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### Return of Organization Exempt From Income Tax

OMB No 1545-0047 2014

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) ► Do not enter social security numbers on this form as it may be made public. ► Information about Form 990 and its instructions is at www.irs.gov/form990. Open to Public Department of the Treasury Internal Revenue Service Inspection For the 2014 calendar year, or tax year beginning Oct 1 , 2014, and ending , 2015 D Employer Identification number C Name of organization SPEEDWAY CHILDREN'S CHARITIES Check if applicable 56-1331429 Address change Doing business as Room/suite Telephone number Number and street (or P.O. box if mail is not delivered to street address) Name change PO BOX 18747 (704) 532-3306 Initial return City or town, state or province, country, and ZIP or foreign postal code Final return/terminated 28218 **G** Gross receipts \$ 4,786,191 Amended return CHARLOTTE NC H(a) Is this a group return for subordinates? F Name and address of principal officer Application pending Are all subordinates included?
If 'No,' attach a list (see instructions) NC 28218 Yes Bruton Smith PO Box 18747 Charlotte 527 Tax-exempt status (insert no ) 4947(a)(1) or X 501(c)(3) 501(c) ( Website: ► H(c) Group exemption number speedwaycharities.org Form of organization X Corporation Trust L Year of formation 1982 M State of legal domicile NC Part I Summarv Briefly describe the organization's mission or most significant activities: Children's Speedway\_ Charities' primary exempt purpose is to raise and provide funds to non-profit organizations that meet the direct needs of children with medical, educational or social challenges. Check this box ▶ If the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a)..... Number of independent voting members of the governing body (Part VI, line 1b) . 4 18 Total number of individuals employed in calendar year 2014 (Part V, line 2a) . . 5 0 Total number of volunteers (estimate if necessary) . . . . . . . . . 6 2, 800 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 0. b Net unrelated business taxable income from Form 990-T, line 34 0. **Prior Year Current Year** Contributions and grants (Part VIII, line 1h). 3,052,930 3,648,199. Program service revenue (Part VIII, line 2g) . . . Investment income (Part VIII, column (A), lines 3, 4 and 7d). 25,200 10 12,752 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 1e).

Total revenue — add lines 8 through 11 (must equal Part VIII, column (A)-line -2,15611 -129,0823,063,526. 12 3,544,317 Grants and similar amounts paid (Part IX, column (A), lines (-3) 13 2,788,115 2,127,686. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e) . . . b Total fundraising expenses (Part IX, column (D), line 25) ▶ 800,457. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e). . . . 749,684 Total expenses, Add lines 13-17 (must equal Part IX, column (A), line 25) 3,537,799. 2,928,143. <u>-47</u>4,273. 616,174. 19 End of Year **Beginning of Current Year** 20 Total assets (Part X. line 16) . . . . . 3,095,110. 3,400,282 21 Total liabilities (Part X, line 26) . . . . . . . . . . . . 585,407. 274,405. 22 Net assets or fund balances Subtract line 21 from line 20 . . . . . . . . . . . 2,509,703. 3,125,877 Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Sign Chuck Swannack Here Executive Director Type or print name and title Print/Type preparer's name Preparer's signature Date PTIN Check self-employed **Paid** Preparer Firm's name Use Only Firm's EIN ► Firm's address

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

TEEA0101 05/28/14

Form 990 (2014

	HILDREN'S CHARITIES	56-1331429 Page 2
	ram Service Accomplishments	
	ntains a response or note to any line in this Part III	
Briefly describe the organization		
	s Charities' primary exempt purpose is to r	
	on-profit organizations that meet the direc	t_needs
<u>of children with π</u>	edical, educational or social challenges.	
	any significant program services during the year which were not listed on	
		· · · · · · · · · · · · Yes X No
If 'Yes,' describe these new se		
	ducting, or make significant changes in how it conducts, any program ser	vices? Yes X No
If 'Yes,' describe these change		
Section 501(c)(3) and 501(c)(4) and revenue, if any, for each p	gram service accomplishments for each of its three largest program servi ) organizations are required to report the amount of grants and allocations ogram service reported	ices, as measured by expenses. s to others, the total expenses,
4 a (Code ) (Expens	s \$ 2,141,416. including grants of \$ 2,127,686	.)(Revenue \$ 0.)
	throughout the year by holding auctions, di	
	ings and numerous other events. The funds	
	allowed Speedway Children's Charities to is	
	ofit organizations that complied with our e	
	·	
	<b></b>	
	·	
Ah (Codo ) (Evnono	es \$including grants of \$	\/Payanua \$
<b>4 b</b> (Code) (Expens		
	·	· <b></b>
<del></del>	·	
	·	·
		· <b></b>
	·	
	·	
4 c (Code ) (Expens	es \$ including grants of \$	) (Revenue \$ )
4 c (Code) (Expens	including grants or \$	
	·	
Ad Other program services (Des	whe in Schedule O \	··
4 d Other program services. (Des	•	ıo \$
(Expenses \$	including grants of \$ ) (Revenue)	ا ب عد
4 e Total program service expens	2,141,416.  TEEA0102 05/28/14	Form 990 (2014)



			Yes	No
1	is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If 'Yes,' complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.	*	, č	
ć	a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a	Х	
ı	b Did the organization report an amount for investments — other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII	11 b		Х
(	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	11 c		Х
(	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	11 d		Х
•	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e		Х
1	f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X	11 f	х	
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	х	
	b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional	12 b		Х
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		Х
14:	a Did the organization maintain an office, employees, or agents outside of the United States?	14a	 	Х
l	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		х
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 (see instructions)	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	х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III.	19	х	
20	a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20		Х
I	<b>b</b> If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return? $N/A$ .	20 b		

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N'C CUADITIES

Yes No Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If Yes, complete Schedule I, Parts I and II . . . . . . 21 Χ Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, Х 22 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 23 Х Х 24a b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . . . . . . . N/A. 24b c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease N/A 24c d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year? 24d 25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit Х 25a b is the organization aware that it engaged in an excess benefit transaction with a disgualified 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 Χ 25b Schedule L, Part I 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 'Ves' complete Schedule 1 Part !! Χ If 'Yes', complete Schedule L, Part II 26 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 27 Х 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) Χ 28a b A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Χ 28b X 28c Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M . . . . . . . . . . . . . . . . . Х 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation Х 30 Х Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I . . . . . . . 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Х Schedule N, Part II . . 32 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections Х 33 Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Part II, III, or IV, Х 34 Х 35a 35b Х 36 Х 37 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? 

BAA Form 990 (2014)

14 a

14 b

Form 990 (2014)

Form 990 (2014) SPEEDWAY CHILDREN'S CHARITIES 56-133142	9	P	age 5
Part V Statements Regarding Other IRS Filings and Tax Compliance			
Check if Schedule O contains a response or note to any line in this Part V			
		Yes	No
1 a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable   1 a     1 a   18	]		
b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	]		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			ļ
(gambling) winnings to prize winners?	1 c	Х	<u> </u>
2 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 2 a 0			
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2 b		
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3 a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a		X
<b>b</b> If 'Yes' has it filed a Form 990-T for this year? <i>If 'No' to line 3b, provide an explanation in Schedule O</i> $\dots$	3 b		
4 a 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)?	4 a		Х
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)			
5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a		Х
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		Х
<b>c</b> If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5 c		
6 a 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?	6 a		Х
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			
not tax deductible?	6 b	ļ <u>-</u>	
			ì
a 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?	7 a	X	
<b>b</b> If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 b	X	$\vdash$
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file		<b> </b>	<b></b>
Form 8282?	7 c		X
d If 'Yes,' indicate the number of Forms 8282 filed during the year		<u> </u>	
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e	1	X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f	<u> </u>	Х
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7 h		
8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring			-
organization have excess business holdings at any time during the year?	8	ļ	-
9 Sponsoring organizations maintaining donor advised funds.	ļ	.	-
a Did the sponsoring organization make any taxable distributions under section 4966?	9 a		<del> </del>
<b>b</b> Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? $N/A$	9 b	1	↓
10 Section 501(c)(7) organizations. Enter			
a Initiation fees and capital contributions included on Part VIII, line 12	4		
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	4	1	
11 Section 501(c)(12) organizations. Enter:			
a Gross income from members or shareholders	4		
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )		ļ	
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? N/A	12 a	1	ــــــ
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year	4		1
13 Section 501(c)(29) qualified nonprofit health insurance issuers.	-		
a Is the organization licensed to issue qualified health plans in more than one state?	13 a	1	—
Note. See the instructions for additional information the organization must report on Schedule O.			
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
c Enter the amount of reserves on hand		<u> </u>	

