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Form **990**

Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047 2014

Department of the Treasury

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

		Je Service	Information about	1 Form 990	and its instruction	18 IS at 1	www.irs.	gov/form99	<u>0. </u>	Inspec	cuon
<u>A</u>	For the	2014 cale	ndar year, or tax year beginning				d ending		6/30	, 20 15	
В	Check if a	applicable:	C Name of organization Surf For L	ife					D Employ	yer identification	number
	Address	change	Doing business as						l	26-2527261	
	Name cha	-	Number and street (or P.O box if m	all is not del	vered to street addres	(S)	Room/suit	.e	E Telepho	one number	
	Initial retu	•	PO Box 591837							858-349-2445	
$\bar{\sqcap}$		vtermnated			030-343-2443						
$\overline{\Box}$	Amended		City or town, state or province, coul San Francisco, CA, 94159-1837		, , , , ,				G Gross r	acointe S	026 011
ī		,	F Name and address of principal office		nder Fang			11/01/040			925,811
_	Application	. "			•					subord_nates? Ye	
			PO Box 591837, San Francisco,				1			s included? [Ye see instructions)	s ∐ No
÷	Tax-exem		✓ 501(c)(3)) • (insert no) 4947(a)	(1) or L	527	⊣			
7	Website:		w.surfforlife.org	<u> </u>	-	T				number >	 -
			Corporation Trust Associa	ition [Oth	er >	L Year	of formation	on 2008	M State	of legal domicile.	CA
Η'	art I	Summ									
_			scribe the organization's miss								
Activities & Governance			velopment projects in coastal c				nbie tea	ms of 'volur	n-lourists	to travel to va	rious
ā			tes where they serve as hands-								
Ver	2 (Check thi	s box ▶ ☐ if the organization	discontinu	red its operations	or disp	osed of	more than	1 25% of	its net assets.	
Ô	3 1	Number o	of voting members of the gove	rning bod	(Part VIDIOTA	EIVE	'n	.] .	3		4
ď	4 1	Number o	of vating members of the gove of independent voting member	rs of the g	verning body (P	arl Vict	ne 1b)		4		3
ties	[5]	Total num	nber of individuals employed in	n calendai	gear 2014 (Part	V, line 2	a) .	7 · · ·	5		3
Ž	6 1	Total num	nber of volunteers (estimate if	necessary	9	@ 20°	(⊋∥	6		250
Ac	7a 1	Total unre	elated business revenue from	Part VIII, d	otumn (C) line 12	y 20;	10 /	≱	7a		0
	l d l	Net unreia	ated business taxable income	from Ford	n 99 0			≝ ∥	7b		0
_					OGDE	N. C	ITT	Pnor Yo	ar	Current Y	ear
	8 (Contribut	ions and grants (Part VIII, line	<u></u>	524,180		925,669				
Revenue			service revenue (Part VIII, line		0		0				
	,	· · · · · · · · · · · · · · · · · · ·									0
			enue (Part VIII, column (A), line				· -		0		142
											
			nue-add lines 8 through 11 (n			(A), III 16	12)		524,180		925,811
			nd similar amounts paid (Part I		0						
		•	paid to or for members (Part I)						0		0
65	L.		other compensation, employee I			lines 5-	10)		147,579		201,210
Expenses	i		nal fundraising fees (Part IX, c				· ·		0		0
ğ			draising expenses (Part IX, col			88.	417.				
ш			oenses (Part IX, column (A), lin				· · _		449,917		671,799
	18 1	Total exp	enses. Add lines 13-17 (must	equal Par	t IX, column (A), li	ne 25)	· L		597,496		873,009
	19 F	Revenue	less expenses. Subtract line 1	8 from line	9 12 <u>.</u>	<u></u>			-73,316		52,802
58							В	eginning of Cu	rrent Year	End of Ye	ar
a se	20 1	Total asse	ets (Part X, line 16)				- · L		115,686		162,284
A A	21 7	Total liabi	lities (Part X, line 26)				· L		8,810		2,606
훒	20 T 21 T 22 N	Vet asset	s or fund balances. Subtract le	ne 21 fror	n line 20		. [106,876		159,678
	ırt li	Signat	ure Block								
Un	der penalti	es of penur	y, I declare that I have examined this r	eturn, includ	ing accompanying scl	nedules a	nd statem	ents, and to th	he best of n	ny knowledge and	d belief, it is
tru	e, correct,	and comple	ete Declaration of preparer (other than	officer) is ba	sed on all information	of which	preparer h	nas any knowl	edge.		
		1	Alle Fre						1/4/	2016	
Sig	n	Signa	ture of officer					Da	te		
He		. Alex	cander Fang, Executive Director								
_	i		or print name and title								
<u> </u>			pe preparer's name	Preparer's s	ignature	7	Date	, ,	Check [ZI (PTIN	
Pa		Annette	Cook	ann	III A ME		12	123/2013	self-emp		72855
	parer				//				's EIN ▶	20-47285	
US	e Only	Firm's ad		Oakland	CA 94607				ne no	510-350-20	
May	the IRS		this return with the preparer s			ions) .					s No
			tion Act Notice, see the separa				Cat. No	11282Y			990 (2014)



Form 99	00 (2014)	₃₀ 2
Part	Statement of Program Service Accomplishments	_
	Check if Schedule O contains a response or note to any line in this Part III	
1	Briefly describe the organization's mission:	
	Our mission is to channel the interest and energy of individuals into teams that travel to various project sites where they serve as	
	hands-on volun-tourists and goodwill advocates. Execution of community-identified projects that provide access to health an	
	education to disadvantaged children and their communities in the developing world.	
2	Did the organization undertake any significant program services during the year which were not listed on the	
_	prior Form 990 or 990-EZ?	
	If "Yes," describe these new services on Schedule O.	U
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.	U
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 other	Dy Pre
	the total expenses, and revenue, if any, for each program service reported.	,
48	(Code:) (Expenses \$ 388,308 including grants of \$ 0) (Revenue \$ 388,308)	_
70	Surf For Live volunteers worked with local leaders to construct a secondary schools in four Central America countries providing	
	education to hundreds of students	
	######################################	
		••••

