EXTENDED TO NOVEMBER 15, 2020

_	gg	N	Return of O	ganiz	zation Exer	npt From	Inco	me Ta	X	OMB No 154	5-0047	
For		U	Under	- 4047/-	\(\d \) = 4 Ab = 1 - 4 - 1 - 1 - 1	D O-d-	/			201	9	
Pe۱)ک	(Rev January 2020) Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)											
Dep	Department of the Treasury Internal Revenue Service Do not enter social security numbers on this form as it may be made public Go to www.irs.gov/Form990 for instructions and the latest information.											
	nal Revenu		<u> </u>		rm990 for instruct			ormation.	<u> </u>	Inspect	ion	
<u> </u>	For the 2	2019 calend	dar year, or tax year beginni	ng		, 2019, and e	nding			, 20		
В	Check if a	pplicable [.]	C Name of organization Road R	unners	Club of America				D Employ	yer identification	number	
	Address cl	hange	Doing business as Maine Tra	ck Club			.			22-2579812		
	Name cha	one number										
	inmal retur	m i	PO Box 8008							(207) 440-3523		
	Final return	/terminated	City or town, state or province,	country,	and ZIP or foreign pos	stal code						
	Amended	return	Portland, ME 04104						G Gross r	receipts \$	419,608	
	Application	n pending	F Name and address of principal	officer			_	H(a) Is this a g	roup return for	subordinates? TY	as 🗹 No	
			Stephen Lee, 46 Morning St	, Portan			1	• •		s included? 🗌 Y		
<u> </u>	Tax-exemp	ot status	✓ 501(c)(3) 501(c) ()◀	(insert no.) 49	47(a)(1) or [] 5	27	If "No,"	attach a list	t (see instructions)	
J			ackclub.com			, 0		H(c) Group 6	exemption n	iumber ►		
				ciation	Other ►	L Year of f	ormation	1979	M State o	f legal domicile	ME	
P	art I	Summa				<u> </u>						
	1 E	Briefly desc	cribe the organization's mis	ssion or	most significant	activities:						
ခိုင	ĺ											
ī.		· 										
ě	1		box ► ☐ If the organization				sed of	more than	1 1	ts net assets.		
ၓ	l .		voting members of the government	_	• •				3		9	
Activities & Governance	į.		independent voting memb		-	• •			4		9	
j š i			per of individuals employed		-				5		0	
÷€			per of volunteers (estimate		• •				6		1,000	
Ø			ated business revenue from						7a		0	
	_ b N	let unrelat	ed business taxable incom	e trom	Form 990-1, line	39	· ; ·		7b		0	
				- 4 (-)				Prior Yea		Current Ye		
9			ons and grants (Part VIII, lin				.		7,176		7,549	
Revenue		-	ervice revenue (Part VIII, lin				·		333,694		381.795	
æ	l .		income (Part VIII, column	-	-		.		160		237	
			nue (Part VIII, column (A), li				<u>,</u>	· · · · · · · · · · · · · · · · · · ·	26,362		30,027	
			ue-add lines 8 through 11 similar amounts paid (Part						367,392		419,608	
									100,069 0		115,274	
	i		ud to or for members (Part her compensation, employe			 . (Δ) lines 5–10			0		0	
Expenses			al fundraising fees (Part IX,		•	• •	-		0	 	0	
ĕ			aising expenses (Part IX, c								0	
찚			nses (Part IX, column (A), li				₽ ├─		253,960		279,003	
			nses. Add lines 13-17 (mus			ME [ma 25]	·		354,049		394,277	
			ss expenses. Subtract line			W. E. 207	· -		13,343		25,331	
- Se	13 1	OVOING IC	SO EXPENSES. CUDITACT IIIIE	, 5 i 5ii	m10-12	ं । छि	Beni	inning of Cur		End of Ye		
Net Assets or Fund Balances	20 T	otal asset	s (Part X, line 16)	2	0	2020			164,024		189,355	
Ass	21 T		ties (Part X, line 26)	. lo	[78 88			. 34,324 n		-143,333 N	
Net	22 N		or fund balances. Subtract	line 21	from limer20 N.I.	- 	·		164,024		189,355	
		Signatu			COPEN	· U1			101/021		100,000	
	_		I declare that I have examined the	s return. ır	ncluding accompanyir	o schedules and	statemen	its, and to the	best of my	knowledge and	belief, it is	
true	correct, a	and complete	Declaration of prepare (other the	in officer)	is based on all inform	ation of which pre	eparer has	s any knowle	dge.	•	ŕ	
		T.	White C. Was									
Sig	ın 📋	Signatu	re of officer	·	1 ()			Date		-2 2		
He	re	'	Stephen G. L	ee !	?resabent				10	-92-9	مه	
	-	Type or	print name and title	- 1	<u> </u>	· 						
D-		Print/Type	preparer's name	Prepa	rer's signature		Date		Check	if PTIN		
Pai				1					self-emplo	- I		
	parer	Firm's nam	ne ►					Firm's	s EIN ▶			
US	e Only	Firm's addi			·			Phon				
May	the IRS		his return with the prepare	shown	above? (see inst	ructions) .				. 🗌 Yes	□No	
			on Act Notice see the sensi				Cat No. 1	1282Y			90 (2019)	