Form 990 (2014) SPEEDWAY CHILDREN CHARITIES 56-1331429 Page 6 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. Section A. Governing Body and Management No Yes 1 a Enter the number of voting members of the governing body at the end of the tax year . . . . . 1a 18 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 . . . . . 18 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other Х 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 Х of officers, directors, or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents Х 5 Did the organization become aware during the year of a significant diversion of the organization's assets? . . 6 Х 7 a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more 7 a Х b Are any governance decisions of the organization reserved to (or subject to approval by) members, 7 b Х Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: Х 8 a 8 b Х b Each committee with authority to act on behalf of the governing body? . . . . . . . . . . . . . . . . . Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O . . . . . . . . . . . . Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code. Yes No X 10 a b If Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their Χ operations are consistent with the organization's exempt purposes?.............. 10 b 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? . . . . . . 11 a X b Describe in Schedule O the process, if any, used by the organization to review this Form 990. Х 12 a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise Х 12<sub>b</sub> to conflicts? c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Х 12 c Х X 14 Did the organization have a written document retention and destruction policy? . . . . . . . 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? a The organization's CEO, Executive Director, or top management official . . . . . . . . . . 15 a X 15b Х 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? . . . . . . . 16 a Х 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 N/Aorganization's exempt status with respect to such arrangements?................. 16 b Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed > See Form 990, Page 6, Line 17 (continued) Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Other (explain in Schedule O) Another's website Upon request Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year State the name, address, and telephone number of the person who possesses the organization's books and records:

Nancy Bisson

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56-1331429

SPEEDWAY CHILDREN'S CHARITIES

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

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

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

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

Check this box if neither the organization nor any	related organiz	zatio	n con	nper	nsate	ed ar	ту с	urrent officer, dire	ctor, or trustee.	
				(C)				,		
(A) Name and Title	(B) Average hours per	Position (do not check more than one box, unless person is both an officer and a director/trustee)					ì	(D)  Reportable compensation from the organization	(E)  Reportable compensation from related organizations	(F) Estimated amount of other compensation
	week (list any	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(1) O. Bruton Smith Chairman	1.00			х				0.	0.	0.
(2) Marcus Smith Chairman	1.00			х				0.	0.	0.
(3) Sam Bass Director	1.00	Х						0.	0.	0.
(4) Scott Brown Director	1.00	х						0.	0.	0.
(5) Jerry Caldwell Director	1.00	Х						0.	0.	0.
(6) Ed Clark Director	1.00	х						0.	0.	0.
	1.00	х						0.	0.	0.
(8) Jerry Gappens Director	1.00	Х						0.	0.	0.
(9) Eddie Gossage Director	1.00	х						0.	0.	0.
(10) Jeff Hammond Director	1.00	х						0.	0.	0.
(11) Kim Hansen Director	1.00	х						0.	0.	0.
(12) Don Hawk Director	1.00	х						0.	0.	0.
(13) Mel Larson Director	1.00	х						0.	0.	0.
(14) Steve Page Director	1.00	+						0.	0.	0.
DITECTOL			<u> </u>			<u>'                                    </u>			0.	Form 990 (2014)

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Part VII Section A. Officers, Directors, Tr	1	Key	En			es,	and	d Highest Con	pensated Emp	loyee	S (cont	tınued)
(A) Name and title	Average hours per week	box, unless perso officer and a dire				s both or/trust	an ee)	(D)  Reportable compensation from the organization	(E)  Reportable  compensation from  related organizations	(F) Estimated amount of oth compensation		her
	(list any hours for related organiza - tions below dotted line)	or director	nsututional trustee	Officer	Key employee	Highest compensated employee	omer	(W-2/1099-MISC)	(W-2/1099-MISC)	fr org an	pensaud rom the anization d related anization	n L
(15) Chris Powell Director	1.00_	x						0.	0.			0.
(16) Tyler Schropp	1.00											
Director  (17) Mark Simendinger  Director	1.00	X				-		0.	0.			0.
(18) Marcy Smothers Director	1.00_	Х						0.	0.			0.
(19) James Green III Secretary	1.00			х				0.	0.			0.
(20) Randall Storey Treasurer/Assistant Secretary	1.00_			х				0.	0.			0.
(21) Chuck Swannack Executive Director	40.00			Х				0.	0.		60,	621.
(22) Thomas Sadler Executive Director Emeritus	1.00_			х				0.	0.			088.
(23)												
(24)	<b>-</b>	!										
(25)												
1 b Sub-total							<b>&gt;</b>	0.	0.		73,	709.
d Total (add lines 1b and 1c)							eive	0 . d more than \$100,	0. 000 of reportable cor	npensa		709.
from the organization   0	·										Yes	No
3 Did the organization list any former officer, directo on line 1a? If 'Yes,' complete Schedule J for such it										. 3		X
4 For any individual listed on line 1a, is the sum of re the organization and related organizations greater such individual	than \$150,	,0007	? If "	Yes'	con	iplete	Sci	hedule J for		. 4	ļ	X
5 Did any person listed on line 1a receive or accrue for services rendered to the organization? If 'Yes,'	compensa	tion f	rom	any	unre	elated	d org	ganization or indivi				X
Section B. Independent Contractors  1 Complete this table for your five highest compensations.	ated indepe	ender	nt co	ntra	ctor	s that	rec	ceived more than \$	100,000 of			
compensation from the organization. Report comp  (A)  Name and business add		or the	cale	enda	ar ye	ar er	iding	g with or within the (B) Description (	) 1		(C)	
								Description (				
2 Total number of independent contractors (including	n hut not le	mitod	to #	hoc	- lic4	od o	2011	a) who received are	ore than			
\$100,000 of compensation from the organization	<b>▶</b> 0	TEFA					, U V E	,, mio received mo	no ulan	- Farr	990	(2014

ARITIES

		Check if Schedule O co	ontains a respons	e or note to any line				
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
nts nts	1 a	Federated campaigns .	1a					
힐	b	Membership dues	1b		1			
ا ﴿ يُر	С	Fundraising events	1c	2,423,696.				
Contributions, Gifts, Grants and Other Similar Amounts	d	Related organizations .	1 d					
5 E		Government grants (contribution	<del></del>					
દું જે		•						
를	Ţ	All other contributions, gifts, gr similar amounts not included a	above 1 f	1,224,503.				
물티		Noncash contributions include						
등	_	Total. Add lines 1a-1f	· —	579,828.	2 640 100			
9 C		Total. Add lilles 1a-11 .	1	Business Code	3,648,199.			
몵	2 a		-	20311033 0000				
ě	b							
ë								
ž					<del></del>			<del></del>
8	a							
an	e	All all and a second						<del> </del>
Program Service Revenue		All other program service	<u> </u>				<del></del>	
<u> </u>		Total. Add lines 2a-2f .					<del></del>	
	3	Investment income (incluother similar amounts).						
		•		L				
	4	Income from investment		· •				
	5	Royalties	(ı) Real					
			(i) Real	(II) Personal				
		Gross rents						
		Less rental expenses						
		Rental income or (loss)	L	L				
	d	Net rental income or (los	<del></del>					
	7 a	Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory		25,200.				
	b	Less cost or other basis						
		and sales expenses		0.				
	l .	Gain or (loss)		25,200.				
	d	Net gain or (loss)			25,200.	0.	0.	25,200.
age :	8 a	Gross income from funda (not including \$2	,423,697.					
Other Reven		of contributions reported						
Œ		See Part IV, line 18	a	1,005,919.		j		
		Less: direct expenses .						
ಕ	C	Net income or (loss) fron	m fundraising eve	n <u>ts ▶</u>	-160,766.		0.	-160,766.
	9 a	Gross income from gami See Part IV, line 19	ing activities.	106,873.				
	b	Less: direct expenses .	t					
	c	Net income or (loss) from	m gaming activitie		31,684.	0.	0.	31,684.
	10 a	Gross sales of inventory and allowances		1				
	b	Less cost of goods sold	<b>t</b>		<u> </u>			
	c	: Net income or (loss) from	n sales of invento	ry				
		Miscellaneous Reveni		Business Code			<del></del>	
	11 a							
	b	 '						
	c	;						
	1	All other revenue	L					
		Total. Add lines 11a-11d						
	_	Total revenue. See inst	tructions		3,544,317.	0.	0.	-103,882.
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### 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 a	ny line in this Part IX

	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) 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	2,127,686.	2,127,686.	,	
2	Grants and other assistance to domestic individuals See Part IV, line 22	2,12.,7000.			
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees				
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)				
а	Management				
b	Legal			-	
c	Accounting	26,757.	0.	21,767.	4,990.
d	Lobbying				· · · · · · · · · · · · · · · · · · ·
е	Professional fundraising services See Part IV, line 17 .				
-	Investment management fees				
12	Advertising and promotion	963.	0.	0.	963.
13	Office expenses	27,708.	0.	0.	27,708.
14	Information technology				
15	Royalties				
16	Occupancy	2,061.	0.	0.	2,061.
17	Travel	47,557.	0.	11,274.	36,283.
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	4,435.	0.	0.	4,435.
23	Insurance	9,687.	0.	2,756.	6,931.
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.)				
a	Payroll Services	501,843.	13,730.	79,311.	408,802.
t	)				•
•		*			
		170 446			170 445
	All other expenses	179,446.	0.	0.	179,446.
25	Total functional expenses Add lines 1 through 24e	2,928,143.	2,141,416.	115,108.	671,619.
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.  Check here  if following SOP 98-2 (ASC 958-720).		_		