		••••
4b	(Code:) (Expenses \$ 104,661 including grants of \$ 0) (Revenue \$ 104,661)	
-10	Surf For Life volunteers worked with local leaders to construct classrooms in Philippines, providing educational support, vocations	1
	training, and various social services to thousands of residents of the surrounding community.	 -

	\$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	
		_
4c	(Code:) (Expenses \$ 212,490 including grants of \$ 0) (Revenue \$ 212,490)	
	Our mission is to channel the interest and energy of individuals into teams that travel to various project sites where they serve as	
	hands-on volun-tourists and goodwill advocates. Execution of community-identified projects that provide access to health an	
	education to disadvantaged children and their communities in the developing world.	
	***************************************	***
		••••

		••••
	Other program services (Describe in Schedule O.) See Schedule O, Statement 2	
	(Expenses \$ 37,088 including grants of \$ 0) (Revenue \$ 31,000)	
40	Tetal amount contine expenses > 742 527	

Form 9	90 (2014) IV Checklist of Required Schedules			Page (
			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	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	1	-
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	•	1
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		1
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		1
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		1
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		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		1
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		1
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		1
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VII, IX, or X as applicable.			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		
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	Ť	✓
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		1
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		1
e	Did the organization report an amount for other flabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		1
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's flability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	111		1
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		1
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		✓
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		✓
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	148		1
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		1
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		<u> </u>
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		<u>▼</u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	1	<u>·</u>
18	Did the organization report more than \$15,000 total of fundralsing event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		<u>·</u> ✓
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		<u>*</u>
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		⇁
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		<u>·</u>

Part	IV Checklist of Required Schedules (continued)			rage 4
•			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 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on	21		1
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		1
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		1
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		1
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 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	24d 25a		1
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		1
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		1
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		1
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):	,		
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		1
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		√
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	29 30		√
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		1
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		1
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		✓
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a 35b		1
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	38		1
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
38	Part VI	37 38	1	√
			000	

Part	Statements Regarding Other IRS Filings and Tax Compliance		 -	raye o				
	Check if Schedule O contains a response or note to any line in this Part V			П				
			Yes	No				
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 14	7.		· ·				
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0	1		1				
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	4.	1					
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	1c	*					
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 3							
ь	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		`				
•	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	20	-	 				
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	'	/				
ь	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Н	<u> </u>				
48	At any time during the calendar year, did the organization have an interest in, or a signature or other authority	-	_					
74	over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		,				
h	If "Yes," enter the name of the foreign country: ▶			`				
U	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts	- "	- 1					
	(FBAR).							
Ea	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	•	1				
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	55		7				
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		<u> </u>				
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		1				
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or							
	aifts were not tax deductible?	6b						
7	Organizations that may receive deductible contributions under section 170(c).							
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	, ·	7. ,					
	and services provided to the payor?	7a		✓_				
ь	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b						
C	ment in the state of the second of the secon							
	required to file Form 8282?	7¢		<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		✓_				
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	71		✓				
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 g		1				
ĥ	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	76		✓				
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	Marin.	. 1	1 . 1				
	sponsoring organization have excess business holdings at any time during the year?	8						
9	Sponsoring organizations maintaining donor advised funds.	٠,						
8	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:	٠, ،						
a	Initiation fees and capital contributions included on Part VIII, line 12		'	, ,				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b		′					
11	Section 501(c)(12) organizations. Enter: Gross income from members or shareholders	٠	- :					
8	Gross income from members or shareholders							
D	against amounts due or received from them.)							
40-	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	128	-	۱. ۱				
12a b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	128						
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	· .	l					
is a	is the organization licensed to issue qualified health plans in more than one state?	13a						
•	Note. See the instructions for additional information the organization must report on Schedule O.		1					
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							
C	Enter the amount of reserves on hand	2.1	<u> </u>					
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		1				
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O .	14b						
		Form	990	(2014)				

Form 990 (2014)	Form	990	(2014)	
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Part	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. Check if Schedule O contains a response or note to any line in this Part VI	and See in:	for a	"No" ions.
Sect	ion A. Governing Body and Management		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a		103	NO
	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 2	Enter the number of voting members included in line 1a, above, who are independent . 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?	'		
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		1
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		1
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		1
6	Did the organization have members or stockholders?	6	<u> </u>	1
7 a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		1
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		1
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			,
8	The governing body?	8a 8b	7	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	_	1
Secti	ion B. Policies (This Section B requests information about policies not required by the Internal Rever	ue C	ode.)
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	<u> </u>	1
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
118	Has the organization provided a complete copy of this Form 990 to all members of its governing body before fitting the form?	11a	/	
ь	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	120	/	
12a b	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a 12b		
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	1	
13	Did the organization have a written whistleblower policy?	14	 ` -	┼─
14 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?	3		
8	The organization's CEO, Executive Director, or top management official	15a	✓.	
b	Other officers or key employees of the organization	15b		1
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		ļ	ļ
16a	with a taxable entity during the year?	16a		1
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	1		,
	organization's exempt status with respect to such arrangements?	16b	L	L
	List the states with which a copy of this Form 990 is required to be filed ► CA			
17 18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public inspection. Indicate how you made these available. Check all that apply.	n 501(c)(3)s	only)
19	Own website Another's website Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of infinancial statements available to the public during the tax year.	erest	polic	y, and
20	State the name, address, and telephone number of the person who possesses the organization's books and re	cords	:▶	
	Alex Fang. (415)664-2050			