Form 99	0 (2019) Page
Part	Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	Promote and support the sport of distance running in Maine.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured be expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others the total expenses, and revenue, if any, for each program service reported.
48	(Code:) (Expenses \$ 309,254 including grants of \$ 101,260) (Revenue \$ 318,565)
	Sponsor and direct the Maine Marathon, Half Marathon and Relay races in Portland, Maine.
4b	(Code:) (Expenses \$ 28,447 including grants of \$ 8,500) (Revenue \$ 33,511) Sponsor and direct the Mid-winter Classic 10 mile race held in Cape Elizabeth, Maine.
4c	(Code:) (Expenses \$ 15,495 including grants of \$ 3,314) (Revenue \$ 15,545)
	Sponsor and direct the Turkey Trot 5K race in Cape Elizabeth, Maine.
4d	Other program services (Describe on Schedule O.) (Expenses \$ 9,231 including grants of \$ 2,100) (Revenue \$ 14,174)
40	(Expenses \$ 9,231 including grants of \$ 2,100) (Revenue \$ 14,174) Total program service expenses \$ 362,427



Form 990 (2019) Part IV Checklist of Required Schedules

1 2 3	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	2	✓	✓
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>			1
	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	3		$\vdash -$
A				1
•	clothol in check during the tax year in res, complete ochedule o, rait in	4		1
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		1
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		1
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		1
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		✓
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part V	10		1
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		1
b	Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		1
С	Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		1
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		√
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		✓
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		1
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	_	1
ь	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 to the organization are the discounted in control of 170/E/(1/A)/E/(1/A) (1/A)/E/(1/A)	12b		1
13 14a	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13 14a		▼
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV.	14b		1
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		1
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		√
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		✓
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		1
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		1
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		✓
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	1	

Part	Checklist of Required Schedules (continued)			
	,		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		1
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		1
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		1
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		✓
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		1
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 transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		1
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		✓
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		✓
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		√
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a		✓
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		1
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV	28c		✓
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		✓
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		✓
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		✓
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		✓
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		1
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		✓
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		✓
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable related organization? If "Yes," complete Schedule R, Part V, line 2	36		✓
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		✓
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O.	38		✓
Part	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
1a b	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1 1		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	<u></u>	

