Form **990**

Department of the Treasury

Return of Organization Exempt From Income Tax

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

U Do not enter Social Security numbers on this form as it may be made public.
 U Information about Form 990 and its instructions is at www.irs.gov/form990.

2013
Open to Public Inspection

OMB No. 1545-0047

09/01/13 For the 2013 calendar year, or tax year beginning , and ending 08/31/14Employer identification number C Name of organization Check if applicable: X Address change BRIDGES TO PROSPERITY, INC. Doing Business As 54-2031102 Name change Number and street (or P.O. box if mail is not delivered to street address) Room/suite Telephone number Initial return 1031 33RD STREET 235 720-460-1046 Terminated City or town, state or province, country, and ZIP or foreign postal code DENVER 80205 2,881,441 Amended return CO G Gross receipts \$ Name and address of principal officer: Application pending H(a) Is this a group return for subordinates? ELIE HOMSI 1031 33RD STREET, #235 H(b) Are all subordinates included? CO 80205 **DENVER** If "No," attach a list. (see instructions X 501(c)(3) 4947(a)(1) or 501(c) () t (insert no.) WWW.BRIDGESTOPROSPERITY.ORG Website: U H(c) Group exemption number ${f u}$ X Corporation Trust Year of formation: 2001 CO Form of organization: Association Other **u** M State of legal domicile: Summary 1 Briefly describe the organization's mission or most significant activities: ... BRIDGES TO PROSPERITY WORKS WITH ISOLATED COMMUNITIES TO CREATE ACCESS TO Activities & Governance ESSENTIAL HEALTHCARE, EDUCATION, AND ECONOMIC ACTIVITIES BY BUILDING FOOTBRIDGES OVER IMPASSABLE RIVERS. 2 Check this box u | 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) 18 4 Number of independent voting members of the governing body (Part VI, line 1b) 18 5 Total number of individuals employed in calendar year 2013 (Part V, line 2a) 5 5 6 Total number of volunteers (estimate if necessary) 441 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 Current Year 8 Contributions and grants (Part VIII, line 1h) 2,852,763 2,815,574 9 Program service revenue (Part VIII, line 2g) 22,327 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 1,710 2,530 7,839 41,010 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 2,862,312 2,881,441 12 Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12) 0 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 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) 230,380 280,548 16a Professional fundraising fees (Part IX, column (A), line 11e) **b** Total fundraising expenses (Part IX, column (D), line 25) ${f u}$ 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 2,373,998 2,363,179 2,604,378 2,643,727 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 257,934 237,714 **19** Revenue less expenses. Subtract line 18 from line 12 Beginning of Current Year 5 473,210 848,819 20 Total assets (Part X, line 16) 21 Total liabilities (Part X, line 26) 22,776 160,671 Met 688,148 22 Net assets or fund balances. Subtract line 21 from line 20 450,434 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. Sian Signature of officer Here ELIE HOMSI BOARD OF DIRECTORS CHAIR Type or print name and title Print/Type preparer's name Preparer's signature Check Paid ROBERT E. FABRY, CPA 06/09/15 P00757821 **Preparer** BAUERLE AND 84-0817888 COMPANY, Firm's name Firm's EIN } **Use Only** 7887 E BELLEVIEW AVE STE 303-759-0089 DENVER, CO 80111-6021 May the IRS discuss this return with the preparer shown above? (see instructions) X Yes No

