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SCANNED NOV 0 9 2015

#### EXTENDED TO NOVEMBER 16, 2015

# 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.

2014
Open to Public Inspection

Form 990 (2014)

For the 2014 calendar year, or tax year beginning and ending C Name of organization Check if D Employer identification number RED DIRT CHARITABLE FUND, INC. 54-1920820 Doing business as Initial return Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Final return/ 2325 DULLES CORNER BLVD 670 703-437-9720 City or town, state or province, country, and ZIP or foreign postal code G Gross receipts \$ Amended HERNDON, VA 20171 H(a) Is this a group return F Name and address of principal officer JAMES LINTOTT for subordinates? Yes X No pending SAME AS C ABOVE H(b) Are all subordinates included? Yes No | Tax-exempt status | X | 501(c)(3) | 501(c) ( ) (insert no.) 4947(a)(1) or 527 If "No," attach a list. (see instructions) J Website: ▶ N/A H(c) Group exemption number ▶ K Form of organization: X Corporation Trust Association Other > L Year of formation: 1998 M State of legal domicile: VA Part I Summary Briefly describe the organization's mission or most significant activities: TO SUPPORT ORGANIZATIONS Governance OPERATING TO ADVANCE MEDICAL RESEARCH AND EDUCATION. Check this box I if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b) 4 Activities & Total number of individuals employed in calendar year 2014 (Part V, line 2a) 5 0 0 Total number of volunteers (estimate if necessary) 6 7 a Total unrelated business revenue from Part VIII, column (C), line 12 1,202. 7a b Net unrelated business taxable income from Form 990-T, line 34 CN/CD 7b 202. **Prior Year Current Year** Contributions and grants (Part VIII, line 1h) 0 Revenue OCT 2 2 2015 Program service revenue (Part VIII, line 2g) 0 0. Investment income (Part VIII, column (A), lines 3, 4, and 7d) 76,252. 160,620 10 <u>2,767.</u> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 1,402 11 162,022. Total revenue - add lines 8 through 11 (must equal Part-VIII, column (A), line 12 79,019. 1,067,500 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0. Benefits paid to or for members (Part IX, column (A), line 4) 0 0 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e) 0 0. b Total fundraising expenses (Part IX, column (D), line 25) 6,901 4,528. Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 1,074,401 4,528. -912,379. 74,491 Revenue less expenses Subtract line 18 from line 12 **Beginning of Current Year End of Year** 1,423,605. 20 Total assets (Part X, line 16) ,498,096. 21 Total liabilities (Part X, line 26) O 22 Net assets or fund balances. Subtract line 21 from line 20 423,605. 498.096. Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete-Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Sign DIRECTOR Here Type or print name and title Preparer signature Date PTIN Print/Type preparer's name Paid BARRY B. BONDROFF, CPA sett employed **P00087387** Preparer Firm's name GORFINE, SCHILLER & Firm's EIN 52-1231901 Firm's address 10045 RED RUN BLVD, SUITE Use Only OWINGS MILLS, MD 21117 Phone no 410 - 356 - 5900May the IRS discuss this return with the preparer shown above? (see instructions) X Yes No

LHA For Paperwork Reduction Act Notice, see the separate instructions.

Pai	art III   Statement of Program Service Accomplishments	-1940840	Page Z
i ai	Check if Schedule O contains a response or note to any line in this Part III		X
1	Briefly describe the organization's mission		م_
	THE CORPORATION IS ORGANIZED AND OPERATED EXCLUSIVELY FOR (	CHARITABL	Ξ,
	SCIENTIFIC AND EDUCATIONAL PURPOSES IN FURTHERANCE OF AND T		
	THE PURPOSES OF KIDS CONNECT CHARITABLE FUND, A VIRGINIA NO	ONPROFIT	
	CORPORATION, AND OTHER PUBLIC, SECTION 501(C)(3) ORGANIZATI	CONS	
2	Did the organization undertake any significant program services during the year which were not listed on	<b></b>	
	the prior Form 990 or 990-EZ?	. LYes	X No
_	If "Yes," describe these new services on Schedule O.		X No
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? If "Yes," describe these changes on Schedule O.	L Yes	NO LAL
4	Describe the organization's program service accomplishments for each of its three largest program services, as measi	ured by expenses	
·	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the	* *	
	revenue, if any, for each program service reported.	• •	
4a	(Code) (Expenses \$) (Revenue \$)		)
	THE CORPORATION IS ORGANIZED AND OPERATED EXCLUSIVELY FOR C		
	SCIENTIFIC AND EDUCATIONAL PURPOSES IN FURTHERANCE OF AND		OUT_
	THE PURPOSES OF KIDS CONNECT CHARITABLE FUND, A VIRGINIA NO		
	CORPORATION, AND OTHER PUBLIC, SECTION 501(C)(3) ORGANIZATION OF THE CHARLES AND OF THE CHARLES		
	ORGANIZED AND OPERATED FOR THE CHARITABLE, SCIENTIFIC OR EIPURPOSE OF ADVANCING MEDICAL RESEARCH AND EDUCATION OR THE		
	THE PUBLIC.	EDUCATION	N OF
		•	
4b	(Code) (Expenses \$ including grants of \$) (Revenue \$		)
			<del></del>
			<del></del>
4c	(Code) (Expenses \$ including grants of \$ ) (Revenue \$		<u> </u>
			′
			<del></del>
		<del></del>	
			~-
		<del></del>	
			_
4d	Other program services (Describe in Schedule O)		
	(Expenses \$ including grants of \$ ) (Revenue \$		
4e	Total program service expenses		

Form **990** (2014)