Part	V Statements Regarding Other IRS Filings and Tax Compliance (continued)			
			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b		
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3а	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		✓
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O .	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		✓
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).			لب_
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		<u> </u>
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b_		✓_
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		✓
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			لب
	and services provided to the payor?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			,
	required to file Form 8282?	7c		 -i
d	If "Yes," indicate the number of Forms 8282 filed during the year	7e		7
e f	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 6		- /
-	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
g h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			i
•	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
0	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12		- 1	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . [10b]		1	
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources		1	i
	against amounts due or received from them.)			
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b		1	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	13a		
а	Is the organization licensed to issue qualified health plans in more than one state?	134	\rightarrow	i
	Enter the amount of reserves the organization is required to maintain by the states in which	ľ		1
b	the organization is licensed to issue qualified health plans			į
С	Enter the amount of reserves on hand	- 1		j
4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		√
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O.	14b		
5	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
-	excess parachute payment(s) during the year?	15	ļ	1
	If "Yes," see instructions and file Form 4720, Schedule N.	1		1
6	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		
	If "Yes," complete Form 4720, Schedule O.			
				_

Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O.								
•	Check if Schedule O contains a response or note to any line in this Part VI		131140						
Sect	ion A. Governing Body and Management			<u> </u>					
			Yes	No					
1a	Enter the number of voting members of the governing body at the end of the tax year 1a	3							
	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 on Schedule O.								
b	b Enter the number of voting members included on line 1a, above, who are independent . 1b 9								
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?								
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?	3		1					
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?								
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		1					
6	Did the organization have members or stockholders?	6	✓						
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	1						
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		1					
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:								
а	The governing body?	8a	1						
b	Each committee with authority to act on behalf of the governing body?	8b	✓	<u> </u>					
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		1					
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Rever	ue C							
10a	Did the organization have local chapters, branches, or affiliates?	10a	Yes	No ✓					
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	IUa		-					
11a	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b							
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	110		l i					
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	1						
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	1						
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	1						
13	Did the organization have a written whistleblower policy?	13		-					
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?								
а	The organization's CEO, Executive Director, or top management official	15a		✓					
b	Other officers or key employees of the organization	15b		✓					
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			ı					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		<u> </u>					
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b							
Secti	on C. Disclosure								
17	List the states with which a copy of this Form 990 is required to be filed ▶ None								
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Own website Other (explain on Schedule O)	(Sec	tion 5	501(c)					
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict or and financial statements available to the public during the tax year.			olicy,					
20	State the name, address, and telephone number of the person who possesses the organization's books and re- Robert J. Ayotte, 505 Delano Park, Cape Elizabeth, ME 04107, (207) 799-3649	cords	>						

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Form	agn	(201	q

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employees."
- 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. See instructions for the order in which to list the persons above.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee. (C) Position (B) (do not check more than one Reportable Reportable Estimated amount Name and title Average box, unless person is both an hours compensation compensation of other officer and a director/trustee) compensation per week from the from related Individual trustee Institutional trustee Key employee employee Highest compensated (list any organization organizations from the (W-2/1099-MISC) (W-2/1099-MISC) hours for organization and related related organizations organizations below datted line) (1) Cadence Atkinson Secretary (2) Robert Ayotte Treasurer (3) Robert Dunfey Trustee (4) Eric Hager Trustee (5) Tanya Holbrook Vice President (6) Stephen Lee President (7) Laurie Nicholas Trustee (8) Philip Pierce Trustee (9) Stan Rintz Trustee (10) (11) (12) (13)

