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Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

Do not enter social security numbers on this form as it may be made public.

Open to Public Inspection

Department of the Treasur
Internal Revenue Service

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

A F	or the	2014 calendar year, or tax year beginning	and ending		
В	heck if pplicable	C Name of organization		D Employer identifi	cation number
	Addres	B.U.L.L. SESSION CHARITY GOLF TOUR	NAMENT		
Ė	Name change		(IVAPIEN I	93-1	078155
	Initial return	Number and street (or P 0. box if mail is not delivered to street address)	Room/sui	te E Telephone numbe	r
	Final return/	14695 SW MILLIKAN WAY		(503) 646-7670
	termin- ated	City or town, state or province, country, and ZIP or foreign postal co	ode	G Gross receipts \$	666,916.
	Amend return	BEAVERTON, OR 97003		H(a) Is this a group re	
	Application	F Name and address of principal officer F KANK WALL	for subordinates	² Yes X No	
	pendin	9 14695 SW Millikan Way, Beaverton, C	OR 97003	H(b) Are all subordinates in	ncluded? Yes No
17	ax-exe	mpt status X 501(c)(3)	17(a)(1) or 5	27 If "No," attach a	list (see instructions)
J	Nebsit	e: http://www.bullsessioncharity.com/	,	H(c) Group exemptio	
		organization: Corporation Trust Association X Other		Y-	A State of legal domicile: OR
Pa	art I	Summary			
d)	1 1	Briefly describe the organization's mission or most significant activities	o raise	funds for lo	cal
Š	1	children's charities through the spor	nsorship	of an annual	golf
rus	2	Check this box If the organization discontinued its operations of	r disposed of mo	ore than 25% of its net as	ssets
Š	3	Number of voting members of the governing body (Part VI, line 1a)		3	10
ر مح	4 1	Number of independent voting members of the governing body (Part VI, Ii	ne 1b)	4	10
es ?	5	Total number of individuals employed in calendar year 2014 (Part V, line 2	a) .	5	0
vi ţř.	6	Total number of volunteers (estimate if necessary)		6	76
Activities & Governance	7 a -	Total unrelated business revenue from Part VIII, column (C), line 12		7a	0.
_	ы	Net unrelated business taxable income from Form 990-T, line 34		7b	0.
				Prior Year	Current Year
ø	8	Contributions and grants (Part VIII, line 1h)	L	254,223.	276,670.
Revenue	9 1	Program service revenue (Part VIII, line 2g)	L	383,823.	387,522.
ě	10	investment income (Part VIII, column (A), lines 3, 4, and 7d)	L	92.	83.
C	11 (Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		2,052.	73.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), lir	ne 12)	640,190.	664,348.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		325,000.	330,000.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
S	15	Salaries, other compensation, employee benefits (Part IX, column (A), line	s 5-10)	0.	0.
Expenses	16a 1	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
ğ	b ·	Total fundraising expenses (Part IX, column (D), line 25)	0.		
	17	Other expenses (Part IX, column (A), lines 11a-1 d, 11f-PFCEIVE		324,822.	332,438.
4	18	Total expenses Add lines 13-17 (must equal Part IX column (A), line 25)	73	649,822.	662,438.
j	19	Revenue less expenses Subtract line 18 from lines	~ 1~~+	-9,632.	1,910.
Net Assets or Fund Balances		S NOV 2 4 201	_ ເທ⊨	Beginning of Current Year	End of Year
set	20	Total assets (Part X, line 16)	<u> </u>	129,252.	131,162.
\$ <u>₽</u>	21	Total liabilities (Part X, line 26)) T	0.	0.
蓬	22	Net assets or fund balances Subtract line 21 from line 29		129,252.	131,162.
<u></u>	art II	Signature Block			
271		lties of perjury, I declare that I have examined this return, including accompanying :		1	y knowledge and belief, it is
true	, correc	t, and complete. Declaration of preparer (other than officer) is based on all informat	ion of which prepa		
		Signature of officer		100 12	<u> </u>
Sig	n			Date •	
He	re	FRANK WALL, Secretary	· · · · · · · · · · · · · · · · · · ·	-	
		Type or print name and title		Date , , Check	PTÍN
		Print/Type preparer's name Preparer's signature	///	11/10/16	 '
Pai		TIMOTHY HUFF	enger -	////3//7 self-employ	
	parer	Firm's name MACK, ROBERTS & CO., L.L.C.	-	Firm's EIN	93-1159640
Use	Only	Firm's address 1211 SW 5th Ave., STE 2300			001 004 0066
_		PORTLAND, OR 97204		Phone no. (5	
Ma	y the IF	RS discuss this return with the preparer shown above? (see instructions)			X Yes No

Form **990** (2014)

	n 990 (2014) B.U.L.L. SESSION CHARITY GOLF TOURNAMENT 93-1(078155	Page 2
Pa	art III Statement of Program Service Accomplishments		
	Check & Schedule O contains a response or note to any line in this Part III		<u> </u>
1	Briefly describe the organization's mission		
	See Part I, Line 1		
2	Did the organization undertake any significant program services during the year which were not listed on		
_	the prior Form 990 or 990-EZ?	Yes	X No
	If "Yes," describe these new services on Schedule O		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes	X No
	If "Yes," describe these changes on Schedule O		
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured	by expenses	;
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total		
	revenue, if any, for each program service reported.		
4a	(Code) (Expenses \$ 662,438. including grants of \$ 330,000.) (Revenue \$	387,	
	Golf Tournament and Auction to Raise Funds for Benefitting Ch	<u>naritie</u>	s
			-
4b	(Code) (Expenses \$)
	·		
40	10		
4c	(Code) (Expenses \$ including grants of \$) (Revenue \$,
			
