


Form 990



Department of the Treasury  
Internal Revenue Service

Return of Organization Exempt From Income Tax

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 By law, the IRS generally cannot redact the information on the form

Information about Form 990 and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990)

OMB No 1545-0047

2013

Open to Public Inspection

A For the 2013 calendar year, or tax year beginning 01-01-2013 , 2013, and ending 12-31-2013

B Check if applicable

☐ Address change

☐ Name change

☐ Initial return

☐ Terminated

☐ Amended return

☐ Application pending

C Name of organization

RONALD MCDONALD HOUSE CHARITIES OF ST LOUIS

Doing Business As

Number and street (or P O box if mail is not delivered to street address)

3450 PARK AVENUE

Room/suite

City or town, state or province, country, and ZIP or foreign postal code

ST LOUIS, MO 63104

F Name and address of principal officer

DAN HARBAUGH

3450 PARK AVE

ST LOUIS, MO 63104

H(a) Is this a group return for subordinates?

☐ Yes ☒ No

H(b) Are all subordinates included?

☐ Yes ☒ No

If "No," attach a list (see instructions)

H(c) Group exemption number

I Tax-exempt status

☒ 501(c)(3) ☐ 501(c) ( ) ☐ (insert no ) ☐ 4947(a)(1) or ☐ 527

J Website:

www.rmhcstl.com

K Form of organization

☒ Corporation ☐ Trust ☐ Association ☐ Other ☐

L Year of formation

1995

M State of legal domicile

MO

| Part I                      | Summary   |             |   |             |           |   |  |            |  |                                     |  |  |         |   |  |            |         |  |  |           |           |    |   |        |        |    |   |  |   |    |   |           |           |     |   |  |   |   |  |  |  |    |  |           |           |    |  |           |           |    |   |          |          |
|-----------------------------|---|-------------|---|-------------|-----------|---|--|------------|--|-------------------------------------|--|--|---------|---|--|------------|---------|--|--|-----------|-----------|----|---|--------|--------|----|---|--|---|----|---|-----------|-----------|-----|---|--|---|---|--|--|--|----|--|-----------|-----------|----|--|-----------|-----------|----|---|----------|----------|
| Activities & Governance     | <div><div>1</div><div>Briefly describe the organization’s mission or most significant activities</div><div>By creating, finding and supporting programs that directly improve the health and well-being of children, Ronald McDonald House Charities is working to better the lives of children and their families around the world</div></div>   |             |   |             |           |   |  |            |  |                                     |  |  |         |   |  |            |         |  |  |           |           |    |   |        |        |    |   |  |   |    |   |           |           |     |   |  |   |   |  |  |  |    |  |           |           |    |  |           |           |    |   |          |          |
|                             |   |             |   |             |           |   |  |            |  |                                     |  |  |         |   |  |            |         |  |  |           |           |    |   |        |        |    |   |  |   |    |   |           |           |     |   |  |   |   |  |  |  |    |  |           |           |    |  |           |           |    |   |          |          |
|                             |   |             |   |             |           |   |  |            |  |                                     |  |  |         |   |  |            |         |  |  |           |           |    |   |        |        |    |   |  |   |    |   |           |           |     |   |  |   |   |  |  |  |    |  |           |           |    |  |           |           |    |   |          |          |
|                             |   |             |   |             |           |   |  |            |  |                                     |  |  |         |   |  |            |         |  |  |           |           |    |   |        |        |    |   |  |   |    |   |           |           |     |   |  |   |   |  |  |  |    |  |           |           |    |  |           |           |    |   |          |          |
|                             |   |             |   |             |           |   |  |            |  |                                     |  |  |         |   |  |            |         |  |  |           |           |    |   |        |        |    |   |  |   |    |   |           |           |     |   |  |   |   |  |  |  |    |  |           |           |    |  |           |           |    |   |          |          |
|                             | <div><div>2</div><div>Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets</div></div>  |             |   |             |           |   |  |            |  |                                     |  |  |         |   |  |            |         |  |  |           |           |    |   |        |        |    |   |  |   |    |   |           |           |     |   |  |   |   |  |  |  |    |  |           |           |    |  |           |           |    |   |          |          |
|                             |   |             |   |             |           |   |  |            |  |                                     |  |  |         |   |  |            |         |  |  |           |           |    |   |        |        |    |   |  |   |    |   |           |           |     |   |  |   |   |  |  |  |    |  |           |           |    |  |           |           |    |   |          |          |
| Revenue                     | <table><tr><td>3</td><td>Number of voting members of the governing body (Part VI, line 1a)</td><td>25</td></tr><tr><td>4</td><td>Number of independent voting members of the governing body (Part VI, line 1b)</td><td>25</td></tr><tr><td>5</td><td>Total number of individuals employed in calendar year 2013 (Part V, line 2a)</td><td>49</td></tr><tr><td>6</td><td>Total number of volunteers (estimate if necessary)</td><td>1,185</td></tr><tr><td>7a</td><td>Total unrelated business revenue from Part VIII, column (C), line 12</td><td>0</td></tr><tr><td>7b</td><td>Net unrelated business taxable income from Form 990-T, line 34</td><td></td></tr></table>   | 3           | Number of voting members of the governing body (Part VI, line 1a) | 25          | 4         | Number of independent voting members of the governing body (Part VI, line 1b) | 25   | 5          | Total number of individuals employed in calendar year 2013 (Part V, line 2a) | 49                                  | 6  | Total number of volunteers (estimate if necessary) | 1,185   | 7a  | Total unrelated business revenue from Part VIII, column (C), line 12     | 0          | 7b      | Net unrelated business taxable income from Form 990-T, line 34 |  |           |           |    |   |        |        |    |   |  |   |    |   |           |           |     |   |  |   |   |  |  |  |    |  |           |           |    |  |           |           |    |   |          |          |
| 3                           | Number of voting members of the governing body (Part VI, line 1a)   | 25          |   |             |           |   |  |            |  |                                     |  |  |         |   |  |            |         |  |  |           |           |    |   |        |        |    |   |  |   |    |   |           |           |     |   |  |   |   |  |  |  |    |  |           |           |    |  |           |           |    |   |          |          |
| 4                           | Number of independent voting members of the governing body (Part VI, line 1b)   | 25          |   |             |           |   |  |            |  |                                     |  |  |         |   |  |            |         |  |  |           |           |    |   |        |        |    |   |  |   |    |   |           |           |     |   |  |   |   |  |  |  |    |  |           |           |    |  |           |           |    |   |          |          |
| 5                           | Total number of individuals employed in calendar year 2013 (Part V, line 2a)  | 49          |   |             |           |   |  |            |  |                                     |  |  |         |   |  |            |         |  |  |           |           |    |   |        |        |    |   |  |   |    |   |           |           |     |   |  |   |   |  |  |  |    |  |           |           |    |  |           |           |    |   |          |          |
| 6                           | Total number of volunteers (estimate if necessary)  | 1,185       |   |             |           |   |  |            |  |                                     |  |  |         |   |  |            |         |  |  |           |           |    |   |        |        |    |   |  |   |    |   |           |           |     |   |  |   |   |  |  |  |    |  |           |           |    |  |           |           |    |   |          |          |
| 7a                          | Total unrelated business revenue from Part VIII, column (C), line 12  | 0           |   |             |           |   |  |            |  |                                     |  |  |         |   |  |            |         |  |  |           |           |    |   |        |        |    |   |  |   |    |   |           |           |     |   |  |   |   |  |  |  |    |  |           |           |    |  |           |           |    |   |          |          |
| 7b                          | Net unrelated business taxable income from Form 990-T, line 34  |             |   |             |           |   |  |            |  |                                     |  |  |         |   |  |            |         |  |  |           |           |    |   |        |        |    |   |  |   |    |   |           |           |     |   |  |   |   |  |  |  |    |  |           |           |    |  |           |           |    |   |          |          |
|                             |   |             |   |             |           |   |  |            |  |                                     |  |  |         |   |  |            |         |  |  |           |           |    |   |        |        |    |   |  |   |    |   |           |           |     |   |  |   |   |  |  |  |    |  |           |           |    |  |           |           |    |   |          |          |
|                             |   |             |   |             |           |   |  |            |  |                                     |  |  |         |   |  |            |         |  |  |           |           |    |   |        |        |    |   |  |   |    |   |           |           |     |   |  |   |   |  |  |  |    |  |           |           |    |  |           |           |    |   |          |          |
|                             |   |             |   |             |           |   |  |            |  |                                     |  |  |         |   |  |            |         |  |  |           |           |    |   |        |        |    |   |  |   |    |   |           |           |     |   |  |   |   |  |  |  |    |  |           |           |    |  |           |           |    |   |          |          |
|                             |   |             |   |             |           |   |  |            |  |                                     |  |  |         |   |  |            |         |  |  |           |           |    |   |        |        |    |   |  |   |    |   |           |           |     |   |  |   |   |  |  |  |    |  |           |           |    |  |           |           |    |   |          |          |
|                             |   |             |   |             |           |   |  |            |  |                                     |  |  |         |   |  |            |         |  |  |           |           |    |   |        |        |    |   |  |   |    |   |           |           |     |   |  |   |   |  |  |  |    |  |           |           |    |  |           |           |    |   |          |          |
|                             |   |             |   |             |           |   |  |            |  |                                     |  |  |         |   |  |            |         |  |  |           |           |    |   |        |        |    |   |  |   |    |   |           |           |     |   |  |   |   |  |  |  |    |  |           |           |    |  |           |           |    |   |          |          |
| Expenses                    | <table><tr><td>8</td><td>Contributions and grants (Part VIII, line 1h)</td><td>1,953,675</td><td>2,350,910</td></tr><tr><td>9</td><td>Program service revenue (Part VIII, line 2g)</td><td>98,912</td><td>75,003</td></tr><tr><td>10</td><td>Investment income (Part VIII, column (A), lines 3, 4, and 7d )</td><td>141,126</td><td>265,704</td></tr><tr><td>11</td><td>Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)</td><td>756,714</td><td>666,537</td></tr><tr><td>12</td><td>Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)</td><td>2,950,427</td><td>3,358,154</td></tr><tr><td>13</td><td>Grants and similar amounts paid (Part IX, column (A), lines 1–3 )</td><td>24,354</td><td>32,500</td></tr><tr><td>14</td><td>Benefits paid to or for members (Part IX, column (A), line 4)</td><td></td><td>0</td></tr><tr><td>15</td><td>Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)</td><td>1,559,878</td><td>1,608,088</td></tr><tr><td>16a</td><td>Professional fundraising fees (Part IX, column (A), line 11e)</td><td></td><td>0</td></tr><tr><td>b</td><td>Total fundraising expenses (Part IX, column (D), line 25) <input type="checkbox"/>425,074</td><td></td><td></td></tr><tr><td>17</td><td>Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)</td><td>1,803,299</td><td>1,819,673</td></tr><tr><td>18</td><td>Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)</td><td>3,387,531</td><td>3,460,261</td></tr><tr><td>19</td><td>Revenue less expenses Subtract line 18 from line 12</td><td>-437,104</td><td>-102,107</td></tr></table> | 8           | Contributions and grants (Part VIII, line 1h)                     | 1,953,675   | 2,350,910 | 9   | Program service revenue (Part VIII, line 2g) | 98,912     | 75,003   | 10                                  | Investment income (Part VIII, column (A), lines 3, 4, and 7d ) | 141,126  | 265,704 | 11  | Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) | 756,714    | 666,537 | 12   | Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) | 2,950,427 | 3,358,154 | 13 | Grants and similar amounts paid (Part IX, column (A), lines 1–3 ) | 24,354 | 32,500 | 14 | Benefits paid to or for members (Part IX, column (A), line 4) |  | 0 | 15 | Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) | 1,559,878 | 1,608,088 | 16a | Professional fundraising fees (Part IX, column (A), line 11e) |  | 0 | b | Total fundraising expenses (Part IX, column (D), line 25) <input type="checkbox"/> 425,074 |  |  | 17 | Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e) | 1,803,299 | 1,819,673 | 18 | Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25) | 3,387,531 | 3,460,261 | 19 | Revenue less expenses Subtract line 18 from line 12 | -437,104 | -102,107 |
