	
He	re		n Steele		Pr	esident	
			print name and title				
		Print/Type p	preparer's name	Preparer's signature	Date // /	Check X if	PTIN
Pai	id	Thomas	D. Henderson	Lokul	11/16/15	self-employed	P01293532
	pare			Associates, PLLC			· · · · · · · · · · · · · · · · · · ·
	e Onl					Firm's EIN ► 8	1-0488466
		_	Hamilton, MT				06) 363-6306
May	the IF	RS discuss th		shown above? (see instructions)		(4)	X Yes No
			leduction Act Notice, see t		TEEA01131	05/28/14	Form 990 (2014)

Forn	n 990 (2014) Friends Of The Hamilton Schools	36-3	89230	03	F	age 2
	rt III Statement of Program Service Accomplishments					
	Check if Schedule O contains a response or note to any line in this Part III					_ _
1	Briefly describe the organization's mission					
	The foundation exists to create and maintain a financial base to				<u>on_</u> _	
	funded needs of the Hamilton Schools system and to fund scholars	<u>hips_f</u>	or th	<u>leir</u>		
	graduates attending post graduate education.		- - -		- - -	
_	D. III					
2	Did the organization undertake any significant program services during the year which were not listed on the pri Form 990 or 990-EZ?	10.		Vaa	₩.	M.
	If 'Yes,' describe these new services on Schedule O			Yes	A	No
3	Did the organization cease conducting, or make significant changes in how it conducts, any program se	nucas?	П	Yes	v	No
3	If 'Yes,' describe these changes on Schedule O.	., VICCS	LJ	163	Δ	110
4	· · · · · · · · · · · · · · · · · · ·	vices, as i	neasure	ed hv i	exnen	ses
•	Describe the organization's program service accomplishments for each of its three largest program service Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocation and revenue, if any, for each program service reported	ns to othe	rs, the	total e	xpens	es,
4 8	a (Code:) (Expenses \$ 61,365. including grants of \$ 61,365.) (F	Revenue	\$	20	5,7	36.)
	Thirty-nine scholarships were paid out to colleges and universit	ies th	rough	out	the	
	nation from earnings on the funds received from various contribu	tors s	ince	199	3.	The
	scholarships are paid based on criteria established when the fun-					
	Eight grants were paid out to provide the necessary funds for sp					the
	Hamilton Schools system that were non funded within the normal s	<u>chools</u>	_ope1	<u>cati</u>	ng	
	budgets.					
			. – –			
			-			
			·			
	(Code) (Expenses \$ 1,600. including grants of \$ 1,600.) (F	Zevenue	Ś		5 2	54.)
41	Four grant was paid out to provide the necessary funds for speci			e in		
	Hamilton Schools system that were not funded within the normal s					- - -
	budgets.	5110013	ope.	Lac I	<u> 19</u>	
	budgets.					- -
			·			
			·			
4 0	(Code) (Expenses \$ including grants of \$) (F	Revenue	\$)
		_				
				-		- - -
A	Other program conuces (Describe in Schodule O.)					
40	Other program services (Describe in Schedule O.) (Expenses \$ including grants of \$) (Revenue \$				١	
4 0	Total program service expenses • 62,965.				,	
BAA	TEEA0102L 05/28/14			Forn	n 990	(2014)

			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	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	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		Х
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		Х
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		Х
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	Х	
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		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		<u>X</u>
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		Х
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	х	
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VIII, IX, or X as applicable			.
а	Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a		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	11 b		Х
С	Did the organization report an amount for investments – program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII	11 c		Х_
	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	11 d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e		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	11 f		Х
	Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, and XII	12a		Х
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		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		X
14 a	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	l	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		Х
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 (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? If 'Yes,' complete Schedule G, Part III	19		Х
	Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20		X
b	If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 b		L

	Officerist of required softwares (continued)		1./	
			Yes	No
	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	-	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	х	
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		Х
24	a 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		Х
	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		
25	a 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		Х
1	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		Х
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		Х
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		Х
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)			
í	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		X
ı	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28ь		X
	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		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		X
30	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		Х
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		Х
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		Х
35 a	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
ŀ	o 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		Х
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		Х
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	Х	
BAA	·	Form	990 ((2014)

Check if Schedule O contains a response or note to any line in this Part V				
Check it deficable of contains a response of note to any line in this rate.	-:		Yes	No
1 a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a :	,[
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	<u>-</u>	7	}]
c Did the organization comply with backup withholding rules for reportable payments to vendors and i		4	l	
(qambling) winnings to prize winners?	eportable gairing	1 c		X
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax State-				
ments, filed for the calendar year ending with or within the year covered by this return	2a ()		
b If at least one is reported on line 2a, did the organization file all required federal employment	nt tax returns?	2 b		
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see in	structions)			
3 a Did the organization have unrelated business gross income of \$1,000 or more during the year	ar?	3 a		X
b If 'Yes' has it filed a Form 990-T for this year? <i>If 'No' to line 3b, provide an explanation in Schedule 0</i>		3 b		
4 a At any time during the calendar year, did the organization have an interest in, or a signature or oth financial account in a foreign country (such as a bank account, securities account, or other to	er authority over, a	4 a		Х
b If 'Yes,' enter the name of the foreign country. ►	mandar accounty.	70	l	
See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial	Accounts (FRAR)	-{	ĺ	[
• ,		5 a		- x
5 a Was the organization a party to a prohibited tax shelter transaction at any time during the ta		ļ		X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shell	ter transaction?	5 b		<u> </u>
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?		5 c		<u> </u>
6 a Does the organization have annual gross receipts that are normally greater than \$100,000, a solicit any contributions that were not tax deductible as charitable contributions?	and did the organization	6 a		х
b If 'Yes,' did the organization include with every solicitation an express statement that such contribution not tax deductible?		6 b		
7 Organizations that may receive deductible contributions under section 170(c).		0.5		
a Did the organization receive a payment in excess of \$75 made partly as a contribution and p	partly for goods and			
services provided to the payor?	and group and	7 a		Х
b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	•	7 b		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it	was required to file			v
Form 8282?	ii	7 c		X
d If 'Yes,' indicate the number of Forms 8282 filed during the year	7 d			<u> </u>
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal		7 e	_	X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal ber		7 f		_^
g If the organization received a contribution of qualified intellectual property, did the organization file as required?	Form 8899	7 g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the Form 1098-C?	e organization file a	7 h		
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?		9 a		
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related pe	rson? .	9 b		
10 Section 501(c)(7) organizations. Enter:		T.,		
a Initiation fees and capital contributions included on Part VIII, line 12	10 a			
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10 Ь	7	ļ]
11 Section 501(c)(12) organizations. Enter:		7		
a Gross income from members or shareholders	11 a	1	ļ	ł
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11 Ъ		ļ	
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of	L	12a	1	
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year	126	<u> </u>		
13 Section 501(c)(29) qualified nonprofit health insurance issuers.		٦		
a is the organization licensed to issue qualified health plans in more than one state?		13a	1	
Note. See the instructions for additional information the organization must report on Schedu	le O		\Box	
b Enter the amount of reserves the organization is required to maintain by the states in			ļ	
which the organization is licensed to issue qualified health plans	13 Ь	_	1	
c Enter the amount of reserves on hand	13 c	_	!	
14a Did the organization receive any payments for indoor tanning services during the tax year?		14a	<u></u>	Х
b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in	Schedule O	146		ــــــــــــــــــــــــــــــــــــــ
BAA TEEA0105L 05/28/14		Form	1 990	(2014