Pa祝X Balance Sheet Beginning of year End of year 1 2,858,456 2,859,070. 2 2 3 3 4 177,844 492,175. Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L . . . . . 6 7 Assets 8 <u>23,6</u>25 22,648. Prepaid expenses and deferred charges . . . . . . . . 18,756 9 12,500 10 a Land, buildings, and equipment cost or other basis. 10 a 10 b 42,861 10 c 16,429 13,889. 11 11 Investments - other securities. See Part IV, line 11 . . . . . . . 12 12 Investments - program-related See Part IV, line 11 . . . . . . 13 13 14 14 15 15 16 Total assets. Add lines 1 through 15 (must equal line 34) . . . . . . . 3,095,110 3,400,282 16 17 17 108,594. 78,133 18 18 427,732 129,863 19 19 79,542 35,948. 20 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, 22 Secured mortgages and notes payable to unrelated third parties . . . . . . . . . . . . 23 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D. . . . 25 25 26 Total liabilities, Add lines 17 through 25....... 585,407 274,405 Organizations that follow SFAS 117 (ASC 958), check here ► X and complete Fund Balances lines 27 through 29, and lines 33 and 34. Unrestricted net assets . . . . . . . . . . . . . 2,509,703 27 3,125,877. 27 28 29 29 Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. þ 30 30 Assets 31 Paid-in or capital surplus, or land, building, or equipment fund . . . . . . . . 31 32 32 Retained earnings, endowment, accumulated income, or other funds . . . .

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33

34

Net.

3,400,282. Form 990 (2014)

3,125,877.

33

34

2,509,703

3.095.110

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Pa	Reconciliation of Net Assets					_			
	Check if Schedule O contains a response or note to any line in this Part XI			· · ·		$\Box$			
1	Total revenue (must equal Part VIII, column (A), line 12)	1	3	,54	4,3	17.			
2	Total expenses (must equal Part IX, column (A), line 25)	2	2	, 921	3,1	43.			
3	Revenue less expenses. Subtract line 2 from line 1	3		61	6,1	74.			
4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))									
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							
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,								
	column (B)).	10	3	,12	5,8	<u>77.</u>			
Pa	於劉則 Financial Statements and Reporting					_			
	Check if Schedule O contains a response or note to any line in this Part XII					. []			
				<u> </u>	es	No			
1	Accounting method used to prepare the Form 990: Cash X Accrual Other								
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.								
2	a Were the organization's financial statements compiled or reviewed by an independent accountant?			2 a	1	Х			
-	· · · · · · · · · · · · · · · · · · ·		· ·						
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both								
	Separate basis Consolidated basis Both consolidated and separate basis		1						
	b Were the organization's financial statements audited by an independent accountant?			2 b	х				
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate								
	basis, consolidated basis, or both.								
	X Separate basis Consolidated basis Both consolidated and separate basis		ķ						
	c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit review, or compilation of its financial statements and selection of an independent accountant?	i, 		2 c	Х				
	If the organization changed either its oversight process or selection process during the tax year, explain								
	ın Schedule O.								
3	a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		L	3 a		Х			
	b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required au		,		- 1				
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits	N	/A	3 b					

#### SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

2014

Open to Public Inspection

Name c	i the	organization					Employer identificat	ion nomber			
SPE	E DI	WAY CHILDREN'S CHAR	ITIES				56-1331429	)			
		Reason for Public Cha					art.) See instruction	s			
The o	The organization is not a private foundation because it is (For lines 1 through 11, check only one box )										
1	L	A church, convention of church	es, or association of c	hurches described in se	ction 17	0(b)(1)(A	۸)(i).				
2		A school described in section									
3	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).										
4	A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii) Enter the hospital's										
	name, city, and state:										
5		An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 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).									
6	L										
7	X	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)									
8	Ļ	A community trust described in									
9		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)									
10		An organization organized and	-	•							
11	L	An organization organized and or more publicly supported org lines 11a through 11d that des	anizations described in	n <b>section 509(a)(1)</b> or s	ection 50	)9(a)(2).	See section 509(a)(3).	rposes of one Check the box in			
а	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.										
b		Type II. A supporting organiza management of the supporting must complete Part IV, Secti	organization vested in ons A and C.	n the same persons that	control o	r manag	e the supported organiza	ation(s) <b>You</b>			
С		Type III functionally integrate organization(s) (see instruction	ns). You must comple	ete Part IV, Sections A,	D, and E	Ε.					
d	L	Type III non-functionally inte functionally integrated. The org instructions) You must comp	ganization generally m	ust satisfy a distribution	connecti requirem	on with i ent and	ts supported organizatio an attentiveness require	n(s) that is not ment (see			
е		Check this box if the organizat integrated, or Type III non-fund	ion received a written of tonally integrated sup	determination from the I oporting organization.	RS that is	s a Type	I, Type II, Type III functi	onally			
f	E	nter the number of supported or	ganizations								
g	P	ovide the following information a	about the supported or	rganization(s).							
		(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is organizati in your go docun	on listed overning	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)			
					Yes	No					
(A)											
(B)											
(c)											
<u>(D)</u>					ļ	 		<del></del>			
<u>(E)</u>											
Tota											
BAA	Fo	or Paperwork Reduction Act N	otice, see the Instruc	ctions for Form 990 or	990-EZ.		Schedule A (Forr	n 990 or 990-EZ) 2014			

Page 2

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	tion A. Public Support						
	ndar year (or fiscal year nning 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')	3,347,490.	3,164,212.	3,578,251.	3,052,930.	3,648,199.	16,791,082.
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	3,347,490.	3,164,212.	3,578,251.	3,052,930.	3,648,199.	16,791,082.
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						1,574,017.
6	Public support. Subtract line 5 from line 4						15,217,065.
Sec	tion B. Total Support						
	ndar year (or fiscal year nning in) ►	(a) 2010	<b>(b)</b> 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7	Amounts from line 4	3,347,490.	3,164,212.	3,578,251.	3,052,930.	3,648,199.	16,791,082.
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.)	1,082,922.	1,013,510.	1,080,758.	1,126,512.	1,112,792.	5,416,494.
11	Total support. Add lines 7 through 10				,		22,207,576.
12	Gross receipts from related activit	ies, etc (see instru	ctions)			12	<u> </u>
13	First five years. If the Form 990 porganization, check this box and s	s for the organizati	on's first, second,	third, fourth, or fifth	n tax year as a sec	tion 501(c)(3)	▶ 🔲
Sec	tion C. Computation of Pu	<del> </del>					
14	,, ,						68.52 %
15	Public support percentage from 20	013 Schedule A, P	art II, line 14			<u>15</u>	67.12 %
16 a	33-1/3% support test — 2014. If and stop here. The organization of	the organization d qualifies as a publi	id not check the bo cly supported orga	ox on line 13, and the nization	he line 14 is 33-1/3	3% or more, check	this box · · · · · · ► X
t	33-1/3% support test — 2013. If the and stop here. The organization	the organization di qualifies as a publi	d not check a box of icly supported orga	on line 13 or 16a, a inization	and line 15 is 33-1.	/3% or more, checl	k this box
17 a	10%-facts-and-circumstances to or more, and if the organization m the organization meets the 'facts-a	eets the 'facts-and	l-cırcumstances' te	st, check this box a	and stop here. Ex	plain in Part VI hov	· –
	o 10%-facts-and-circumstances to or more, and if the organization m organization meets the facts-and-	eets the 'facts-and -circumstances' tes	l-circumstances' te st. The organization	st, check this box a n qualifies as a pul	and s <b>top here.</b> Ex blicly supported or	plain ın Part VI hov ganization	v the
18	Private foundation. If the organiz	zation did not chec	k a box on line 13,	16a, 16b, 17a, or	17b, check this bo	x and see instruction	ons ▶ 📙

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Page 3



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.)

<u>Sect</u>	ion A. Public Support						
1	lar year (or fiscal yr beginning in)  Gifts, grants, contributions and membership fees	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
	received (Do not include any 'unusual grants.')						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities						
	furnished in any activity that is related to the organization's tax-exempt purpose						
	Gross receipts from activities that are not an unrelated trade or business under section 513.						
5	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge						
7 a	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons						
	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6.)						
Sect	tion B. Total Support						
Calend	dar year (or fiscal yr beginning in) 🕨	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
_	Amounts from line 6						
10 a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
_	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
	Add lines 10a and 10b						
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.)						
14	First five years. If the Form 990 is organization, check this box and s	top here					
	Bubble support percentage for 201			2 column (6)		1	45 9.
15	Public support percentage for 201		•			<u>-</u>	15 %
16	Public support percentage from 20	-					16 8
	tion D. Computation of Inv				<u></u>	<del></del>	17 %
17	Investment income percentage for						
18	Investment income percentage fro					-	
	<ul> <li>33-1/3% support tests — 2014. If is not more than 33-1/3%, check t</li> <li>33-1/3% support tests — 2013. If</li> </ul>	his box and stop h	ere. The organiza	tion qualifies as a	publicly supported	organization	▶ [_
	line 18 is not more than 33-1/3%, Private foundation. If the organiz	check this box and	I stop here. The o	rganization qualifi	es as a publicly sup	oported organ	ization ▶ 📘
	J	·	<u>·</u>	•			

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).