| 8                           | Contributions and grants (Part VIII, line 1h)   | 1,953,675   | 2,350,910   |             |           |   |  |            |  |                                     |  |  |         |   |  |            |         |  |  |           |           |    |   |        |        |    |   |  |   |    |   |           |           |     |   |  |   |   |  |  |  |    |  |           |           |    |  |           |           |    |   |          |          |
| 9                           | Program service revenue (Part VIII, line 2g)  | 98,912      | 75,003  |             |           |   |  |            |  |                                     |  |  |         |   |  |            |         |  |  |           |           |    |   |        |        |    |   |  |   |    |   |           |           |     |   |  |   |   |  |  |  |    |  |           |           |    |  |           |           |    |   |          |          |
| 10                          | Investment income (Part VIII, column (A), lines 3, 4, and 7d )  | 141,126     | 265,704   |             |           |   |  |            |  |                                     |  |  |         |   |  |            |         |  |  |           |           |    |   |        |        |    |   |  |   |    |   |           |           |     |   |  |   |   |  |  |  |    |  |           |           |    |  |           |           |    |   |          |          |
| 11                          | Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)  | 756,714     | 666,537   |             |           |   |  |            |  |                                     |  |  |         |   |  |            |         |  |  |           |           |    |   |        |        |    |   |  |   |    |   |           |           |     |   |  |   |   |  |  |  |    |  |           |           |    |  |           |           |    |   |          |          |
| 12                          | Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)  | 2,950,427   | 3,358,154   |             |           |   |  |            |  |                                     |  |  |         |   |  |            |         |  |  |           |           |    |   |        |        |    |   |  |   |    |   |           |           |     |   |  |   |   |  |  |  |    |  |           |           |    |  |           |           |    |   |          |          |
| 13                          | Grants and similar amounts paid (Part IX, column (A), lines 1–3 )   | 24,354      | 32,500  |             |           |   |  |            |  |                                     |  |  |         |   |  |            |         |  |  |           |           |    |   |        |        |    |   |  |   |    |   |           |           |     |   |  |   |   |  |  |  |    |  |           |           |    |  |           |           |    |   |          |          |
| 14                          | Benefits paid to or for members (Part IX, column (A), line 4)   |             | 0   |             |           |   |  |            |  |                                     |  |  |         |   |  |            |         |  |  |           |           |    |   |        |        |    |   |  |   |    |   |           |           |     |   |  |   |   |  |  |  |    |  |           |           |    |  |           |           |    |   |          |          |
| 15                          | Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)   | 1,559,878   | 1,608,088   |             |           |   |  |            |  |                                     |  |  |         |   |  |            |         |  |  |           |           |    |   |        |        |    |   |  |   |    |   |           |           |     |   |  |   |   |  |  |  |    |  |           |           |    |  |           |           |    |   |          |          |
| 16a                         | Professional fundraising fees (Part IX, column (A), line 11e)   |             | 0   |             |           |   |  |            |  |                                     |  |  |         |   |  |            |         |  |  |           |           |    |   |        |        |    |   |  |   |    |   |           |           |     |   |  |   |   |  |  |  |    |  |           |           |    |  |           |           |    |   |          |          |
| b                           | Total fundraising expenses (Part IX, column (D), line 25) <input type="checkbox"/> 425,074  |             |   |             |           |   |  |            |  |                                     |  |  |         |   |  |            |         |  |  |           |           |    |   |        |        |    |   |  |   |    |   |           |           |     |   |  |   |   |  |  |  |    |  |           |           |    |  |           |           |    |   |          |          |
| 17                          | Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)  | 1,803,299   | 1,819,673   |             |           |   |  |            |  |                                     |  |  |         |   |  |            |         |  |  |           |           |    |   |        |        |    |   |  |   |    |   |           |           |     |   |  |   |   |  |  |  |    |  |           |           |    |  |           |           |    |   |          |          |
| 18                          | Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)  | 3,387,531   | 3,460,261   |             |           |   |  |            |  |                                     |  |  |         |   |  |            |         |  |  |           |           |    |   |        |        |    |   |  |   |    |   |           |           |     |   |  |   |   |  |  |  |    |  |           |           |    |  |           |           |    |   |          |          |
| 19                          | Revenue less expenses Subtract line 18 from line 12   | -437,104    | -102,107  |             |           |   |  |            |  |                                     |  |  |         |   |  |            |         |  |  |           |           |    |   |        |        |    |   |  |   |    |   |           |           |     |   |  |   |   |  |  |  |    |  |           |           |    |  |           |           |    |   |          |          |
|                             |   |             |   |             |           |   |  |            |  |                                     |  |  |         |   |  |            |         |  |  |           |           |    |   |        |        |    |   |  |   |    |   |           |           |     |   |  |   |   |  |  |  |    |  |           |           |    |  |           |           |    |   |          |          |
|                             |   |             |   |             |           |   |  |            |  |                                     |  |  |         |   |  |            |         |  |  |           |           |    |   |        |        |    |   |  |   |    |   |           |           |     |   |  |   |   |  |  |  |    |  |           |           |    |  |           |           |    |   |          |          |
|                             |   |             |   |             |           |   |  |            |  |                                     |  |  |         |   |  |            |         |  |  |           |           |    |   |        |        |    |   |  |   |    |   |           |           |     |   |  |   |   |  |  |  |    |  |           |           |    |  |           |           |    |   |          |          |
|                             |   |             |   |             |           |   |  |            |  |                                     |  |  |         |   |  |            |         |  |  |           |           |    |   |        |        |    |   |  |   |    |   |           |           |     |   |  |   |   |  |  |  |    |  |           |           |    |  |           |           |    |   |          |          |
|                             |   |             |   |             |           |   |  |            |  |                                     |  |  |         |   |  |            |         |  |  |           |           |    |   |        |        |    |   |  |   |    |   |           |           |     |   |  |   |   |  |  |  |    |  |           |           |    |  |           |           |    |   |          |          |
|                             |   |             |   |             |           |   |  |            |  |                                     |  |  |         |   |  |            |         |  |  |           |           |    |   |        |        |    |   |  |   |    |   |           |           |     |   |  |   |   |  |  |  |    |  |           |           |    |  |           |           |    |   |          |          |
| Net Assets or Fund Balances | <table><tr><td></td><td>Beginning of Current Year</td><td>End of Year</td></tr><tr><td>20</td><td>Total assets (Part X, line 16)</td><td>14,901,663</td><td>16,173,936</td></tr><tr><td>21</td><td>Total liabilities (Part X, line 26)</td><td>1,651,944</td><td>2,645,860</td></tr><tr><td>22</td><td>Net assets or fund balances Subtract line 21 from line 20</td><td>13,249,719</td><td>13,528,076</td></tr></table>  |             | Beginning of Current Year   | End of Year | 20        | Total assets (Part X, line 16)  | 14,901,663                                   | 16,173,936 | 21   | Total liabilities (Part X, line 26) | 1,651,944  | 2,645,860  | 22      | Net assets or fund balances Subtract line 21 from line 20 | 13,249,719   | 13,528,076 |         |  |  |           |           |    |   |        |        |    |   |  |   |    |   |           |           |     |   |  |   |   |  |  |  |    |  |           |           |    |  |           |           |    |   |          |          |
|                             | Beginning of Current Year   | End of Year |   |             |           |   |  |            |  |                                     |  |  |         |   |  |            |         |  |  |           |           |    |   |        |        |    |   |  |   |    |   |           |           |     |   |  |   |   |  |  |  |    |  |           |           |    |  |           |           |    |   |          |          |
| 20                          | Total assets (Part X, line 16)  | 14,901,663  | 16,173,936  |             |           |   |  |            |  |                                     |  |  |         |   |  |            |         |  |  |           |           |    |   |        |        |    |   |  |   |    |   |           |           |     |   |  |   |   |  |  |  |    |  |           |           |    |  |           |           |    |   |          |          |
| 21                          | Total liabilities (Part X, line 26)   | 1,651,944   | 2,645,860   |             |           |   |  |            |  |                                     |  |  |         |   |  |            |         |  |  |           |           |    |   |        |        |    |   |  |   |    |   |           |           |     |   |  |   |   |  |  |  |    |  |           |           |    |  |           |           |    |   |          |          |
| 22                          | Net assets or fund balances Subtract line 21 from line 20   | 13,249,719  | 13,528,076  |             |           |   |  |            |  |                                     |  |  |         |   |  |            |         |  |  |           |           |    |   |        |        |    |   |  |   |    |   |           |           |     |   |  |   |   |  |  |  |    |  |           |           |    |  |           |           |    |   |          |          |
|                             |   |             |   |             |           |   |  |            |  |                                     |  |  |         |   |  |            |         |  |  |           |           |    |   |        |        |    |   |  |   |    |   |           |           |     |   |  |   |   |  |  |  |    |  |           |           |    |  |           |           |    |   |          |          |
|                             |   |             |   |             |           |   |  |            |  |                                     |  |  |         |   |  |            |         |  |  |           |           |    |   |        |        |    |   |  |   |    |   |           |           |     |   |  |   |   |  |  |  |    |  |           |           |    |  |           |           |    |   |          |          |
|                             |   |             |   |             |           |   |  |            |  |                                     |  |  |         |   |  |            |         |  |  |           |           |    |   |        |        |    |   |  |   |    |   |           |           |     |   |  |   |   |  |  |  |    |  |           |           |    |  |           |           |    |   |          |          |