Par	Section A. Officers, Directors,	Trustees,	Key	Em			s, an	id F	lighest Compe	nsated	Emplo	yees (conti	nued
					•	C)								
	(A)	(B)	(do n	not ct		ntion mor	e than e	one	(D)	(€	•		(F)	
	Name and title	Average hours	box,	unles	ss pe	erson	is both	h an	Reportable compensation	Repor comper			ated arr	
		per week		_	_	1	or/trus	T	from the	from re	elated	com	pensat	non
		(list any hours for	합	nst a	Officer	é	휼호	Former	organization (W-2/1099-MISC)	organız (W-2/109			rom the	
	•	related	를 를	<u>₽</u>	4	퍨	oyer c	1	(W 2 1005 MILOO)	(** 2 .00	<i>55</i>	related		
		organizations below	Individual trustee or director	Institutional trustee		Key employee	Highest compensated employee	1						
		dotted line)	stee	탏		•) ens							
		1		8	Ì		ated		<u>'</u>					
(15)				T		1				-				
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46	Cubbadal	<u> </u>		L	L_		L	L		-				
1b c	Subtotal						•		0		0			
d	Total (add lines 1b and 1c)	•						•	0		0			
	Total number of individuals (including but							s) w		e than \$1				
-	reportable compensation from the organi			.000	, ,,,,,		40010	-, ••		s andir ϕ .	00,000	0.		
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		•										Yes	No
3	Did the organization list any former of	officer, dire	ector.	tru	stee	e, k	ev e	mpl	oyee, or highes	t compe	ensated			
	employee on line 1a? If "Yes," complete \$							٠.				3		1
4	For any individual listed on line 1a, is the													
	organization and related organizations	greater that	an \$1	50,	000	? //	"Yes	s,"	complete Sched	dule J fo	r such			
	ındividual			•	•		•					4		/
5	Did any person listed on line 1a receive o											_		
C4:	for services rendered to the organization?	/ If "Yes," C	ompi	ete .	Scn	eau	ile J t	or s	ucn person '.	• • •	• •	5		✓
	on B. Independent Contractors											¢.	100.00	20 -4
1	Complete this table for your five high compensation from the organization. Repo													
		ort compen	Sallor	1 101	-	Cai	CIIGAI	ye		WILLIAM CIT	e Organ	•	3 tax	year.
	(A) Name and business add	ress							(B) Description of serv	ices	((C) Compens	ation	
	· ···				-	-								
										-				
2	Total number of independent contracto	•	_					th	ose listed above	e) who				
	received more than \$100,000 of compensations	ation from t	he or	ganı	zati	ion I	>		0		İ			

Par	t VIII	Statement of Reve		cnor	oso or noto to on	v line in this Da	vet V/III		
		Check if Schedule O	contains a re	espor	ise or note to an	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
(0 (0	1a	Federated campaigns		1a	T				0000013 312-014
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues .		1b	7,549				
	c	Fundraising events .		1c	7,343				
	d	Related organizations		1d					1
ਤੂੰ ਤੁ	е	Government grants (co		1e					
Sir	f	All other contributions,							
iệ P		and similar amounts not in		1f					
ᅙ	g	Noncash contributions						1	ļ
g g		lines 1a-1f		1g					
0 6	h_	Total. Add lines 1a-1f	<u></u>	·		7,549			
ø)	_	_			Business Code				
Program Service Revenue	2a	Revenue from races				381,795			
jram Ser Revenue	b								
ž ž	C d								
Ba Be	e	***************************************	-						
Š	f	All other program serv	rice revenue			<u> </u>			
_	g	Total. Add lines 2a-2f			▶	381,795			
	3	Investment income (in							
		other similar amounts))		▶	237			
	4	Income from investmen	nt of tax-exen	npt bo	ond proceeds ►				
	5	Royalties	.,		T				
	_		(i) Rea		(ii) Personal				
	6a		ib		 				
	b	• •	ic i		 				
	d	Net rental income or (le	la a a \						· · · · · · · · · · · · · · · · · · ·
	7a	Gross amount from	(i) Securi	ies	(ii) Other				
	'a	sales of assets							
		į į	'a		1				
e T	b	Less. cost or other basis							
Ę.			'b						ĺ
ě	С		'c		l				
ther Revenue	d	Net gain or (loss) .			· · · •	-			
ē	8a	Gross income from	fundraising		1				
		events (not including \$_of contributions report	rted on line		1 1	i			
		1c). See Part IV, line 18		8a					
	b	Less: direct expenses		8b	· · · · · · · · · · · · · · · · · · ·				
	С	Net income or (loss) fro		g eve	ents ▶				
	9a	Gross income from	m gamıng						
		activities. See Part IV,		9a					
		Less: direct expenses		9b	<u></u>				
		Net income or (loss) from		tivitie	s >			·	,
	10a		•	40-]	J		J	
	.	returns and allowances		10a 10b				ì	
	b	Less: cost of goods so Net income or (loss) fro			orv 🕨				
<u>, </u>					Business Code				
, on	11a	Other income				30,027			······································
ية <u>يا</u>	b								
scellaneous Revenue	C								
Maisc B	d	All other revenue .		-	L				
_	e	Total. Add lines 11a-1		•	· · · · •	30,027			