Pt II Ln 10

Other Income Part II, Line 10 Description: Event Revenue 2010: 1082922.

2011: 1013510. 2012: 1080758. 2013: 1126512. 2014: 1112792.

# SCHEDULE D (Form 990)

## Supplemental Financial Statements

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

► Attach to Form 990.

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Open to Public Employer identification number

	SPEEDWAY CHILDREN'S CHARITIES	5.6	-1331429	
Pár	列蒙 Organizations Maintaining Donor Advised Funds or Other Similar Funds	or Accou	-1331429 nts.	
	Organizations Maintaining Donor Advised Funds or Other Similar Funds Complete if the organization answered 'Yes' to Form 990, Part IV, line 6.			
	(a) Donor advised funds	(b) Funds	and other accou	ınts
1	Total number at end of year			
2	Aggregate value of contributions to (during year)	<del></del>		
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 advisare the organization's property, subject to the organization's exclusive legal control?	ed funds	Yes	No
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose impermissible private benefit?	used only conferring	Yes	No
Pär	Conservation Easements. Complete if the organization answered 'Yes' to Form 990, Part IV, line 7.			
1	Purpose(s) of conservation easements held by the organization (check all that apply)			
	Preservation of land for public use (e.g., recreation or education)	nistorically imp	ortant land area	
	Protection of natural habitat Preservation of a c	certified historic	structure	
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of	of a conservati	on easement on	the
	last day of the tax year.	Co. sell	<del></del>	
_	Total number of conservation easements	<del></del>	at the End of th	e Tax Year
		2 a		
	Total acreage restricted by conservation easements	2 b		_
	Number of conservation easements on a certified historic structure included in (a)	2 c		
C	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2 d		
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the tax year ►	organization	during the	
4	Number of states where property subject to conservation easement is located ▶			
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of vand enforcement of the conservation easements it holds?		Yes	No
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements du	uring the year		_
7	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during ►\$	the year		
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170 and section 170(h)(4)(B)(ii)?	(h)(4)(B)(ı)	Yes	No
9	In Part XIII, describe how the organization reports conservation easements in its revenue and expense include, if applicable, the text of the footnote to the organization's financial statements that describes the property of the footnote to the organization reports.	e statement, ar he organization	nd balance sheet n's accounting fo	, and r
Par	conservation easements.  † III Organizations Maintaining Collections of Art, Historical Treasures, or Ot Complete if the organization answered 'Yes' to Form 990, Part IV, line 8.	ther Simila	r Assets.	
		<del></del> .		
1 a	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue stater art, historical treasures, or other similar assets held for public exhibition, education, or research in furth in Part XIII, the text of the footnote to its financial statements that describes these items	ment and balar herance of pub	nce sheet works lic service, provi	of de,
t	If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statemen historical treasures, or other similar assets held for public exhibition, education, or research in furtheral following amounts relating to these items.	ince of public s	ervice, provide ti	rt, ne
	(i) Revenue included in Form 990, Part VIII, line 1			
	(II) Assets included in Form 990, Part X		·	
	If the organization received or held works of art, historical treasures, or other similar assets for financial amounts required to be reported under SFAS 116 (ASC 958) relating to these items:	•	J	<u> </u>
	Revenue included in Form 990, Part VIII, line 1 · · · · · · · · · · · · · · · · · ·		<b>▶</b> \$	
L	Assets included in Form 990. Bort V			

Partilla Organizations Maintaining Co	ollections of Art, I	<u> Historical Treasures, c</u>	or Other Similar Ass	sets (continu	ued)
3 Using the organization's acquisition, accession items (check all that apply)	on, and other records, c	heck any of the following that	are a significant use of it	s collection	
a Public exhibition	d ∏l	oan or exchange programs			
b Scholarly research	e 🗍 (	Other			
c Preservation for future generations		<del></del>			
Provide a description of the organization's co Part XIII.	llections and explain ho	w they further the organization	on's exempt purpose in		
5 During the year, did the organization solicit o to be sold to raise funds rather than to be ma	intained as part of the o	organization's collection?		Yes	No
Part   Value   Escrow and Custodial Arrang line 9, or reported an amount o	gements. Complete n Form 990, Part X	e if the organization ans , line 21.	swered 'Yes' to Form	990, Part I\	<del>,</del>
1 a Is the organization an agent, trustee, custodi on Form 990, Part X?		• • • • • • • • • • • • • • • • • • • •	sets not included	Yes	No
b If 'Yes,' explain the arrangement in Part XIII	and complete the follow	ing table:			
				Amount	
c Beginning balance					
<b>d</b> Additions during the year			1d		
e Distributions during the year			1 e		
f Ending balance			1f		
2 a Did the organization include an amount on Fe	orm 990, Part X, line 21	, for escrow or custodial acco	ount liability?	Yes	No
<b>b</b> If 'Yes,' explain the arrangement in Part XIII	Check here if the expla	nation has been provided in F	Part XIII		П
<u> </u>				•	_
Part V Endowment Funds. Complete	if the organization	answered 'Yes' to Forn	n 990, Part IV, line 1	0.	
(a) Cur	rent year (b) Pri	or year (c) Two years bac	k (d) Three years back	(e) Four yea	rs back
1 a Beginning of year balance				1	
<b>b</b> Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships				+	<del></del>
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					
2 Provide the estimated percentage of the curr	ent year end balance (l	ne 1g. column (a)) held as	<del>1</del>		
a Board designated or quasi-endowment ►	%	ine 19, column (a), note as:			
b Permanent endowment	<del></del> °				
c Temporarily restricted endowment	_ °				
<u> </u>					
The percentages in lines 2a, 2b, and 2c shou	nd equal 100%.				
3 a Are there endowment funds not in the posses	ssion of the organization	n that are held and administe	red for the		T
organization by				Yes	No
(i) unrelated organizations				. 3a(i)	<del> </del>
(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		nent funds.			
Part VI Land, Buildings, and Equipm					
Complete if the organization ar	swered 'Yes' to Fo	rm 990, Part IV, line 11	a. See Form 990, Pa	art X, line 10	).
Description of property	(a) Cost or other ba (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book v	alue
1 a Land	[		Parameter Services		
<b>b</b> Buildings					
c Leasehold improvements					
d Equipment		48,471.	34,582.	1 3	3,889.
e Other		8,279.			0.
Total. Add lines 1a through 1e. (Column (d) must e				1.3	3,889.

Complete if the organization answered "  (a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-	
(1) Financial derivatives	`	.,	<u> </u>
(2) Closely-held equity interests			
(3) Other			
(A) (B) (C) (D)			
(C)			
 (D)			
(E)			
(F)			
(G)			<u> </u>
<u>(H)</u>			
<u>(I)                                      </u>			
Total. (Column (b) must equal Form 990, Part X, column (B) line 12) ▶		<u>                                     </u>	
Part VIII Investments – Program Related. Complete if the organization answered '	Ves' to Form 990	Part IV line 11c See Form 990 P	art X line 13
(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-o	
(1)	1-, 200 value	(-,	, , , , , , , , , , , , , , , , , , , ,
(2)			
(3)			
(4)	-		
(5)			
(6)			
(7)			
(8)			
(9)			
(10)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 13) ▶	<u> </u>		
Part IX Other Assets. Complete if the organization answered '	'Voc' to Form 000	Part IV line 11d See Form 900 P	art V line 15
	escription	Factiv, line 11d. See Form 990, F	(b) Book value
(1)	· · · · · · · · · · · · · · · · · · ·		
(2)			
(3)	<del> </del>		
(4)			
(5)			·-··
(6)			
<u>(7)</u> (8)		· · · · · · · · · · · · · · · · · · ·	<u> </u>
(9)			
(10)			
Total. (Column (b) must equal Form 990, Part X, column (B),	line 15.)		
Part X Other Liabilities.			
Complete if the organization answered 'Yes' to F			<u> </u>
(a) Description of liability	(b) Book value	9	
(1) Federal income taxes			
<u>(2)</u> (3)			
(4)		<del></del>	
(5)		<del> </del>	
(6)			
(7)			
(8)			
(9)			
(10)			
(11)			
Total (Column (h) must equal Form 990, Part X, column (R) line 25.)	. ▶	1	

2. Liability for uncertain tax positions In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII.

4 0

2,928,143

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return. Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a. 4,085,191. 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12. 2 a 540,874. 2 c <. 26 540,874. 3 3,544,317. ,,,, 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1 ž. a Investment expenses not included on Form 990, Part VIII, line 7b . . . . . . . . . . 4 b 5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) . . . . . . . . . . 3,544,317. Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a. 3,469,017. 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: 2 a 2 b 2 c 2 e 540,874. 3 2,928,143. 4 Amounts included on Form 990, Part IX, line 25, but not on line 1:

Part XIII Supplemental Information.

a Investment expenses not included on Form 990, Part VIII, line 7b . . . . .

5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) . . . . . . . .