	Other program services (Describe in Schedule O)		
70		1	
4.	(Expenses \$ including grants of \$) (Revenue \$		

432002 11-07-14

	,		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	<u>X</u> _	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	<u>X</u>	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	_		٠,,
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			7.
_	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	_		₹.
6	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	5		X
O	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I			х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	6		
•	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			
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	0_		- 25
•	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	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
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		_X_
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	X	
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			7.5
	Schedule D, Parts XI and XII	12a		X
D	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. Borto VI and VII is entired.	404		v
13	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	12b		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	13 14a		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	144		A
~	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		Х
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	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
	· · · · · · · · · · · · · · · · · · ·	20a		X
<u>b</u>	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K If "No", go to line 25a	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
¢	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		-
	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
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		ŀ	
	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,"		i	
	complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27	Ì	X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions).			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	200		
_	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	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	25		
•	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	<u> </u>		
	Schedule N. Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	- 50		
-	Part V, line 1	34		Х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	555		
_	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-chantable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			-12
J .	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?	5,		43
	Note. All Form 990 filers are required to complete Schedule O	38	\mathbf{x}	
	1950. Factorial of the second		000	

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Part V Statements Regarding Other IRS Filings and Tax Compliance

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

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

	Check if Schedule O contains a response or note to any line in this Part VI			X				
Sec	tion A. Governing Body and Management							
			Yes	No				
1a	Enter the number of voting members of the governing body at the end of the tax year 10							
	If there are material differences in voting rights among members of the governing body, or if the governing							
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.							
b	Enter the number of voting members included in line 1a, above, who are independent 1b 10]						
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other							
	officer, director, trustee, or key employee?	2		X				
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision	} :						
	of officers, directors, or trustees, or key employees to a management company or other person?	3	X					
4								
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X				
6	Did the organization have members or stockholders?	6		X_				
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or							
	more members of the governing body?	7a		X				
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or							
	persons other than the governing body?	7b		_X_				
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:							
а	The governing body?	8a	X					
b	Each committee with authority to act on behalf of the governing body?	8b	Х					
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the		1					
<u> </u>	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X				
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)							
40-	Did the agreement on hear lead sheeters have been settled as		Yes	No				
	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	10a		X				
IJ	and branches to ensure their operations are consistent with the organization's exempt purposes?	406						
112	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b	X					
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990	11a	^					
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						
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	125						
_	in Schedule O how this was done	12c						
13	Did the organization have a written whistleblower policy?	13		х				
14	Did the organization have a written document retention and destruction policy?	14		X				
15	Did the process for determining compensation of the following persons include a review and approval by independent							
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?							
а	The organization's CEO, Executive Director, or top management official	15a		X				
þ	Other officers or key employees of the organization	15b		X				
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)							
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a							
	taxable entity during the year?	16a		X				
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation							
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's							
	exempt status with respect to such arrangements?	16b						
	tion C. Disclosure							
17	List the states with which a copy of this Form 990 is required to be filed OR							
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 501(c)(3)s only) and 500-T (Section 501(c)(3)s only) and 500-T (Sec	ivailab	le					
	for public inspection. Indicate how you made these available. Check all that apply							
	Own website Another's website W Upon request Other (explain in Schedule O)							
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	I finan	cial					
00	statements available to the public during the tax year.							
20	State the name, address, and telephone number of the person who possesses the organization's books and records:							
	FRANK WALL - (503) 646-7670 14695 SW MILLIKAN WAY, BEAVERTON, OR 97003	·						
	TAOLO OU MINDI NUI, DERVENION, ON DIVO							

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

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

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

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

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

(A)	(B)			((C)			(D)	(E)	(F)
Name and Title	Average		not c		more	than		Reportable	Reportable	Estimated
	hours per	box	, unle	ss pe	rson	ıs bot or/trus	han	compensation	compensation	amount of
	week	_		uau	recit	Ji/Gus	iee,	from	from related	other
	(list any	recto						the	organizations	compensation
	hours for	9	8			ated		organization	(W-2/1099-MISC)	from the
	related	ustee	trust		g	§		(W-2/1099-MISC)		organization
	organizations below	ual tr	E E		e o	5 8				and related
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) Timothy Gauthier	0.00									
President		X		X				0.	0.	0
(2) Frank Wall	0.00									
Secretary/Treasurer		X		X		_	_	0.	0.	0 .
(3) Doug McQuown	0.00									_
Vice President		X		X		<u> </u>	ļ	0.	0.	0_
(4) Jim Moss	0.00				Ì				_	•
Director	0.00	X			├	├	_	0.	0.	0
(5) John Mohlis	0.00	٠,			ļ		ł	_	0	
Director	0.00	Х			\vdash	-		0.	0.	0
(6) Ross Vroman	0.00	х						0.	0.	_
Director (3)	0.00	^				┝	-	0.	0.	0.
(7) Dave Johnston Director	0.00	X						0.	0.	0.
(8) Jim Link	0.00		-	\vdash				·	0.	
Director	0.00	x						0.	0.	0
(9) Jason Kaufman	0.00									
Director		X					l	0.	0.	0
(10) David Kreifels	0.00									
Director		X	L.					0.	0.	0.
		_	_	<u> </u>	_	↓	_			
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								LF TOURNAMEN		78:	<u> 155</u>	P	age 8
Part VII Section A. Officers, Directors, Trus		ploy	ees,			ghes	st C	ompensated Employe	es (continued)				
(A)Name and title	(B) Average			Pos				(D) Reportable	(E) Reportable		Fo	(F) stimate	ad
. Wante and the	hours per	box,	, unles	ss pe	rson	than o	h an	compensation	compensatio	n		nount	
	week (list any		ceran	dad	recto	or/trus	tee)	from	from related	- 1		other	
	hours for	direct				8		the organization	organizations (W-2/1099-MIS			pensa om th	
	related	stee or	rustee			pensat		(W-2/1099-MISC)	,		_	anızat	
	organizations below	ndividual trustee or director	nstitutional trustee		Key employee	st com	_					d relat anızatı	
	line)	Individ	Institu	Officer	Кеу еп	Highest compensated employee	Former				orga	ai iizati	Olis
													