	00 (2019)	<u> </u>			Page 10
Sectio	Statement of Functional Expenses in 501(c)(3) and 501(c)(4) organizations must complete	lete all columns. All o	other organizations	must complete colu	mn (A).
0000	Check if Schedule O contains a response				
	t include amounts reported on lines 6b, 7b, a, 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	115,274	115,174		· · · · · · · · · · · · · · · · · · ·
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members 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 (nonemployees):		1		
а	Management				
b	Legal				
C	Accounting				
d	Lobbying				
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)				
12	Advertising and promotion	1,395			
13	Office expenses	5,527			
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	5,645			
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization .				·
23	Insurance				
24	Other expenses. Itemize expenses not covered				
	above (List miscellaneous expenses on line 24e. If				!
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)				
а	Race expenses	247,253	247,253		
þ					
C					
d	All about the second se				
e	All other expenses	19,183		· · · · · · · · · · · · · · · · · · ·	
25 26	Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the	394,277	362,427		
20	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)				
	10110 Willing CO1 30-2 (100 300-120)				

Forn	n 990 (2	019)			Page 1 1
Р	art X	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Pa	rt X		<u></u> 🗆
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	130,167	1	139,26
	2	Savings and temporary cash investments	33,857	2	50,094
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	•	4	
•	5	Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
		controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B).		6	
Ŋ	7	Notes and loans receivable, net	· · · · · ·	7	
Assets	8	Inventories for sale or use		8	
As	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a			
	ь	Less: accumulated depreciation 10b		10c	
	11	Investments—publicly traded securities		11	
	12	Investments—other securities. See Part IV, line 11		12	
	13	Investments—program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 33)	164,024	16	189,355
	17	Accounts payable and accrued expenses		17	
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Liabilities	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
ap		controlled entity or family member of any of these persons		22	<u> </u>
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17–24). Complete Part X			
		of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	0	26	
ssets or Fund Balances		Organizations that follow FASB ASC 958, check here ▶ ☐ and complete lines 27, 28, 32, and 33.			
ā	27	Net assets without donor restrictions		27	
ă	28	Net assets with donor restrictions . '		28	
1		Organizations that do not follow FASB ASC 958, check here ▶ ☑			
Ţ		and complete lines 29 through 33.			
ō	29	Capital stock or trust principal, or current funds		29	
je	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
ŞŞ	31	Retained earnings, endowment, accumulated income, or other funds		31	

32

33

185,355 Form **990** (2019)

185,355

32

164,024

164,024 33

om 9	90 (2019)			Pa	ge 12
Par	XI Reconciliation of Net Assets			-	
	Check if Schedule O contains a response or note to any line in this Part XI	<u></u>	<u>.</u>		
1	Total revenue (must equal Part VIII, column (A), line 12)	1		41	9,608
2	Total expenses (must equal Part IX, column (A), line 25)	2		39	4,277
3	Revenue less expenses. Subtract line 2 from line 1	3		2	5,331
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4		16	4,024
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8	•		
9	Other changes in net assets or fund balances (explain on Schedule O)	9			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line			•	
	32, column (B))	10		18	9,355
Part	XII Financial Statements and Reporting				
•	Check if Schedule O contains a response or note to any line in this Part XII		· <u>·</u>		
				Yes	No
1	Accounting method used to prepare the Form 990: 🗸 Cash 🔲 Accrual 🔲 Other				
	If the organization changed its method of accounting from a prior year or checked "Other," e	kplain in			
	Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		\
	If "Yes." check a box below to indicate whether the financial statements for the year were com	piled or			
	reviewed on a separate basis, consolidated basis, or both:		ł		
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b		✓
	If "Yes," check a box below to indicate whether the financial statements for the year were audit	ed on a			
	separate basis, consolidated basis, or both:		1		
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for over	rsight of			
	the audit, review, or compilation of its financial statements and selection of an independent accounta	nt? .	2c		
	If the organization changed either its oversight process or selection process during the tax year, ex	plain on			
	Schedule O.				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set for	th in the			
	Single Audit Act and OMB Circular A-133?		3a		✓
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not und	ergo the			
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such a		3b		