Form 990 (2014) Friends Of The Hamilton Schools Page 6 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 1 a Enter the number of voting members of the governing body at the end of the tax year 1 a 11 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 1 h 11 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other ̈́χ officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 Х of officers, directors, or trustees, or key employees to a management company or other person? 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? $\overline{\mathbf{x}}$ 5 X Did the organization have members or stockholders? 6 7 a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 7 a 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? 7 b Х Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following. X a The governing body? 8 a 8 b X b Each committee with authority to act on behalf of the governing body? 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 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10 a X 10 a Did the organization have local chapters, branches, or affiliates? 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 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? X 11 a b Describe in Schedule O the process, if any, used by the organization to review this Form 990. See Schedule O X 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise Х 12b to conflicts? c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in X Schedule O how this was done 12c 13 Х 13 Did the organization have a written whistleblower policy? 14 Did the organization have a written document retention and destruction policy? 14 Х 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? Х a The organization's CEO, Executive Director, or top management official 15 a b Other officers or key employees of the organization 15 b 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? Х 16 a 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? 16 b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed > None 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 Another's website Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to 19 the public during the tax year See Schedule O State the name, address, and telephone number of the person who possesses the organization's books and records. 20 Jill Hansen-Twardoski 406-396-7279

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

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

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

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

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

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

				(C))					
(A) Name and Title	(B) Average hours per	15	s both dırı	(do n box, an o ector	office: /trust		1	(D) Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of other compensation
	per week (list any hours for related organiza- trons below dotted line)	or director	institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099 MISC)	related organizations (W-2/1099-MISC)	from the organization and related organizations
(1) Ron Meuchel	1									
Director	0	X						0.	0.	0.
(2) Russell Hughes	1_1_			\		İ .				
Director	0	X					Ĺ_	0.	0.	0.
(3) Cynthia Favara	11									
Director	0	X				<u> </u>	<u> </u>	0.	0.	0.
_(4) Tom Grymes	11									
Director	0	X	Ш			<u> </u>	<u> </u>	0.	0.	0.
_(5) John_Berglund	1_1_	ļ		ĺ		 			_	_
Director	0	X	Ш	<u> </u>	<u> </u>	_	_	0.	0.	0.
_(6) Virgina Vinal	1_1									
Director	0	X	\vdash	<u> </u>	├			0.	0.	0.
	1-1	 		ļ						
Director	0	X	Н			 	_	0.	0.	0.
(8) Rick Lubke	1-1	X	l	Х					0	
Vice President	3	^		<u> </u>	┝	 		0.	0.	0.
(9) Ellen Ryter Director	1-3-	x		l				0.	0.	0.
(10) Don Faris	1	╁≏	\vdash	├─	├-		├─	ļ —		
Director	-	X						0.	ο.	0.
(11) Jean Steele	2	1^	\vdash	-	┢╌	┼	-	<u> </u>		<u> </u>
President	1-5-	X		x	}	}		0.	О.	0.
(12) Jill Hansen-Twardoski	3	<u> </u>		╫	 	1	\vdash		-	<u></u>
Treasurer	7-5-	1		х	l			0.	О.	0.
(13) Ronda Hansen	0	†	-	 	Г	1	\vdash	<u>`</u>	ļ 	<u>-</u> -
Secretary	-15-			x				ο.	٥.	0.
(14)								- -		<u>-</u>
		1			1	1				