	 				 	-			* <u>-</u>				
		-											
		_			<u> </u>						<u>-</u>		
					-		_						
1b Sub-total							>	0.		0.			0.
c Total from continuation sheets to Part V	II, Section A						>	0.		0.			0.
d Total (add lines 1b and 1c) 2 Total number of individuals (including but i	ant limited to th		lioto		 bow	-\b	>	0.	000 of reportable	0.			0.
 Total number of individuals (including but incompensation from the organization) 	iot iimitea to tr	iose	liste	eu ai	DOVE	e) wi	Ю	eceived more than \$100	,000 or reportabl	е			0
												Yes	No
3 Did the organization list any former officer			e, ke	y er	nplo	yee,	or	highest compensated e	mployee on				
line 1a? If "Yes," complete Schedule J for					- 4			h	4 h	-	_3_		X
4 For any individual listed on line 1a, is the s and related organizations greater than \$15									the organization		4		X
5 Did any person listed on line 1a receive or									idual for services	Ī	-		
rendered to the organization? If "Yes," con	nplete Schedul	e J f	or su	uch	pers	son					5_		X
Section B. Independent Contractors 1 Complete this table for your five highest co	ompensated in	dene	ende	nt c	onti	racto	ors t	that received more than	\$100,000 of com	nensa	ation f	rom	
the organization Report compensation for	•												
(A) Name and business	address	NO	ONE					(B) Description of s	services	C	O) ompe	C) nsatio	n
	-			_									
							_						
											••		_
O Total number of independent contractions	look die - b. 4 -	- A - I		-4 A		00 l··		d abaya) who societ d	nore these				
Total number of independent contractors \$100,000 of compensation from the organ	_	OL III	mie	u (0		se 11: 0	siec	above) who received n	iore triaff				
											Form	990 (2014)

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (B) Related or (C) Revenue excluded from tax under Unrelated Total revenue exempt function business sections 512 - 514 revenue revenue Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns 1a 1b **b** Membership dues c Fundraising events 1c d Related organizations 1d e Government grants (contributions) 1e f All other contributions, gifts, grants, and 276,670 similar amounts not included above 1f g Noncash contributions included in lines 1a-1f \$ 276,670 h Total. Add lines 1a-1f Business Code 168,135. 168,135. 2 a Auction Proceeds 900099 Program Service 148,055. 900099 148,055. ь Tournament Entry Fees c Meal Fees 900099 63,625. 63,625 d Program Advertising 900099 4,200. 4,200. e Inventory Sold 900099 3,507. 3,507. f All other program service revenue 387,522 g Total. Add lines 2a-2f Investment income (including dividends, interest, and 3 83. 83. other similar amounts) Income from investment of tax-exempt bond proceeds Royalties 5 (i) Real (II) Personal 6 a Gross rents b Less rental expenses c Rental income or (loss) d Net rental income or (loss) (i) Securities 7 a Gross amount from sales of (II) Other assets other than inventory b Less cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ contributions reported on line 1c) See Part IV, line 18 b Less direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities See Part IV, line 19 2,641 2,568 b Less: direct expenses b 73. 73. c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue **Business Code** 11 a d All other revenue Total, Add lines 11a-11d 664,348. 387,522 Total revenue See instructions.

12

Secti	on 501(c)(3) and 501(c)(4) organizations must com			omplete column (A)	
	Check if Schedule O contains a respon	(A)		(C)	(D)
	not include amounts reported on lines 6b, Bb, 9b, and 10b of Part VIII.	Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	330,000.	330,000.		
2	Grants and other assistance to domestic				
	ındıvıduals See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals See Part IV, lines 15 and 16			A	
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				<u> </u>
10	Payroll taxes				
11	Fees for services (non-employees)				
а	Management	78,077.	78,077.		
b	Legal				
С	Accounting				
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.)				
12	Advertising and promotion				
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				<u>-</u>
23	Insurance				
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
а	Golf Tournament	96,001.	96,001.		
h	Food and Beverage	65,743.	65,743.		
	Administrative and Misc	33,093.	33,093.		
4	Auction Purchases and E	19,783.	19,783.		
e		39,741.	39,741.		
25_	Total functional expenses. Add lines 1 through 24e	662,438.	662,438.	0.	0.
<u>25</u> 26	Joint costs Complete this line only if the organization	<u> </u>	302/1301		
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.			•	
	Check here If following SOP 98-2 (ASC 958-720)				