Form **990** (2019)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No 1545-0047

Department of the Treasury

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.

Open to Public Inspection

► Go to www.irs.gov/Form990 for instructions and the latest information.

Employer identification number Name of the organization 22-2579812 **Road Runners Club of America** Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). ☐ A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) ☐ A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: 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). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: 10 An organization that normally receives: (1) more than 331/3% 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 33½% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) d that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type III. Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (iii) Type of organization (iv) is the organization (v) Amount of monetary (vi) Amount of (i) Name of supported organization (ii) EIN sted in your governing other support (see (described on lines 1-10 support (see above (see instructions)) instructions) instructions) Yes No (A) (B) (C) (D) (E)

Total

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.) Section A. Public Support (d) 2018 (e) 2019 Calendar year (or fiscal year beginning in) ▶ (a) 2015 **(b)** 2016 (c) 2017 (f) Total Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") . . . 373,563 364,638 354,778 367,232 419,370 1,879,581 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. . . . 364,638 354,778 367,232 419,370 1,879,581 373,563 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) Public support. Subtract line 5 from line 4 1,879,581 Section B. Total Support (c) 2017 (d) 2018 (e) 2019 (f) Total Calendar year (or fiscal year beginning in) ▶ (a) 2015 **(b)** 2016 7 Amounts from line 4 373,563 364,638 354,778 367,232 419,370 1,879,581 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources 13 160 237 410 Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) 11 Total support. Add lines 7 through 10 1,879,991 Gross receipts from related activities, etc. (see instructions) 12 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) 13 Section C. Computation of Public Support Percentage Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f)) 14 15 Public support percentage from 2018 Schedule A, Part II, line 14 100 % 15 16a 331/3% support test - 2019. If the organization did not check the box on line 13, and line 14 is 331/3% or more, check this 331/3% support test - 2018. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test-2019. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported b 10%-facts-and-circumstances test-2018. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly

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

Part							
	(Complete only if you checked the						nder Part II.
	If the organization fails to qualify	under the te	ests listed bel	ow, please c	omplete Part	11.)	
Secti	on A. Public Support				-		
Caler	dar year (or fiscal year beginning in) 🕨	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	/(f) Total
1	Gifts, grants, contributions, and membership fees						,
	received. (Do not include any "unusual grants.")	<u> </u>			<u> </u>		
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	<u> </u>					
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						_
4	Tax revenues levied for the						
	organization's benefit and either paid to						
	or expended on its behalf		1				
5	The value of services or facilities						
	furnished by a governmental unit to the		ľ				
	organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons .		1				
b	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.)						
Secti	on B. Total Support						
Calen	dar year (or fiscal year beginning in)	(a) 2015	(b) ,2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,		/				
	royalties, and income from similar sources .	Í					
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975					•	
С	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b, whether						
	or not the business is regularly carried on						
12	Other income. Do not include gain or						,
	loss from the sale of capital assets	!					
	(Explain in Part VI.) /. [
13	Total support. (Add lines 9, 10c, 11/,						
	and 12.)						
14	First five years. If the Form 990 is for the		n's first, secon	d, third, fourth	, or fifth tax ye	ar as a sectio	n 501(c)(3)
	organization, check this box and stop her	e		<u> </u>	<u> </u>	· · · · ·	<u> ▶ □</u>
Section	on C. Computation of Public Support						
15	Public support percentage for 2019 (line 8					15	%
16	Public support percentage from 2018 Sch			<u></u>	<u></u>	16	%
Section	on D. Computation of Investment Inc						
17	Investment income percentage for 2019 (li					17	%
18	Investment income percentage from 2018						%
19a	331/2% support tests-2019. If the organization						
	17 is not more than/331/3%, check this box a						
b	331/3% support tests-2018. If the organiza						
	line 18 is not more than 331/3%, check this b	ox and stop h	ere. The organi	zatıon qualıfies	as a publicly su	ipported organi	zation 🕨 🔲
20	Private foundation. If the organization did	not check a	box on line 14,	19a, or 19b, c	heck this box	and see instruc	ctions 🕨 🗌