Form	990	(2014)	

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Part VII	Compensation of Officers	, Directors, Tru	stees, Key Employe	es, Highest Comp	ensated Employee	s. and
	Independent Contractors			. •	, ,	•

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.

compensated employees; and former such pers		3 VI	U II		J. O,			one	omocro, noy	ompleyees, mg//c	~
☐ Check this box if neither the organization no	r any relate	d org	aniz	zatic	n c	ompe	nse	ated any currer	nt officer, directo	r, or trustee.	
				(C)						
· W	(B)	l			ution			(D)	(E)	(F)	
Name and Title	Average					than e is boti		Reportable	Reportable	Estimated	
	hours per	office	er en:			or/trus		compensation	compensation from		
	week (list any hours for	Individual trustee or director	Institutional trustee	Officer	Key employee	ar Ar	Former	from the	related organizations	other compensation	
	related organizations	48	Ĕ	¥	3	38] ₹	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization	
	below dotted	9 5	置		ğ	9	ļ			and related	
	line)	1	₹		8	3		ļ		organizations	
		•	8			Highest compensated employse					
											-
Boseph Fox	22	١,				İ	1	_	_		_
Director	0	✓	_	 	-	├	├				0
Trent Gordon	40		1			}]				_
Director	0	1	├	}	-	-	├	67,500	<u> </u>	<u> </u>	0
Craig Finster	22	1			Į		1	١ .			
Director	0	-	├		├		├	ļ <u>0</u>	0		0
Jonathan Sofer	4	ł		1		l	l	١ .			0
Treasurer, Secretary	40		-	-	-		╁	0	<u>-</u>		<u>.</u>
Alex Fang Executive Director	0	l		1			ļ	0	0		0
Executae plactos	-			<u> </u>			┢	 	_		Ť
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Part	Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)													
		ł	l		•	C)								
	(A)	(B)	ido e	vot cl		ution	e than	000	(D)	(E)			(F)	
	Name and title	Average					is boti		Reportable	Reportat		Est	imated	
		hours per week (list any		er an	dad	irect	or/trus	tee)	compensation from	compensatio related			ount of ther	
		hours for	9 E	Į	3	3	哥哥	कु	the	organizatı			ensatioi	ກ
		related	Individual trustee or director	1	Officer Officer	Key employee	1 2 3	Tomas Tomas	organization	(W-2/1099-I	MISC)	fro	m the	
		organizations below dotted	호를	Ş	1	횽	88	Ι.	(W-2/1089-MISC)				nization related	
		line)	3	5	l	夏	퓛	1					rizations	
			8	Institutional trustee]	Highest compensated employee		į.					
					<u></u>	L	8							
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		L		L		لبا	L	Ļ.,						
1b	Sub-total								67,500		- 0			0
C	Total from continuation sheets to Part	•							67.500					
d	Total (add lines 1b and 1c)							<u>\</u>	67,500		0	<u> </u>		0
2	Total number of individuals (including but			ose	list	ed t	above	e) W	ho received mo	ore than \$1	00,00	U Of		
	reportable compensation from the organi	zauon > 0											Yes	No
•	Did the organization list any former of	floor direct	lar a	. · ·	uete	.	kov e	m	lovee or high	oet compo	neata	d [168	NO
3	employee on line 1a? If "Yes," complete \$	ilcer, ulreci Schodulo I	tor, u for si	ich:	uati Indi	vidi	noy o <i>œl</i>	an th	loyee, or riigh	est compe	i isate	3	•	1
	For any individual listed on line 1a, is the								nd other comp	anastian fr	 ~~ *h		-	<u> </u>
4	organization and related organizations	creater the	on \$1	150 (กกก	ipei 2 H	158110 7 "Vo	91 G	complete Sch	erisauon ii erbile J fo	Cili Ui			
	individual	ground the							oompiote con			7 4	1	1
5	Did any person listed on line 1a receive o	r accriie co	mpei	nsat	ion	fror	n anv	un.	related organiz	ation or inc	dividu			<u> </u>
J	for services rendered to the organization?											5	. 1	1
Section	n B. Independent Contractors								• • • • • • • • • • • • • • • • • • • •					
1	Complete this table for your five highest of	compensate	ad inc	lene	ende	ent o	contr	acto	ors that receive	d more tha	n \$10	0.000 of		·
•	compensation from the organization. Rep													IX.
	year.							•	•				-	
	(A)								(B)			(C)		
	Name and business add	re s 8							Description of se	ervices		Compens	ation	
None														
												····		
									· · · · · · · · · · · · · · · · · · ·				-	
2	Total number of independent contractor	•	•					th	ose listed abo	ve) who				
	received more than \$100,000 of compens	ation from 1	the or	gan	izat	ion	_		0	<i>i</i>				;
	- 													