B.U.L.L. SESSION CHARITY GOLF TOURNAMENT Form 990 (2014) 93-1078155 Page 11 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 85,252. 87,162. 1 Cash - non-interest-bearing 2 2 Savings and temporary cash investments Pledges and grants receivable, net 3 3 4 Accounts receivable, net 4 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 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 7,899. basis. Complete Part VI of Schedule D 10a 7,899. 10b 0. b Less: accumulated depreciation 10c Investments - publicly traded securities 11 11 Investments - other securities See Part IV, line 11 12 12 Investments - program-related See Part IV, line 11 13 13 Intangible assets 14 14 44,000. 44,000. 15 Other assets See Part IV. line 11 15 129,252 Total assets. Add lines 1 through 15 (must equal line 34) 16 16 17 Accounts payable and accrued expenses 17 18 Grants payable 18 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 Escrow or custodial account liability Complete Part IV of Schedule D 21 21 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

-	Organizations that follow SFAS 117 (ASC 958), check here X and			
	complete lines 27 through 29, and lines 33 and 34.			
27	Unrestricted net assets	129,252.	27	131,162.
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.			
30	Capital stock or trust principal, or current funds		30	

131,162. Form **990** (2014)

131,162.

0.

23

24

25

26

31

32

33

129,252

0

Net Assets or Fund Balances

31

32

33

23

24

25

Schedule D

Secured mortgages and notes 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

Unsecured notes and loans payable to unrelated third parties

Paid-in or capital surplus, or land, building, or equipment fund

Retained earnings, endowment, accumulated income, or other funds

Total liabilities. Add lines 17 through 25

Total net assets or fund balances

Total liabilities and net assets/fund balances

orm	990 (2014) B.U.L.L. SESSION CHARITY GOLF TOURNAMENT	93-10/8	3 I D D	Pa	ge 12
Par	t XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
	•				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	66	4,3	48.
2	Total expenses (must equal Part IX, column (A), line 25)	2			38.
3	Revenue less expenses. Subtract line 2 from line 1	3		1,9	10.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	12	9,2	52.
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.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,	- 1			
	column (B))	10	13	1,1	62.
Pa	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. X Cash Accrual Other		1		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		_X_
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	l on a			
	separate basis, consolidated basis, or both				}
	Separate basis Consolidated basis Both consolidated and separate basis			ļ	
b	Were the organization's financial statements audited by an independent accountant?		2b		X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,			
	consolidated basis, or both				
	Separate basis Consolidated basis Both consolidated and separate basis				
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,			
	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			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sil	ngle Audit	1	1	
	Act and OMB Circular A-133?		3a		_X_
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	ired audit	1		
	or guidite, explain why in Schedule O and describe any steps taken to undergo such guidite		2h	1	1

Form **990** (2014)

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

Inspection

Name of the organization Employer identification number B.U.L.L. SESSION CHARITY GOLF TOURNAMENT 93-1078155 Reason for Public Charity Status (All organizations must complete this part) See instructions The organization is not a private foundation because it is (For lines 1 through 11, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, 4 city, and state. An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi), (Complete Part II) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) X An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 10 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) You must complete Part IV, Sections A, D, and E. J Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization f Enter the number of supported organizations Provide the following information about the supported organization(s) (i) Name of supported (iii) Type of organization (iv) Is the organization (v) Amount of monetary (ii) EIN (vi) Amount of listed in your (described on lines 1-9 organization support (see other support (see governing document? above or IRC section Instructions) Instructions) Yes No

(see instructions))

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

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

Sec	ction A. Public Support				·		
ale	ndar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
	Gifts, grants, contributions, and		(-)	157.22	(4) =	10,000	(1)
-	membership fees received (Do not						
	include any "unusual grants ")						
2	Tax revenues levied for the organ-						
_	ization'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						
	The portion of total contributions						
3	by each person (other than a					1	
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
6	Public support. Subtract line 5 from line 4			-			
	etion B. Total Support			.L	l		
	ndar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(O Total
	Amounts from line 4	(8) 2010	(b) ZOTT	(0)2012	(u) 2013	(e) 2014	(f) Total
	Gross income from interest,			1			
Ŭ	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources						
q	Net income from unrelated business					· 	
•	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI)						
11	Total support. Add lines 7 through 10						
	Gross receipts from related activities,	etc (see instructi	ons)	·	l ·	12	
	First five years. If the Form 990 is for	•	•	rd, fourth, or fifth ta	ax vear as a sectio		
	organization, check this box and stop		•	,	,		▶□
Se	ction C. Computation of Publi	c Support Pe	rcentage				
14	Public support percentage for 2014 (li	ne 6, column (f) d	ivided by line 11,	column (f))	-	14	%
15	Public support percentage from 2013	Schedule A, Part	II, line 14			15	%
16a	33 1/3% support test - 2014. If the o	rganization did no	ot check the box o	on line 13, and line	14 is 33 1/3% or i	more, check this bo	x and
	stop here. The organization qualifies a	as a publicly supp	orted organization	n			ightharpoons
b	33 1/3% support test - 2013. If the o	rganization did no	ot check a box on	line 13 or 16a, and	l line 15 is 33 1/39	6 or more, check th	iis box
	and stop here. The organization qualif	fies as a publicly :	supported organiz	ation			. ▶□
17a	10% -facts-and-circumstances test	- 2014. If the org	anization did not	check a box on line	e 13, 16a, or 16b,	and line 14 is 10%	or more,
	and if the organization meets the "fact	s-and-circumstan	ces" test, check t	his box and stop t	nere. Explain in Pa	rt VI how the organ	iization
	meets the "facts-and-circumstances" t	test. The organiza	tion qualifies as a	publicly supported	d organization	· ·	ightharpoons
b	10% -facts-and-circumstances test	- 2013. If the org	anization did not	check a box on line	e 13, 16a, 16b, or	17a, and line 15 is	10% or
	more, and if the organization meets th						
	organization meets the "facts-and-circ				•		▶□
18	Private foundation. If the organization		-	· ·		•	s . ▶□
	·				0.1	edule A /Form 990	000 FT) 0044