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			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?	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_		<u> </u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
_	during the tax year? If "Yes," complete Schedule C, Part II	4		_X_
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			17
_	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		<u> </u>
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	ا		v
7	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		<u>X</u>
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	<b>-</b> '-		
Ü	Schedule D, Part III	8		Х
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, VII, VIII, IX, or X	14		
	as applicable.	í		
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI .	11a		Х
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	X	
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	11c		<u>X</u>
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		<u>X</u>
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			v
10-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	-	_X_
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	10-		v
h	Was the organization included in consolidated, independent audited financial statements for the tax year?	12a		<u>X</u>
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		_X_
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		- <u>X</u> -
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		_X_
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		<u>X</u>
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		<u>X</u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
00	complete Schedule G, Part III	19		<u>X</u>
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		<u>X</u>
<u> </u>	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	990 /	2014

	<del></del>			
			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		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		X
24a	• • • • • • • • • • • • • • • • • • • •			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K If "No", go to line 25a	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	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		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
	complete Schedule L, Part II	26		<u> X</u>
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			7.
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			37
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29 22	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			7.7
	contributions? If "Yes," complete Schedule M	30_		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations?			v
20	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			х
33	Schedule N, Part II  Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		
33	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	22	}	Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	_33		
J-4	Part V, line 1	24		х
252	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	34		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	35a		
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	256		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	35b		-
50	If "Yes," complete Schedule R, Part V, line 2	26		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	36_	-	
<i>J</i> ,	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?	31		Λ
~	Note. All Form 990 filers are required to complete Schedule O	38	x	
	11000 III Com and Indiana to administration of the state		990 /	(2014)

	990 (2014) RED DIRT CHARITABLE FUND, INC.	54-1920	<u> 820</u>	P	age
Pa					
	Check if Schedule O contains a response or note to any line in this Part V	- <u>-</u>			
	•			Yes	No
1a	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	1b (	)		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and r	eportable gaming			
	(gambling) winnings to prize winners?		1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,				
	filed for the calendar year ending with or within the year covered by this return	2a (			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retu	rns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions	s)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a	Х	
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule	0.	3b	Х	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other	authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial	account)?	4a		X
b	If "Yes," enter the name of the foreign country: ▶				
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A	Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	action?	5b		Х
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did to	he organization solicit			
	any contributions that were not tax deductible as charitable contributions?		6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contribution	tions or gifts			
	were not tax deductible?		6b		
7	Organizations that may receive deductible contributions under section 170(c).				
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and se	rvices provided to the payor?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w	as required			
	to file Form 8282?		7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d		** &	
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of	contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit conti	ract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file February	orm 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organiz	ation file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained	d by the			
	sponsoring organization have excess business holdings at any time during the year?		8		
9	Sponsoring organizations maintaining donor advised funds.				
а	Did the sponsoring organization make any taxable distributions under section 4966?		9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9b		
10	Section 501(c)(7) organizations. Enter				
а	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	]		
11	Section 501(c)(12) organizations. Enter			1	
а	Gross income from members or shareholders	11a	]		
b	Gross income from other sources (Do not net amounts due or paid to other sources against				
	amounts due or received from them )	11b	}		l
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1041?	12a		$ldsymbol{ld}}}}}}$
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	1		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.				
а	is the organization licensed to issue qualified health plans in more than one state?		13a		
	Note. See the instructions for additional information the organization must report on Schedule O				
b	Enter the amount of reserves the organization is required to maintain by the states in which the				
	organization is licensed to issue qualified health plans	13b	1		1
	Enter the amount of reserves on hand	13c	<u> </u>		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		14a		х

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

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

2	Check ff Schedule O contains a response or note to any line in this Part VI	•		X					
sec	tion A. Governing Body and Management								
	5. u		Yes	No					
1a	Enter the number of voting members of the governing body at the end of the tax year  1a 2		,	ž (					
	If there are material differences in voting rights among members of the governing body, or if the governing			٧					
	body delegated broad authority to an executive committee or similar committee, explain in Schedule 0.								
b	Enter the number of voting members included in line 1a, above, who are independent  1b 2		(*						
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	2	х						
_	officer, director, trustee, or key employee?								
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision	3		X					
	of officers, directors, or trustees, or key employees to a management company or other person?								
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		<u>X</u>					
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		<u>X</u>					
6	Did the organization have members or stockholders?  Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or	6		_X_					
7a	more members of the governing body?	7-		v					
<b>h</b>	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	7a		_X_					
D	persons other than the governing body?	76		v					
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	7b		X					
а	The governing body?		X						
	Each committee with authority to act on behalf of the governing body?	8a 8b	X						
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	OU							
3	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		х					
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code )	<u> </u>							
			Yes	No					
10a	Did the organization have local chapters, branches, or affiliates?	10a		X					
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,								
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b							
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х						
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			,					
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х						
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X						
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe								
	in Schedule O how this was done	12c	Х						
13	Did the organization have a written whistleblower policy?	13	X						
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?								
а	The organization's CEO, Executive Director, or top management official	15a		X					
b	Other officers or key employees of the organization	15b		<u>X</u>					
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)								
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a								
	taxable entity during the year?	16a		<u> X</u>					
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation								
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's								
	exempt status with respect to such arrangements?	16b							
	tion C. Disclosure								
17 10	List the states with which a copy of this Form 990 is required to be filed NONE  Section 5104 requires an executation to make the Forms 1023 (or 1024 if applicable), 900, and 900 T (Section 501(a)/3); and 900 T (Sect								
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990 T (Section 501(c)(3)s only) and the section for public inspection. Indicate however, made these excellents.	avallab	ie						
	for public inspection. Indicate how you made these available. Check all that apply  Own website								
10	, , , , , , , , , , , , , , , , , , , ,	l forme	o.ol						
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and statements available to the public during the tax year	ıınan	cial						
20	State the name, address, and telephone number of the person who possesses the organization's books and records								
20	STERLING FOUNDATION MANAGEMENT, LLC - 703-437-9720								
	2325 DULLES CORNER BLVD SULTE 670 HERNDON VA 20171								