Par	t VIII		to any lina in this	Dort VIII		
		Check if Schedule O contains a response or note	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
nts nts	1a	Federated campaigns 1a	0			<u> </u>
irar	b	Membership dues 1b	0			
s, G	С	Fundraising events 1c	0			
Sift Pr.	d	Related organizations 1d	0			
iE is	е	Gottom granto (Gottom Gottom G	0			
tion er S	f	All other contributions, gifts, grants,				
ib i		and similar amounts not included above 1f 925,66	9			
Contributions, Gifts, Grants and Other Similar Amounts	g		0		<u> </u>	
	h	Total. Add lines 1a–1f	925,669			
Пe		Business Code	-			
eve	2a					
e E	b					
Ž	d		 			
Š	l e		 			<u> </u>
Program Service Revenue	f	All other program service revenue .				
P	g		0			
	3	Total. Add lines 2a–2f ▶ Investment income (including dividends, interest,				· · · · · · · · · · · · · · · · · · ·
		and other similar amounts)	o	0	0	0
	4	Income from investment of tax-exempt bond proceeds ▶	0	0	0	0
	5	Royalties	142	142	0	0
		(i) Real (ii) Personal				
	6a	Gross rents				
	ь	Less: rental expenses	-			
	С		의 [
	_d	Net rental income or (loss)				
	7a	Gross amount from sales of (i) Securities (ii) Other	-			
		assets other than inventory	-			
	b	Less. cost or other basis and sales expenses .	!			
		<u> </u>	- -			
	c d		4			
<u>o</u>	_	Gross income from fundraising				
venue	8a	events (not including \$ 0				
Other Re		of contributions reported on line 1c). See Part IV, line 18 a				
돭	ь	Less: direct expenses b]]			
•		Net income or (loss) from fundraising events				
	9a	Gross income from gaming activities.	1			
	_	See Part IV, line 19 a	-			
		Less: direct expenses b	-			
		Net income or (loss) from gaming activities Gross sales of inventory, less	 			
	IUa	returns and allowances a				
	h	Less: cost of goods sold b	-			
		Net income or (loss) from sales of inventory	-			
		Miscellaneous Revenue Business Code	 			
	11a		- I	İ		
	b		 			
	c					
	d	All other revenue	†			
	е	Total. Add lines 11a-11d	0			
	12	Total revenue. See instructions ▶	925,811	142	0	0

Form 990 (2014) Page 10 Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX 7 Do not include amounts reported on lines 6b, 7b, (B) Program service expenses (D) Fundraising (C) Management and general expenses 8b, 9b, and 10b of Part VIII. expense Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 . . . Grants and other assistance to domestic individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 . . . Benefits paid to or for members 0 0 Compensation of current officers, directors, trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . Other salaries and wages 106,600 15,695 39,199 161,494 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) Other employee benefits 27,040 18,005 4,082 4,953 615 10 Payroll taxes 12,676 8,659 3,402 Fees for services (non-employees): 11 a Management **b** Legal 14,669 14,669 Lobbying 10 1 Let 1 1 1 5 Professional fundraising services. See Part IV, line 17 72 Investment management fees Other, (if line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.) . . 49,349 14,285 34,108 Advertising and promotion 3,896 1.048 650 2,198 12 7.095 3,602 2.644 849 Office expenses 13 14 Information technology 15 1.281 689 9,367 7,397 16 Occupancy 538 943 304.589 306,070 17 18 Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings . 19 20 Payments to affiliates 21 22 Depreciation, depletion, and amortization . 909 305 7,750 6,536 23 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.) 235,811 235,811 0 a Program Expenses 0 12,238 12,238 0 0 b Film & Media 21,850 21,850 ٥ 0 c Fiscal Sponsorship Program 26 1,771 d Miscellaneous Expenses 3,704 1,907 e All other expenses Total functional expenses. Add lines 1 through 24e 742,527 42,065 873,009 88,417 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 I if following SOP 98-2 (ASC 958-720)

art X				_
	Check if Schedule O contains a response or note to any line in this Pa	(A) Beginning of year	•	(B)
1 1	Cash—non-interest-bearing			End of year
2	Cash—non-interest-bearing	111,739	2	145,39
3	Pledges and grants receivable, net		3	
4	Accounts receivable, net		4	
5	Loans and other receivables from current and former officers, directors,		-	
	trustees, key employees, and highest compensated employees.	្ត ហំ		
}	Complete Part II of Schedule L		5	•
6	Loans and other receivables from other disqualified persons (as defined under section	N 4 .	•	, ,
1	4958(f)(1)), persons described in section 4958(c)(3)(8), and contributing employers and	·		
1	sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary			
-	organizations (see instructions). Complete Part II of Schedule L		6	
7	Notes and loans receivable, net		7	
8	Inventories for sale or use		8	
9	Prepaid expenses and deferred charges	3,947	9	7,77
10a	Land, buildings, and equipment: cost or			
}		San dia managan dia menjanjan	-	a. 8
b	Less: accumulated depreciation 10b 2,598		10c	9,11
11	Investments—publicly traded securities		11	
12	Investments—other securities. See Part IV, line 11		12	
13	Investments—program-related. See Part IV, line 11		13	
14	Intangible assets		14	····
15	Other assets. See Part IV, line 11		15	
16	Total assets. Add lines 1 through 15 (must equal line 34)	115,686	16	162,28
17	Accounts payable and accrued expenses	8,810	17	2,60
18	Grants payable		18	
19	Deferred revenue		19	
20	Tax-exempt bond liabilities		20	
21	Escrow or custodial account liability. Complete Part IV of Schedule D .		21	
22	Loans and other payables to current and former officers, directors,	-		•
	trustees, key employees, highest compensated employees, and		ŀ	1
	disqualified persons. Complete Part II of Schedule L		22	
23	Secured mortgages and notes payable to unrelated third parties		23	
24	Unsecured notes and loans payable to unrelated third parties		24	
25	Other liabilities (including federal income tax, payables to related third			
	parties, and other liabilities not included on lines 17-24). Complete Part X			
Į.	of Schedule D		25	
26	Total liabilities. Add lines 17 through 25	8,810	26	2,60
	Organizations that follow SFAS 117 (ASC 958), check here ▶			५ ू भारे
27	Unrestricted net assets	106,876	27	159,67
28	Temporarily restricted net assets	0	28	
29	Permanently restricted net assets	0	29	
	Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and □			
	complete lines 30 through 34.		,3	
30	Capital stock or trust principal, or current funds		30	
31	Paid-in or capital surplus, or land, building, or equipment fund		31	
32	Retained earnings, endowment, accumulated income, or other funds .		32	
33	Total net assets or fund balances	106,876	33	159,67
34	Total liabilities and net assets/fund balances	115,686	34	162,284