Schedule A (Form 990 or 990-EZ) 2014 B.U.L.L. SESSION CHARITY GOLF TOURNAMENT 93-1078155 Page 3 Part III Support Schedule for Organizations Described in Section 509(a)(2)

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

Sec	ction A. Public Support	elow, please comp	nete Fait II j						
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								
	ınclude any "unusual grants.")	216,034.	235,739.	263,028.	254,223.	276,670.	1245694.		
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	391,383.	392,671.			387,522.			
3	Gross receipts from activities that		•	•	•		-		
	are not an unrelated trade or bus- iness under section 513	17,710.	14,645.		2,052.	73.	34,480.		
4	Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf								
5	The value of services or facilities furnished by a governmental unit to the organization without charge								
6	Total. Add lines 1 through 5	625,127.	643,055.	642,429.	640,098.	664,265.	3214974.		
	Amounts included on lines 1, 2, and	,,	,	,					
	3 received from disqualified persons						0.		
t	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	45,325.	57,526.	49,568.	49,186.		<u>247,104.</u>		
	Add lines 7a and 7b	45,325.	57,526.	49,568.	49,186.	45,499.	247,104.		
	Public support (Subtract line 7c from line 6)						<u> 2967870.</u>		
	ction B. Total Support								
	ndar year (or fiscal year beginning in)	(a) 2010 625,127.	(b) 2011 643,055.	(c) 2012 642,429.	(d) 2013 640,098.	(e) 2014 664, 265.	(f) Total		
_	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties		-	•			3214974.		
	and income from similar sources	348.	123.	132.	92.	83.	778.		
ľ	Unrelated business taxable income								
	(less section 511 taxes) from businesses acquired after June 30, 1975								
,	Add lines 10a and 10b	348.	123.	132.	92.	83.	778.		
	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carned on		123.	132.	<i>J2</i> .	03.	770.		
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)	625,475.	643,178.	642,561.	640,190.	664,348.	3215752.		
14	First five years. If the Form 990 is for	r the organization's	first, second, thir	d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3) organiz	ation,		
Se	check this box and stop here	ic Support Pe	rcentage			<u></u>	▶□		
15	Public support percentage for 2014 (line 8, column (f) d	vided by line 13, o	column (f))		15	92.29 %		
<u>16</u>	Public support percentage from 2013	Schedule A, Part	III, line 15			16	92.24 %		
<u>Se</u>	ction D. Computation of Inve	stment Incom	e Percentage			,			
17	Investment income percentage for 20)14 (line 10c, colur	nn (f) divided by lir	ne 13, column (f))		17	.02 %		
18	Investment income percentage from	•				18	.05 %		
19	a 33 1/3% support tests - 2014. If the								
	more than 33 1/3%, check this box a	•	•		•	=	\triangleright [X]		
	o 33 1/3% support tests - 2013. If the line 18 is not more than 33 1/3%, che	eck this box and s	t op here . The orga	anization qualifies a	as a publicly supp	orted organization	and ▶☐		
20	Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions								

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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)

S	ection A.	All Supporting Organization	ıs

- 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?
- 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)

	Yes	No
1		
2		
3a		
Ja		
3b		
1		
3c		
4a		
4b		
4c		
_ 5a		
5b		
5c		
6		
7		
8		
9a		
9b		
9c		
10a		
10b		
m 990 or 99	0-EZ)	2014

<u>sche</u>	dule A (Form 990 or 990 EZ) 2014 B.U.L.L. SESSION CHARITY GOLF TOURNAMENT93-10	<u> 1812</u>	5 Pa	<u> 1ge 5</u>
Pai	rt IV Supporting Organizations (continued)		· · · · · ·	
4	The the appearance of the fellowing of t		Yes	No
	Has the organization accepted a gift or contribution from any of the following persons?			ĺ
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			ı
	below, the governing body of a supported organization?	11a	_	-
	A family member of a person described in (a) above?	11b		-
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c	<u></u> _	<u> </u>
Sec	tion B. Type I Supporting Organizations			
	Daths don't be been seen book of the second		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			1
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			l
	controlled the organization's activities. If the organization had more than one supported organization,			l
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			ĺ
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year	1		<u> </u>
2	Did the organization operate for the benefit of any supported organization other than the supported			1
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carned out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization	2	L	
Sec	tion C. Type II Supporting Organizations		1	
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			ĺ
	the supported organization(s)	1		
Sec	tion D. Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax			
	year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the			ĺ
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		<u> </u>
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s)	2_		<u> </u>
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		<u> </u>
Sec	tion 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):			
а	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.		_	
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see inst	ructions		
2	Activities Test Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			İ
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,		}	İ
	how the organization was responsive to those supported organizations, and how the organization determined			l
	that these activities constituted substantially all of its activities	2a		<u> </u>
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			1
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			_
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			1
	trustees of each of the supported organizations? Provide details in Part VI.	3a		L
ь	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard	3ь		1

Sche	dule A (Form 990 or 990-EZ) 2014 B.U.L.L. SESSION CHARIT	Y GOI	F TOURNAMENTS	3-1078155 Page 6
Pai				
1	Check here if the organization satisfied the Integral Part Test as a qualifying			uctions. All
	other Type III non-functionally integrated supporting organizations must co	mplete S	ections A through E	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	<u>-</u>	
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		<u> </u>	
	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		
Sect	ion B - Minimum Asset Amount		(A) Pnor 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)	<u> </u>	770	
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other			
	factors (explain in detail in Part VI)	<u> </u>		
_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		<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 pon-functional	v.intoarat	ted Type III supporting org	anization (coo

Schedule A (Form 990 or 990-EZ) 2014

instructions).