Part VII Section A. Officers, Directors, Tru		Key	Em	1pic	oye	es,	and	Hignest Con	ipensated Emp	oyees	(conti	nued)
	(B)			((•							
(A)	Average	(do	not c	Pos	more	e than	one	(D)	(E)		(F)	
Name and title	hours per week	offi	, unie cer ai	nd a	direct	is bot or/trus	tee)	Reportable compensation from	Reportable compensation from	amo	stimated unt of otl	her
	(list any hours	9 7	Inst	Officer	Ę.	emp	g	the organization (W 2/1099-MISC)	related organizations (W-2/1099-MISC)	f	pensation the	
	for related	lrec o	톲	ਫੁ	3	loye	뤊			an	janizatio d related anization	d
	organiza tions	10 E	쿒		Key employee	le pin				u u	J. 11201.01	
-	below dotted	or director	nstitutional trustee		0	Sua		j				
	line)	"	ĕ			Highest compensated employee						
(15)	ļ <u> </u>	├-		 	-	}-	-					
	 -	1			1		'					
(16)						<u> </u>						
							<u> </u>					
(17)						ł	ł					
		<u> </u>		_	<u> </u>		<u> </u>					
(18)				{		l						
(10)		├	\vdash	-								
(19)	{- <i>-</i>	1				ĺ						
(20)	 	├		-	 	-	一					
	{	1			ĺ							
(21)						1						
(22)		Ţ										
		<u> </u>				ļ						
(23)		-										
(24)		├			_							
(2-)		ţ			ļ				,			
(25)		\vdash			-		-					
		1					Ĺ					
1 b Sub-total	•						>	0.	0.			0.
c Total from continuation sheets to Part VII, Secti	оп А							0.	0.			0.
d Total (add lines 1b and 1c)	1- 4b 1							0.	0.			0.
2 Total number of individuals (including but not limited from the organization ► 0	to those i	ıstea	abo	ve) v	wno	recei	vea	more than \$100,00	or reportable comp	ensatio	n	
nom the organization (_						Yes	No
3 Did the organization list any former officer, direct	tor or tru	ctoo	kos	, or	ndo	VAA	or h	nahest compans	ted employee		100	1.0
on line 1a? If 'Yes,' complete Schedule J for suc	h individu	ial	, nc	y C11	ipio.	,,	0, ,	ngriest compensa	ica cripioyec	3		X_
4 For any individual listed on line 1a, is the sum of	reportab	le co	mpe	ensa	tion	and	oth	er compensation	from			
the organization and related organizations greate such individual	er than \$1	50,0	003	If '\	es'	com	plet	e Schedule J for		4		Х
5 Did any person listed on line 1a receive or accru	e compen	estic	n fr	om	anv	unre	late	d organization or	individual	 '		<u> </u>
for services rendered to the organization? If 'Yes	s,' comple	te So	chec	lule	J fc	r suc	ch p	erson		5		X
Section B. Independent Contractors			1		-1		AL -		4100.000 (
1 Complete this table for your five highest compen compensation from the organization Report compen	sated indi sation for	epen the c	aen alen	t coi dar	ntra year	ctors endi	เกล ing v	nt received more to with or within the or	nan \$100,000 ot ganization's tax year			
(A)								(B)		(C)	
Name and business add	ress ————				_			Description	of services	Compe	nsatio	חור
								ļ				
								 				
							_	 				
2 Total number of independent contractors (including t	out not limi	ited to	o the	ose I	ıste	d abo	ve)	who received more	than			
\$100,000 of compensation from the organization		_										
											_	

-	Check if Schedule O contains a response or note to any	line in this Part VI	IL		
		(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	1 a Federated campaigns 1 a b Membership dues 1 b c Fundraising events 1 c d Related organizations 1 d e Government grants (contributions) 1 e				
ntributio d Other	f All other contributions, gifts, grants, and similar amounts not included above 1 f 6,000. g Noncash contributions included in lines 1a-1f \$				
<u>ම</u> දි	h Total. Add lines 1a-1f	6,000.			
ILE	Business Code				Į.
Program Service Revenue	2a b c d				
g	f All other program service revenue				
<u>~</u>	g Total. Add lines 2a-2f 3 Investment income (including dividends, interest and other similar amounts) 4 Income from investment of tax-exempt bond proceeds	69,959.	69,959.		
	For a Royalties (i) Real (ii) Personal (ii) Personal (iii) Personal (iv) Personal (iv) Personal (iv) Personal	,	-		
	c Rental income or (loss)				
	d Net rental income or (loss)				
	7 a Gross amount from sales of assets other than inventory 924,876.				
	b Less: cost or other basis and sales expenses 789,735. c Gain or (loss) 135,141.	135,141.	135,141.		
Other Revenue	8 a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18 a b Less: direct expenses c Net income or (loss) from fundraising events	,			
٥	9 a Gross income from garning activities				
ļ	b Less: direct expenses . b c Net income or (loss) from gaming activities				
	10a Gross sales of inventory, less returns and allowances				
	b Less cost of goods sold . b				
ļ	c Net income or (loss) from sales of inventory . Miscellaneous Revenue Business Code			<u> </u>	
- {			-	li .	1
	l1a			<u> </u>	
	<u> </u>			<u> </u>	
	d All other revenue		-		
	e Total. Add lines 11a-11d				
J	12 Total revenue. See instructions	211,100.	205, 100.	0.	0.
	. T.a. revenue: 600 managnons	211,100.	۷۷۵, ۱۷۷.	UU.	U.

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 (D) Do not include amounts reported on lines Total expenses Management and Fundráising Program service 6b, 7b, 8b, 9b, and 10b of Part VIII. general expenses expenses expenses Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21 1,600 1,600 Grants and other assistance to domestic individuals. See Part IV, line 22 2 61,365 61,365 Grants and other assistance to foreign organizations, foreign governments, and for-eign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees 0 0 0 0. Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 0 0 0 0. Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) Other employee benefits 10 Payroll taxes 11 Fees for services (non-employees): a Management **b** Legal c Accounting 17,629 17,629 d Lobbying e Professional fundraising services. See Part IV, line 17 f Investment management fees 31,214 31,214 g Other. (If line 11g amt exceeds 10% of line 25, column 762 762 (A) amount, list line 11g expenses on Schedule (1) 199 199. 12 Advertising and promotion 13 Office expenses 111 111 14 Information technology 15 Royalties 16 Occupancy 17 Travel Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 20 Interest 21 Payments to affiliates 22 Depreciation, depletion, and amortization 23 1,559 1,559 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.). 24 50 50 Volunteer Recognition 30 30 <u>Licenses</u> and Fees e All other expenses 62,965 51,554 0. 25 Total functional expenses. Add lines 1 through 24e 114,519 Joint costs. Complete this line only if the organization reported in column (B) 26 joint costs from a combined educational campaign and fundraising solicitation Check here ► if following