_	PD (2014)			P	ege 12
Par	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		92	5,811
2	Total expenses (must equal Part IX, column (A), line 25)	2		87	3,009
3	Revenue less expenses. Subtract line 2 from line 1	3		5	2,802
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		10	6,876
5	Net unrealized gains (losses) on investments	5			_0
6	Donated services and use of facilities	6			0
7	Investment expenses	7			0
8	Prior period adjustments	8			0
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10		15	9,678
Part	XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: 2 Cash Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," ex	plain in	ŀ		ļ
	Schedule O.	•	t.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	_	✓
	If "Yes." check a box below to indicate whether the financial statements for the year were com				
	reviewed on a separate basis, consolidated basis, or both:	-	[[,.	ĺ
	Separate basis Consolidated basis Both consolidated and separate basis			, ,	
b	Were the organization's financial statements audited by an independent accountant?		2b	ĺ '	1
-	If "Yes." check a box below to indicate whether the financial statements for the year were audit	ed on a			
	separate basis, consolidated basis, or both:			ئىنى:	١,
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis		1 '	1	}
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for o	versight	1	-	ŀ
U	of the audit, review, or compilation of its financial statements and selection of an independent according	intant?	2c		ľ
	If the organization changed either its oversight process or selection process during the tax year, ex			1 ~ () 5'	_
	Schedule O.	φ		, i	
Δ-	As a result of a federal award, was the organization required to undergo an audit or audits as set	forth in			-
3a	the Single Audit Act and OMB Circular A-133?		3a		1
ь	If "Yes," did the organization undergo the required audit or audits? If the organization did not under	ergo the			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a	udits.	3b		<u> </u>
			For	. 000	(2014)

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SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

▶ Attach to Form 990 or Form 990-EZ.

Department of the Treasury Internal Revenue Service

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

OMB No. 1545-0047

2014

Open to Public Inspection

Name	of the organization					Employer identification	n number
Surf	For <u>Life</u>					26-25	27261
Pai							ons.
The	organization is not a private found		•	-	•	•	
1	A church, convention of chur			ribed in s	ection 17	'0(b)(1)(A)(i).	
2	A school described in section						
3	A hospital or a cooperative ho						MM Catantha
4	A medical research organization hospital's name, city, and sta	te:		-			
5	An organization operated for section 170(b)(1)(A)(iv). (Con	nplete Part II.)			-		al unit described in
6 7	An organization that normally described in section 170(b)(1	receives a subs	stantial part of its sup				n the general public
8	A community trust described	in section 170(b)(1)(A)(vi). (Complete	Part II.)			
9	An organization that normally receipts from activities relate support from gross investmacquired by the organization	ed to its exempt ent income and after June 30, 19	functions—subject to unrelated business 75. See section 509(a	certain taxable a)(2). (Co	exceptio income (l mplete Pa	ns, and (2) no more less section 511 ta art III.)	than 331/s% of its
	An organization organized and						
11	An organization organized and one or more publicly supporte the box in lines 11a through 11	d organizations o	described in section 5	09(a)(1) c	r section	509(a)(2). See sect	lon 509(a)(3). Check
a	☐ Type I. A supporting organithe supported organization(organization. You must cor	s) the power to n	egularly appoint or ele	iled by its act a majo	supported strike supported to the support of the supported to the support of the supported to the support of th	ed organization(s), ty e directors or trustee	rpically by giving as of the supporting
b	Type II. A supporting organ control or management of the organization(s). You must organization(s).	ne supporting on	ganization vested in th	nection v ne same (vith its su cersons t	pported organization hat control or manag	n(s), by having ge the supported
C		ated. A supporti	ng organization opera	ted in co te Part i	nnection v	with, and functionallns A, D, and E .	y integrated with,
d		ntegrated. A sup rated. The organ	porting organization of ization generally must	perated satisfy a	in connec distributi	ction with its support ion requirement and	ted organization(s) an attentiveness
e	C Observation have Makes assessed	zation received a	written determination	from the	RS that	it is a Type I, Type I	I, Type III
f	Enter the number of supported	•					
9	6 - 14 4 - 6-0- 1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-	•	ported organization(s)				· · ·
	(i) Name of supported organization	(II) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	listed in yo	organization ur governing ment?	(v) Amount of monetary support (see instructions)	(vii) Amount of other support (see instructions)
		1	(see also actoris))	Yes	No		
(A)							
(B)							
(C)							
(D)							
(E)							
Total			्राप्ता । अवस्था । स्व		,		0

Sched	ule A (Form 990 or 990-EZ) 2014 III Support Schedule for Organiza	otione Dece	ibad in Cad	470/LV	41/41/4	4907-1/41/41/	Page 2
7-81	(Complete only if you checked the						
	Part III. If the organization fails to						y artoo.
Sect	ion A. Public Support						
Caler	ndar year (or fiscal year beginning in) >	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on	11				, ,~	
	line 1 that exceeds 2% of the amount shown on line 11, column (f)		Ĺ	.	1.4	ļ. ļ	
		7 - 7 - 7 - 7 - 7 - 7 - 7 - 7 - 7 - 7 -	(1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	15 Fa. Ai		Out of the second	
Sart	Public support. Subtract line 5 from line 4.	t for all	- 43		1709	<u> </u>	
	ndar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7	Amounts from line 4	14, 20.0	(5) 2017	10,00,0	14,20.0	(9,000)	
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10		1 1 1 1		1.		
12	Gross receipts from related activities, etc					12	
13	First five years. If the Form 990 is for the						
	organization, check this box and stop he			<u> </u>	<u> </u>	<u> </u>	· · · ·
	on C. Computation of Public Support Public support percentage for 2014 (line to			11 column (f)		14	%
14 15	Public support percentage from 2013 Sch		-			15	//
16a	33'n% support test—2014. If the organization qua	zation did not	check the box	on line 13, an	d line 14 is 331	3% or more, cl	neck this
b	331/a% support test-2013. If the organ check this box and stop here. The organ	nization did no	t check a box	k on line 13 o	r 16a, and line		
17a	10%-facts-and-circumstances test—20 10% or more, and if the organization me Part VI how the organization meets the "forganization".	ets the "facts-racts-racts-and-circu	and-circumsta	inces" test, ch	eck this box ar	nd stop here. E	line 14 is xplain in
b	10%-facts-and-circumstances test—20 15 is 10% or more, and if the organization m Explain in Part VI how the organization m supported organization	tion meets the leets the "facts	"facts-and-ci	rcumstances" tances" test. 1	test, check th	is box and sto	and line op here.
18	Private foundation. If the organization di				a, or 17b, chec	k this box and	

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.)