Form 990 (2014) RED	DIRT CHARITABLE FUND, INC.	54-1920820	Page 7
Part VII Compensation of Off	ficers, Directors, Trustees, Key Employees, High	est Compensated	
	ependent Contractors	•	
Check if Schedule O contain	ins a response or note to any line in this Part VII		

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

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

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

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

X Check this box if neither the organiz  (A)  Name and Title	(B) Average hours per week	(C) Position			than	one h an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other	
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) JAMES LINTOTT	1.00									
DIRECTOR		X				_		0.	0.	0
(2) ROGER SILK	1.00	┨						_		
DIRECTOR		X			ļ	⊢		0.	0.	0
	<u> </u>	+								
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		-								
		$\vdash$	<u> </u>			<del> </del>	<del> </del> —			
	<u> </u>	┨								
						<u></u>	1			

	Name and business address	NONE	Description of services	Compensation
		•		
2	Total number of independent contractors (including but	it not limited to those lis	sted above) who received more than	
	\$100,000 of compensation from the organization	0		

		Check if Schedule O conta	ains a response	or note to any lii	e in this Part VIII	<del> </del>	<u> </u>	
		•	,	*	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
ts tr	1 a	Federated campaigns	1a		3			
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues	1b					
S, E	С	Fundraising events	1c			*		
ar E	d	Related organizations	1d			•		
ς <u>Ε</u>	е	Government grants (contributi	ons) 1e			* / "		
tion in	f	All other contributions, gifts, grant	ts, and		3 5 3			
를		similar amounts not included above	/e <b>1f</b>					
벌	g	Noncash contributions included in lines	1a-1f \$		* **:	,		
<u>8</u> 6	h	Total. Add lines 1a-1f		▶_				
				<b>Business Code</b>				
8	2 a							
و ێ	b							
Program Service Revenue	С							
ě a	d							
<u>Б</u>	е							
مَ	f	All other program service reve	nue					
	g	Total. Add lines 2a-2f		. •				
	3	Investment income (including	dıvıdends, ınter	est, and				
		other similar amounts)		<b>&gt;</b>	38,591.		1.	38,590.
	4	Income from investment of tax	exempt bond ;	oroceeds <b>&gt;</b>				
	5	Royalties			1.			1.
			(ı) Real	(II) Personal	*			
	6 a	Gross rents						
	b	Less rental expenses				*	*	
		• •			162 - 1943	٠	*	
	d	Net rental income or (loss)			-1.			-1.
	7 a	Gross amount from sales of	(i) Securities	(II) Other	,	*		
		assets other than inventory						:
	b	Less cost or other basis		Ì				
		and sales expenses			į	,		
		Gain or (loss)			,	3 * *:		
		Net gain or (loss)			37,661.		705.	36,956.
an L	8 a	Gross income from fundraising						
		including \$	of					
<u></u>		contributions reported on line	1c) See					
Other Reve		Part IV, line 18	а	i				
됩		Less direct expenses	b	L				
		Net income or (loss) from fund	-	<u> </u>				
	9 a	Gross income from gaming ac	tivities See					
		Part IV, line 19	а					
		Less direct expenses	b	L				
		Net income or (loss) from gam	-					
	10 a	Gross sales of inventory, less	returns					
		and allowances	а					
		Less. cost of goods sold	b	L				
	С	Net income or (loss) from sales		,				
		Miscellaneous Revenue		Business Code				
		EQUITY PARTNERS	PART.	900099	2,767.	2,271.	496.	
ĺ	b			}				
	С		<del></del>	<b></b>			<del></del>	
	d			<u></u>	<u> </u>			
		Total. Add lines 11a-11d		<b>&gt;</b>	2,767.			
	12	Total revenue. See instructions.			79,019.	2,271.	1,202.	75,546.

Form 990 (2014) RED DIRT CHARITABLE FUND,
Part IX Statement of Functional Expenses

Secti	on 501(c)(3) and 501(c)(4) organizations must com			omplete column (A).	
	Check if Schedule O contains a respon			(C)	<u> </u>
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D)</b> Fundraising expenses
1	Grants and other assistance to domestic organizations				*
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				<b>.</b>
	individuals. See Part IV, line 22				· · · · · · · · · · · · · · · · · · ·
3	Grants and other assistance to foreign				, * <sub>\$</sub> *
	organizations, foreign governments, and foreign				×
	individuals See Part IV, lines 15 and 16				
4	Benefits paid to or for members	·····			
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits .				
10	Payroll taxes	<del> </del>			
11	Fees for services (non-employees):				
а	Management				
b	Legal				
С	Accounting .				<del></del>
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17		//////////////////////////////////////	,	
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch O.)				<del></del>
12	Advertising and promotion				<del></del>
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				·
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				<del>-</del>
23	Insurance			-	
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
a	EXPENSES FROM GS EQUITY	4,231.		4,231.	
b	BANK FEES	297.		297.	
С					
d					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	4,528.	0.	4,528.	0.
26	Joint costs Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here If following SOP 98-2 (ASC 958-720)		[	1	

Part X Balance Sheet Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 2,142. 2,142. 1 1 Cash - non-interest-bearing 456,503. 2 Savings and temporary cash investments 2 561,897. 3 Pledges and grants receivable, net 3 4 Accounts receivable, net 4 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr) Complete Part II of Sch L 6 Notes and loans receivable, net 7 Inventories for sale or use 8 Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a b Less. accumulated depreciation 10b 10c 11 Investments - publicly traded securities 11 958,749. 927,846. 12 Investments - other securities. See Part IV, line 11 12 13 Investments - program-related. See Part IV, line 11 13 14 Intangible assets 14 Other assets. See Part IV, line 11 6,211. 6,211. 15 15 ,498,096, 423,605. Total assets. Add lines 1 through 15 (must equal line 34) 16 17 Accounts payable and accrued expenses 17 18 Grants payable 18 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 22 Loans and other payables to current and former officers, directors, trustees, Liabilities key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties 23 Unsecured notes and loans payable to unrelated third parties 24 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D 25 Ο. 26 Total liabilities. Add lines 17 through 25 0. 26 Organizations that follow SFAS 117 (ASC 958), check here complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 27 Unrestricted net assets 27 28 Temporarily restricted net assets 28 29 Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here ▶ 🗶 and complete lines 30 through 34. 11,061,575 30 Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund 31 31 -9,637,970 -9,563,479. 32 Retained earnings, endowment, accumulated income, or other funds 32 1,423,605.