SOP 98-2 (ASC 958-720)

Page 11

Balance Sheet

Part X

Check if Schedule O contains a response or note to any line in this Part X (A) Beginning of year (B) End of year 1 21,755. 23, 136 Cash - non-interest-bearing 2 145,571. 91,911 2 Savings and temporary cash investments 3 3 Pledges and grants receivable, net 4 Accounts receivable, net Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L. 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L 6 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other basis. Complete Part VI of Schedule D 10a 10b 10 c b Less accumulated depreciation 11 Investments - publicly traded securities 2,440, 901 11 2,621, 710 12 12 Investments - other securities See Part IV, line 11 13 13 Investments - program-related See Part IV, line 11 14 Intangible assets 15 Other assets See Part IV, line 11 24 15 11 16 16 Total assets. Add lines 1 through 15 (must equal line 34) 2.609. 632 2,735, 387. 1,434.17 Accounts payable and accrued expenses . 151 17 18 Grants payable 90,750 18 106,680. 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 Escrow or custodial account liability Complete Part IV of Schedule D 21 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule ${\sf L}$ 22 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 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 90,901 108,114. Organizations that follow SFAS 117 (ASC 958), check here > X and complete Net Assets or Fund Balances lines 27 through 29, and lines 33 and 34. 27 -4,735. Unrestricted net assets 28 Temporarily restricted net assets 383,054 446,650. 29 Permanently restricted net assets 2,135,677 185. Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. Capital stock or trust principal, or current funds 30 31 Paid-in or capital surplus, or land, building, or equipment fund Retained earnings, endowment, accumulated income, or other funds 32 Total net assets or fund balances 33 33 2,518,731 2,627,273 Total liabilities and net assets/fund balances 2,609,632 2,735,387 BAA Form 990 (2014)

Forr	n 990 (2014) Friends Of The Hamilton Schools	<u>36-38923(</u>)3	Pa	age 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI			_	X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	2	11,	100.
2	Total expenses (must equal Part IX, column (A), line 25)	2	1	14,	519.
3	Revenue less expenses. Subtract line 2 from line 1	3		96,	581.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			731.
5	Net unrealized gains (losses) on investments	5			891.
6	Donated services and use of facilities	6	<u>-</u>		
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O). See Schedule O	9		15,	930.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	2,6	 27,:	273.
Pai	t 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 X Accrual Other		_		
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O				
2 a	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 re	viewed on a			
	separate basis, consolidated basis, or both	viewed on a			
	Separate basis Consolidated basis Both consolidated and separate basis				
t	Were the organization's financial statements audited by an independent accountant?		2 b	<u></u>	Х
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sibasis, consolidated basis, or both:	eparate			
	Separate basis Consolidated basis Both consolidated and separate basis				
	ات المادة : 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?	audit,	2c		<u> </u>
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			•	
3 a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin Audit Act and OMB Circular A-133?	gle			v
		1 41	3 a		<u> x</u>
t	If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the require or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	g audit	3 ь		
BAA			تنب	000	(2014)
אאט			FULL	・マフリ	(2014)

Form 990 (2014)

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

Open to Public Inspection

Name	of the organization Friends Of	The Hamilton	Schools			Employer identifica	tion number
	Foundation	, Inc.				36-389230	3
Par							ions.
The	organization is not a private foun	dation because it is (For lines 1 through 11,	check or	nly one	box.)	
1	A church, convention of church	nes, or association of c	hurches described in sec t	tion 170(l	b)(1)(A)(i).	
2	A school described in section	on 170(b)(1)(A)(ii). (At	tach Schedule E)				
3	A hospital or a cooperative l	hospital service organ	ization described in sec	tion 170)(b)(1)(<i>A</i>	\ X (iii) .	
4	A medical research organiza	ation operated in conj	unction with a hospital (describe	d in sec	tion 170(b)(1)(A)(iii) E	nter the hospital's
	name, city, and state:						
5	An organization operated for the 170(b)(1)(A)(iv). (Complete	he benefit of a college of Part II.)	or university owned or op-	erated by	a gove	nmental unit described in	section
6	A federal, state, or local gov						
7	An organization that normally in section 170(b)(1)(A)(vi).	(Complete Part II.)			ental un	t or from the general pub	lic described
8	A community trust described						
9	An organization that normally from activities related to its ex investment income and unre June 30, 1975 See section	empt functions – subje lated business taxabl 509(a)(2). (Complete	ct to certain exceptions, a e income (less section Part III)	and (2) n 511 tax)	o more t from bi	han 33-1/3% of its suppo usinesses acquired by t	ort from aross
10	An organization organized a	•	•	-			
11	An organization organized a or more publicly supported or lines 11a through 11d that d	organizations describe	ed in section 509(a)(1) (or sectio	n 509(a	X2). See section 509(a)	It the purposes of one (3). Check the box in
а		ion operated, supervise					the supported on You must
b	Type II. A supporting organize management of the supporting must complete Part IV, Section 11.	i organization vested in	controlled in connection the same persons that co	with its ontrol or	support manage	ed organization(s), by l the supported organizati	naving control or on(s) You
С	[m] =		tion operated in connection plete Part IV, Sections	n with, ar A, D, an c	nd function d E.	onally integrated with, its	supported
d	Type III non-functionally integrated The instructions) You must com	rated. A supporting orgorganization generally iplete Part IV, Section	panization operated in cor must satisfy a distribute See A and D, and Part V.	nection t tion requ	with its s uiremen	supported organization(s) t and an attentiveness	that is not requirement (see
е		ation received a writt	en determination from t	the IRS t			
	Enter the number of supported	• •	supporting organization				
	Provide the following information	•	d organization(s)			•	L
9	(i) Name of supported	(ii) EIN	(iii) Type of organization	(iv) i	s the	(v) Amount of monetary	(vi) Amount of other
	organization	(1) 2.11	(described on lines 1-9 above or IRC section (see instructions))	organizat in your g docum	ion listed	support (see instructions)	support (see instructions)
				Yes	No		
<u>(A)</u>							
(B)							·
(C)							
(D)		 		 			
(E)							
Total						! 	
BAA	For Paperwork Reduction Act N	lotice, see the Instruc	tions for Form 990 or 9	990-EZ.		Schedule A (Form	1 990 or 990·EZ) 2014

