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NOV - 4 2014
CITY OF SUN VALLEY

EVENT FUNDING REQUEST GUIDELINES AND APPLICATION INSTRUCTIONS

Objective:
One of the priorities of the Sun Valley City Council is to encourage and support events in the City which help grow local option tax (LOT) to support our tourist economy. By providing financial support of up to $5,000 per event for events held in Sun Valley, one of the Council's priorities is fulfilled. In order to ensure that events meet Council priorities, a threshold criterion has been established. Events which are not, to some degree, taking place in Sun Valley will not be considered. One-off, exceptional events will be considered outside the criteria outlined below.

Ineligible Events:
Events which are political, religious, or fund charitable organizations will not be considered. Also, events in which the proceeds do not remain in the Wood River Valley will not be considered. Events which have been funded previously five (5) times are ineligible.

Guidelines:
Each year following the budget process, if the Council elects to fund events, applications will be accepted in October for consideration at the November, or subsequent, Council Meeting. Regular, planned events may submit applications only at this time.

At the November, or subsequent, meeting in which applications for funding are considered, the Council may elect to hold a portion of the budgeted amount in reserve for one-off, exceptional events which seek funding later in the year.

All applications will be scored against a scoring matrix and funding will be allocated to the highest-scoring applications subject to the discretion of the City Council.

Instructions:
The application must be complete, legible, and submitted in order to meet the appropriate deadlines for the November meeting.

A representative of the organization shall attend the November meeting, make a brief presentation and be capable of answering questions on behalf of the event / organization.

An event summary report must be submitted within 60 days of the end of the event. No funding shall be made unless and until such event summary report is timely filed. The report must include tax and LOT collection receipt information for the City of Sun Valley.

Any organization applying for City funding shall provide its last 3 years' IRS Form 990's with their application unless it is exempt from such filing, in which event the specific exemption shall be provided. In addition, any organization that is exempt from Form 990 filing, or a new organization that has not previously filed a Form 990, shall provide a breakdown of the salary and benefits of the five (5) highest paid employees, and the most recent financials, including a P&L statement and balance sheet.

A copy of the specific event budget must accompany the application.

CITY FUNDING REQUEST APPLICATION

Deadline: Monday, October 27, 2014

Name of Organization:	SUN VALLEY SKI EDUCATION FOUNDATION
Complete Address:	P.O. BOX 203 - SUN VALLEY, ID 83353
Federal Tax ID#:	82-0264946
Primary Contact: Name, Title, Contact Number, Email address:	RUBEN MACAYA CHIEF OF RACE - 720-8459 rmacaya@svsef.org
Organization website:	SVSEF.ORG
Outline the Organization Purpose / Mission.	PLEASE, SEE ATTACHED CARD
Date organization was founded?	1966
Describe the event for which funding is being requested. In addition to a general description, please include information about the length and specific location(s) of the event. What is the amount of the request? What is the event's total budget?	USSA-WESTERN REGION SPRING SERIES - END OF SEASON USSA CHAMPIONSHIP EVENT. 6 DAYS OF ALPINE SKI RACING - MEN & WOMEN - ON DOLLAR HILL & BALD MOUNTAIN. U.S. SKI TEAM PARTICIPATION. 400 + PARTICIPANTS (260 ATHLETES - 80 COACHES & OFFICIALS - 80+ RELATIVES) $5,000.00 REQUEST $42,200 TOTAL BUDGET
How will the City benefit from this event?	CLOSE TO 400 + PEOPLE STAYING IN SUN VALLEY FOR 6-7 DAYS. MANY FIRST TIME VISITORS. EXPOSURE IN REGIONAL AND NATIONAL MEDIA.
How many participants do you expect for this year and future years? From where do you expect your participants (e.g. outside of Idaho, Sun Valley residents, etc.)?	400 + PARTICIPANTS MOSTLY FROM OUTSIDE IDAHO. THIS EVENT DOVETAILS INTO THE U.S. NATIONAL ALPINE CHAMPIONSHIPS FOR 2016 & 2018
Is your event seeking other funding?	YES, SPONSORSHIP FROM A LUXURY CAR DEALERSHIP - BENTLEY OF BEVERLY HILLS.
How will funding from the City of Sun Valley be leveraged to gain other funding?	IT WILL HELP US WITH THE POSSIBILITY TO GAIN OTHER FUNDING FOR NEXT YEAR'S U.S. NATIONAL CHAMPIONSHIPS - 600 + PARTICIPANTS