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 Here

\*\*\*\*\*

Signature of officer

2014-07-31

Date

DAN HARBAUGH Executive Director

Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name

Roger G Toennies CPA

Preparer's signature

Date

Check ☐ if self-employed

PTIN P00019708

Firm's name ☐ Schmersahl Treloar & Co PC

Firm's EIN ☐

Firm's address ☐ 10805 Sunset Office Drive Ste 400

St Louis, MO 63127

Phone no (314) 966-2727

May the IRS discuss this return with the preparer shown above? (see instructions)

☒ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 11282Y

Form 990 (2013)

Part III

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

By creating, finding and supporting programs that directly improve the health and well-being of children, Ronald McDonald House Charities is working to better the lives of children and their families around the world

2

Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

If "Yes," describe these new services on Schedule O

3

Did the organization cease conducting, or make significant changes in how it conducts, any program services?

If "Yes," describe these changes on Schedule O

4

Describe the organization’s program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a

(Code ) (Expenses \$ 2,649,718 including grants of \$ ) (Revenue \$ 75,003 )

Ronald McDonald House Charities of St Louis provides a "home away from home" for the parents and families of seriously ill children receiving medical attention at St Louis hospitals including St Louis Childrens, Cardinal Glennon, Mercy Childrens and Shriners Hospitals The House provides a warm, home-like atmosphere where families can sleep, cook, do laundry and, most importantly, spend time together The House also provides one night stay hotel vouchers to St Louis Childrens, Cardinal Glennon and Mercy Childrens Hospitals for emergency lodging when the Ronald McDonald House is full The services provided by the House are vital to the well being of the families of these seriously ill children These families live 50 miles or more outside of St Louis, making frequent travel back and forth from the hospital impossible If the services of the House were not available, families that could not afford to stay in a hotel for an extended period would be forced to sleep in waiting rooms at the hospital and exist on fast food and vending machine snacks Most families are extremely anxious and concerned about the health of their children, and having lodging and meals provided to them is a tremendous relief Also, many of the families receive emotional support from other families staying at the House These families often form strong bonds that carry them through difficult decisions and grieving As more and more transplant services are offered in St Louis, the stays of many families have been extended to six months and beyond Often, the child will also be in residence at the House as he or she waits for organs and after receipt of the transplant In 2013, the house served 11,809 families in family rooms and the new families served in the Family Room Program is 6,925 St Louis three Ronald McDonald Family Rooms are located inside Mercy Childrens Hospital, St Louis Childrens Hospital and SSM Cardinal Glennon Childrens Medical Center Away from the hustle and bustle of hospital corridors and busy waiting rooms, the Ronald McDonald Family Room Program serves as an oasis within the hospital for thousands of families, including many from the St Louis Area, every year Each Family Room is equipped with a kitchen area, complete with a convection oven, microwave, refrigerator and dishwasher, as well as shower facilities, laundry facilities, a computer station with Internet access, comfortable seating and television Snacks are also provided to the families, free of charge Ronald McDonald Care Mobile, a partnership with the Eye Care Charity of Mid-America, serves underprivileged children with on-the-spot eye exams and glasses This mobile vision clinic travels to schools throughout the St Louis area and beyond, where the need for eye care is greatest due to low household income, including city schools, rural schools and social service agencies Its services enable early diagnosis and treatment, which are important for maintaining good vision, eye health and the prevention of vision loss Routine vision exams also help identify diseases such as diabetes and other serious medical conditions