Sect	ion A. Public Support				<u> </u>	· /	
	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.")	97,395	212,432	553,227	524,180	925,669	2,312,903
2	Gross receipts from admissions, merchandise	3,,555				333,333	
	sold or services performed, or facilities						
	furnished in any activity that is related to the organization's tax-exempt purpose	ا	0	0	0	o	0
3	Gross receipts from activities that are not an	<u>"</u>				-	
•	unrelated trade or business under section 513	_				ا	_
		0	0	0	0	0	0
4	Tax revenues levied for the	j j]	
	organization's benefit and either paid						
	to or expended on its behalf	0	0	0	0	0	0
5	The value of services or facilities	}				}	
	furnished by a governmental unit to the	}					
	organization without charge	0	0	0	0	0	0
6	Total. Add lines 1 through 5	97,395	212,432	553,227	524,180	925,669	2,312,903
7a	Amounts included on lines 1, 2, and 3	[ſ			[
	received from disqualified persons .	0	0	0	0	0	0
b	Amounts included on lines 2 and 3						
	received from other than disqualified					ĺ	
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year	o	15,000	0	0	0	15,000
C	Add lines 7a and 7b	0	15,000	0	0	0	15,000
8	Public support (Subtract line 7c from		11 (13)	,			
	line 6.)	Sept 1		il ,			2,297,903
Secti	on B. Total Support	(a ¹), -	<u> </u>	· · · · · · · · · · · · · · · · · · ·	——————————————————————————————————————		
	dar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
9	Amounts from line 6	97,395	212,432	553,227	524,180	925,669	2,312,903
10a	Gross income from interest, dividends,	57,000				333,333	
	payments received on securities loans, rents,						
	royalties and Income from similar sources .	ol	10	15	o	142	167
ь	Unrelated business taxable income (less						
•	section 511 taxes) from businesses	1	l			i	
	acquired after June 30, 1975	o	0	o	o	اه	0
c	Add lines 10a and 10b	0	10	15	0	142	167
-	Net income from unrelated business						
11	activities not included in line 10b, whether					ŀ	
	or not the business is regularly carried on	_]				اه	•
40	•	0	0	0	0		0
12	Other income. Do not include gain or loss from the sale of capital assets						
	(Explain in Part VI.)	<u> </u>	_ {	_	_	اہ	-
40	•	0	0	0	0	0	0
13	Total support. (Add lines 9, 10c, 11,						
44	and 12.)	97,395	212,442	553,242		925,811	2,313,070
14	First five years. If the Form 990 is for the						1 501(0)(3)
04	organization, check this box and stop he				· · · · ·		<u> </u>
	on C. Computation of Public Suppor			0 (0)		Tarl	
15	Public support percentage for 2014 (line (• • •	•	- **		15	99.34 %
16 Socti	Public support percentage from 2013 Sci on D. Computation of Investment In			<u></u>	· · · · · · ·	16	98.96 %
				line 10 male:	a= (A)	1471	0.00 0/
17	Investment income percentage for 2014 (17	0.01 %
18	Investment income percentage from 2013 331/s% support tests—2014. If the organ	•	•			18	0 %
19a	17 is not more than 331,2%, check this box						
		-	-			_	
b	331.5% support tests—2013. If the organiz line 18 is not more than 331.5%, check this i						
20	Private foundation. If the organization di		_				

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.)

0	Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete P	art V	.)	
Seci	lon A. All Supporting Organizations		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1	108	1
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2	,	1
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	3a	, 	
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.	3b		
C	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2) (B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3с		
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.	48		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
C	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c	:	·
58	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).	6 a	9 -	,
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b 5c	12 -	
6	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.	6	- ,	1/15
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7	- ` }	
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990).	8	, i	
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.	9a		
b	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI. Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit	9b		
	from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9c		
10a	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer (b) below.	10a); :	

b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to

determine whether the organization had excess business holdings.)

10b

Part	Supporting Organizations (continued)			r ogo c
	Supporting Organizations (committed)		Vee	No
11	Has the organization accepted a gift or contribution from any of the following persons?	<u> </u>	103	1.00
8	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)	[''		
	below, the governing body of a supported organization?	11a	<u> </u>	
	A family member of a person described in (a) above?	11b		
c	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		<u> </u>
Sect	on B. Type I Supporting Organizations			
1	Did the directors, trustees, or membership of one or more supported organizations have the power to		Yes	No
•	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			ļ
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or	, , ,	'	1
	controlled the organization's activities. If the organization had more than one supported organization,] !		
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.			l
		1		
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			1
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.	2	11.4	1
Cocti	on C. Type II Supporting Organizations			
3000	on o. Type ii supporting organizations		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors	ſ .		
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		L
Secti	on D. All Type III Supporting Organizations		Van	Ma
4	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		Yes	NO
1	organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax		1.	
	year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the	.		
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1	. ``	
2	Were any of the organization's officers, directors, or trustees either (I) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a		-	
	significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's		-	
	supported organizations played in this regard.	3		
Secti	on E. Type III Functionally-Integrated Supporting Organizations			Ļ
	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see it		ctions	s).
1		1500		
8 h	☐ The organization satisfied the Activities Test. Complete line 2 below. ☐ The organization is the parent of each of its supported organizations. Complete line 3 below.			
b C	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (s	ee ins	tructi	ons).
		ļ		
2	Activities Test. Answer (a) and (b) below.		Yes	140
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,	'	3,3	١.
	how the organization was responsive to those supported organizations, and how the organization determined		_	
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more	-	£.,	,
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the		' '	
	reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	_		
3	Parent of Supported Organizations. Answer (a) and (b) below.	2b		
a	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.	За		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each		, ,	
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3ь	` '	