Will this be an annual event? If so, will it be held in Sun Valley every year? How long has this event been taking place? SPRING SERIES WAS HELD IN S.V. LAST YEAR, AGAIN THIS YEAR - NEXT YEAR (2016) WILL BE U.S. NATIONAL CHAMPIONSHIPS - SPRING SERIES AGAIN IN 2017 FOLLOWED BY NATIONAL CHAMPIONSHIPS IN 2018
Which event costs will be offset by funding from the City of Sun Valley? LODGING EXPENSES FOR U.S. SKI TEAM MEMBERS - RACE TIMING COSTS - RACE OFFICIALS EXPENSES & SALARIES - RACE WORKER SALARIES - EQUIPMENT COSTS (TIMING - GATES - PANNELS - SAFETY EQUIPMENT)
How will you publicize the event? CHANNEL 7 T.V. BOISE - USSA PROMOTIONS DEPARTMENT - INTERNET (WEBSITES, FACEBOOK TWITTER) SKI PUBLICATIONS - "SKIRACING" ONLINE
How will the City be acknowledged at this event? IN BANNERS, MAGAZINE ARTICLES, "SKI RACING" ONLINE, T.V. INTERVIEWS. AT THE AWARDS CEREMONY EVERY EVENING AND ONLINE
Is this a political, religious or partisan event, or will the event be used in any way to fund charitable organizations? If so, explain. NO
Will all proceeds from the event stay in the Wood River Valley? ALL, EXCEPT FOR THE "RACE TAX" PAID BY SUSEF TO USSA FOR EACH RACE START.
Will there be an admission charge for your event(s)? If so, what is it? Will there be any special discounts or privileges offered to Sun Valley residents? THERE IS AN "ENTRY FEE" FOR THE ATHLETES TO COMPETE. NO ADMISSION CHARGE TO SPECTATORS
Will there be merchandise or services sold at the event which generate additional sales tax revenue? THERE WILL NOT BE MERCHANDISE SALES. SOUVENIR ITEMS WILL BE GIVEN TO PARTICIPANTS (T-SHIRTS, BACKPACKS, WATER BOTTLES, ETC)

Once this form is completed, please return to Alissa Weber, City Clerk, by email (aweber@svidaho.org), fax (208-622-3401) or in person at City Hall at 81 Elkhorn Rd.

SVSEF sun valley ski education foundation

DID YOU KNOW?

SVSEF MAKES THE GRADE:
STUDENT-ATHLETES OF THE SVSEF COMPILE VERY IMPRESSIVE GRADE POINT AVERAGES THROUGH THE ARDUOUS WINTER SEASON. THE AVERAGE CUMULATIVE GPA FOR ALL SVSEF UPPER SCHOOL ATHLETES WAS A 3.4. SVSEF ATHLETES ARE NOT PERMITTED TO TRAVEL TO COMPETITIONS IF THEIR GRADES FALL BELOW A "C" IN ANY ONE CLASS.

❋ ❋ ❋

SCHOLARSHIP ASSISTANCE: FINANCIAL AID IS BASED ON CHARACTER AND NEED. AN AVERAGE OF $100,000 EVERY SEASON IS AWARDED TO QUALIFYING FAMILIES FOR TUITION AND TRAVEL EXPENSES.

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SVSEF MISSION STATEMENT:
THE SVSEF IS A NON-PROFIT ORGANIZATION DEDICATED TO PROVIDING EXCEPTIONAL SNOW SPORTS PROGRAMS FOR THE YOUTH OF THE WOOD RIVER VALLEY. THE PRIMARY GOALS OF OUR PROGRAMS ARE TO ASSIST EACH PARTICIPANT IN REACHING HIS/HER ATHLETIC POTENTIAL, WHILE DEVELOPING STRONG PERSONAL CHARACTER AND POSITIVE VALUES.