Schedule A (Form 990 or 990-EZ) 2014 B.U.L.L. SESSION CHARITY GOLF TOURNAMENT93-1078155 Page 7 Part V | Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) Section D - Distributions **Current Year** 1 Amounts paid to supported organizations to accomplish exempt purposes Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity Administrative expenses paid to accomplish exempt purposes of supported organizations 3 Amounts paid to acquire exempt-use assets Qualified set-aside amounts (prior IRS approval required) Other distributions (describe in Part VI). See instructions 6 Total annual distributions. Add lines 1 through 6 7 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions 9 Distributable amount for 2014 from Section C, line 6 Line 8 amount divided by Line 9 amount (i) (ii) (iii) **Excess Distributions** Underdistributions Distributable Section E - Distribution Allocations (see instructions) Pre-2014 Amount for 2014 Distributable amount for 2014 from Section C, line 6 Underdistributions, if any, for years prior to 2014 (reasonable cause required-see instructions) Excess distributions carryover, if any, to 2014 b C d e From 2013 f Total of lines 3a through e g Applied to underdistributions of prior years h Applied to 2014 distributable amount i Carryover from 2009 not applied (see instructions) Remainder Subtract lines 3g, 3h, and 3i from 3f. Distributions for 2014 from Section D. a Applied to underdistributions of prior years **b** Applied to 2014 distributable amount c Remainder Subtract lines 4a and 4b from 4 Remaining underdistributions for years prior to 2014, if any. Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions) Remaining underdistributions for 2014 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see Excess distributions carryover to 2015. Add lines 3j and 4c. Breakdown of line 7 а b C d Excess from 2013

e Excess from 2014

Schedule A Part VI	(Form 990 or 990-EZ) 2014 B.U.L.L. SESSION CHARITY GOLF TOURNAMENT93-1078155 Page 8
	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12 Also complete this part for any additional information (See instructions)
	•
 	

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

➤ Attach to Form 990.

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

OMB No 1545-0047 Open to Public Inspection

Name of the organization

B.U.L.L. SESSION CHARITY GOLF TOURNAMENT

Employer identification number 93-1078155

Pai	t I Organizations Maintaining Donor Advise	d Funds or Other Similar Funds o	r Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line	e 6	·
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)	-	
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advised	funds
	are the organization's property, subject to the organization's	•	Yes No
6	Did the organization inform all grantees, donors, and donor a	_	
	for charitable purposes and not for the benefit of the donor of		
	impermissible private benefit?		Yes No
Pai		ganization answered "Yes" to Form 990, Part	
1	Purpose(s) of conservation easements held by the organization		
	Preservation of land for public use (e.g., recreation or e		cally important land area
	Protection of natural habitat	Preservation of a certifie	
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quality	fied 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
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
C	Number of conservation easements on a certified historic str	ucture included in (a)	2c
d	Number of conservation easements included in (c) acquired	• •	
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by the or	
	year▶	,	3
4	Number of states where property subject to conservation ea	sement is located	
5	Does the organization have a written policy regarding the per		
	violations, and enforcement of the conservation easements i	t holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,	and enforcing conservation easements durir	ng the year
7	Amount of expenses incurred in monitoring, inspecting, and	enforcing conservation easements during the	e year ▶ \$
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirements of section 170(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservati	on easements in its revenue and expense st	atement, and balance sheet, and
	include, if applicable, the text of the footnote to the organiza	tion's financial statements that describes the	organization's accounting for
	conservation easements		
Pa	t III Organizations Maintaining Collections o	f Art, Historical Treasures, or Oth	er Similar Assets.
	Complete if the organization answered "Yes" to Form	990, Part IV, line 8	
1a	If the organization elected, as permitted under SFAS 116 (AS	SC 958), not to report in its revenue statemer	nt and balance sheet works of art,
	historical treasures, or other similar assets held for public ext	nibition, education, or research in furtherance	e of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that descri	bes these items	
b	If the organization elected, as permitted under SFAS 116 (AS	SC 958), to report in its revenue statement ar	nd balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, e	ducation, or research in furtherance of public	service, provide the following amounts
	relating to these items		
	(i) Revenue included in Form 990, Part Vill, line 1		> \$
	(ii) Assets included in Form 990, Part X		> \$
2	If the organization received or held works of art, historical tre	asures, or other similar assets for financial ga	
	the following amounts required to be reported under SFAS 1	16 (ASC 958) relating to these items:	
а	Revenue included in Form 990, Part VIII, line 1		> \$
b	Assets included in Form 990, Part X		▶ \$