4b

(Code ) (Expenses \$ including grants of \$ ) (Revenue \$ )

4c

(Code ) (Expenses \$ including grants of \$ ) (Revenue \$ )

4d

Other program services (Describe in Schedule O )

(Expenses \$ including grants of \$ ) (Revenue \$ )



















4e

Total program service expenses

2,649,718

Part IV

Checklist of Required Schedules

|   | 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 Yes   |    |
| 2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?    | 2 Yes   |    |
| 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       | No |
| 4 <b>Section 501(c)(3) organizations.</b> 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       | No |
| 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       | No |
| 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       | No |
| 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       | No |
| 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III    | 8       | No |
| 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       | No |
| 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 Yes  |    |
| 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   |         |    |
| a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI    | 11a Yes |    |
| 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     | No |
| c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII   | 11c     | No |
| 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     | No |
| e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X    | 11e Yes |    |
| 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     | No |
| 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII   | 12a Yes |    |
| b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional    | 12b     | No |
| 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E . . . . .  | 13      | No |
| 14a Did the organization maintain an office, employees, or agents outside of the United States? . . . . .   | 14a     | No |
| 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     | No |
| 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      | No |
| 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      | No |
| 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      | No |
| 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 Yes  |    |
| 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      | No |
| 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H . . . . .   | 20a     | No |
| b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?  | 20b     |    |

Part IV

Checklist of Required Schedules (continued)

|     |  |     |     |    |
|-----|--|-----|-----|----|
| 21  | Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i> . . . . .  | 21  | Yes |    |
| 22  | Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i> . . . . .  | 22  |     | No |
| 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? <i>If "Yes," complete Schedule J</i> . . . . .  | 23  | Yes |    |
| 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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i> . . . . .                            | 24a | Yes |    |
| b   | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . . .  | 24b |     | No |
| c   | 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 |     | No |
| d   | Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . . .  | 24d |     | No |
| 25a | <b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i> . . . . .  | 25a |     | No |
| 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? <i>If "Yes," complete Schedule L, Part I</i> . . . . .                                       | 25b |     | No |
| 26  | Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If so, complete Schedule L, Part II</i> . . . . .                                    | 26  |     | No |
| 27  | Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i> . . . . . | 27  |     | No |
| 28  | Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)   |     |     |    |
| a   | A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .   | 28a |     | No |
| b   | A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .  | 28b |     | No |
| c   | An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i> . . . .  | 28c |     | No |
| 29  | Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> . . . .  | 29  | Yes |    |
| 30  | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> . . . . .  | 30  |     | No |
| 31  | Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> . . . . .  | 31  |     | No |
| 32  | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> . . . . .  | 32  |     | No |
| 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? <i>If "Yes," complete Schedule R, Part I</i> . . . . .  | 33  |     | No |
| 34  | Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i> . . . . .  | 34  |     | No |
| 35a | Did the organization have a controlled entity within the meaning of section 512(b)(13)?  | 35a |     | No |
| 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)? <i>If "Yes," complete Schedule R, Part V, line 2</i> . . . .   | 35b |     | No |
| 36  | <b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> . . . . .   | 36  |     | No |
| 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? <i>If "Yes," complete Schedule R, Part VI</i>   | 37  |     | No |
| 38  | Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O . . . . .  | 38  | Yes |    |

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  |
| 1a  | Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.  | 1a  | 10  |
| b   | Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.   | 1b  | 0   |
| c   | Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?   | 1c  | Yes |
| 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  | 49  |
| b   | If at least one is reported on line 2a, did the organization file all required federal employment tax returns?<br><b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).  | 2b  | Yes |
| 3a  | Did the organization have unrelated business gross income of \$1,000 or more during the year?  | 3a  | No  |
| b   | If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O.   | 3b  | No  |
| 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  | No  |
| b   | If "Yes," enter the name of the foreign country: _____<br>See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.   |     |     |
| 5a  | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  | 5a  | No  |
| b   | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?   | 5b  | No  |
| 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  | No  |
| 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). |  |     |     |
| 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?  | 7a  | No  |
| b   | If "Yes," did the organization notify the donor of the value of the goods or services provided?  | 7b  |     |
| c   | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?   | 7c  | No  |
| d   | If "Yes," indicate the number of Forms 8282 filed during the year.   | 7d  | 0   |
| e   | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  | 7e  | No  |
| f   | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?   | 7f  | No  |
| g   | If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?   | 7g  | No  |
| h   | If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?   | 7h  | No  |
| 8   | <b>Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? | 8   | No  |
| 9 Sponsoring organizations maintaining donor advised funds.                     |  |     |     |
| a   | Did the organization make any taxable distributions under section 4966?  | 9a  | No  |
| b   | Did the organization make a distribution to a donor, donor advisor, or related person?   | 9b  | No  |
| 10 Section 501(c)(7) organizations. Enter                                       |  |     |     |
| a   | Initiation fees and capital contributions included on Part VIII, line 12.  | 10a |     |
| b   | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.   | 10b |     |
| 11 Section 501(c)(12) organizations. Enter                                      |  |     |     |
| a   | Gross income from members or shareholders.   | 11a |     |
| b   | Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).   | 11b |     |
| 12a   | <b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?  | 12a | No  |
| b   | If "Yes," enter the amount of tax-exempt interest received or accrued during the year.   | 12b |     |
| 13 Section 501(c)(29) qualified nonprofit health insurance issuers.             |  |     |     |
| a   | Is the organization licensed to issue qualified health plans in more than one state?<br><b>Note.</b> See the instructions for additional information the organization must report on Schedule O.   | 13a | No  |
| 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.   | 13b |     |
| c   | Enter the amount of reserves on hand.  | 13c |     |
| 14a   | Did the organization receive any payments for indoor tanning services during the tax year?   | 14a | No  |
| b   | If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.   | 14b |     |