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BUILDING STRONG MINDS, STRONG BODIES, AND STRONG FUTURES THROUGH WINTER SPORTS.

SVSEF sun valley ski education foundation

DID YOU KNOW?

SVSEF WAS ESTABLISHED IN 1966

❋ ❋ ❋

SVSEF IS A SIGNIFICANT CONTRIBUTOR TO THE KETCHUM/SUN VALLEY AREA: HOSTING 8-10 REGIONAL AND NATIONAL COMPETITIONS EACH YEAR, THE SVSEF BRINGS AN ESTIMATED THREE QUARTERS OF A MILLION DOLLARS TO THE WOOD RIVER VALLEY ANNUALLY.

❋ ❋ ❋

SVSEF IS ACTIVE IN BRANDING AND PROMOTING SUN VALLEY REGIONALLY, NATIONALLY & INTERNATIONALLY: SVSEF ATHLETES SUCCESSFULLY COMPETE AND REPRESENT OUR COMMUNITY BY PROUDLY WEARING THE SUN VALLEY TEAM LOGO ALL OVER THE WORLD.

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SVSEF INVESTS IN THE FUTURE:
WITH 500 YOUNG ATHLETES INVOLVED IN OUR PROGRAMS, THE SVSEF SUPPORTS AND PROMOTES YEAR ROUND MOUNTAIN SPORTS AS WELL AS THE OUTDOOR LIFESTYLE…THE VERY FABRIC OF THE WOOD RIVER VALLEY'S CULTURE.

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DRUG/ALCOHOL POLICY:
SVSEF PROMOTES A DRUG/ALCOHOL FREE ENVIRONMENT. ATHLETES AND COACHES ARE RANDOMLY DRUG TESTED THROUGHOUT THE SEASON.

2015 Alpine Spring Series Budget

EXPENSE	
Equipment:	
Gates/Panels/Race Bibs	$11,000.00
Officials Housing	$ 2,000.00
Officials Per Diem	$ 2,000.00
Additional Race Help Salaries	$ 10,000.00
Timing:	$14,400.00
Trophies:	$ 800.00
Advertising & Promotion	$ 2,000.00
TOTAL EXPENSE	**$ 42,200.00**
REVENUE	
Entry Fees (net after USSA, WR & IMD Race Taxes)	$14,000.00
Possible Sponshorship (not yet secured)	$ 6,000.00
TOTAL REVENUE	**$20,000.00**
NET DIFFERENCE	**($22,200.00)**

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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.

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

OMB No. 1545-0047

2013

Open to Public Inspection

A For the 2013 calendar year, or tax year beginning 07/01/13 , and ending 06/30/14

B Check if applicable:
- [ ] Address change
- [ ] Name change
- [ ] Initial return
- [ ] Terminated
- [ ] Amended return
- [ ] Application pending

C Name of organization: SUN VALLEY SKI EDUCATION FOUNDATION INC

Doing Business As

Number and street (or P.O. box if mail is not delivered to street address): P.O. BOX 203 | Room/suite

City or town, state or province, country, and ZIP or foreign postal code: SUN VALLEY ID 83353-0203

D Employer identification number: 82-0264946

E Telephone number: 208-726-4129

G Gross receipts $ 5,197,512

F Name and address of principal officer:
JONATHAN NEELEY
PO BOX 4938
KETCHUM ID 83340

H(a) Is this a group return for subordinates? [ ] Yes [X] No

H(b) Are all subordinates included? [ ] Yes [ ] No
If "No," attach a list. (see instructions)

I Tax-exempt status: [X] 501(c)(3) [ ] 501(c) ( ) ◀ (insert no.) [ ] 4947(a)(1) or [ ] 527