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 I fithe organization fails to qualify under the tests listed below, please complete Part III)

Sec	tion A. Public Support						
Cale beg	endar year (or fiscal year inning 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')	28,690.	14,980.	84,508.	1,750.	6,000.	135,928.
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						_ 0
3	The value of services or facilities furnished by a governmental unit to the organization without charge.						0.
4 5	Total. Add lines 1 through 3 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).	28,690.	14,980.	84,508.	1,750.	6,000.	135,928.
6	Public support. Subtract line 5 from line 4						135,928.
Sec	tion B. Total Support		· · · · · · · · · · · · · · · · · · ·				
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7	Amounts from line 4	28,690.	14,980.	84,508.	1,750.	6,000.	135,928.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	63,232.	59,243.	64,294.	62,948.	69,959.	319,676.
9	Net income from unrelated business activities, whether or not the business is regularly carried on						0.
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						0.
11	Total support. Add lines 7 through 10 .	,					455,604.
12	Gross receipts from related activ	ities, etc (see inst	tructions)			12	0.
13	First five years. If the Form 990 is organization, check this box and	for the organization stop here	's first, second, thir	d, fourth, or fifth to	ax year as a section	n 501(c)(3)	▶ []
	tion C. Computation of Pul						
	Public support percentage for 20	•	•	e 11, column (f))		14	29.83%
	Public support percentage from 2 33-1/3% support test - 2014. If			nov on line 13 ar	nd the line 14 is 3	15 13% or more of	31.75 %
	and stop here. The organization	qualifies as a pub	olicly supported or	ganızatıon	•		▶ []
t	33-1/3% support test – 2013. If t and stop here. The organization				a, and line 15 is 3	33-1/3% or more, c	heck this box
17 a	10%-facts-and-circumstances te or more, and if the organization the organization meets the 'facts'	meets the 'facts-a	ınd-cırcumstances	test, check this	box and stop her	e. Explain in Part \	VI how
	or more, and if the organization organization meets the facts-and	meets the 'facts-a d-circumstances' t	ind-circumstances est. The organiza	' test, check this tion qualifies as a	box and stop here a publicly supporte	e. Explain in Part \ ed organization	VI how the ►
	Private foundation. If the organiz	zation did not che	ck a box on line 1	3, 16a, 16b, 17a,			<u></u>
BAA					Sch	edule A (Form 990	or 990-EZ) 2014

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)

	tion A. Public Support						
Calen	dar year (or fiscal yr 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.						
7 a	Total. Add lines 1 through 5 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 line 6)						
Sec	tion B. Total Support						
Calen	dar year (or fiscal yr beginning in) >	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
9	Amounts from line 6 .						
10 a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
							
	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.						
c	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b						
c	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.						
c 11	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included in line 10b, whether or not the business is						
c 11 12	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in						
11 12 13	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on. Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI). Total support. (Add lines 9.	is for the organiza	ation's first, secon	nd, third, fourth, o	or fifth tax year as	a section 501(c)(3	3)
12 13 14	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI). Total support. (Add lines 9, 10c, 11 and 12) First five years. If the Form 990	stop here		nd, third, fourth, o	or fifth tax year as	a section 501(c)(3	3)
11 12 13 14 Sect	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI). Total support. (Add lines 9, 10c, 11 and 12) First five years. If the Form 990 organization, check this box and	stop here blic Support P	ercentage			a section 501(c)(3	3) ▶ □
11 12 13 14 Sect	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI). Total support. (Add lines 9, 10c, 11 and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Pul	stop here blic Support P 14 (line 8, column	ercentage n (f) divided by lin				<u> </u>
11 12 13 14 Sec:	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11 and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Pul Public support percentage from	stop here blic Support P 14 (line 8, columi 2013 Schedule A,	ercentage n (f) divided by lin Part III, line 15	ne 13, column (f))		15	8
11 12 13 14 Sect 15 16 Sect	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on. Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.). Total support. (Add lines 9, 10c, 11 and 12.) First five years. If the Form 990 organization, check this box and tion C. Computation of Pul Public support percentage for 20.	blic Support P 014 (line 8, column 2013 Schedule A, restment Incor	ercentage n (f) divided by lir Part III, line 15 ne Percentage	ne 13, column (f))		15	8
11 12 13 14 Sect 15 16 Sect 17	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11 and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Public support percentage from tion D. Computation of Invition D. Computation D. Compu	blic Support P 014 (line 8, column 2013 Schedule A, restment Incor or 2014 (line 10c,	ercentage n (f) divided by lir Part III, line 15 ne Percentage column (f) divide	ne 13, column (f)) . e d by line 13, colu		15	06 08
11 12 13 14 Sect 15 16 Sect 17 18	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on. Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) Total support. (Add lines 9, 10c, 11 and 12.) First five years. If the Form 990 organization, check this box and tion C. Computation of Public support percentage from the support percentage from tion D. Computation of Investment income percentage from the section of the support percentage from	blic Support P 014 (line 8, column 2013 Schedule A, restment Incor or 2014 (line 10c, rom 2013 Schedule the organization	ercentage n (f) divided by lir Part III, line 15 ne Percentage column (f) divide le A, Part III, line did not check the	ne 13, column (f)) . e d by line 13, colu 17 box on line 14, a	mn (f)) and line 15 is mor	15 16 17 . 18 e than 33·1/3%, ar	00 00 00 00
11 12 13 14 Sect 15 16 Sect 17 18 19a	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11 and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Public support percentage for 20 Public support percentage from Investment income percentage finvestment income percentage for 33-1/3% support tests — 2014. If	blic Support P 114 (line 8, column 2013 Schedule A, restment Incor or 2014 (line 10c, rom 2013 Schedu the organization this box and stop the organization	ercentage n (f) divided by lir Part III, line 15 ne Percentage column (f) divided le A, Part III, lined did not check the here. The organ did not check a b	ne 13, column (f)) d by line 13, column 17 box on line 14, and a column box on line 14 or l	mn (f)) and line 15 is moras a publicly suppine 19a, and line	15 16 17 18 e than 33·1/3%, are orted organization 16 is more than 33	% % % % % md line 17 ▶ □ 3-1/3%, and □

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.)