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting On	nan	izatione	1 000
Check here if the organization satisfied the Integral Part Test as a qualifying other Type III non-functionally integrated supporting organizations must contain the property of the prop	g tn	ıst on Nov. 20, 1970. See i	nstructions. All
Section 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 collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
Section B - Minimum Asset Amount	10	(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see	Γ		
instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	18		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (explain in detail in Part VI):		i jumpin j	-
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1	m	<u> </u>
2 Enter 85% of line 1	2	, , , , , , , , , , , , , , , , , , ,	<u></u>
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		<u></u>
4 Enter greater of line 2 or line 3	4		
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 instructions)	y-in	tegrated Type III supportin	g organization (see

Part	7,	3) Supporting Organ	izations (continued)	
Sect	ion D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish			
2		empt purposes of suppo	orted	
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purp	poses of supported orga	nızations	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which	th the organization is res	sponsive	
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2014 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount	<u></u>		
S:	ection E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1	Distributable amount for 2014 from Section C, line 6			······································
2	Underdistributions, if any, for years prior to 2014			
	(reasonable cause required-see instructions)			
3	Excess distributions carryover, if any, to 2014:			
a				
<u>b</u>				
<u> </u>				
<u>d</u>				
e	From 2013			
f	Total of lines 3a through e			
<u>g</u>	Applied to underdistributions of prior years			
<u>_h</u>	Applied to 2014 distributable amount			
	Carryover from 2009 not applied (see instructions)			
	Remainder. Subtract lines 3g, 3h, and 3i from 3f			
4	Distributions for 2014 from Section			
	D, line 7: \$			
<u>a</u>	Applied to underdistributions of prior years			
b	Applied to 2014 distributable amount			
<u> </u>	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2014, if any. Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions).			
6	Remaining underdistributions for 2014. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions).			
7	Excess distributions carryover to 2015. Add lines 3 _j and 4c.			
8	Breakdown of line 7:			
<u>a</u>				
<u>b</u>				
c				
d	Excess from 2013			
<u>e</u>	Excess from 2014			

Schedule A (I	Form 980 or 990-EZ) 2014	Page l
Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b Part III, line 12. Also complete this part for any additional information. (See instructions.)	; and

•••		
	\$	
,,,,,		

,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	***************************************	
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	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	********
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No. 1545-0047 2014

Department of the Treasury Internal Revenue Service Name of the organization

Open to Public Inspection

	an or Brussan			701 1001	- Lines Con Training
Surf Fo					26-2527261
Pari			ds or	Acco	ounts.
	Complete if the organization answered				
		(a) Donor advised funds	<u> </u>	(b) F	unds and other accounts
1	Total number at end of year		ļ		
	Aggregate value of contributions to (during year)				
3	Aggregate value of grants from (during year) .		<u> </u>		·
	Aggregate value at end of year		<u> </u>		
	Did the organization inform all donors and dono				
	funds are the organization's property, subject to t				
	Did the organization inform all grantees, donors,				
	only for charitable purposes and not for the bene				
	conferring impermissible private benefit?	· · · · · · · · · · · · · · · · · · ·	• • •		· · · 🗌 Yes 🗌 No
Part		West to Francisco Dest N/ No. 7			
	Complete if the organization answered				
	Purpose(s) of conservation easements held by the		a blat	-dooll	. Important land area
	Preservation of land for public use (e.g., recreated Protection of natural habitat	Preservation of			-
	Preservation of open space	L Preservation of	a cert	illeu i	istoric structure
	Complete lines 2a through 2d if the organization h	eld a qualified conservation contributio	n in th	e forn	of a conservation
	easement on the last day of the tax year.	old a qualified dormal validity domination			Held at the End of the Tax Year
		<i></i>		28	· · · · · · · · · · · · · · · · · · ·
	Fotal acreage restricted by conservation easemen			2b	·
	Number of conservation easements on a certified			20	
	Number of conservation easements included in				
-				2d	
	Number of conservation easements modified, tran	sferred, released, extinguished, or term	ninated	by th	e organization during the
	ax year ►			•	
4	Number of states where property subject to conse	ervation easement is located ►			
	Does the organization have a written policy re				
	riolations, and enforcement of the conservation en				
6	Staff and volunteer hours devoted to monitoring, i	nspecting, and enforcing conservation	easem	ents d	during the year
	-				
	Amount of expenses incurred in monitoring, inspe	cting, and enforcing conservation ease	ments	during	g the year
	> \$				
	Does each conservation easement reported on line	• • •	section	n 170(
				•	· · · 🔲 Yes 🔲 No
9	n Part XIII, describe how the organization reports	conservation easements in its revenue	and ex	pens	e statement, and
	palance sheet, and include, if applicable, the text		ancial :	staten	nents that describes the
	organization's accounting for conservation easem		<u> </u>	. 61	11 - A A
Part			Other	'SIM	uar Assets.
4 -	Complete if the organization answered f the organization elected, as permitted under Sf			4-	4
	r the organization elected, as permitted under Sr works of art, historical treasures, or other simila				
	public service, provide, in Part XIII, the text of the				
	f the organization elected, as permitted under S				
	works of art, historical treasures, or other simila	• • •			
	public service, provide the following amounts relate			,	
	i) Revenue included in Form 990, Part VIII, line 1			. 1	> \$
	ii) Assets included in Form 990, Part X				\$
	f the organization received or held works of art				
	ollowing amounts required to be reported under \$	SFAS 116 (ASC 958) relating to these its	ems:		Q,
a	Revenue included in Form 990, Part VIII, line 1	-		. •	\$
b	Assets included in Form 990 Part X		_		• •