1,498,096.

33

1,423,605

33

Total net assets or fund balances

Total liabilities and net assets/fund balances

	990 (2014) RED_DIRT_CHARITABLE FUND, INC.	54-1	920820	Page 1	12
Pa	rt XI Reconciliation of Net Assets				_
	Check if Schedule O contains a response or note to any line in this Part XI			[	$\Box$
	•				
1	Total·revenue (must equal Part VIII, column (A), line 12)	1	79	,019	<u>)                                    </u>
2	Total expenses (must equal Part IX, column (A), line 25)	2	4	,528	} .
3	Revenue less expenses Subtract line 2 from line 1	74	,491	_	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	1,423	,605	· ·	
5	Net unrealized gains (losses) on investments	5			_
6	Donated services and use of facilities	6			_
7	Investment expenses	7			_
8	Prior period adjustments	8			_
9	Other changes in net assets or fund balances (explain in Schedule O)	9		0	) <u>.</u>
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,				_
	column (B))	10	1,498	,096	<u>.</u>
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
			`	Yes No	0
1	Accounting method used to prepare the Form 990: X Cash Accrual Other		_		<
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Ο.			. '
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	X	:
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewe	d on a			,
	separate basis, consolidated basis, or both				
	Separate basis Consolidated basis Both consolidated and separate basis				1
b	Were the organization's financial statements audited by an independent accountant?		2b	X	<u>:</u>
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	e basis,			
	consolidated basis, or both.			Ş	1
	Separate basis Consolidated basis Both consolidated and separate basis		'	"	•
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audıt,	1 1	1	
	review, or compilation of its financial statements and selection of an independent accountant?		2c		_
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O.		15	1
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audıt	:		
	Act and OMB Circular A-133?		3a	X	<u>.                                    </u>
þ	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ired audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		
			Form 9	<b>990</b> (201	14)

#### **SCHEDULE A**

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

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

Maine of the organization						⊏mpioyer	identification numi	jer
RED	DIRT CHARI	TABLE FUND,	INC.	<del></del> -		5	4-1920820	
Part I Reason for Public 0	Charity Status (/	All organizations must co	omplete th	ıs part ) Se	e instructions	S		
The organization is not a private found	lation because it is: (	For lines 1 through 11, o	heck only	one box.)				
1 A church, convention of ch	urches, or association	on of churches described	d in sectio	n 170(b)(1	)(A)(i).			
2 A school described in secti	ion 170(b)(1)(A)(ii). (	Attach Schedule E)						
3 A hospital or a cooperative	hospital service orga	anization described in se	ection 170	(b)(1)(A)(ii	i).			
4 A medical research organiz	ation operated in coi	njunction with a hospital	described	ın sectio	n 170(b)(1)(A)	(iii). Enter 1	the hospital's name,	
city, and state								
5 An organization operated for		llege or university owner	d or operat	ted by a go	overnmental u	ınıt describ	ed in	
section 170(b)(1)(A)(iv). (C								
6 A federal, state, or local go	-							
7 An organization that norma	•	ntial part of its support f	rom a gov	ernmental	unit or from t	he general	public described in	
section 170(b)(1)(A)(vi). (C		44444 D 40						
8 A community trust describe								
9 An organization that norma	-	•	•			•	•	
activities related to its exen		•					-	
income and unrelated busin		(less section 511 tax) in	om busine	sses acqu	irea by the or	ganization	aπer June 30, 1975.	
See section 509(a)(2). (Con 10 An organization organized a	•	waly to toot for public or	ifatir Saar		0(~)(4)			
	•	• •	•			rn, out the	nurnassa of one or	
11 X An organization organized a more publicly supported or	•	-	-			•	•	
lines 11a through 11d that	T			,			HECK THE DOX III	
a Type I. A supporting orga	· · ·			•		•	OWING	
the supported organization	· ·	•						
organization. You must o		· · · · ·	a majorney	01 1110 41101	, , , , , , , , , , , , , , , , , , ,		аррокту	
b Type II. A supporting org	•		tion with it	s supporte	ed organizatio	n(s) hy ha	vina	
control or management of	· ·				-		•	
organization(s) You mus			, , , , , , , , , , , , , , , , , , ,			.g oap	<b>, , , , , , , , , , , , , , , , , , , </b>	
c X Type III functionally inte			ın connec	tion with, a	and functiona	liv integrate	ed with.	
its supported organizatio	- · ·			•		.,	- ·····,	
d Type III non-functionally		·	•	•	•	rted organiz	zation(s)	
that is not functionally int						_	• •	
requirement (see instruct	-		-		•			
e X Check this box if the orga	anization received a	written determination fro	m the IRS	that it is a	Type I, Type	II, Type III		
functionally integrated, or	r Type III non-functio	nally integrated support	ing organi	zation				
f Enter the number of supported	organizations						1	
g Provide the following information	n about the supporte	ed organization(s)						
(ı) Name of supported	(ii) EIN	(iii) Type of organization		rganization in your	(v) Amount of	- 1	(vi) Amount of	
organization		(described on lines 1-9 above or IRC section		document?	support	· .	other support (see	
		(see instructions))	Yes	No	Instruct	ions)	Instructions)	
KIDS CONNECT				}				
CHARITABLE FUND	54-1907780	7	X		· · · · · · · · · · · · · · · · · · ·	0.		0.
			ļ					
				ļ				
	1							
			ļ					
Total	:					0.		ο.
	i .	i				ا م زن		