Part VII

Governance, Management, and Disclosure

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

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

Section A. Governing Body and Management

|  |   |     |     |
|--|---|-----|-----|
|  |   | Yes | No  |
| 1a   | Enter the number of voting members of the governing body at the end of the tax year . . . . .   | 25  |     |
| 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 . . . . .  | 25  |     |
| 2  | Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? . . . . .   | 2   | No  |
| 3  | Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? . . . . . | 3   | No  |
| 4  | Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? . . . . .  | 4   | No  |
| 5  | Did the organization become aware during the year of a significant diversion of the organization's assets? . . . . .  | 5   | No  |
| 6  | Did the organization have members or stockholders? . . . . .  | 6   | No  |
| 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  | No  |
| 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  | No  |
| 8  | Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following  |     |     |
| a  | The governing body? . . . . .   | 8a  | Yes |
| b  | Each committee with authority to act on behalf of the governing body? . . . . .   | 8b  | Yes |
| 9  | Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O . . . . .        | 9   | No  |

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

|  |  |     |     |
|--|--|-----|-----|
|  |  | Yes | No  |
| 10a  | Did the organization have local chapters, branches, or affiliates? . . . . .   | 10a | No  |
| b  | If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? . . . . .   | 10b |     |
| 11a  | Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? . . . . .  | 11a | Yes |
| b  | Describe in Schedule O the process, if any, used by the organization to review this Form 990 . . . . .   |     |     |
| 12a  | Did the organization have a written conflict of interest policy? If "No," go to line 13 . . . . .  | 12a | Yes |
| b  | Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? . . . . .  | 12b | Yes |
| c  | Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done . . . . .   | 12c | Yes |
| 13   | Did the organization have a written whistleblower policy? . . . . .  | 13  | Yes |
| 14   | Did the organization have a written document retention and destruction policy? . . . . .   | 14  | Yes |
| 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 . . . . .   | 15a | Yes |
| b  | Other officers or key employees of the organization . . . . .  | 15b | Yes |
| If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) |  |     |     |
| 16a  | Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? . . . . .  | 16a | No  |
| 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 |     |

Section C. Disclosure

|    |  |
|----|--|
| 17 | List the States with which a copy of this Form 990 is required to be filed▶  |
| 18 | Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply.<br><input checked="" type="checkbox"/> Own website <input type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request <input type="checkbox"/> Other (explain in Schedule O) |
| 19 | Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year   |
| 20 | State the name, physical address, and telephone number of the person who possesses the books and records of the organization<br>▶MR DAN HARBAUGH 3450 PARK AVENUE<br>ST LOUIS, MO 63104 (314) 773-1100   |

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

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

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

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

| (A)<br>Name and Title                | (B)<br>Average hours per week (list any hours for related organizations below dotted line) | (C)<br>Position (do not check more than one box, unless person is both an officer and a director/trustee) |                       |         |              |                              |        | (D)<br>Reportable compensation from the organization (W- 2/1099-MISC) | (E)<br>Reportable compensation from related organizations (W- 2/1099-MISC) | (F)<br>Estimated amount of other compensation from the organization and related organizations |
|--------------------------------------|--|---|-----------------------|---------|--------------|------------------------------|--------|---|--|---|
|                                      |  | Individual trustee or director  | Institutional Trustee | Officer | Key employee | Highest compensated employee | Former |   |  |   |
| (1) Jim Souers<br>Director           | 1 00<br>0 00   | X   |                       |         |              |                              |        | 0   | 0  | 0   |
| (2) Brad Seabaugh<br>Director        | 1 00<br>0 00   | X   |                       |         |              |                              |        | 0   | 0  | 0   |
| (3) Colleen Schoendienst<br>Director | 1 00<br>0 00   | X   |                       |         |              |                              |        | 0   | 0  | 0   |
| (4) Keith Schieler<br>Director       | 1 00<br>0 00   | X   |                       |         |              |                              |        | 0   | 0  | 0   |
| (5) Ann Bueler<br>Director           | 1 00<br>0 00   | X   |                       |         |              |                              |        | 0   | 0  | 0   |
| (6) Steve Fahrig<br>Director         | 1 00<br>0 00   | X   |                       |         |              |                              |        | 0   | 0  | 0   |
| (7) George Gipson III<br>Director    | 1 00<br>0 00   | X   |                       |         |              |                              |        | 0   | 0  | 0   |
| (8) Larry Glascott<br>Director       | 1 00<br>0 00   | X   |                       |         |              |                              |        | 0   | 0  | 0   |
| (9) Lincoln Gray<br>Director         | 1 00<br>0 00   | X   |                       |         |              |                              |        | 0   | 0  | 0   |
| (10) Ed Harmon<br>Director           | 1 00<br>0 00   | X   |                       |         |              |                              |        | 0   | 0  | 0   |
| (11) Thomas Hof<br>Director          | 1 00<br>0 00   | X   |                       |         |              |                              |        | 0   | 0  | 0   |
| (12) Donald Kalicak<br>Director      | 1 00<br>0 00   | X   |                       |         |              |                              |        | 0   | 0  | 0   |
| (13) Sirus Karimi<br>Director        | 1 00<br>0 00   | X   |                       |         |              |                              |        | 0   | 0  | 0   |
| (14) Tamı Keller<br>Director         | 1 00<br>0 00   | X   |                       |         |              |                              |        | 0   | 0  | 0   |
| (15) Stephen T Lux<br>Director       | 1 00<br>0 00   | X   |                       |         |              |                              |        | 0   | 0  | 0   |
| (16) Rita Mathews<br>Director        | 1 00<br>0 00   | X   |                       |         |              |                              |        | 0   | 0  | 0   |
| (17) Steve Pelch<br>Director         | 1 00<br>0 00   | X   |                       |         |              |                              |        | 0   | 0  | 0   |

## Part VII

|           |  |         |  |        |
|-----------|--|---------|--|--------|
| <b>1b</b> | <b>Sub-Total . . . . .</b>   |         |  |        |
| <b>c</b>  | <b>Total from continuation sheets to Part VII, Section A . . . . .</b> |         |  |        |
| <b>d</b>  | <b>Total (add lines 1b and 1c) . . . . .</b>                           | 412,309 |  | 42,737 |