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continues a Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of collection items (check all that apply): a
Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continues) Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of collection items (check all that apply): a
Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of collection items (check all that apply): a
b Scholarly research e Other c Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in EXIII. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?
b Scholarly research e Other c Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in EXIII. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?
 Preservation for future generations Provide a description of the organization's collections and explain how they further the organization's exempt purpose in fixill. During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?
XIII. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?
assets to be sold to raise funds rather than to be maintained as part of the organization's collection?
Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not
990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not
b If "Yes," explain the arrangement in Part XIII and complete the following table:
Amount
c Beginning balance
d Additions during the year
e Distributions during the year
f Ending balance
2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes
b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII
Part V Endowment Funds.
Complete if the organization answered "Yes" to Form 990, Part IV, line 10.
(a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back
1a Beginning of year balance
b Contributions
c Net investment earnings, gains, and losses
d Grants or scholarships
e Other expenditures for facilities and programs
f Administrative expenses
g End of year balance
2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
a Board designated or quasi-endowment ▶ %
b Permanent endowment ▶ %
c Temporarily restricted endowment ▶ %
The percentages in lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the
organization by:
(i) unrelated organizations
(ii) related organizations
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?
4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

	Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
18	Land	0	0		0
b	Buildings	0	0	0	0
C	Leasehold improvements	0	0	0	0
đ	Equipment	0		0	0
е	Other	0	11,712	2,598	9,114
Total.	Add lines 1a through 1e. (Column (d) must e	qual Form 990, Part)	K, column (B), line 10	0c.) ▶	9,114

	(a) Description of security or category	ory		(b) Book value			d of valuation
	(including name of security)				Cos	st or end-of	f-year market value
	derivatives		[
	eld equity interests		[
3) Other							
(A)							
(B)		• • • • • • • • • • • • • • • • • • • •					·
(C)				_			
(D)					 -		
(E)					- 		
(F)		•••••			 		
(G) (H)			····		 		
	Name of the State				 		
Part VIII	n) must equal Form 990, Part X, col. (8) line 12.) Investments—Program Relate						
OIL VIII	Complete if the organization an		" to Form	990 Part IV lir	e 11c See	Form 90	90 Part X line 13
	(a) Description of investment	3440100 100	1010111	(b) Book value	1		d of valuation
	(a) Description of investment]	(5) 2001200	Cos		-year market value
(1)					 		
(2)					†		
(3)					 		
(4)				···_			
(5)		····	····		<u> </u>		
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	e D (Form 990) 2014			Page 4
Part	XI Reconciliation of Revenue per Audited Financial Statem	ents With Revenue pe	r Return	•
	Complete if the organization answered "Yes" to Form 990, I	Part IV, line 12a.		
1	Total revenue, gains, and other support per audited financial statements		Til	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
_ a	Net unrealized gains (losses) on investments	2a	1 1	
ь	Donated services and use of facilities	2b	-	
-	Recoveries of prior year grants	2c 2c	-i I	
C	Other (Describe in Dest VIII.)	2d	-}	
d			- .:	
ө	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:			
8		48	-	
Ь	,	4b	4	
C	Add lines 4a and 4b			
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line			
Part	XII Reconciliation of Expenses per Audited Financial Staten	nents With Expenses p	er Retu	m.
	Complete if the organization answered "Yes" to Form 990, F	Part IV, line 12a.		
1	Total expenses and losses per audited financial statements		11	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
_ a	Donated services and use of facilities	28	1 1	
ь	Prior year adjustments	2b	⊣ 1	
0	Other losses	2c	- 1	
-	Other (Describe in Part XIII.)		-	
d			2e	
_	Add lines 2a through 2d		3	
3	Subtract line 2e from line 1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	-	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		1 1	
8	Investment expenses not included on Form 990, Part VIII, line 7b		-	
b	Other (Describe in Part XIII.)		4.1	
C	Add lines 4a and 4b			
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lin	e 18.)	5	, , ,
Part :		·		
Provid	e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	d 4; Part IV, lines 1b and 2	b; Part V,	line 4; Part X, line
2; Part	XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	to provide any additional i	ntormatio	ก.
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Schedule D (Form 990) 2014

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047

Inspection

Department of the Treasury Internal Revenue Service ➤ Attach to Form 990 or 990-EZ.
➤ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irz.gov/form990.

Open to Public

Name of the organization	Employer identification number				
Surf For Life	26-2527261				
Form 990, Part VI, Section B, Line 11b - The IRS 990 form is submitted to the Executive Director and shared with the Board of Directors for					
review prior to submission.	***************************************				
Form 990, Part VI, Section B, Line 12c - The Board of Directors requires annual disclosure of conflicts	of interest.				
***************************************	***************************************				
Form 990, Part VI, Section B, Line 15 - A market review is conducted for similar organizations of like s	ize and mission to establish				
compensation for Executive Director.					
Form 990, Part VI, Section C, Line 19 - Corporate documents are made available upon request.					
Form 990, Part VI, Section C, Line 19 - Corporate documents are made available upon request.					
Form 990, Part IX, Line 11g - Web Development, Consultants and Contractors					

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Schedule O, Statement 1	Surf For Life
Form: 990	26-252726
Page: 1	
Line Number:	
Reasonable Cause Explanations	
Explanation	
Board approval of year-end books was required; all appropriate extensions were filed.	