	fails to qualify under the tests	listed below, plea	ase complete Part	III.)			
Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🖊	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not						
	include any "unusual grants ")						
2	Tax revenues levied for the organ-						
	ızatıon's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions				/		
	by each person (other than a				3*,\$*,		
	governmental unit or publicly						
	supported organization) included			k			
	on line 1 that exceeds 2% of the				, ,		
	amount shown on line 11,				· '		
	column (f)						
	Public support. Subtract line 5 from line 4						
	ndar year (or fiscal year beginning in)	(a) 2010	<b>(b)</b> 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
	Amounts from line 4	(2) 2010	(6) 2011	(0)2012	(4) 2013	(6) 2014	(i) iotai
8	Gross income from interest,			-			
_	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain	-		1			
	or loss from the sale of capital						
	assets (Explain in Part VI)						
11	Total support. Add lines 7 through 10					\$	
12	Gross receipts from related activities,	etc (see instruct	ions)			12	
13	First five years. If the Form 990 is for	the organization'	s first, second, thii	rd, fourth, or fifth t	ax year as a sectio	n 501(c)(3)	
Sec	organization, check this box and storetion C. Computation of Publi		rcentage				▶□
	Public support percentage for 2014 (I		<del></del>	column (fl)		14	
	Public support percentage from 2013	• •	•	(-,,		15	
	33 1/3% support test - 2014. If the c			on line 13, and line	14 is 33 1/3% or r	·	ox and
	stop here. The organization qualifies	•				,	▶□
	33 1/3% support test - 2013. If the c	. ,	ŭ		d line 15 is 33 1/3%	or more, check t	
b	and stop here. The organization qual	•		•			►□
b			· · · · · ·		e 13, 16a, or 16b,	and line 14 is 10%	or more,
	10% -facts-and-circumstances tes						
	and if the organization meets the "fac			his box and stop I		rt VI how the orga	nization
		ts-and-circumstar	nces" test, check t	-	nere. Explain in Pa	rt VI how the orga	nization ►
17a	and if the organization meets the "fac	ts-and-circumstar test The organiza	nces" test, check t ation qualifies as a	publicly supporte	here. Explain in Pa d organization	Ť	►[

organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization.

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

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

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

Se	ction A. Public Support	-					
Cale	endar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
	Gifts, grants, contributions, and			<u> </u>			
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,					1	
	merchandise sold or services per-						
	formed, or facilities furnished in						
	any activity that is related to the organization's tax-exempt purpose						
3							
Ů	are not an unrelated trade or bus-						
	iness under section 513		1				
4	Tax revenues levied for the organ-			<del> </del>	<del> </del>		
7	ization's benefit and either paid to						
	or expended on its behalf						
5		· · · · · · · · · · · · · · · · · · ·			<del> </del>		
3	furnished by a governmental unit to						
	the organization without charge						
					<del>                                     </del>		
	Total. Add lines 1 through 5					-	
73	a Amounts included on lines 1, 2, and		•				
	3 received from disqualified persons				-	<del> </del>	<del></del>
'	Amounts included on lines 2 and 3 received from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
	c Add lines 7a and 7b						
	Public support (Subtract line 7c from line 6)			<u></u>		1	
	ction B. Total Support		T	T	1	T	
	endar year (or fiscal year beginning in)	(a) 2010	<b>(b)</b> 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
	Amounts from line 6				ļ	<del>-</del>	
10	a Gross income from interest, dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources						
ı	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	c Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b.						
	whether or not the business is						
	regularly carried on						
12	Other income Do not include gain						
	or loss from the sale of capital assets (Explain in Part VI)						
13	Total support. (Add lines 9, 10c, 11, and 12)				<u> </u>		
14	First five years. If the Form 990 is for	the organization's	s first, second, thi	rd, fourth, or fifth t	ax year as a section	on 501(c)(3) organiz	ation,
	check this box and stop here						▶□_
Se	ction C. Computation of Publ	<u>ic Support Pe</u>	rcentage				
15	Public support percentage for 2014 (I	ine 8, column (f) d	ivided by line 13,	column (f))		15	%
16	Public support percentage from 2013	Schedule A, Part	III, line 15			16	%
<u>Se</u>	ction D. Computation of Inve	stment Incom	e Percentage	·			
17	Investment income percentage for 20	114 (line 10c, colur	nn (f) divided by li	ne 13, column (f))		17	%
18	Investment income percentage from :	2013 Schedule A,	Part III, line 17			18	%
19	a 33 1/3% support tests - 2014. If the	organization did r	not check the box	on line 14, and line	e 15 is more than	33 1/3%, and line 1	7 is not
	more than 33 1/3%, check this box a	nd stop here. The	organization qua	lifies as a publicly	supported organiz	ation	▶□
ı	o 33 1/3% support tests - 2013. If the	organization did r	not check a box or	n line 14 or line 19	a, and line 16 is m	ore than 33 1/3%, a	and
	line 18 is not more than 33 1/3%, che	ck this box and s	top here. The org	anization qualifies	as a publicly supp	orted organization	
<u>20</u>	Private foundation. If the organization					-	▶ □

### Part IV Supporting Organizations

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

Section A. A	\II	Supporting Organizations
--------------	-----	--------------------------

- 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
- 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).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below
- **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.
- 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.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.
- 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
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 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.
- 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)
- 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).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- 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.
- 10a Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer (b) below.
- **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings)