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

> The Organization has implemented the provisions of FASB ASC 740-10 relating to the accounting for uncertainty in income tax positions. FASB ASC 740-10 prescribes a comprehensive model for the financial statement recognition, measurement, presentation and disclosure of income tax uncertainties with respect to positions, including tax-exempt status, taken or expected to be taken in income tax returns. Organization's income tax returns for its reporting periods ended during the years 2012 through 2014 are still subject to examination by the IRS.

Pt X, Line 2

Schedule D (Form 990) 2014

BAA

### SCHEDULE G (Form 990 or 990-EZ)

## **Supplemental Information Regarding Fundraising or Gaming Activities**

Complete if the organization answered 'Yes' to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

► Attach to Form 990 or Form 990-EZ.

Department of the Treasury Internal Revenue Service

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

OMB No 1545-0047

2014

Open to Public Inspection

ame of the organization					Employer Identific	ation number
SPEEDWAY CHILDREN'S CHARI	TIES				56-133142	9
Fundraising Activities. Comp	lete if the organ uired to complet	ızatıon ans e this part.	wered 'Ye	s' to Form 990, Part IV, I	ine 17.	
1 Indicate whether the organization ra	sed funds throu	gh any of t	he followin	ng activities. Check all th	at apply	
a Mail solicitations			е	Solicitation of non-g	overnment grants	
b Internet and email solicitations			f	Solicitation of gover	_	
~ <b>⊢</b>				<b>=</b>		
d n-person solicitations			g	Special fundraising	events	
2 a Did the organization have a written of employees listed in Form 990, Part	or oral agreemer	nt with any onnection v	ındıvidual wıth profes	(including officers, direct	tors, trustees or key	Yes No
b If 'Yes,' list the ten highest paid indiv compensated at least \$5,000 by the	iduals or entities					o be
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(III) Did fu have custod of contri	ly or control	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in	(vi) Amount paid to (or retained by) organization
					column (i)	
		Yes	No			
1						
2						
3						
4						-
5						
6						
7			1			
8						
9						
10						
<del></del>	<u> </u>	<u> </u>	l			
Total						
<ol> <li>List all states in which the organization or licensing.</li> </ol>	on is registered	or licensed	to solicit	contributions or has bee	n notified it is exempt fro	m registration

Fundraising Events. Complete if the organization answered 'Yes' to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
_			NC Dinner	TX Dinner	74	(add column (a) through column (c))
E			(event type)	(event type)	(total number)	
	1	Gross receipts	671,497.	210,710.	2,547,409.	3,429,616.
E	2	Less: Contributions	561,959.	140,307.	1,721,431.	2,423,697.
	3	Gross income (line 1 minus line 2)	109,538.	70,403.	825,978.	1,005,919.
	4	Cash prizes				
D	5	Noncash prizes		-		
DIRECT	6	Rent/facility costs	1,716.		25,553.	27,269.
	7	Food and beverages	57,975.	15,271.	112,255.	185,501.
X P E	8	Entertainment		22,500.	4,200.	26,700.
пхршхим	9	Other direct expenses	24,097.	77,721.	825,397.	927,215.
3		Direct expense summary. Add lines 4 through				1,166,685.
ا	11	Net income summary Subtract line 10 from				-160,766.
िद्धा	<u>s uu .</u>	Gaming. Complete if the organizati \$15,000 on Form 990-EZ, line 6a.	on answered Yes	to Form 990, Part IV	, line 19, or reporte	d more than
RE>E>E			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add column (a) through column (c))
E	1	Gross revenue			106,873.	106,873.
F	2	Cash prizes			17,384.	17,384.
DIRECT	3	Noncash prizes			50,065.	50,065.
C S T E S	4	Rent/facility costs				
	5	Other direct expenses			7,740.	7,740.
	6	Volunteer labor	Yes % No	Yes %	X Yes 95.00 % No	
	7	Direct expense summary. Add lines 2 throu	gh 5 in column (d)			75,189.
	8	Net gaming income summary. Subtract line	7 from line 1, column (d	)	<u></u>	31,684.
а	Is th		ctivities in each of these			
		e any of the organization's gaming licenses r	evoked, suspended or te		year?	· Yes XNo

Scrie	adie G (Form 990 or 990	-E2/2014 SPEEDW	AI CHILDREN 2	CHARITIES	36-13	331429	Page 3
11.	Does the organization o	perate gaming activities	s with nonmembers?			· · X Yes	No
12	Is the organization a gra administer charitable ga	intor, beneficiary or trus ming?	stee of a trust or a men	nber of a partnership or other e	entity formed to	Yes	XNo
13	Indicate the percentage	of gaming activity cond	ducted in:				
					<sub>.</sub> <sub>13</sub>	a	ુ
					<del></del>	<del></del>	<del></del>
	· ·			ation's gaming/special events b			
	Name ► <u>Nancy Bi</u>	sson			· <b>-</b>		
	Address ► <u>5401_E</u>	. Independence	Blvd Charlot	te, NC 28212	<del></del> -		
t	Does the organization has If 'Yes,' enter the amour of gaming revenue retains If 'Yes,' enter name and	nt of gaming revenue re ned by the third party	eceived by the organiza	e organization receives gaming ation \$	revenue? and the am	· · · Yes	ΧNο
	in res, entername and	address of the third pa	rty.				
	Name					. – – – – – –	
	Address	. <b></b>		·			
16	Gaming manager inform	nation.					
	Name ► <u>See Part</u>	_ <u>IV</u>				· – – – – – -	
	Gaming manager comp	ensation • \$	0				
	Description of services	provided <u>Over</u>	saw gaming ope	erations		. <b></b>	
	Director/officer	XEmploy	ee	Independent contractor			
17	Mandatory distributions						
ā	Is the organization requistate gaming license?	red under state law to	make charitable distrib	outions from the gaming procee	ds to retain the	XYes	No
ŧ	Enter the amount of dist	tributions required unde	er state law to be distril	buted to other exempt organiza	itions or spent in the		<u></u>
	organization's own exer						
Pa	and Part III, li	al Information. Prones 9, 9b, 10b, 15lee instructions).	ovide the explanat o, 15c, 16, and 17	ions required by Part I, li b, as applicable. Also pro	ne 2b, columns ( ovide any additio	(iii) and (v), ∙nal	
Lir	ne 16	Anderson, and oversaw local	d Cheryl LaPra . gaming event located to gam	d, Lisa Starnes, C de, Speedway Child s as part of their ning manager, which	ren's Charit position wi	ies emplo th SCC.	yees, No

SCHEDULE 1 (Form 990)

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

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

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

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545-004	7
-	0
B No	Ñ
OMB	

Employer identification number 56-1331429 

	d Assistance
RITIES	n Grants an
SPEEDWAY CHILDREN'S CHARITIES	Il Information on Grants and
WAY CHILDREN	General In
SPEED	?સ્ત્રો!

Department of the Treasury Internal Revenue Service Name of the organization

× Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Rants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered 'Yes' to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

(a) Name and address of organization or government	(p) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) Tarrant Area Food Bank - 2600 Cullen St Fort Worth TX 76107	75-1822473	501(c)(3)	150,000.				Food truck
(2) Boys & Girls Club_Mtn Emp - PO Box 1074		501(5)(3)	000-19				After school
(3) Jeff_Gordon_Foundation		501 (c) (3)	34,475.				Medical supprt
(4) Boys_& Girls_Club_Sonoma PO_Box_218 El Veraon CA 95433		501(c)(3)	30,000.				Educate youth
	56-0560327	501(c)(3)	30,000.				Food, clothing
<u>וה _ ו</u> בב  23459	31-1728910	501(c)(3)	25,000.			,	Youth camps
(7) PediPlace	75-2512752	501(c)(3)	20,000.				Medical supprt
(8) David's House	22-2593431	501(c)(3)	18,057.				Housing asst
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	and government orga	anizations listed in the	line 1 table				133
3 Enter total number of other organizations listed in the line 1 table	ns listed in the line 1	able				<b>A</b>	0

Schedule I (Form 990) (2014)

TEEA3901 06/19/14

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

Page 2

SPEEDWAY CHILDREN'S CHARITIES Schedule I (Form 990) (2014)

**Parilin** Grants and Other Assistance to Domestic Individuals. Complete if the organization answered 'Yes' to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of reapients	(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
2					
9					
9					
Partily Supplemental Information. Provide the information	de the information	required in Part I, lir	ne 2, Part III, columr	required in Part I, line 2, Part III, column (b), and any other additional information.	litional information.

Pt I Line 2

Speedway Children's Charities monitors the use of grant funds through various site visits and grant evaluation forms, which are completed by the grant recipient.