J Website: ▶ SVSEF.ORG

H(c) Group exemption number ▶

K Form of organization: [X] Corporation [ ] Trust [ ] Association [ ] Other ▶

L Year of formation: 1966

M State of legal domicile: ID

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities:
SEE SCHEDULE O

2 Check this box ▶ [ ] if the organization discontinued its operations or disposed of more than 25% of its net assets.

3 Number of voting members of the governing body (Part VI, line 1a)	3	13
4 Number of independent voting members of the governing body (Part VI, line 1b)	4	13
5 Total number of individuals employed in calendar year 2013 (Part V, line 2a)	5	116
6 Total number of volunteers (estimate if necessary)	6	600
7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
b Net unrelated business taxable income from Form 990-T, line 34	7b	0

	Prior Year	Current Year
Revenue		
8 Contributions and grants (Part VIII, line 1h)	1,149,446	1,464,785
9 Program service revenue (Part VIII, line 2g)	2,118,312	2,116,106
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	85,858	134,619
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-27,042	62,626
12 Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	3,326,574	3,778,136
Expenses		
13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)		0
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)	1,363,129	1,533,595
16a Professional fundraising fees (Part IX, column (A), line 11e)		0
b Total fundraising expenses (Part IX, column (D), line 25) ▶ 84,304		
17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	1,858,898	1,874,973
18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	3,222,027	3,408,568
19 Revenue less expenses. Subtract line 18 from line 12	104,547	369,568
	Beginning of Current Year	**End of Year**
Net Assets or Fund Balances		
20 Total assets (Part X, line 16)	2,796,554	3,473,557
21 Total liabilities (Part X, line 26)	0	172,565
22 Net assets or fund balances. Subtract line 21 from line 20	2,796,554	3,300,992

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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 | Date

▶ Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check [ ] if self-employed	PTIN
LINDA P. CHAMBERS		11/03/14		

Firm's name ▶ BECKER, CHAMBERS & CO., P.A. | Firm's EIN ▶

Firm's address ▶ PO BOX 909 HAILEY, ID 83333-0909 | Phone no. 208-788-9595

May the IRS discuss this return with the preparer shown above? (see instructions) [ ] Yes [ ] No

For Paperwork Reduction Act Notice, see the separate instructions.

DAA

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

▶ **Attach to Form 990 or Form 990-EZ.**

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

OMB No. 1545-0047

2013

Open to Public Inspection

Name of the organization SUN VALLEY SKI EDUCATION FOUNDATION INC

Employer identification number 82-0264946

Part I 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 11, check only one box.)

1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**

2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E.)

3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: .....

5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

9 ☒ An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)

10 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**

11 ☐ 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 that describes the type of supporting organization and complete lines 11e through 11h.

a ☐ Type I **b** ☐ Type II **c** ☐ Type III–Functionally integrated **d** ☐ Type III–Non-functionally integrated

e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).

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f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box ..... ☐

g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

		Yes	No
(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?	11g(i)		
(ii) A family member of a person described in (i) above?	11g(ii)		
(iii) A 35% controlled entity of a person described in (i) or (ii) above?	11g(iii)		

h Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document? Yes	No	(v) Did you notify the organization in col. (i) of your support? Yes	No	(vi) Is the organization in col. (i) organized in the U.S.? Yes	No	(vii) Amount of monetary support
(A)									
(B)									
(C)									
(D)									
(E)									
Total									

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Part II **Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 **Total.** Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4.						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11 **Total support.** Add lines 7 through 10						

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12 Gross receipts from related activities, etc. (see instructions) 12

13 **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) organization, check this box and **stop here** ..... ▶ ☐

Section C. Computation of Public Support Percentage

14 Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f)) ..... 14 %

15 Public support percentage from 2012 Schedule A, Part II, line 14 ..... 15 %

16a **33 1/3% support test—2013.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ..... ▶ ☐

b **33 1/3% support test—2012.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ..... ▶ ☐

17a **10%-facts-and-circumstances test—2013.** 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 IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ..... ▶ ☐

b **10%-facts-and-circumstances test—2012.** 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 IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ..... ▶ ☐