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Secti	on A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)			
	purposes.	4c		<u> </u>
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action			
	was accomplished (such as by amendment to the organizing document).	5a		ļ
	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
C	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		ļ
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .	9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI .	9b		
С	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .	9c		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)	10a	_	

Part	Supporting Organizations (continued)			
	Has the examination eccented a gift or contribution from any of the following persons?		Yes	No
11 a	Has the organization accepted a gift or contribution from any of the following persons? A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)	ĺ	İ	
_	below, the governing body of a supported organization?	11a		
	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		L
Secti	on B. Type I Supporting Organizations		\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	
1	Did the directors, trustees, or membership of one or more supported organizations have the power to		Yes	No
'	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.			
_		1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2	_	ļ
Secti	on C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed			i l
	the supported organization(s).	1		
Secti	on D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			i
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		السيسي
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
_	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how	_		
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a		i 1	
	significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's	.		
	supported organizations played in this regard.	3		
Secti	on E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see in		ctions	s).
а	☐ The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
C	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (s			
2	Activities Test. Answer (a) and (b) below.		Yes	NO
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI Identify	ı	, 1	l
	those supported organizations and explain how these activities directly furthered their exempt purposes,]		
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more	Į	,	
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.	20		\neg
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	_	_	
•	trustees of each of the supported organizations? Provide details in Part VI.	За		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard.	3b		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	ani	zations	
Check here if the organization satisfied the Integral Part Test as a qualifying instructions. All other Type III non-functionally integrated supporting organization.			
Section A-Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or			
collection of gross income or for management, conservation, or	1		
maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B-Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other			
factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C—Distributable Amount	•	***************************************	Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions).	6		<u> </u>
7 Check here if the current year is the organization's first as a non-functional	y int	egrated Type III supporting	ng organization (see
instructions).			

Schedu	e A (Form 990 or 990-EZ) 2019			Page 7
Part	V Type III Non-Functionally Integrated 509(a)(3	Supporting Organi	zations (continued)	
Secti	on D-Distributions			Current Year
1	Amounts paid to supported organizations to accomplish	exempt purposes		
2	Amounts paid to perform activity that directly furthers exe	empt purposes of suppo	rted	
	organizations, in excess of income from activity			
	Administrative expenses paid to accomplish exempt purp	oses of supported orga	nizations	
5_	Qualified set-aside amounts (prior IRS approval required)			
6_	Other distributions (describe in Part VI). See instructions.			-
7	Total annual distributions. Add lines 1 through 6.	h 4hition in roo		
8 	Distributions to attentive supported organizations to whic (provide details in Part VI). See instructions.	n the organization is res		
9_	Distributable amount for 2019 from Section C, line 6			
10	Line 8 amount divided by line 9 amount	r		2005
Secti	on E—Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(ili) Distributable Amount for 2019
1	Distributable amount for 2019 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2019			
	(reasonable cause required - explain in Part VI). See			
	ınstructions.			
3	Excess distributions carryover, if any, to 2019			
	From 2014			
	From 2015			
	From 2016			
	From 2017			
	From 2018			
	Total of lines 3a through e			
	Applied to underdistributions of prior years			
	Applied to 2019 distributable amount		·	
<u> </u>	Carryover from 2014 not applied (see instructions)		<u> </u>	
	Remainder. Subtract lines 3g, 3h, and 3ı from 3f.			
4	Distributions for 2019 from Section D, line 7: \$			
			· · · · · · · · · · · · · · · · · · ·	
	Applied to underdistributions of prior years Applied to 2019 distributable amount			
	Remainder. Subtract lines 4a and 4b from 4.			1
5	Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. For result			i
	greater than zero, explain in Part VI . See instructions.]
6	Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7	Excess distributions carryover to 2020. Add lines 3 _j and 4c.			
8	Breakdown of line 7:			
а	Excess from 2015			
b	Excess from 2016			
С	Excess from 2017			
d	Excess from 2018			
е	Excess from 2019			

Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)
	
	

SCHEDULE 1 (Form 990)

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

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

2019

OMB No. 1545-0047

► Attach to Form 990.

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Open to Public Inspection % ∑ (h) Purpose of grant or assistance **Employer identification number** 5 **General Support Seneral Support** General Support General Support General Support □ Yes 22-2579812 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and noncash assistance (g) Description of . Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (f) Method of valuation (book, FMV, appraisal, other) . ► Go to www.irs.gov/Form990 for the latest information. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. (e) Amount of noncash assistance Enter total number of section 501(c)(3) and government organizations listed in the line 1 table (d) Amount of cash 20,000 20,000 6,700 6,700 6,700 grant Enter total number of other organizations listed in the line 1 table (c) IRC section the selection criteria used to award the grants or assistance? (if applicable) For Paperwork Reduction Act Notice, see the Instructions for Form 990. General Information on Grants and Assistance 01-0521260 46-2787590 45-5144500 01-0523949 01-0535175 (p) EIN 1 (a) Name and address of organization 506 Main St., Westbrook, ME 04092 (4) Portland Community Squash 1 Karen Dr., Westbrook, ME 04092 159 State St., Portland, ME 04101 66 Noyes St., Portland, ME 04103 (5) Girls on the Run - Maine Road Runners Club of America (1) Eastern Trail Alliance PO Box 250, Saco, ME 04072 or government Department of the Treasury Internal Revenue Service Name of the organization (3) Winter Kids (2) Rippleffect Part I Part II <u>©</u> 9 S <u>@</u> 9 Ξ (12)

Schedule I (Form 990) (2019)

Cat. No 50055P

Schedule t (Fc	Schedule I (Form 990) (2019)					Page 2
Part III	Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.	nestic Individual space is needed.	ls. Complete if the	organization answe	ered "Yes" on Form 990,	
	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
,						
2						
က						
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တ						
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Part IV	Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.	he information re	quired in Part I, Iln	e 2; Part III, column	(b); and any other additi	onal information.
Part 1, Line 2	9.2					
The grante	The grantees are local not for profit organizations with which the	ich the Maine Track	Club is very familiar.	An informal procedu	Maine Track Club is very familiar. An informal procedure exists to monitor the grantees activties to ensure the	ees activties to ensure the
funds are b	funds are being expended as intended.					
						Schedule I (Form 990) (2019)

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Name of the organization

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.

► Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047
2019
Open to Public

Inspection

Employer identification number

Road Runners Club of America 22-2579812 Form 990, Part III, Line 4d - Other program services (description) Sponsor and direct the Peaks Island 5 mile road race held in Portland, Maine. Sponsor and direct the Longfellow Frostbite 2.5K road race held in Portland, Maine. Sponsor and direct the Farm to Farm ultra road race held in Freeport, Maine. Form 990, Part VI, Line 11b- Form 990 review process The form is reviewed with the Executive Committee of the board before filing and with the full board at the meeting closest to the filing. Form 990, Part VI, Line 12c - Explanation of monitoring and enforcements of conflicts At each board meeting, board members must self disclose any potential conflicts of interest. Form 990, Part VI, Line 19 - Other organizational documents publically available Organizational documents are available upon request.