) T	Littin A. Ali 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		
3	a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If 'Yes,' answer (b) and (c) below	3a	••	
ł	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		<i>*</i> -
•	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	3с		
4:	a 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		
•	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		
5 8	a 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	***	
١	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		
(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)	- <u>*</u> 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	_	
9 2	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		
ł	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	9с		}
10 a	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations)? If 'Yes,' answer (b) below	10a	<u> </u>	
t	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.)	 10ь		

Schedule A (Form 990 or 990-EZ) 2014 Friends Of The Hamilton Schools	36-3892303	ſ	2age 5
Part IV Supporting Organizations (continued)			
11 Has the organization accepted a gift or contribution from any of the following persons?	Γ—	Yes	No
 a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, governing body of a supported organization? 	the 11a	a	
b A family member of a person described in (a) above?	111	5	
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 110	;	<u> </u>
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 at or elect at least a majority of the organization's directors or trustees at all times during the tax year? If 'No,' desc Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization If the organization had more than one supported organization, describe how the powers to appoint and/or directors or trustees were allocated among the supported organizations and what conditions or restriction applied to such powers during the tax year	cribe in or's activities or remove		
2 Did the organization operate for the benefit of any supported organization other than the supported organization at that operated, supervised, or controlled the supporting organization? If 'Yes,' explain in Part VI how provident to the purposes of the supported organization(s) that operated, supervised, or controlled supporting organization	riding such		'
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.	ustees	-] ,
of each of the organization's supported organization(s)? If No,' describe in Part VI how control or manage supporting organization was vested in the same persons that controlled or managed the supported organization.	gement of the 1		
Section D. All 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 organization's tax year, (1) a written notice describing the type and amount of support provided during the year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copie organization's governing documents in effect on the date of notification, to the extent not previously provided the provious of the date of notification or the date of notification.	ne prior tax s of the		1
Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the support organization(s) or (ii) serving on the governing body of a supported organization? If 'No,' explain in Part the organization maintained a close and continuous working relationship with the supported organization.	orted VI how		
3 By reason of the relationship described in (2), did the organization's supported organizations have a sign voice in the organization's investment policies and in directing the use of the organization's income or at all times during the tax year? If 'Yes,' describe in Part VI the role the organization's supported organization this regard	ssets at	<u></u>	
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	ty (see instructions).		
2 Activities Test. Answer (a) and (b) below.		Yes	No
a Did substantially all of the organization's activities during the tax year directly further the exempt purpos	es of the	1.00	1
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 organizations are supported organizations, and how the organization determined that these activities of substantially all of its activities.	orted zation was	a	
•	 -	+	
b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or the organization's supported organization(s) would have been engaged in? If 'Yes,' explain in Part VI the the organization's position that its supported organization(s) would have engaged in these activities but organization's involvement.	reasons for	ь	
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 t each of the supported organizations? <i>Provide details in Part VI</i>	rustees of	a	
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each supported organizations? If 'Yes,' describe in Part VI the role played by the organization in this regard	of its	ь	
DAA Coha	dula A (Form 000 or 00	70 E.Z.	2014

1	Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nother Type III non-functionally integrated supporting organizations must complete	ovembe	r 20, 1970 See instruct	ions. All
Sec	ction A — Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
$\overline{2}$	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		
Sec	tion 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):			
	Average monthly value of securities	1a		
	Average monthly cash balances	1b		
	Fair market value of other non-exempt-use assets	1c		
	Total (add lines 1a, 1b, and 1c)	1d		
•	Discount claimed for blockage or other factors (explain in detail in Part VI)			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3		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		
Sec	tion 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		<u> </u>
_4	Enter greater of line 2 or line 3	4		<u> </u>
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 (see instructions).	egrated	Type III supporting or	ganızatıon
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Par		ipporting Organizat	ions (continuea)	
<u>Sec</u>	tion D – Distributions			Current Year
_1	Amounts paid to supported organizations to accomplish exempt pul	rposes		·
2	Amounts paid to perform activity that directly furthers exempt purposes on excess of income from activity	of supported organizations	,	
3	Administrative expenses paid to accomplish exempt purposes of su	ipported 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 ${\bf Part\ VI}$). See instructions	on is responsive (provide o	details	
9	Distributable amount for 2014 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
Sec	tion 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			
а				
b		1		
С	1			
d	1	,	<u> </u>	<u> </u>
е	From 2013		· · · · · · · · · · · · · · · · · · ·	
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years .			
h	Applied to 2014 distributable amount	21 1 1 1 1 1	,	
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. \$		· -	
а	Applied to underdistributions of prior years			L
	Applied to 2014 distributable amount			
	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				
С				
d	Excess from 2013			

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e Excess from 2014

Schedule A (Form 990 or 990-EZ) 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).

Part II, Line 17a - 10% Facts and Circumstances Test - Current Year

Facts and Circumstances Statement

The Friends of the Hamilton Schools Foundation normally receives over 1/3 of its financial support from donations from the general public. During 2014, the board realized the organization was in danger of falling below this percentage and created a Fund Raising Committee to develop a permanent program to continuously solicit funds from the general public. The program consists of the creation of a website for the foundation which accepts on line donations, the utilization of alumni database to solicit funds through mass mailing and emailing, the organization of fund raising events, and the recruitment of new scholarships.