**2** Total number of individuals (including but not limited to those listed in Item 1) who received more than \$100,000 of reportable compensation from the organization. **3**

|   |   | Yes | No  |
|---|---|-----|-----|
| 3 | Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i> . . . . .  | 3   | No  |
| 4 | For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i> . . . . . | 4   | Yes |
| 5 | Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i> . . . . .                       | 5   | No  |

## **Section B. Independent Contractors**

**1** Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

| (A)<br>Name and business address | (B)<br>Description of services | (C)<br>Compensation |
|----------------------------------|--------------------------------|---------------------|
|                                  |                                |                     |
|                                  |                                |                     |
|                                  |                                |                     |
|                                  |                                |                     |
|                                  |                                |                     |

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 0



Part VIII

Statement of Revenue

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

|   |                       |   | (A)<br>Total revenue | (B)<br>Related or<br>exempt<br>function<br>revenue | (C)<br>Unrelated<br>business<br>revenue | (D)<br>Revenue<br>excluded from<br>tax under<br>sections<br>512-514 |
|---|-----------------------|---|----------------------|--|---|---|
| Contributions, Gifts, Grants<br>and Other Similar Amounts | 1a                    | Federated campaigns . . . . . 1a  |                      |  |   |   |
|   | b                     | Membership dues . . . . . 1b  |                      |  |   |   |
|   | c                     | Fundraising events . . . . . 1c   |                      |  |   |   |
|   | d                     | Related organizations . . . . . 1d  |                      |  |   |   |
|   | e                     | Government grants (contributions) 1e  |                      |  |   |   |
|   | f                     | All other contributions, gifts, grants, and<br>similar amounts not included above 1f  | 2,350,910            |  |   |   |
|   | g                     | Noncash contributions included in lines<br>1a-1f \$ 112,893   |                      |  |   |   |
|   | h                     | Total. Add lines 1a-1f . . . . .  | 2,350,910            |  |   |   |
| Program Service Revenue                                   | 2a                    | LODGING REVENUE   |                      |  |   |   |
|   |                       | Business Code 721310  | 75,003               | 75,003   |   |   |
|   | b                     |   |                      |  |   |   |
|   | c                     |   |                      |  |   |   |
|   | d                     |   |                      |  |   |   |
|   | e                     |   |                      |  |   |   |
|   | f                     | All other program service revenue   |                      |  |   |   |
|   | g                     | Total. Add lines 2a-2f . . . . .  | 75,003               |  |   |   |
| Other Revenue   | 3                     | Investment income (including dividends, interest,<br>and other similar amounts) . . . . .   | 97,039               |  |   | 97,039  |
|   | 4                     | Income from investment of tax-exempt bond proceeds . . . . .  | 0                    |  |   |   |
|   | 5                     | Royalties . . . . .   | 0                    |  |   |   |
|   | 6a                    | (i) Real  |                      |  |   |   |
|   |                       | (ii) Personal   |                      |  |   |   |
|   |                       | Gross rents   |                      |  |   |   |
|   |                       | b Less rental expenses  |                      |  |   |   |
|   | c                     | Rental income or (loss)   |                      |  |   |   |
|   | d                     | Net rental income or (loss) . . . . .   | 0                    |  |   |   |
|   | 7a                    | (i) Securities  |                      |  |   |   |
|   |                       | (ii) Other  |                      |  |   |   |
|   |                       | Gross amount from sales of assets other than inventory  | 289,563              |  |   |   |
|   |                       | b Less cost or other basis and sales expenses   | 120,898              |  |   |   |
|   | c                     | Gain or (loss)  | 168,665              |  |   |   |
|   | d                     | Net gain or (loss) . . . . .  | 168,665              | 168,665  |   |   |
|   | 8a                    | Gross income from fundraising events (not including<br>\$ _____ of contributions reported on line 1c)<br>See Part IV, line 18 . . . . . |                      |  |   |   |
|   |                       | a 942,140   |                      |  |   |   |
|   | b                     | Less direct expenses . . . . . b  | 315,730              |  |   |   |
|   | c                     | Net income or (loss) from fundraising events . . . . .  | 626,410              |  |   | 626,410   |
|   | 9a                    | Gross income from gaming activities<br>See Part IV, line 19 . . . . .   |                      |  |   |   |
|   |                       | a   |                      |  |   |   |
|   | b                     | Less direct expenses . . . . . b  |                      |  |   |   |
|   | c                     | Net income or (loss) from gaming activities . . . . .   | 0                    |  |   |   |
|   | 10a                   | Gross sales of inventory, less returns and allowances . . . . .   |                      |  |   |   |
|   |                       | a   |                      |  |   |   |
|   | b                     | Less cost of goods sold . . . . . b   |                      |  |   |   |
|   | c                     | Net income or (loss) from sales of inventory . . . . .  | 0                    |  |   |   |
|   | Miscellaneous Revenue |   | Business Code        |  |   |   |
|   | 11a                   | MISCELLANEOUS   | 900099               | 40,127   |   | 40,127  |
|   | b                     |   |                      |  |   |   |
|   | c                     |   |                      |  |   |   |
|   | d                     | All other revenue . . . . .   |                      |  |   |   |
|   | e                     | Total. Add lines 11a-11d . . . . .  | 40,127               |  |   |   |
|   | 12                    | Total revenue. See Instructions . . . . .   | 3,358,154            | 243,668  |   | 763,576   |