		SESSION								Page 2
Par										
3	Using the organization's acquisition, accessi	on, and other record	ls, check	any of the	following tha	t are a si	gnificant	use of its	collection	rtems
	(check all that apply)									
а	Public exhibition	C	. '	Loan or excl	hange progra	ams				
b	Scholarly research	e	,	Other						
С	Preservation for future generations									
4	Provide a description of the organization's co	•		•	-			ose in Pari	t XIII	
5	During the year, did the organization solicit o					er sımılar	assets		_	
_	to be sold to raise funds rather than to be ma								<u>Yes</u>	No_
Par	t IV Escrow and Custodial Arran reported an amount on Form 990, Par		ete if the	organizatio	n answered '	"Yes" to	Form 990	, Part IV, I	ine 9, or	
1a	Is the organization an agent, trustee, custodi	an or other intermed	diary for	contribution	s or other as	sets not	ıncluded			
	on Form 990, Part X?		,						Yes	☐ No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	oliowina t	table.						
_			3						Amount	
С	Beginning balance						1c			
	Additions during the year	•					1d			
	Distributions during the year						1e			
f	Ending balance						1f			
2a	Did the organization include an amount on F	orm 990, Part X, line	21, for e	escrow or cu	ustodial acco	unt liabil	ity?		Yes	No
b	If "Yes," explain the arrangement in Part XIII	Check here if the e	xplanatio	on has been	provided in l	Part XIII				
Par							0			
		(a) Current year	(b) P	rior year	(c) Two year	rs back	(d) Three y	ears back	(e) Four	ears 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									
2	Provide the estimated percentage of the cur	rent year end baland	ce (line 1	g, column (a	a)) held as [.]					
а	Board designated or quasi-endowment		%							
b	Permanent endowment	%								
С	Temporarily restricted endowment ▶	%								
	The percentages in lines 2a, 2b, and 2c should	uld equal 100%								
За	Are there endowment funds not in the posse	ession of the organiz	ation tha	at are held a	ind administe	ered for th	ne organiz	zation	_	
	by								<u> </u>	Yes No
	(i) unrelated organizations	•							3a(ı)	
	(ii) related organizations								3a(ii)	
b	If "Yes" to 3a(ii), are the related organizations								3b	
4	Describe in Part XIII the intended uses of the		owment	funds						
Pa	rt VI _] Land, Buildings, and Equipm									
	Complete if the organization answere	d "Yes" to Form 990), Part IV	/, line 11a_S	ee Form 990	, Part X,	line 10			
	Description of property	(a) Cost or o			or other		ccumulate	i i	(d) Book	value
		basis (investi	ment)	basis	(other)	dep	oreciation	_		
1a	Land									
b	Buildings							_		
С	Leasehold improvements									
	Equipment				<u>7,899.</u>		7,8	99.		0.
	Other			L				_		
Tota	I. Add lines 1a through 1e (Column (d) must e	equal Form 990, Part	t X, colur	nn (B), line 1	10c)					0.

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Part VII	Investments - Other Securities.			000 5			
(a) Descrip	Complete if the organization answered "Yes" tion of security or category (including name of security)	(b) Book value				of year market year	
		(b) Book value	(C) IVIE	ethod of valuat	cost or end-	of-year market va	liue
	al derivatives				-		
	held equity interests			 			
(3) Other				· · · · · · · · · · · · · · · · · · ·			
(A)						 	
(B)	· · · · · · · · · · · · · · · · · · ·						
(C)				· · · · · · · · · · · · · · · · · · ·			
(D)							
(E)		<u>-</u>					
(F)			1				
(G)	· · · · · · · · · · · · · · · · · · ·	+	- 		 -		
(H)	b) must squal Form 000 Port V and (D) line 10.)		-				
	b) must equal Form 990, Part X, col. (B) line 12.)						
rait viii	•				v. 1 . 40		
	Complete if the organization answered "Yes" (a) Description of investment	(b) Book value				of-year market va	uluo
(1)	(a) Description of investment	(b) Book value	(6) 1416	Striod or Valuat	don Cost of end-	Oryear market va	
(1)	·· -	 -	-				
(2)							
(3)							
(5)	·		_	.	· · ·	_	
(6)	·						
(7)					 -		
(8)					 		
(9)		 				-	
	b) must equal Form 990, Part X, col. (B) line 13.)				·	· · · ·	
Part IX		ı	L				
[Complete if the organization answered "Yes'	to Form 990. Part IV	line 11d See F	orm 990 Part	X line 15		
	111	Description	,	om 550, r urr	7, 1110 10.	(b) Book valu	
(1) De	posits						000.
(2)	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					<u> </u>	000.
(3)							
(4)						<u> </u>	
(5)	· -			 -			
(6)							
(7)						·	
(8)					-		
(9)			 				
	ımn (b) must equal Form 990, Part X, col (B) lır	ne 15)				44	000.
Part X	Other Liabilities.	,	· · · · · · · · · · · · · · · · · · ·				000.
	Complete if the organization answered "Yes"	to Form 990. Part IV	. line 11e or 11f.	See Form 990). Part X. line 25		
1.	(a) Description of liability		(b) Book v		, · · · · · · · · · · · · · · · · · · ·		
	leral income taxes						
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)		·					
(9)							
	ımn (b) must equal Form 990, Part X, col (B) lir	ne 25)					
	for uncertain tax positions. In Part XIII, provid		note to the organ	uzation's financ	nial statements +	nat reports the	
	ation's liability for uncertain tax positions unde		_				