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9	90 or 99	0-F71	2014

Yes No  11 Has the organization accepted a gift or contribution from any of the following persons?  a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?  b A family member of a person described in (a) above?  11b X		dule A (Form 990 or 990 EZ) 2014 RED DIRT CHARITABLE FUND, INC. 54	<u>-192082</u>	0 P	age 5
11. Has the organization accepted a gift or contribution from any of the following persons?  2. A person who directly or indirectly controls, either alone of together with persons described in (b) and (c) below, the governing body of a supported organization?  3. A person who directly or indirectly controls, either alone of together with persons described in (b) and (c) below, the governing body of a supported organization.  3. A Table Controlled entity of a person described in (b) or (b) above? If "Yes" to a, b, or c, provide detail in Pert VI.  3. Esction B. Type I Supporting Organizations  4. The Controlled setting of the discrimination of the organizations have the power to import the discrimination of the organization of the organization in the supported organization in the controlled the organization or elect at least a majority of the organization of the supported organization of the controlled the organization of end to the supported organization of end to the provision of the organization of the organization of the provision of the organization of the purposes of the supported organization of the than the supported organization and what conditions or estrictions, if any, applied to such powers during that a year.  4. The organization operate for the benefit carried out the purposes of the supported organization(b) that operated, supporting organization of the than the supported organization of the than the supported organization of the third than the supported organization of the third than the supported organization of the third than the supported organization of the or	Pa	rt IV   Supporting Organizations (continued)			
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reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement  3 Parent of Supported Organizations Answer (a) and (b) below. a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.  b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	b				
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a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in <i>Part VI</i> .  b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			2b	<b>—</b> —	<u> </u>
trustees of each of the supported organizations? Provide details in <i>Part VI</i> .  b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	3				
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	а		1		
			3a	ļ	ļ
of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard 3b	b	the contract of the contract o			
		of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard	3b	L	<u></u>

	dule A (Form 990 or 990 EZ) 2014 RED DIRT CHARITABLE FUN			<b>4-1920820</b> Page €
Pa	Type miles and many magnated destants appearing			
1	Check here if the organization satisfied the Integral Part Test as a qualifying	g trust o	n Nov. 20, 1970 See instru	ctions. All
	other Type III non-functionally integrated supporting organizations must co	mplete S	Sections A through E.	<u> </u>
Sect	on A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3	, <del></del>	
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	<u> </u>		
	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		
Sect	on B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see		*	
	instructions for short tax year or assets held for part of year):			
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
đ	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other	3	* *	
	factors (explain in detail in Part VI)			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount,			
	see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functional	y-ıntegra	ated Type III supporting orga	anization (see
	instructions)			

Sche <b>Pa</b> ı	dule A (Form 990 or 990-EZ) 2014 RED DIRT CHAR			04-1920820 Page 7
		v(a)(3) Supporting Orga	anizations (continuea)	
Secti	on D - Distributions			Current Year
	Amounts paid to supported organizations to accomplish exe	•	·	
2	Amounts paid to perform activity that directly furthers exemple organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpos	es or supported organization	<u> </u>	
4	Amounts paid to acquire exempt-use assets  Qualified set-aside amounts (prior IRS approval required)		<u>= ,=:</u>	
<u>5</u> 6	Other distributions (describe in Part VI) See instructions	<del></del>		
	Total annual distributions, Add lines 1 through 6.			
<u>7</u> 8	Distributions to attentive supported organizations to which t	ho organization is responsive	· · · · · · · · · · · · · · · · · · ·	<del>                                     </del>
0	(provide details in Part VI) See instructions.	ne organization is responsive	<del>,</del>	
9	Distributable amount for 2014 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
10	Line 8 amount divided by Line 9 amount	(1)	(ii)	/iii
Secti	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	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			<u> </u>	*
С				138
d				5
е	From 2013			
f	Total of lines 3a through e			
9	Applied to underdistributions of prior years			, ,
h	Applied to 2014 distributable amount		l , .	
<u>i_</u>	Carryover from 2009 not applied (see instructions)		* ; ' (	
i_	Remainder Subtract lines 3g, 3h, and 3i from 3f			`
4	Distributions for 2014 from Section D,			
	line 7 \$		** (** **	# <u>%</u>
а	Applied to underdistributions of prior years			75 *
b	Applied to 2014 distributable amount			
c	Remainder Subtract lines 4a and 4b from 4.			à
5	Remaining underdistributions for years prior to 2014, if			, and a second s
	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 3 <sub>j</sub>			
	and 4c			Friday
_8_	Breakdown of line 7			
a				
<u>b</u>				
<u>c</u>				
	Excess from 2013			<del></del>
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).
SCHEDULE A, PART IV, SECTION E
ALL OF RED DIRT CHARITABLE FUND'S ACTIVITIES DURING THE TAX YEAR
DIRECTLY FURTHERED THE EXEMPT PURPOSES OF THE SUPPORTED ORGANIZATION,
KIDS CONNECT CHARITABLE FUND. THE EXEMPT PURPOSE OF KIDS CONNECT IS TO
PROVIDE SUPPORTING GRANTS TO MEDICAL FACILITIES AND INSTITUTIONS FOR
RESEARCH ON EPILEPSY AND METABOLIC DISORDERS AND GRANTS TO INSTITUTIONS
FOR EDUCATION.