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

Part III **Support Schedule for Organizations Described in Section 509(a)(2)**
(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	792,150	1,688,236	1,133,757	1,149,446	1,464,785	6,228,374
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	1,706,317	2,163,517	2,248,423	2,392,080	2,345,428	10,855,765
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						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 **Total.** Add lines 1 through 5	2,498,467	3,851,753	3,382,180	3,541,526	3,810,213	17,084,139
7a Amounts included on lines 1, 2, and 3 received from disqualified persons	97,315	157,412	63,426	111,417	368,879	798,449
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	97,315	157,412	63,426	111,417	368,879	798,449
8 **Public support** (Subtract line 7c from line 6.)						16,285,690

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9 Amounts from line 6	2,498,467	3,851,753	3,382,180	3,541,526	3,810,213	17,084,139
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	22,911	48,768	48,387	46,599	51,778	218,443
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	22,911	48,768	48,387	46,599	51,778	218,443
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on			945			945
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 **Total support.** (Add lines 9, 10c, 11, and 12.)	2,521,378	3,900,521	3,431,512	3,588,125	3,861,991	17,303,527

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14 **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) organization, check this box and **stop here** ▶ ☐

Section C. Computation of Public Support Percentage

15	Public support percentage for 2013 (line 8, column (f) divided by line 13, column (f))	15	94.12 %
16	Public support percentage from 2012 Schedule A, Part III, line 15	16	95.43 %

Section D. Computation of Investment Income Percentage

17	Investment income percentage for **2013** (line 10c, column (f) divided by line 13, column (f))	17	1 %
18	Investment income percentage from **2012** Schedule A, Part III, line 17	18	1 %

19a **33 1/3% support tests—2013.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☒

b **33 1/3% support tests—2012.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶ ☐

Part IV **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

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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 black lung benefit trust or private foundation)

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

OMB No. 1545-0047

2012

Open to Public Inspection

A For the 2012 calendar year, or tax year beginning 07/01/12 , and ending 06/30/13

B Check if applicable:
- [ ] Address change
- [ ] Name change
- [ ] Initial return
- [ ] Terminated
- [ ] Amended return
- [ ] Application pending

C Name of organization: SUN VALLEY SKI EDUCATION FOUNDATION INC

Doing Business As

Number and street (or P.O. box if mail is not delivered to street address): P.O. BOX 203 | Room/suite

City, town or post office, state, and ZIP code: SUN VALLEY ID 83353-0203

D Employer identification number: 82-0264946

E Telephone number: 208-726-4129

G Gross receipts $ 4,383,646

F Name and address of principal officer:
JONATHAN NEELEY
PO BOX 4938
KETCHUM ID 83340

H(a) Is this a group return for affiliates? [ ] Yes [X] No

H(b) Are all affiliates included? [ ] Yes [ ] No
If "No," attach a list. (see instructions)

I Tax-exempt status: [X] 501(c)(3) [ ] 501(c) ( ) ◀ (insert no.) [ ] 4947(a)(1) or [ ] 527

J Website: ▶ SVSEF.ORG

H(c) Group exemption number ▶

K Form of organization: [X] Corporation [ ] Trust [ ] Association [ ] Other ▶

L Year of formation: 1966

M State of legal domicile: ID

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities:
SEE SCHEDULE O

2 Check this box ▶ [ ] if the organization discontinued its operations or disposed of more than 25% of its net assets.

3 Number of voting members of the governing body (Part VI, line 1a)	3	12
4 Number of independent voting members of the governing body (Part VI, line 1b)	4	12
5 Total number of individuals employed in calendar year 2012 (Part V, line 2a)	5	100
6 Total number of volunteers (estimate if necessary)	6	575
7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
b Net unrelated business taxable income from Form 990-T, line 34	7b	0