Part IX

Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

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

| Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII. |   | (A)<br>Total expenses | (B)<br>Program service expenses | (C)<br>Management and general expenses | (D)<br>Fundraising expenses |
|--|---|-----------------------|---------------------------------|--|-----------------------------|
| 1  | Grants and other assistance to governments and organizations in the United States. See Part IV, line 21.  | 32,500                | 32,500                          |  |                             |
| 2  | Grants and other assistance to individuals in the United States. See Part IV, line 22.  | 0                     |                                 |  |                             |
| 3  | Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16.   | 0                     |                                 |  |                             |
| 4  | Benefits paid to or for members.  | 0                     |                                 |  |                             |
| 5  | Compensation of current officers, directors, trustees, and key employees.   | 412,309               | 320,364                         | 45,354                                 | 46,591                      |
| 6  | Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).  | 0                     |                                 |  |                             |
| 7  | Other salaries and wages.   | 937,753               | 738,633                         | 97,825                                 | 101,295                     |
| 8  | Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions).   | 0                     |                                 |  |                             |
| 9  | Other employee benefits.  | 159,271               | 123,818                         | 17,440                                 | 18,013                      |
| 10   | Payroll taxes.  | 98,755                | 76,773                          | 10,814                                 | 11,168                      |
| 11   | Fees for services (non-employees):  |                       |                                 |  |                             |
| a  | Management.   | 0                     |                                 |  |                             |
| b  | Legal.  | 0                     |                                 |  |                             |
| c  | Accounting.   | 0                     |                                 |  |                             |
| d  | Lobbying.   | 0                     |                                 |  |                             |
| e  | Professional fundraising services. See Part IV, line 17.  | 0                     |                                 |  |                             |
| f  | Investment management fees.   | 0                     |                                 |  |                             |
| g  | Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O).   | 161,186               | 69,855                          | 42,266                                 | 49,065                      |
| 12   | Advertising and promotion.  | 5,040                 |                                 |  | 5,040                       |
| 13   | Office expenses.  | 119,096               | 67,689                          | 50,502                                 | 905                         |
| 14   | Information technology.   | 0                     |                                 |  |                             |
| 15   | Royalties.  | 0                     |                                 |  |                             |
| 16   | Occupancy.  | 0                     |                                 |  |                             |
| 17   | Travel.   | 0                     |                                 |  |                             |
| 18   | Payments of travel or entertainment expenses for any federal, state, or local public officials.   | 0                     |                                 |  |                             |
| 19   | Conferences, conventions, and meetings.   | 0                     |                                 |  |                             |
| 20   | Interest.   | 48,192                | 40,354                          | 7,838                                  |                             |
| 21   | Payments to affiliates.   | 0                     |                                 |  |                             |
| 22   | Depreciation, depletion, and amortization.  | 798,059               | 758,157                         | 19,951                                 | 19,951                      |
| 23   | Insurance.  | 49,223                | 46,762                          | 1,231                                  | 1,230                       |
| 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  | UTILITIES   | 128,392               | 121,972                         | 3,210                                  | 3,210                       |
| b  | MAINTENANCE AND REPAIRS   | 115,766               | 115,766                         |  |                             |
| c  | FUNDRAISING PROJECTS  | 113,013               |                                 |  | 113,013                     |
| d  | MISCELLANEOUS   | 93,122                | 42,276                          | 45,950                                 | 4,896                       |
| e  | All other expenses  | 188,584               | 94,799                          | 43,088                                 | 50,697                      |
| 25   | Total functional expenses. Add lines 1 through 24e.   | 3,460,261             | 2,649,718                       | 385,469                                | 425,074                     |
| 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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720). |                       |                                 |  |                             |

Part X

Balance Sheet

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

|                             |   |  |               | (A)               |     | (B)         |
|-----------------------------|---|--|---------------|-------------------|-----|-------------|
|                             |   |  |               | Beginning of year |     | End of year |
| Assets                      | 1   | Cash—non-interest-bearing  |               | 3,684             | 1   | 464         |
|                             | 2   | Savings and temporary cash investments   |               | 623,542           | 2   | 811,247     |
|                             | 3   | Pledges and grants receivable, net   |               | 911,876           | 3   | 450,057     |
|                             | 4   | Accounts receivable, net   |               | 36,157            | 4   | 45,769      |
|                             | 5   | Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L   |               |                   | 5   | 0           |
|                             | 6   | 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   | 0           |
|                             | 7   | Notes and loans receivable, net  |               |                   | 7   | 0           |
|                             | 8   | Inventories for sale or use  |               |                   | 8   | 0           |
|                             | 9   | Prepaid expenses and deferred charges  |               | 53,161            | 9   | 13,268      |
|                             | 10a   | Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D  | 10a15,806,338 |                   |     |             |
|                             | b   | Less accumulated depreciation  | 10b5,427,078  | 9,290,173         | 10c | 10,379,260  |
|                             | 11  | Investments—publicly traded securities   |               | 3,983,070         | 11  | 4,473,871   |
|                             | 12  | Investments—other securities See Part IV, line 11  |               |                   | 12  | 0           |
|                             | 13  | Investments—program-related See Part IV, line 11   |               |                   | 13  | 0           |
|                             | 14  | Intangible assets  |               |                   | 14  | 0           |
|                             | 15  | Other assets See Part IV, line 11  |               |                   | 15  | 0           |
|                             | 16  | Total assets. Add lines 1 through 15 (must equal line 34)  |               | 14,901,663        | 16  | 16,173,936  |
| Liabilities                 | 17  | Accounts payable and accrued expenses  |               | 180,451           | 17  | 153,904     |
|                             | 18  | Grants payable   |               |                   | 18  |             |
|                             | 19  | Deferred revenue   |               |                   | 19  |             |
|                             | 20  | Tax-exempt bond liabilities  |               |                   | 20  |             |
|                             | 21  | Escrow or custodial account liability Complete Part IV of Schedule D   |               |                   | 21  |             |
|                             | 22  | Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L  |               |                   | 22  |             |
|                             | 23  | Secured mortgages and notes payable to unrelated third parties   |               | 1,283,223         | 23  | 2,311,670   |
|                             | 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   |               | 188,270           | 25  | 180,286     |
|                             | 26  | Total liabilities. Add lines 17 through 25   |               | 1,651,944         | 26  | 2,645,860   |
| Net Assets or Fund Balances | Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34. |  |               |                   |     |             |
|                             | 27  | Unrestricted net assets  |               | 11,715,104        | 27  | 12,441,945  |
|                             | 28  | Temporarily restricted net assets  |               | 916,876           | 28  | 468,392     |
|                             | 29  | Permanently restricted net assets  |               | 617,739           | 29  | 617,739     |
|                             | Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.                          |  |               |                   |     |             |
|                             | 30  | Capital stock or trust principal, or current funds   |               |                   | 30  |             |
|                             | 31  | Paid-in or capital surplus, or land, building or equipment fund  |               |                   | 31  |             |
|                             | 32  | Retained earnings, endowment, accumulated income, or other funds   |               |                   | 32  |             |
|                             | 33  | Total net assets or fund balances  |               | 13,249,719        | 33  | 13,528,076  |
|                             | 34  | Total liabilities and net assets/fund balances   |               | 14,901,663        | 34  | 16,173,936  |