990 - Sch I - Part II, Continuation of Grants and Other Assistance to Governments and Organizations in the United States

56-1331429

For the Calendar year 2014, or the tax year penod beginning 10-01 and ending 9-30-15 Speedwar Chaldren's Charites

(a) Name of Organization		Address		(b) EIN (c)IRC Section	(d) Amount of (e) Amount of cash grant assistance	Int of (f) Method of ssh valuation	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Children's Attention Home, Inc.	P O Box 2912	Rock Hill	SC 29732	57-0527092 501(c)(3)	15,000			Provide food to child victims of abuse, abandonment, and neglect
Discovery Home Care	818 Pesceful Glen Road	Charlotte		-	15,000			SS associated children while finding home
Ronald McDonald House Fort Worth	1001 8th Avenue	Fort Worth	TX 76104	75-1754490 501(c)(3)	15,000	İ		Provide meals to children in Pediatric ICU at Cook Children's
Sele Affance	601 E, 5th Street, Suite 400	Charlotte	NC 28202	56-0529967 501(c)(3)	15,000			Provide support services for child victims of sexual assault
Denton Kwanta Chakran's Cline	1001 N Elm	Denton			13,380			Provide prescriptions to impoverished children and expand the types of procedures they can provide them:
Date Jr Foundstion	349 Cayuga Drive	Mooresvile			11,400			Dedicated to gnung underprivileged youth the resources to improve their confidence and education
Big Brothers/ Big Sisters of East Tennessee	301 Louis St Suite 302	Kingsport	TN 37660	62-0842531 501(c)(3)	11,000			Community and School based mentoring
Boys and Girts Club of Greater Kingsport	P,O, Box 784	Kingsport	TN 37662	62-0481370 501(c)(3)	11,000			Enable young people to reach their full potential
Bristol Family YMCA Teen Leadership Club	400 MLK Jr BMd	Bristal	TN 37620	62-0521204 501(c)(3)	11,000			Provide a positive environment after school for kids
CASA For Kids	317 Shelby Suffe 206	Kingsport	TN 37660	62-1464923 501(c)(3)	11,000			Training for court advocates for children in judicial system.
Children Exceeding Expectations School JLK	151 Speedway Blvd	Bristol	TN 37620	62-0634742 501(c)(3)	11,000			School for children going through cancer treatment
Children's Advocacy Center of BristolWeshington Co VA	P O Box 16231	Brrstol	VA 24209	54-1860857 501(c)(3)	11,000			Child abuse prevention curriculum for children of all ages
Children's Advocacy Center of Suffixan Co	P.O. Box 887	Blountville	TN 37617	62-1232172 501(c)(3)	11,000			Therapy for the abused child and the non-offending family member
Feeding America Southwest Virginia	P O Box 2579	Abingdon	VA 24211	54-1939556 501(c)(3)	11,000			Fight hunger and change lives among needy children
Girts Incorporated of Bristal	613 Highland Ave	Bristol	VA 24201	62-0514164 501(c)(3)	11,000			Fnendly PEERsuasion drug prevention program
Second Harvest Food Bank of Northeast TN	1020 Jencho Drive	Kingsport	TN 37663	62-1303822 501(c)(3)	11,000			Kids backpack program
Girts incorporated of Kingsport	P O Box 981	Kingsport	TN 37662	62-6064042 501(c)(3)	10,800			Project Helping Hands so that girls get a hand up and not a hand out
Tony Stewart Foundation	5644 W 74th St	Indianapolis	IN 46278	20-0160286 S01(c)(3)	10,325	-		Cere for critically ill youth, injured drivers & various animal species
Сатр Норе	1949 Templahiii Drive	Plano	TX 75075	46-3925764 501(c)(3)	10,125			Send children with padiatric cancer to properly equipped camp
McChure River Velley Community Center	124 Ratter Circle	McClure	VA 24269	54-1509759 501(c)(3)	10,000			Meeting Christmas needs of 600 underserved children in their region
A Botter World	4527 Freedom Drave	Charlotte	NC 28208	56-2238007 501(c)(3)	10,000			Financial resources needed to supplement program expenses for after school program
American Red Cross	14298 Lee Highway	Bristol	VA 24202	53-0196605 501(c)(3)	10,000			Help children with their recovery fallowing disasters
Boys and Girts Club of Elizabethton/Carter Co.	104 Hudson Dr	Elizabethton	TN 37643	62-0502737 501(c)(3)	10,000			Increase the effectiveness and the children served through the Affer School Program
Boys and Girls Club of Greenville & Greene County	P O Box 1977	Greenville	TN 37744	62-1706248 501(c)(3)	10,000			Homework, Tutoning, & Positive rewards
Boys and Girs Club of Johnson CAY/Weshington County	P O Box 5219	Johnson City	TN 37602	62-0810733 501(c)(3)	10,000			Strangthen our existing programs with opportunities to enhance our offerings.
Boys and Girts Club of Morristown	P O Box 1461	Молтяцомп	TN 37816	62-0630667 501(c)(3)	10,000			Head of the Class-homework and tutoring
Bristol Emergency Food Pantry	201 Overbrook Dr	Bristol	TN 37620	62-0984494 501(c)(3)	10,000			Meeting emergency food needs of families with children
Bristol Regional Speech and Hearing Center	2603 Osborne St. Surte 1	Bristol	VA 24201	62-0556300 501(c)(3)	10,000			Prowde medical services directly to children to improve their quality of life
Cemp CARE, Inc.	8625 Gruenewald Ln	Charlotte	NC 28210	56-1467274 501(c)(3)	10,000			Help put on a week long summer camp for kids who have or had cancer and their sibling
CASA of Northerst Tennessee	P O Box 1021	Johnson City	TN 37605	45-0515257 501(c)(3)	10,000			Recruit, train and monitor court advocated for children
Charlen's Healthcare of Atlanta	1510 Hudson Bridge Rd	Stockbridge	GA 30281	58-1710601 501(c)(3)	10,000			Use proceeds to buy medical equipment
Coattlon for Kds	2308 Watauga Road	Johnson City	TN 37601	62-1765487 501(c)(3)	10,000			Awesome Kids Club tutoning and mentoring.
Crumley House Brain Injury Rehab Center	300 Urbana Rd	Limestone	TN 37681	58-1988511 501(c)(3)	10,000			Care and training for concussions and prevention
Girts Incorporated of Johnson ChyWashington County	P O Box 1435	Johnson City	TN 37605	62-0493392 501(c)(3)	10,000			ASTRID. Achieving Success Through Resources and Independent Day.

990 - Sch I - Part II, Continuation of Grants and Other Assistance to Governments and Organizations in the United States

58-1331429

For the Calendar year 2014, or the lax year period beginning 10-01 and ending 9-30-15