		Prior Year	Current Year
Revenue	8 Contributions and grants (Part VIII, line 1h)	1,133,757	1,149,446
	9 Program service revenue (Part VIII, line 2g)	1,855,733	2,118,312
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	33,868	85,858
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	31,932	-27,042
	12 Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	3,055,290	3,326,574
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)		0
	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)	1,209,184	1,363,129
	16a Professional fundraising fees (Part IX, column (A), line 11e)		0
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 136,875		
	17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	1,674,162	1,858,898
	18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	2,883,346	3,222,027
	19 Revenue less expenses. Subtract line 18 from line 12	171,944	104,547
		Beginning of Current Year	**End of Year**
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	2,615,123	2,796,554
	21 Total liabilities (Part X, line 26)	4,022	0
	22 Net assets or fund balances. Subtract line 21 from line 20	2,611,101	2,796,554

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 | Date

▶ Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check [ ] if self-employed	PTIN
LINDA P. CHAMBERS		11/08/13		

Firm's name ▶ BECKER, CHAMBERS & CO., P.A. | Firm's EIN ▶

Firm's address ▶ PO BOX 909 HAILEY, ID 83333-0909 | Phone no. 208-788-9595

May the IRS discuss this return with the preparer shown above? (see instructions) [ ] Yes [ ] No

For Paperwork Reduction Act Notice, see the separate instructions.

DAA

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No. 1545-0047

2012

Open to Public Inspection

Name of the organization SUN VALLEY SKI EDUCATION FOUNDATION INC

Employer identification number 82-0264946

Part I 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 11, check only one box.)

1 [ ] A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**

2 [ ] A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E.)

3 [ ] A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4 [ ] A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: .....

5 [ ] An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)

6 [ ] A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 [ ] An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

8 [ ] A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

9 [X] An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)

10 [ ] An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**

11 [ ] 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 that describes the type of supporting organization and complete lines 11e through 11h.

a [ ] Type I **b** [ ] Type II **c** [ ] Type III–Functionally integrated **d** [ ] Type III–Non-functionally integrated

e [ ] By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).

f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box ..... [ ]

g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

		Yes	No
(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?	11g(i)		
(ii) A family member of a person described in (i) above?	11g(ii)		
(iii) A 35% controlled entity of a person described in (i) or (ii) above?	11g(iii)		

h Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document? Yes	No	(v) Did you notify the organization in col. (i) of your support? Yes	No	(vi) Is the organization in col. (i) organized in the U.S.? Yes	No	(vii) Amount of monetary support
(A)									
(B)									
(C)									
(D)									
(E)									
Total									

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Part II **Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 **Total.** Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4.						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11 **Total support.** Add lines 7 through 10						

12 Gross receipts from related activities, etc. (see instructions) 12

13 **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) organization, check this box and **stop here** ▶ ☐

Section C. Computation of Public Support Percentage

14 Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f)) ..... 14 %

15 Public support percentage from 2011 Schedule A, Part II, line 14 ..... 15 %

16a **33 1/3% support test—2012.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

b **33 1/3% support test—2011.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

17a **10%-facts-and-circumstances test—2012.** 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 IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ ☐

b **10%-facts-and-circumstances test—2011.** 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 IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ ☐

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

Part III **Support Schedule for Organizations Described in Section 509(a)(2)**

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	772,445	792,150	1,688,236	1,133,757	1,149,446	5,536,034
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	1,685,834	1,706,317	2,163,517	2,248,423	2,392,080	10,196,171
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						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 **Total.** Add lines 1 through 5	2,458,279	2,498,467	3,851,753	3,382,180	3,541,526	15,732,205
7a Amounts included on lines 1, 2, and 3 received from disqualified persons	96,328	97,315	157,412	63,426	111,417	525,898
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	96,328	97,315	157,412	63,426	111,417	525,898
8 **Public support** (Subtract line 7c from line 6.)						15,206,307

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9 Amounts from line 6	2,458,279	2,498,467	3,851,753	3,382,180	3,541,526	15,732,205
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	34,957	22,911	48,768	48,387	46,599	201,622
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	34,957	22,911	48,768	48,387	46,599	201,622
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on				945		945
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 **Total support.** (Add lines 9, 10c, 11, and 12.)	2,493,236	2,521,378	3,900,521	3,431,512	3,588,125	15,934,772

