

Form **990-EZ****Short Form****Return of Organization Exempt From Income Tax**

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

OMB No. 1545-1150

2016**Open to Public Inspection**Department of the Treasury
Internal Revenue Service

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

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

A For the 2016 calendar year, or tax year beginning July 1 , 2016, and ending June 30 , 20 17	
B Check if applicable: ☐ Address change ☐ Name change ☐ Initial return ☐ Final return/terminated ☐ Amended return ☐ Application pending	
C Name of organization 2 Mountain Sprouts Children's Community Number and street (or P.O. box, if mail is not delivered to street address) 2 Room/suite PO Box 2182 City or town, state or province, country, and ZIP or foreign postal code Leavenworth, WA 98826	
D Employer identification number 2 80-058263	
E Telephone number (509) 548-6880 x229	
F Group Exemption Number ▶ 2	
G Accounting Method: ☒ Cash ☐ Accrual Other (specify) ▶ _____	
H Check ☒ if the organization is not required to attach Schedule B 2 (Form 990, 990-EZ, or 990-PF).	
I Website: ▶ mtnsprouts.org	
J Tax-exempt status (check only one) - ☒ 501(c)(3) ☐ 501(c) () ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527	
K Form of organization: ☐ Corporation ☐ Trust ☐ Association ☒ Other Non-Profit	
L Add lines 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ. \$	

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I) 2	
Check if the organization used Schedule O to respond to any question in this Part I ☐	
Revenue	1 Contributions, gifts, grants, and similar amounts received 1 4,961
	2 Program service revenue including government fees and contracts 2 128,291
	3 Membership dues and assessments 3
	4 Investment income 4 59
	5a Gross amount from sale of assets other than inventory 5a
	b Less: cost or other basis and sales expenses 5b
	c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) 5c
	6 Gaming and fundraising events
	a Gross income from gaming (attach Schedule G if greater than \$15,000) 6a
	b Gross income from fundraising events (not including \$ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000) 6b
c Less: direct expenses from gaming and fundraising events 6c	
d Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c) 6d 2,265	
7a Gross sales of inventory, less returns and allowances 7a	
b Less: cost of goods sold 7b	
c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) 7c	
8 Other revenue (describe in Schedule O) 8	
9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 9 135,576	
Expenses	10 Grants and similar amounts paid (list in Schedule O) 10
	11 Benefits paid to or for members 11
	12 Salaries, other compensation, and employee benefits 2 112,941
	13 Professional fees and other payments to independent contractors 2 4,474
	14 Occupancy, rent, utilities, and maintenance 2 12,567
	15 Printing, publications, postage, and shipping 2 176
	16 Other expenses (describe in Schedule O) 2 16,646
	17 Total expenses. Add lines 10 through 16 17 146,804
Net Assets	18 Excess or (deficit) for the year (Subtract line 17 from line 9) 18 -11,228
	19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return) 19 64,981
	20 Other changes in net assets or fund balances (explain in Schedule O) 20
	21 Net assets or fund balances at end of year. Combine lines 18 through 20 21 53,753

For Paperwork Reduction Act Notice, see the separate instructions.

Cat. No. 106421

Form **990-EZ** (2016)

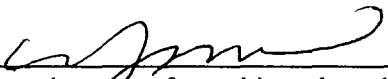
0425876267
Jan. 23, 2018 LTR 2695C 0 R
80-0458263 201612 67
Input Op: 0425876267 00020520

MOUNTAINSPROUTSCHILDREN'SCOMMUNITY
PO BOX 2182
LEAVENWORTH WA 98826

DECLARATION

007522

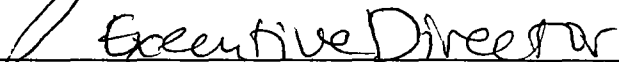
Under penalties of perjury, I declare that I've examined the return identified in this letter, including any accompanying schedules and statements, and any supplemental statements attached hereto, which are intended as supplements to the return, and to the best of my knowledge and belief, it's true, correct and complete. I understand this declaration will become a permanent part of the return.



Signature of authorized individual

1/31/18

Date



Title