Speedway Children's Charities

(a) Name of Organization		Address		(b) EIN (c)IRC Section	(d) Amount of (e) Au cash grant nor	(e) Amount of (f) Method of non-cash valuation	of (g) Description of non-cash assistance	
Girs on the Run of NE, Tennessee	P O Box 5622	Johnson City	TN 37602	20-8559320 501(c)(3)	10,000			Unleash confidence through accomplishment while establishing a lifetime appreciation of health and fitness
God's Appelachian Pertnership, Inc	P.O. Box 704, 90 Big Bridge Road	McDowell	KY 41647	61-1391656 501(c)(3)	10,000			Provide low-income children with necessary school items
Good Samaritan Menstries	P.O. Box 2441	Johnson City	TN 37605	62-1233320 501(c)(3)	10,000			Food programs for children and Back to School Education program
Greater Kingsport Family YMCA	1100 Franklin Sq	Kingsport	TN 37664	58-1564232 501(c)(3)	10,000			Child care for special needs children
Johnson Co, Safe Haven	P O Box 167	Mountain City	TN 37683	62-1719057 501(c)(3)	10,000			Emergency food, clothing, shelter for children of domestic wolence
Male Leadership Academy of Charlotte	5901 Nations Ford Rd	Charlotte	NC 28270	46-0733802 501(c)(3)	10,000			Implementation of a language academy teaching Spanish and Chinese to grades 1-4.
Wisty Meadows Mdey Riders	455 Prowdence Road	Waxhaw	NC 28173	56-2045099 501(c)(3)	10,000			Therapeutic nding program for special needs children free of charge
Mountain Region Speech and Hearing Center	301 Lours St Suite 101	Kingsport	TN 37660	51-0141536 501(c)(3)	10,000			Provide speech, language, swallowing and hearing treatments for infants and children
National Camps for Blind Children	70 N Massengill Rd	Greenewile	TN 37743	47-0405439 501(c)(3)	10,000			Prowde camping experience for blind children
Par's Place Child advocacy Center	901 East Bhd	Charlotte	NC 28203	20-1820596 501(c)(3)	10,000			Child abuse education & prevention programs free of charge
Race to Read	PO Box 550	Waterbury	VT 5678	46-3939471 501(c)(3)	10,000			Reading initiative throughout state of Vermont
Rise Up!	P O. Box 4428	Johnson City	TN 37602	62-1641099 501(c)(3)	10,000			SKIA (Sending Kids Into Action) Nutrition and Enrichment Field Trip Programs
Sarta Pal	P O Box 212	Bristol	VA 24203	31-1794923 501(c)(3)	10,000			Christmas for underprivileged children
Smail Miracles Therapeutic Equestrian Center	1026 Rock Springs Drive	Kingsport	TN 37664	62-1603341 501(c)(3)	10,000			Student sponsorship program for special needs students
Suffkan Co, Sheriffs Office Auditary	P O Box 589	Blountville	TN 37617	27-0052413 501(c)(3)	10,000			Serving needy children in county for Christmas
The Dragonfly Foundation	9275 Governors Way	Cnannati	OH 45249	27-3183929 501(c)(3)	10,000			"C.A.R.E. Packages" for youth cancer patients in hospital
The Juner Charity League of Concord, Inc	P.O. Box 1008	Concord	NC 28026	56-6061166 501(c)(3)	10,000			Provide new clothing for disadvantaged children in Cabarrus and Kannapolis schools
YWCA Bristol	106 State St	Bristol	TN 37620	62-0488044 501(c)(3)	10,000			Moms R Us teen pregnancy program
Hanna Boys Center	PO Box 100	Sonoma	CA 95476	94-1156478 501(c)(3)	9,850			Change lives of troubled youth
Sonoma Valley Teen Services	17440 Sonoma Highway	Sonoma	CA 95476	68-0390038 501(c)(3)	9,600			Support and encourage teens through various programs
Mary Hitchcock Memorfal Hospital	One Medical Center Drive	Lebanon	NH 3756	02-0222140 501(c)(3)	9,442	_		Support for CHaD programs such as child life and family center
Mary And John Elliot Cheritable Foundation	4 Elliot Way, Surte 301	Manchester	NH 3103	02-0512229 501(c)(3).	9,405			New Hampshire's Hospital for Children - funding for V Go Robot
Abuse Alternatives	104 Memorial Dr	Bristol	TN 37620	54-1101180 501(c)(3)	000'6			Providing emergency shelter for abused children and mothers
Arc of Washington Co.	2700 S. Roan St. Suite 300B	Johnson City	TN 37601	62-0694557 501(c)(3)	000'6			Prowde respite services to children with disabilities
Bethamy Christian Services	3104 Hanover Road	Johnson city	TN 37601	38-2842293 501(c)(3)	000'8			Goal is to serve children
Bread of Life Children's Ministry	30427 Old Saltworks Rd	Meadowniew	VA 24361	54-2057171 501(c)(3)	8,000			Backpack Food Program and Christmas project
Crossroads Medical Mission	P O Box 16852	Brestol	VA 24209-6852	54-2038877 501(c)(3)	000'6			Free healthcare and medications and school/sports physicals
Hands On! Regional Museum	315 E, Main Street	Johnson City	TN 37601	62-1282542 501(c)(3)	000'6			Prowding educational programs for all children
Holston United Methodist Home for Children	P O Box 188	Greenevile	TN 37744	62-0515531 501(c)(3)	000'e			LEAD Program emphasizes leadership, life skills, and healthy living
Lee St. Community Child Care Center "All God & Children"	614 Goodson St	Bristol	VA 24201	54-1707603 501(c)(3)	000'6			Affordable quality childcare for the less fortunate
River's Way Outdoor Adventure Center	889 Stoney Hollow	Rd Bluff Crty	TN 37618	62-1542726 501(c)(3)	000'6			Adventure incentive for children with disabilities
Town Square Inc. Food Ministries	P O. Box 338	Glade Spring	VA 24340	54-1897853 501(c)(3)	000'6			Prepare food for boxes for children
Assistance League of Charlotte	P.O. Box 471112	Charlotte	NC 28247	56-1781080 501(c)(3)	8,000			Prowde clothes, shoes, grooming kits and books to at-risk youth
Captal Region Food Program	Co Susan Leahy, 11 South Main Street, Surte 500	concord	NH 3301	22-2490055 501(c)(3)	8,000			Holiday Food Basket Project

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For the Calendar year 2014, or the tax year period beginning 10-01 and ending 9-30-15

For the Calendar year 2014, or the tax year period beginning 10-01 and ending 9-30-15	1 and ending 9-30-15									delicer and
Speedway Chafren s Charites (a) Name of Organization		Address		(b) EIN		) Amount of (			(g) Description	(h) Purpose of grant or assistance
				-	Section	cash grant	non-cash assistance	vafuation	of non-cash assistance	
Certor Co, Imagination Library	2207 Eagle Dr	Elzabethton	TN 37643	43-2082197 5	501(c)(3)	8,000				Provide free books for children birth to 5 years
Child Advocacy Center of the 3rd Judicial District	P O Box 743	Mosherm	TN 37818	62-1822505 5	501(c)(3)	8,000				Therapeutic services for sexually abused children
Freedom School Pertners	P O Box 37363	Charlotte	NC 28237	58-2169158 5	501(c)(3)	8,000				Literacy instruction and books freedom school scholars at the Grove Freedom School
Hope House of Scott Co.	P O Box 1992	Gate City	VA 24251	54-1893016 5	501(c)(3)	8,000				Provide needs for youth residing in their shelter
Jerico Shriners	P O Box 5548	Kingsport	TN 37663	36-2193608 5	501(c)(3)	8,000			9	Children treated at the hospital at no charge to that parents
Radwood Empire Food Bank	3990 Brickway Blvd	Senta Rosa	CA 95403		501(0)(3)	8,000				Farm to Family School Pantry (FFSP)
Sullvan Co, Imagination Library	149 Pactolus Rd	Kingsport	TN 37663	55-0860873 5	501(c)(3)	8,000				ree books for children birth until 5 at no cost to family
The Salvation Army, A Georgia Corporation - Charlotte	4335 Stuart Andrew Blvd, Suite 120	Charlotte	28217		501(c)(3)	9,000				Provide emergency funding for Boys and Girls Club at the emergency homeless shelter
Educational Excellence Foundation of Gallatin County, Inc.	75 Boardwalk	Warsaw	KY 41095	45-2394650 5	501(c)(3)	7,925				Provides books to children through literacy program.
Southern Appalachtan Ronald McDonald House	418 N State of Frenklin Road	Johnson City	TN 3764		501(c)(3)	7,600				inderwriting the actual cost of family rooms
Anuvia Prevention & Recovery Center	100 Billingsley Rd	Charlotte	NC 28210	58-0746601	501(c)(3)	7,500			L	Free services addressing substance abuse, mental health conditions & life skills deficits
Boys & Girts Club of Greater Concord	55 Bradjey Street	Concord	NH 3301	02-0259874 5	501(c)(3)	7,500				Financial assistance for at-risk children to attend the afterschool program
Committee on the Shelterless - COTS	PO Box 2744	Petatuma	CA 94952	68-0176855 5	501(c)(3)	7,500			0	Children's Programs at COTS
Nswonger Children s Hospital	303 Meed Tech Perkway Suite 330	Johnson Cdy	TN 37604	62-0476282 5	501(c)(3)	7,200			- 4	Replace children's stretchers
Children's Advocacy Center of the 1st Judicial District	P O Box 827	Johnson City	TN 37605	62-1765785 5	501(c)(3)	7,000				Provide services to child victims of physical and sexual abuse
Crisis Pregnancy Center of Griston County, Inc.	800 Robinson Rd	Gastonia	NC 28056	56-1499208	501(c)(3)	7,000			. 0	Provide car seats and pack and plays for indigent children of Gaston County
Hope House	514 Cedar Court	Kingsport	TN 37663	56-2277775 5	501(c)(3)	2,000			<u> </u>	Provide physical, emotional and basic health needs of bables and children.
Imagination Library for Washington Co. and Bristol VA	220 Lee Street	Brrstol	VA 24209	35-2300989 5	501(c)(3)	7,000			-	Free books for children birth unbl 5 at no cost to family
Shepard s inn	P O Box 2214	Elizabethton	TN 37644	62-1690064 5	501(c)(3)	7,000				Emergency shefter, wamen and children
Barlum Springs Home for Children	P O Box 1	Banum Springs	NC 28010	56-0529993	501(c)(3)	8,736			<u> </u>	Beds for the nearth and safety of our most severely emotionally damaged children.
Appalachia Service Project	4523 Bristol Highway	Johnson Crty	TN 37601	62-0989383 5	501(c)(3)	000'9			2	Making children's homes safer and drier
Autsm Foundation of the Carolinas - Autsm Charlotte	P O Box 12671	Chartotte	NC 28220	06-1801739 5	501(c)(3)	9,000			d. 6	Program connecting college students seeking practical experience in autism families
Bristol Outreach	412 Glenway Avenue	Bristol	VA 24201	27-0259050 5	501(c)(3)	9'000			o,	Summer fun with positive guidance
Catholic Charities of the Diocese of Santa Rosa	987 Arway Court	Santa Rosa	CA 85403	94-2479393 5	501(c)(3)	9,000				Family Support Center Canng for Children & Families in Crisis
Child Perent Institute - formerly Celifornia Perenting Institute	3650 Standish Avenue	Santa Rosa	CA 85401	94-2541640 5	501(c)(3)	6,000			0	Children's Mental Health Treatment for Trauma, Abuse and Neglect
Court Appointed Special Advocates of Sonoms County (CASA)	PO Box 1418	Kenwood	CA 95452	68-0404770 5	501(c)(3)	6,000			0	CASA Mentoring and Gang Prevention
East TN Christian Home and Academy	P O Box 1147	Elizabethton	TN 37644	62-0517558 5	501(c)(3)	6,000			a.	Prepare girts in home with an independent IMng program for future
Friends of Hospice	400 W Main Street Suite B-110	Morristown	TN 37816	58-1761448 5	501(c)(3)	6,000				Grief camp and services for children
Individuals NOW dba SAY - Social Advocates for Youth	3440 Anway Drive Suite E	Santa Rosa	CA 95403	94-1711490 5	501(c)(3)	6,000				Dr. James E. Coffee House Emergency Teen Shelter and Drop in Center
InReach	4425 Randolph Road Suite 400	Charlotte	NC 28211	52-1084075	501(c)(3)	6,000			w .	Emergency assistance for families/children with disability
Jonesville Methodist Church Feeding America Food Pantry #300	P O Box 280	Jonesville	VA 24263	54-0782814 5	501(c)(3)	6,000			O.	Provide food for less fortunate families
רש רחל.	17560 Greger Street	Sопота	CA 95478	68-0228235	501(c)(3)	9,000			- 4	Fostering Healthy Children, Healthy Families and a Healthy Community
LandPeths	618 4th Street	Santa Rosa	CA 95404	68-0328590 501(c)(3)	01(0)(3)	6,000				and preservation and promotion
LifeWorks of Sonoma County	120 College Avenue	Santa Rosa	CA 85404	68-0375462 501(c)(3)	(6)(3)10	9,000			s	Student tutomg