14 **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) organization, check this box and **stop here** ▶ ☐

Section C. Computation of Public Support Percentage

15 Public support percentage for 2012 (line 8, column (f) divided by line 13, column (f))	15	95.43 %
16 Public support percentage from 2011 Schedule A, Part III, line 15	16	94.78 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for **2012** (line 10c, column (f) divided by line 13, column (f))	17	1 %
18 Investment income percentage from **2011** Schedule A, Part III, line 17	18	2 %

19a **33 1/3% support tests—2012.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☒

b **33 1/3% support tests—2011.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶ ☐

Part IV **Supplemental Information.** Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

4112 11/12/2012 9:22 AM

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 black lung benefit trust or private foundation)

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

OMB No. 1545-0047

2011

Open to Public Inspection

A For the 2011 calendar year, or tax year beginning 07/01/11 , and ending 06/30/12

B Check if applicable:
- [ ] Address change
- [ ] Name change
- [ ] Initial return
- [ ] Terminated
- [ ] Amended return
- [ ] Application pending

C Name of organization: SUN VALLEY SKI EDUCATION FOUNDATION INC

Doing Business As

Number and street (or P.O. box if mail is not delivered to street address): P.O. BOX 203 | Room/suite

City or town, state or country, and ZIP + 4: SUN VALLEY ID 83353-0203

D Employer identification number: 82-0264946

E Telephone number: 208-726-4129

G Gross receipts $ 4,802,436

F Name and address of principal officer:
RUFUS BROWN
P.O. BOX 6298
KETCHUM ID 83340

H(a) Is this a group return for affiliates? [ ] Yes [X] No

H(b) Are all affiliates included? [ ] Yes [ ] No
If "No," attach a list. (see instructions)

I Tax-exempt status: [X] 501(c)(3) [ ] 501(c) ( ) ◀ (insert no.) [ ] 4947(a)(1) or [ ] 527

J Website: ▶ SVSEF.ORG

H(c) Group exemption number ▶

K Form of organization: [X] Corporation [ ] Trust [ ] Association [ ] Other ▶

L Year of formation: 1966

M State of legal domicile: ID

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities:
See Schedule O

2 Check this box ▶ [ ] if the organization discontinued its operations or disposed of more than 25% of its net assets.

3 Number of voting members of the governing body (Part VI, line 1a)	3	12
4 Number of independent voting members of the governing body (Part VI, line 1b)	4	12
5 Total number of individuals employed in calendar year 2011 (Part V, line 2a)	5	108
6 Total number of volunteers (estimate if necessary)	6	600
7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
b Net unrelated business taxable income from Form 990-T, line 34	7b	0

	Prior Year	Current Year
Revenue		
8 Contributions and grants (Part VIII, line 1h)	1,688,236	1,133,757
9 Program service revenue (Part VIII, line 2g)	1,809,641	1,855,733
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	101,690	33,868
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	68,567	31,932
12 Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	3,668,134	3,055,290
Expenses		
13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	0	0
14 Benefits paid to or for members (Part IX, column (A), line 4)	0	0
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	1,187,900	1,209,184
16a Professional fundraising fees (Part IX, column (A), line 11e)	0	0
b Total fundraising expenses (Part IX, column (D), line 25) ▶ 183,928		
17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	1,765,472	1,674,162
18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	2,953,372	2,883,346
19 Revenue less expenses. Subtract line 18 from line 12	714,762	171,944
	Beginning of Current Year	**End of Year**
Net Assets or Fund Balances		
20 Total assets (Part X, line 16)	2,514,805	2,615,123
21 Total liabilities (Part X, line 26)	1,822	4,022
22 Net assets or fund balances. Subtract line 21 from line 20	2,512,983	2,611,101

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 | Date

▶ Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check [ ] if self-employed	PTIN
Linda P. Chambers		11/12/12		

Firm's name ▶ Becker, Chambers & Co., P.A. | Firm's EIN ▶

Firm's address ▶ PO Box 909 Hailey, ID 83333-0909 | Phone no. 208-788-9595

May the IRS discuss this return with the preparer shown above? (see instructions) [ ] Yes [ ] No

For Paperwork Reduction Act Notice, see the separate instructions.