This organization benefits the general public in our school district of Hamilton, Montana. It provides scholarships to local high school graduates and the board is comprised of a broad spectrum of community members, including current and retired educators, attorneys, hospital administrators, accountants, building contractors, small business owners, and others.

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

2014

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

Friends Of The Hamilton Schools Foundation, Inc. 36-3892303 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 Aggregate value of contributions to (during year) 5,500 Aggregate value of grants from (during year). 3,500 Aggregate value at end of year 21,755 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds X No are the organization's property, subject to the organization's exclusive legal control? |Yes 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 X No Yes impermissible private benefit? 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 **2** a 2 b b Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a) **2** c d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year > 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, No Yes and enforcement of the conservation easements it holds? 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)? 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 Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III 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: Revenue included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 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 Frien						392303		Page 2
Part III Organizations Mainta	ining Collection	s of Art, Histo	rical	Treasures, or	Other Similar A	ssets (c	ontınu	ed)
3 Using the organization's acquisition items (check all that apply) a Public exhibition	, accession, and othe			ne following that are hange programs	a significant use of i	ts collection	n	
b Scholarly research		e Other						
c Preservation for future gener	ations	- L						
4 Provide a description of the organize Part XIII		d explain how they	furthe	r the organization's	exempt purpose in			
5 During the year, did the organiza to be sold to raise funds rather the	ition solicit or receive	e donations of art	t, histo raaniz	orical treasures, or ation's collection?	other similar assets	Yes	, [No
Part IV Escrow and Custodia line 9, or reported an	Arrangements.	Complete if the	he or	ganization ans	wered 'Yes' to F	orm 990), Part	īV,
1 a Is the organization an agent, trus on Form 990, Part X?		_			r assets not include	ed Yes	. [No
b If 'Yes,' explain the arrangement	in Part XIII and con	plete the following	ng tab	le				
						Amour	<u>t </u>	
c Beginning balance					1 c			
d Additions during the year		•			1 d			
e Distributions during the year		•			1 e			
f Ending balance		5 1 7 1 61	,		11			T
2 a Did the organization include an a						Yes	, <u> </u>	No
b If 'Yes,' explain the arrangement	in Part XIII. Check i	nere if the explan	ation	nas been provided	in Part XIII		L	_
Part V Endowment Funds. C	omplete if the oi	ranization an	SWAL	ed 'Yes' to For	m 990 Part IV	line 10		
Lindownient Funds.	(a) Current year	(b) Prior year		(c) Two years back	(d) Three years back		Four year	s hack
1 a Beginning of year balance	2,609,481.	2,297,9		2,123,879			,989,	
b Contributions	6,000.	1,7	$\overline{}$	84,508				690.
_	<u></u>	<u> </u>		01,000		" 		0301
 Net investment earnings, gains, and losses 	232,991.	403,8	92.	186,036	. 44,72	2.	228,	042.
d Grants or scholarships	62,965.	54,0		60,316				367.
e Other expenditures for facilities and programs						0.		
f Administrative expenses	51,554.	40,1		36,109				283.
g End of year balance.	2,733,953.	2,609,4		2,297,998		9. 2	<u>,146,</u>	089.
2 Provide the estimated percentage			e 1g,	column (a)) held a	S			
a Board designated or quasi-endowm		[%]						
b Permanent endowment	79.99 %							
c Temporarily restricted endowmer								
The percentages in lines 2a, 2b,	·							
3 a Are there endowment funds not in to organization by.	he possession of the	organization that a	ire held	d and administered	for the		Yes	No
(i) unrelated organizations.						3a(i)	X	
(ii) related organizations						3a(ii)		<u> X</u>
b If 'Yes' to 3a(ıı), are the related of	-	•				_3b		<u> </u>
4 Describe in Part XIII the intended		ation's endowme	ent fun	ds See Part	XIII			
Part VI Land, Buildings, and		. IV.a - I & a	- 000	. Dank IV / Ivan	11 - 0 5 0	NOO D	1 V 1!	10
Complete if the organi								
Description of property		it or other basis nvestment)		Cost or other pasis (other)	(c) Accumulated depreciation	(d)	Book va	alue
1 a Land								
b Buildings								
c Leasehold improvements								
d Equipment .								
e Other								

Schedule **D** (Form 990) 2014

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

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Schedule D (Form 990) 2014 Friends Of The Ham	nilton Schools			36-389	92303	Page 3
Part VII Investments – Other Securities. Complete if the organization answered		Part IV	N/A line 11b			line 12
(a) Description of security or category (including name of security)	(b) Book value			uation Cost or end-o		
(1) Financial derivatives			<u></u>		 -	
(2) Closely-held equity interests						
(3) Other						
(A)						
(B)						
(C)						
(D)						
(D) (E)						
(F) (G) (H)						
(G)						
(H)						
(1)						
Total. (Column (b) must equal Form 990, Part X, column (B) line 12)						
Part VIII Investments - Program Related.	1\/-al ta = 000	Dort IV	N/A	Con Form Of	20 David V	luna 12
Complete if the organization answered		, Part IV	, line iic	tion: Cost or end	of year mark	ine 13.
(a) Description of investment type	(b) Book value	(c) Metri	ou or valua	tion Cost of end	-or-year mark	et value
(1)						
(2)						
(3)						
(4) (5)						
(6)						
(7)						
(8)						
(9)						-
(10)						
Total. (Column (b) must equal Form 990, Part X, column (B) line 13)						
Part IX Other Assets. Complete if the organization answered	N/A	Dort IV	luna 11 d	Coo Form Of	70 David V	luna 15
	scription	, raitiv	, iiile i i u	. See Form 9:	(b) Book	
(1)	semption				(b) Book	Value
(2)						
(3)						
(4)						
(5)						
(6)					ļ	
(7) (8)						
(9)						
(10)						
Total. (Column (b) must equal Form 990, Part X, column (E	3), line 15.)			•		
Part X Other Liabilities.	<u></u>				<u> </u>	
Complete if the organization answered 'Yes' to Fo		e or 11f. S	ee Form 990), Part X, line 25		
(a) Description of liability	(b) Book value	_				
(1) Federal income taxes						
(2)						
(4)		\dashv				
(5)						
(6)						
(7)						
(8)		_				
(9)		\dashv				
(10)						
(11)		1				