990 - Sch I - Part II, Continuation of Grants and Other Assistance to Governments and Organizations in the United States

56-1331429

For the Calendar year 2014, or the tax year period beginning 10-01 and ending 9-30-15

Speedway Children's Charities

(a) Name of Organization		Address		(B) EIN	(c)IRC Section	(d) Amount of cash grant	(e) Amount of non-cash	(f) Method of valuation	(g) Description of non-cash	(h) Purpose of grant or essistance
Matte, A Parent Network and Resource Center	94 Galii Drive, Surte C	Novato	CA 94949	19 94-2747307	307 501(c)(3)	6,000				Parent-to-Parent Support for Sonoma Families of Children with Special Needs
Mountain Kids Inc	P,O, Box 1298	North Tazewell	VA 24630	30 56-2509157	157 501(c)(3)	6,000				After school program with snacks, mentoring and school supplies
North Bay Children's Center, Inc.	932 C Street	Novato	CA 94948	19 94-3024248	248 501(c)(3)	6,000				Garden of Eeth Health and Nutrition Program
Petaluma People Services Center	1500 Petaluma Blwd South	Petaluma	CA 94952	94-2271299	299 501(C)(3)	000'9				PPSC Youth Prevention & Intervention - Mental Health
Ridh' High Therspeutic Horse Program	1491 Springvele Rd	Mornstown	TN 37813	13 62-1752021	221 501(c)(3)	6,000				Sponsorship for a child to have lessons for nine months
Roseland Charter School	1934 Biwana Drive	Santa Rosa	CA 85407		43-2029144 501(c)(3)	6,000				College Mentor Program
Senta Rosa Community Health Centers	3695 Round Barn Circle	Santa Rosa	CA 95403	3 68-0365296	296 501(c)(3)	000'9				Else Allen Health Center Dental Program
Santa Rosa Memortal Hospital-St, Joseph Dental	751 Lombardi Court Surte A	Santa Rosa	CA 95407	37 94-1231005	501(5)(3)	6,000				Mighty Mouth Dental Disease Prevention Program
Sonoma Valley Education Foundation	17878 Railroad Ave PO Box 493	Sonoma	CA 95476	6 68-0279152	152 501(c)(3)	6,000				Sonoma Valley School Garden Project
Sonoma Valley Mentoring Alfance	916 First Street West	Sonome	CA 95478	68-0429128	128 501(c)(3)	6,000				Stand By Me' Mentoring Program
The Learning Collaborative	3045 N Davidson St	Charlotte	NC 28205	56-1668333	333 501(c)(3)	6,000				Breakfast, hot lunch and a nutritious snack each school day to 64 low moome children
The Living Room Center, Inc.	636 Cherry Street	Santa Rosa	CA 95404		58-2675876 501(c)(3)	6,000				Mother and Child Program.
United Way Virgina Hghlands	P.O. Box 644	Abingdon	VA 24212		54-0718860 501(c)(3)	000'9				Backpack feeding program
Valley of the Moon Children's Home Foundation	PO Box 11671	Santa Rosa	CA 95406	68-0343720	720 501(c)(3)	000'9				Valley of the Moon Children's Center Dental Program
Washington County Friends of Santa	P O Box 54	Abingdon	VA 24212	2 54-1778277	277 501(c)(3)	000'9				Assistance for needy children at Christmas
WilMar Famity Griet & Heating Center	583 First Street West	Sonoma	CA 95478		94-3368889 501(c)(3)	9000				Living with Illiness (LWI) Support Program for Sonoma Valley Pre-Teens
Wonder Kids Therapeutic Equestrian Center	P O Box 17023	Bristol	VA 24209		20-1476076 501(c)(3)	9'000'9				Horseback riding for children with special needs
Sonoma Valley Educational Foundation	17878 Railroad Ave PO Box 493	Sonoma	CA 95476		68-0279152 501(c)(3)	5,648				Enrich Student experiences at school
Kasev Kahne Foundation	4400 Papa Joe Hedrick Blvd	Charlotte	NC 28262		25-1926392 501(c)(3)	5,588				Raise funds to donate to charities supporting chronically ill children and their families
Kewin Harvick Foundstion	703 Park awn Court	Kemersvile	NC 27284		27-2014610 501(c)(3)	5,300				Support programs that positively ennich the lives of children throughout the United States
Flint River Council	PO Box 173	Guffin	GA 30224		58-0574922 <u>501(c)(3)</u>	5,250				Financial assistance for those who need it to participate in scouting
Philips Academy	3115 Providence Road	Charlotte	NC 28211	$\neg$	20-3125525 501(c)(3)	5,200				Transition to Independence Summer Program for Autistic children
Easter Seats New Hampshite, Inc.	555 Aubum Street	Manchester	NH 3103	$\neg$	02-0272825 501(c)(3)	5,004				Child Development Center
			ı	1						

Grants \$5,000 or less

689,878

2,127,686

Total Grants

4 0 4

### **SCHEDULE M** (Form 990)

Name of the organization

#### **Noncash Contributions**

OMB No 1545-0047

2014

Open To Public Inspection

Department of the Treasury Internal Revenue Service

► Complete if the organizations answered 'Yes' on Form 990, Part IV, lines 29 or 30,

► Attach to Form 990.

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

SPEEDWAY CHILDREN'S CHARITIES

Employer identification number

56-1331429 Types of Property (a) (d) Method of determining Check if Number of Noncash contribution applicable contributions or amounts reported noncash contribution amounts items contributed on Form 990. Part VIII, line 1q Art - Historical treasures . . . . . . . . . . . . . . . . . 2 3 4 5 Cars and other vehicles . . . . . . . . . . . . . . . . 6 7 Boats and planes......... 8 9 10 Securities - Partnership, LLC, or trust interests. . 11 12 13 Qualified conservation contribution -Qualified conservation contribution — Other. . . . 15 Real estate - Commercial . . . . . . . . . . . . . 17 Collectibles 18 19 Drugs and medical supplies . . . . . . 20 21 Historical artifacts . . . . . . . . . . . . . . . 22 23 24 Х 25 (Auction Items \_ \_ \_ ) 044 361,734. Cost Х 26 Other ► (Food & Beverages ) 58 109,487. Cost X 27 Other (Prizes \_\_\_\_) 95 65,181 Cost Х 28 (Supplies 30 43,426. Cost Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement . . . . . . . . . . . 29 0. Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt 30 a Х b If 'Yes,' describe the arrangement in Part II. Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? . 31

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

b If 'Yes,' describe in Part II.

describe in Part II.

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell 

If the organization did not report an amount in column (c) for a type of property for which column (a) is checked,

Schedule M (Form 990) (2014)

32 a

56-1331429

Page 2

Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Pt I col(b)

Number represents the number of contributions, not the number of items contributed.

### **SCHEDULE O** (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

Open to Public Inspection

OMB No 1545-0047

2014

Department of the Treasury Internal Revenue Service Name of the organization

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

Name of the organization		Employer identification number
SPEEDWAY CHILDREN	'S CHARITIES	56-1331429
	Board Members O. Bruton Smith and Marcus Smith	have a father-son
Pt VI, Line 2	relationship	
	Committee meetings are not documented in minute	s. Committees submit
	recommendations to the Board for approval. Boa	rd meetings are
Pt VI, Line 8b	documented.	-
Pt VI, Line 11b	The 990 is reviewed by the Finance and Audit Co	mmittee prior to filing.
	The Conflict of Interest Policy is distributed	annually to Board
	Members, Key Employees and Officers to sign. In	a conflict of interest
	is disclosed, it is reviewed by the Board and vo	
	conflict of interest exists. The individual ha	
	explain the alleged failure. If the Board dete	
Pt VI, Line 12c	interest exists, corrective action is taken.	
	Governing documents, conflict of interest polic	y and audited financial
	statements are made available to the public upon	
Pt VI, Line 19	be mailed or emailed to person requesting docum	-