DAA

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

▶ **Attach to Form 990 or Form 990-EZ.** ▶ **See separate instructions.**

OMB No. 1545-0047

2011

Open to Public Inspection

Name of the organization SUN VALLEY SKI EDUCATION FOUNDATION INC

Employer identification number 82-0264946

Part I 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 11, check only one box.)

1 [ ] A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**

2 [ ] A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E.)

3 [ ] A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4 [ ] A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: .....

5 [ ] An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)

6 [ ] A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 [ ] An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

8 [ ] A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

9 [X] An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)

10 [ ] An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**

11 [ ] 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 that describes the type of supporting organization and complete lines 11e through 11h.

a [ ] Type I **b** [ ] Type II **c** [ ] Type III–Functionally integrated **d** [ ] Type III–Other

e [ ] By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).

f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box ..... [ ]

g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

		Yes	No
(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?	11g(i)		
(ii) A family member of a person described in (i) above?	11g(ii)		
(iii) A 35% controlled entity of a person described in (i) or (ii) above?	11g(iii)		

h Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document? Yes	No	(v) Did you notify the organization in col. (i) of your support? Yes	No	(vi) Is the organization in col. (i) organized in the U.S.? Yes	No	(vii) Amount of support
(A)									
(B)									
(C)									
(D)									
(E)									
Total									

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Part II **Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 **Total.** Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 **Public support.** Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11 **Total support.** Add lines 7 through 10						

12 Gross receipts from related activities, etc. (see instructions) 12

13 **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) organization, check this box and **stop here** ▶ ☐

Section C. Computation of Public Support Percentage

14 Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f)) ..... 14 %

15 Public support percentage from 2010 Schedule A, Part II, line 14 ..... 15 %

16a **33 1/3% support test—2011.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

b **33 1/3% support test—2010.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

17a **10%-facts-and-circumstances test—2011.** 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 IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ ☐

b **10%-facts-and-circumstances test—2010.** 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 IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ ☐

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

Part III **Support Schedule for Organizations Described in Section 509(a)(2)**
(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	853,203	772,445	792,150	1,688,236	1,133,757	5,239,791
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	1,074,947	1,685,834	1,706,317	2,163,517	2,248,423	8,879,038
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						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 **Total.** Add lines 1 through 5	1,928,150	2,458,279	2,498,467	3,851,753	3,382,180	14,118,829
7a Amounts included on lines 1, 2, and 3 received from disqualified persons	114,875	96,328	97,315	157,412	63,426	529,356
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	114,875	96,328	97,315	157,412	63,426	529,356
8 **Public support** (Subtract line 7c from line 6.)						13,589,473

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9 Amounts from line 6	1,928,150	2,458,279	2,498,467	3,851,753	3,382,180	14,118,829
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	63,274	34,957	22,911	48,768	48,387	218,297
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	63,274	34,957	22,911	48,768	48,387	218,297
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on					945	945
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 **Total support.** (Add lines 9, 10c, 11, and 12.)	1,991,424	2,493,236	2,521,378	3,900,521	3,431,512	14,338,071

14 **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) organization, check this box and **stop here** ▶ ☐

Section C. Computation of Public Support Percentage

15	Public support percentage for 2011 (line 8, column (f) divided by line 13, column (f))	15	94.78 %
16	Public support percentage from 2010 Schedule A, Part III, line 15	16	93.74 %

Section D. Computation of Investment Income Percentage

17	Investment income percentage for **2011** (line 10c, column (f) divided by line 13, column (f))	17	2 %
18	Investment income percentage from **2010** Schedule A, Part III, line 17	18	2 %

19a **33 1/3% support tests—2011.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☒

b **33 1/3% support tests—2010.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶ ☐

Part IV **Supplemental Information.** Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).