Schedule A (Form 990 or 990-EZ) 2014

432028 09-17-14

#### **SCHEDULE D**

(Form 990)

Supplemental Financial Statements

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

OMB No 1545-0047 Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

	RED DIRT CHARITABLE FUND, INC.			<u>-19208</u>	
Pai	rt I Organizations Maintaining Donor Advised Funds or Other Similar	Funds or A	<b>ccounts.</b> Co	mplete if the	•
	organization answered "Yes" to Form 990, Part IV, line 6.				
	(a) Donor advised funds	(	b) Funds and o	ther accour	nts
1	Total number at end of year				
2	Aggregate value of contributions to (during year)				
3	Aggregate value of grants from (during year)				
4	Aggregate value at end of year				
5	Did the organization inform all donors and donor advisors in writing that the assets held in don	or advised fun	ds		
	are the organization's property, subject to the organization's exclusive legal control?			Yes	No No
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds	can be used o	only		
	for charitable purposes and not for the benefit of the donor or donor advisor, or for any other p	ourpose confer	ring		
	impermissible private benefit?			Yes	No
Pai	rt II Conservation Easements. Complete if the organization answered "Yes" to Form	n 990, Part IV,	line 7	-	
1	Purpose(s) of conservation easements held by the organization (check all that apply)				
	Preservation of land for public use (e.g., recreation or education)	of a historically	important land	l area	
	Protection of natural habitat Preservation	of a certified hi	storic structure	•	
	Preservation of open space				
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in t	ne form of a co	nservation eas	ement on th	e last
	day of the tax year.				_
			Held at t	he End of the	Tax Year
а	Total number of conservation easements		2a		
b	Total acreage restricted by conservation easements		2b		
С	Number of conservation easements on a certified historic structure included in (a)		2c		
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a histori	c structure			
	listed in the National Register		2d		
3	Number of conservation easements modified, transferred, released, extinguished, or terminate	d by the organ	ization during t	he tax	
	year ▶				
4	Number of states where property subject to conservation easement is located	<del> </del>			
5	Does the organization have a written policy regarding the periodic monitoring, inspection, hand	dling of	_		
	violations, and enforcement of the conservation easements it holds?		L,	Yes	U No
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation ease	ments during t	ne year ► _		
7	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easement	s during the ye	ar▶ \$		
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of sec	tion 170(h)(4)(E	3)(1)		
	and section 170(h)(4)(B)(ii)?			Yes	☐ No
9	In Part XIII, describe how the organization reports conservation easements in its revenue and				nd
	include, if applicable, the text of the footnote to the organization's financial statements that de	scribes the org	janization's acc	counting for	
_	conservation easements				
Pai	rt III Organizations Maintaining Collections of Art, Historical Treasures	, or Other	Similar Asse	ets.	
	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				
	historical treasures, or other similar assets held for public exhibition, education, or research in	furtherance of	public service,	provide, in f	Part XIII,
	the text of the footnote to its financial statements that describes these items.				
b	, , , , , , , , , , , , , , , , , , , ,				
	treasures, or other similar assets held for public exhibition, education, or research in furtherance	ce of public sei	vice, provide th	ne following	amounts
	relating to these items:				
	(i) Revenue included in Form 990, Part VIII, line 1		<b>S</b>		
	(ii) Assets included in Form 990, Part X		<b>S</b>		
2	If the organization received or held works of art, historical treasures, or other similar assets for	financial gain,	provide		-
	the following amounts required to be reported under SFAS 116 (ASC 958) relating to these item	ms.			
а	Revenue included in Form 990, Part VIII, line 1		<b>&gt;</b> \$		
b	Assets included in Form 990, Part X		<b>S</b>		

		T CHARITAB			NC.			<u>54-19</u>			<u>age 2</u>
Par	t III Organizations Maintaining C		•								
3	Using the organization's acquisition, accessi	on, and other record	ds, chec	k any of the	following that	t are a si	gnifican	it use of its	collection	n item	s
	(check all that apply):										
а	Public exhibition	c	ı 🔲	Loan or exc	hange progra	ms					
b	Scholarly research	e	$\Box$	Other							
С	Preservation for future generations										
4	Provide a description of the organization's co	ollections and explai	in how th	nev further t	he organizatio	on's exe	mpt pur	pose in Par	t XIII.		
5	During the year, did the organization solicit o	•		-	-						
_	to be sold to raise funds rather than to be ma								Yes		] No
Par	t IV Escrow and Custodial Arran					Yes" to	Form 99	0. Part IV.			
	reported an amount on Form 990, Par			, o. ga				, , ,	0, 0.		
12	Is the organization an agent, trustee, custod		diany for	contribution	ns or other as	sets not	ınclude	d			
14	on Form 990, Part X?	ian or other intermet	dialy loi	CONTINUENCE	is or other as.	3613 1101	include	<b>"</b>	Yes		No
L	•	and complete the fe	. محسدها	table.				_	_ res		7 MO
D	If "Yes," explain the arrangement in Part XIII	and complete the ic	ollowing	lable:							
	5						-	<del></del>	Amount	<u> </u>	
	Beginning balance						1c	<del></del>			
	Additions during the year				-		1d				
е	Distributions during the year	•					<u>1e</u>				
f	Ending balance .						1f		<del></del>		
	Did the organization include an amount on F						ıty?		」Yes		No
	If "Yes," explain the arrangement in Part XIII.										
<u>"Par</u>	t V Endowment Funds. Complete i	f the organization ar	nswered	"Yes" to Fo	rm 990, Part	IV, line 1	0.				
		(a) Current year	(b) F	rior year	(c) Two year	s back	<b>(d)</b> Three	e years back	(e) Four	years	back
1a	Beginning of year balance										
b	Contributions										
С	Net investment earnings, gains, and losses										
d	Grants or scholarships										
е	Other expenditures for facilities										
	and programs										
f	Administrative expenses										
g	End of year balance							,,, ,,, e			
2	Provide the estimated percentage of the curr	rent year end baland	ce (line 1	a column (a	a)) held as				·		
 a	Board designated or quasi-endowment		%	9, 00.0 (0	a,, a.						
h	Permanent endowment	%	'"								
•	Temporarily restricted endowment	% %									
·	The percentages in lines 2a, 2b, and 2c shou	<del> </del>									
20	Are there endowment funds not in the posse		ation th	at are bold a	and administra	rad for t	ho orga	aration			
Sa		ssion of the organiz	anon m	at ale lielu a	ina aaniiniste	ieu ioi ti	ie Oigai	lization	Γ	Yes	NI-
	by: (i) unrelated organizations								0-(1)	res	No
								•	3a(i)		
	(ii) related organizations	- 1-4-4	O-h-	dula DO					3a(ii)		
	If "Yes" to 3a(ii), are the related organizations	•							3b		
4	Describe in Part XIII the intended uses of the		owment	tunds							
rai	t VI Land, Buildings, and Equipm				= ===	<b>5</b>					
	Complete if the organization answere			1				·			
	Description of property	(a) Cost or o			or other		ccumula		( <b>d</b> ) Bool	k valu	е
		basis (investi	ment)	basis	(other)	de	oreciatio	on			
1a	Land			ļ							
b	Buildings .										
С	Leasehold improvements										
d	Equipment										
е	Other										
Total	. Add lines 1a through 1e (Column (d) must e	qual Form 990, Part	X, colui	mn (B), line 1	10c)			<b>•</b>			0.