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

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

Schedule D (Form 990) 2014 Friends Of The Hamilton Schools	36-3892303 Page 4
Part XI Reconciliation of Revenue per Audited Financial Statements With Rev	venue per Return. N/A
Complete if the organization answered 'Yes' to Form 990, Part IV, line	
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	
a Net unrealized gains (losses) on investments	
b Donated services and use of facilities 2b	
c Recoveries of prior year grants	
d Other (Describe in Part XIII)	
e 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:	
a Investment expenses not included on Form 990, Part VIII, line 7b	1 1
b Other (Describe in Part XIII)	
c Add lines 4a and 4b.	4 c
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5
Part XII Reconciliation of Expenses per Audited Financial Statements With Ex	penses per Return. N/A
Complete if the organization answered 'Yes' to Form 990, Part IV, line	
Total expenses and losses per audited financial statements	1
2 Amounts included on line 1 but not on Form 990, Part IX, line 25	
a Donated services and use of facilities 2a	1 1
b Prior year adjustments	
c Other losses 2c	
d Other (Describe in Part XIII)	
e Add lines 2a through 2d .	2 e
3 Subtract line 2e from line 1	3
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	
b Other (Describe in Part XIII)	
c Add lines 4a and 4b	4 c
5 Total expanses Add lines 3 and 4c (This must equal Form 990 Part I line 18)	<u></u>

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 XI, lines 2d and 4b; and Part XII, lines 2d and 4b Also complete this part to provide any additional information

Part V, Line 4 - Intended Uses Of Endowment Fund

Part XIII Supplemental Information.

Individual endowments are maintained per wishes of the donor. Generally scholarships are paid from the earnings from these endowment funds.

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Schedule **D** (Form 990) 2014

SCHEDULE	<u>ق</u>	rants and Otl	Grants and Other Assistance to Organizations,	to Organizatior	IS,		OMB No 1545-0047
(1056 11501)	Comple	/ernments, al ete if the organizati	Governments, and Individuals in the United States Complete if the organization answered 'Yes' to Form 990, Part IV, line 21 or 22.	n the United St orm 990, Part IV, line 2	ates 1 or 22.	1	2014
Department of the Treasury Internal Revenue Service	_ Informatio	n about Schedule I	. Number of the state of the second of the s	u. ructions is at <i>www.ir</i> s.	gov/form990.		Open to Public Inspection
Name of the organization Friends Of The Hamilton	Schools					Employer Identification number	ation number
ormation or	Grants and Assist	ance				30-3636	
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?	rds to substantiate the am d the grants or assistan	ount of the grants or	assistance, the grantees'	eligibility for the grants	or assistance, and		X Yes No
2 Describe in Part IV the organization's procedures for monitoring the use	s procedures for monitorin	g the use of grant fu	of grant funds in the United States		See P	See Part IV	
Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered 'Yerr 1900, Part IV, line 21 for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.	stance to Domestic	Organizations of that received m	zations and Domestic Governments. Complete if the organization answered 'Yes' to ceived more than \$5,000. Part II can be duplicated if additional space is needed.	ernments. Comple art II can be duplic	te if the organizat	lion answered 'Y space is needed	es' to
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1)	J.						
(2)							
	1 1						
(3)							
(4)	ii						
(6)	11						
(9)	1 1						
ω	1 1						
(8)	1 1						
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	c)(3) and government o zations listed in the line	rganizations listed in table	n the line 1 table			A A	
_ را	lice, see the Instruction	s for Form 990.		TEEA3901L 06/19/14	06/19/14	Schedul	Schedule I (Form 990) (2014)

Page 2 Schedule I (Form 990) (2014) Friends Of The Hamilton Schools

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
1 Student Scholarships	39	61, 365.			
2					
8					
4					
5					
9					
7					
Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.	de the information	required in Part I,	line 2, Part III, co	umn (b), and any othe	er additional information.

Part I, Line 2 - Procedures for Monitoring Use of Grants Funds in U.S.

Classroom Grant - monitored by review of invoices to document the use of the grant

funds.

Teachers Grants - monitored by review of invoices to document the grant use.

Choral Grants - monitored by review of invoices to document the grant use.

Schedule I (Form 990) (2014)

SCHEDULE O (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.

► Attach to Form 990 or 990-EZ.

at www.irs.gov/form990.

► Attach to Form 990 or 990-EZ.
► Information about Schedule O (Form 990 or 990-EZ) and its instructions is

2014

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization Friends Of The Hamilton Schools Foundation, Inc.

Employer identification number 36-3892303

Form 990 Part VI, Line 11b - Organization's review process Form 990

The Form 990 will be presented to the finance committee and the president prior to submitting it to the IRS.

Form 990, Part VI, Line 19- Governing Documents Disclosure Explanation

Copies of the Form 990 and all financial statements are on file at the office of Jill Hansen-Twardoski. If a request is received for public access to those items, they are allowed to obtain a copy or read them on site as they prefer.

Form 990, Part VI, Line 11b - Form 990 Review Process

See Schedule O.

Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available

See Schedule O.

Form 990, Part XI, Line 9 Other Changes In Net Assets Or Fund Balances

Reclassify Future Grants Payable

	\$ _~15,930.
Total	\$ -15,930.