Schedule D (Form 990) 2014

chedule D (Form 990) 2014 B.U.L.L. SESSION CHAR	ITY GOLF TOURNAMENT	93-10781	55 Page 4
Part XI Reconciliation of Revenue per Audited Financial S	Statements With Revenue pe	r Return.	
Complete if the organization answered "Yes" to Form 990, Part IV,	, line 12a		
1 Total revenue, gains, and other support per audited financial statements		1	
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12			
a Net unrealized gains (losses) on investments	2a	_	
b Donated services and use of facilities	2b		
c Recoveries of prior year grants	2c		
d Other (Describe in Part XIII.)	2d	<u> </u>	
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	1 1		
a Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b Other (Describe in Part XIII)	4b	⊣	
c Add lines 4a and 4b		4c	 .
5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line		5 Dots	
Part XII Reconciliation of Expenses per Audited Financial	-	er Keturn.	
Complete if the organization answered "Yes" to Form 990, Part IV,	, line 12a		
1 Total expenses and losses per audited financial statements		1	
2 Amounts included on line 1 but not on Form 990, Part IX, line 25	1.5.1		
a Donated services and use of facilities	2a		
b Prior year adjustments	2b		
c Other losses	2c	-	
d Other (Describe in Part XIII) e Add lines 2a through 2d	2d	- 0.	
		2e 3	
3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part IX, line 25, but not on line 1:	•	3	
a Investment expenses not included on Form 990, Part VIII, line 7b	40		
b Other (Describe in Part XIII)	4a 4b	-	
c Add lines 4a and 4b	40	- ₄₅	
5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line	a 18)	4c 5	
Part XIII Supplemental Information.	C 707		
nes 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide	e any additional information.		
			•
			
			
			
			

SCHEDULE (Form 990) Department of the Treasury Internal Revenue Service

Name of the organization

B.U.L.L.

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

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

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

2014 Open tó Public Inspection

OMB No 1545-0047

2 Employer identification number 93-1078155 X Yes 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 CHARITY GOLF TOURNAMENT SESSION Part I General Information on Grants and Assistance

crite	criteria used to award the grants or assistance? $oxed{X}$ Yes $oxed{D}$ Nes	ŝ
2 Des	Describe in Part IV the organization's procedures for monitoring the <u>use</u> of grant funds in the United States	
Part II	Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any	
	someone that society many than \$5 000 Date II and he disabled it additional connection	

recipient that received more than \$5,000. Part II can be duplicated	\$5,000 Part II can		if additional space is needed	þe			
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, EMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
March of Dimes							To support general
1220 SW MOFFISON, SUITE 510 Portland, OR 97205	13-1846366	501(c)(3)	70,000,	0			organization
Wheel to Walk Foundation							To support general
P.O. Box 20146	93-0725300	501(c)(3)	61.000	0			mission of the organization
Gales Creek Camp Foundation, c/o							
Cheryl Sheppard - 7110 SW Fir							To support general
Loop, Suite 170 - Portland, OR							mission of the
97223	93-6010464	501(c)(3)	45,000.	0			organization
Providence Child Center							To support general
830 NE 47th Avenue							mission of the
Portland, OR 97213	93-0800140	501(c)(3)	50,000	0			organization
Randall Children's Hospital at						<u>*</u>	To support general
Emanuel - P.O. Box 4484 -							mission of the
Portland OR 97208	93-1314469	501(c)(3)	15,000	0			organization
Shriners Hospitals for Children							To support general
3101 SW Sam Jackson Park Rd.							mission of the
Portland, OR 97201	36-2193608	501(c)(3)	36,000,	0			organization
							4

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Enter total number of other organizations listed in the line 1 table

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

Schedule I (Form 990) (2014)

93-1078155 Page 1 ·	
3.U.L.L. SESSION CHARITY GOLF TOURNAMENT	rants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II)
Schedule I (Form 990)	Part II Continuation of Grar

(a) Name and address of (b) EIN (c) IRC section (d) Amount of non-cash organization or government assistance	(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
Doernbecher Children's Hospital Foundation - 1121 SW Salmon - Portland, OR 97205	93-0579589	501(c)(3)	10,000	0			To support general mission of the organization
Albertina Kerr 424 NE 22nd Avenue Portland, OR 97232	93-1297104	501(c)(3)	36,000.	0			To support general mission of the organization
							Schedule I (Form 990)

Page 2 · 93-1078155

Schedule I (Form 990) (2014) B.U.L.L. SESSION CHARITY GOLF TOURNAMENT

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" to Form 990, Part IV, line 22

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" to Form 990, Part IV, line 22

(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
Part IV Supplemental Information. Provide the information required in	ured in Part I, line	2, Part III, column	Part I, line 2, Part III, column (b), and any other additional information	ditional information	
Part I, Line 2:					
The Organization maintains records	to subst	substantiate t	the amount	of grants,	
eligibility and selection criteria	used to	award gra	grants. The (Organization	
does not monitor the use of grant funds	funds as	all grants	s are unrestricted	stricted.	
The Organization supports the general		on of the	mission of the charities		

Schedule I (Form 990) (2014)

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue, Service

Supplemental Information to Form 990 or 990-EZ

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

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

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Name of the organization Employer identification number B.U.L.L. SESSION CHARITY GOLF TOURNAMENT 93-1078155 Form 990, Part I, Line 1, Description of Organization Mission: tournament. Form 990, Part VI, Section A, line 3: The organization has entered into a consulting agreement with EEE, LLC to manage and operate the tournament in accordance with the terms and conditions set forth in the agreement. Form 990, Part VI, Section B, line 11: The Form 990 was distributed to the Finance Committee of the Board of Directors for review and comment before it was filed. Form 990, Part VI, Section C, Line 19: The organization provides copies of governing documents and reviewed financial statements upon request.