RED DIRT CHARITABLE FUND.

INC

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Schedule D (Form 990) 2014

	dule D (Form 990) 2014 RED DIRT CHARITABLE FUNL			Page 4
Pai	Reconciliation of Revenue per Audited Financial State		ue per Return.	
	Complete if the organization answered "Yes" to Form 990, Part IV, line	<u>12a.</u>	<del></del>	
1	Total revenue, gains, and other support per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	ا ما		
a	Net unrealized gains (losses) on investments  Donated services and use of facilities	2a		
b		2b		
c d	Recoveries of prior year grants Other (Describe in Part XIII )	2c	<del></del>	
e	Add lines 2a through 2d			
3	Subtract line 2e from line 1		. <u>2e</u> 3	<u>.</u>
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
ь	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b	_ <del>-10</del>	4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	•	5	
Pa	rt XII Reconciliation of Expenses per Audited Financial Sta	tements With Exper	ses per Return.	
	Complete if the organization answered "Yes" to Form 990, Part IV, line		•	
1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			
а	Donated services and use of facilities	2a		
b	Prior year adjustments .	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII)	2d		
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Decembers Dart VIII.)	4b		
U	Other (Describe in Part XIII.)	40		
C			4c	
с 5	Add lines 4a and 4b  Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		4c 5	
5 Pa	Add lines 4a and 4b  Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 ort XIII Supplemental Information.	;	5	
5 <b>Pa</b> i	Add lines 4a and 4b  Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 rt XIII Supplemental Information.  Ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4,	Part IV, lines 1b and 2b, F	5	l,
5 <b>Pa</b> i	Add lines 4a and 4b  Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 ort XIII Supplemental Information.	Part IV, lines 1b and 2b, F	5	
5 <b>Pa</b> i	Add lines 4a and 4b  Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 rt XIII Supplemental Information.  Ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4,	Part IV, lines 1b and 2b, F	5	I,
5 <b>Pa</b> i	Add lines 4a and 4b  Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 rt XIII Supplemental Information.  Ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4,	Part IV, lines 1b and 2b, F	5	I,
5 <b>Pa</b> i	Add lines 4a and 4b  Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 rt XIII Supplemental Information.  Ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4,	Part IV, lines 1b and 2b, F	5	ı,
5 <b>Pa</b> i	Add lines 4a and 4b  Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 rt XIII Supplemental Information.  Ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4,	Part IV, lines 1b and 2b, F	5	l,
5 <b>Pa</b> i	Add lines 4a and 4b  Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 rt XIII Supplemental Information.  Ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4,	Part IV, lines 1b and 2b, F	5	I,
5 <b>Pa</b> i	Add lines 4a and 4b  Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 rt XIII Supplemental Information.  Ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4,	Part IV, lines 1b and 2b, F	5	I,
5 <b>Pa</b> l Prov	Add lines 4a and 4b  Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 rt XIII Supplemental Information.  Ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4,	Part IV, lines 1b and 2b, F	5	I,
5 Par	Add lines 4a and 4b  Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 rt XIII Supplemental Information.  Ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4,	Part IV, lines 1b and 2b, F	5	I,
5 Par	Add lines 4a and 4b  Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 rt XIII Supplemental Information.  Ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4,	Part IV, lines 1b and 2b, F	5	1,
5 <b>Pa</b> i	Add lines 4a and 4b  Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 rt XIII Supplemental Information.  Ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4,	Part IV, lines 1b and 2b, F	5	l,
5 <b>Pa</b> i	Add lines 4a and 4b  Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 rt XIII Supplemental Information.  Ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4,	Part IV, lines 1b and 2b, F	5	I,
5 <b>Pa</b> i	Add lines 4a and 4b  Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 rt XIII Supplemental Information.  Ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4,	Part IV, lines 1b and 2b, F	5	Ι,
5 <b>Pa</b> i	Add lines 4a and 4b  Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 rt XIII Supplemental Information.  Ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4,	Part IV, lines 1b and 2b, F	5	I,
5 <b>Pa</b> i	Add lines 4a and 4b  Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 rt XIII Supplemental Information.  Ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4,	Part IV, lines 1b and 2b, F	5	I,
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## **SCHEDULE 0** (Form 990 or 990-EZ)

Department of the Treasury

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

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

OMB No 1545-0047 Open to Public

Internal Revenue Service Name of the organization

> RED DIRT CHARITABLE FUND, INC

Employer identification number 54-1920820

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
ORGANIZED AND OPERATED FOR THE CHARITABLE, SCIENTIFIC OR EDUCATIONAL
PURPOSE OF ADVANCING MEDICAL RESEARCH AND EDUCATION OR THE EDUCATION OF
THE PUBLIC.
FORM 990, PART VI, SECTION A, LINE 2:
ROGER SILK AND JAMES LINTOTT OWN SEVERAL BUSINESSES JOINTLY.
FORM 990, PART VI, SECTION B, LINE 11:
DETAILED REVIEW AT BOARD MEETING
FORM 990, PART VI, SECTION B, LINE 12C:
ANNUAL MEETING OF THE BOARD OF DIRECTORS
FORM 990, PART VI, SECTION C, LINE 19:
UPON WRITTEN REQUEST