Pa	rt III		nent of P if Schedu						ne in th	is Part III					<u> </u>
B E	RIDGE SSENT	S TO	e organization PROSP HEALTH OVER	ERITY CARE,	WORKS EDUCA	TION,	AND	ECON	OMIC	ACTIV	ITIES		BUILI	DING	
2	prior Forr	m 990 or	n undertake 990-EZ? hese new se				ŭ	•						🗆	Yes X No
3	-	organizatio	n cease cor	nducting, or		ificant chai									Yes X No
4	Describe expenses	the orgars. Section	hese change nization's pro 501(c)(3) ar , and revenu	ogram servi	ce accompl) organizatio	ons are re	quired to re	eport the a	•	•					
T R T O	RECTI EFLEC O OUF HE FI VERWH PERAT	RGANII ING FO TED I R ORG ISCAL IELMIN IONS	OOTBRI IN THI ANIZAT YEAR NG AMO , \$21, R FUNI	IS BI DGES S RET ION AI ENDED UNT OI 245 DO RAISI	IN FOR URN, V ND REI AUGUS F \$1,0 ONATED	IG, HAREIGN WE ACPORT 1 ST 31 1027,90 10 SERV	AS COM COUNT CUMULA HERE T , 2014 05 IS VICES	PLETE RIES. ATE T THAT TO RELAT FOR	ED OR IN OTAL TOTAL TALED TED T ADMIN	ADDIT: VOLUN IN-K \$1,0 O OUR	N THI ION T TEER IND 69,27 PRO IION	HOURS	NING CAS CON D SI WHIC ERVI	SH RENTRIBERVICH THE	UTED ES FOR E &
4b															
4c	(Code:) (Expenses	s \$			including g	rants of \$) (Revenue	\$)
	·														
4d	•	-	vices. (Desc	ribe in Sch	,	arant f	Ф.) /D					
	(Expense		vice expense	es u	2 .	grants of 419,1	.09) (Revenu	ic ⊅)	

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	_X_	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			l
	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		X
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,			l
	Part III	5		X
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			l
	"Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			l
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7_		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			l
	complete Schedule D, Part III	8		X
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			l
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			l
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a	_X_	
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		X
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more			٠,,
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets	l		٦,
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		v	
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		v	
	Schedule D, Parts XI and XII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if	401		
40	the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	v	X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	X	
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		v	
45	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	X	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	4.5		.
40	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other	40		
47	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
40	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			.
40	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			.
00	If "Yes," complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
<u>b</u>	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)

			Yes	No
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? If "Yes," complete Schedule I, Parts I and II	21		X
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? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		X
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? If so, complete Schedule L, Part II	26		X
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? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		X
С	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? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,			
	or IV, and Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
	19? Note. All Form 990 filers are required to complete Schedule O	38	X	

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 14 Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 0 b Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? X 1c 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 If at least one is reported on line 2a, did the organization file all required federal employment tax returns? X Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) X Did the organization have unrelated business gross income of \$1,000 or more during the year? If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O 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 Х account)? If "Yes," enter the name of the foreign country: **u** b See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? ... X Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? X b If "Yes" to line 5a or 5b, did the organization file Form 8886-T? Does the organization have annual gross receipts that are normally greater than \$100,000, and did the 6a organization solicit any contributions that were not tax deductible as charitable contributions? X If "Yes," did the organization include with every solicitation an express statement that such contributions or b gifts were not tax deductible? Organizations that may receive deductible contributions under section 170(c). 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? X If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was X required to file Form 8282? If "Yes," indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? X 7e X Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? h Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting 8 organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? Sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 4966? Did the organization make a distribution to a donor, donor advisor, or related person? b Section 501(c)(7) organizations. Enter: 10 Initiation fees and capital contributions included on Part VIII, line 12 10a Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities b Section 501(c)(12) organizations. Enter: 11 Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 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. Is the organization licensed to issue qualified health plans in more than one state? 13a Note. See the instructions for additional information the organization must report on Schedule O. **b** Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans Enter the amount of reserves on hand X Did the organization receive any payments for indoor tanning services during the tax year? 14h If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

Section A. Governing Body and Management

Part VI

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI

- 1	 1

				_		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	18				
	If there are material differences in voting rights among members of the governing body, or						
	if the governing body delegated broad authority to an executive committee or similar						
	committee, explain in Schedule O.						
b	Enter the number of voting members included in line 1a, above, who are independent	1b	18				
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		X
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?			L	3		_X_
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?				4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?				5		X
6	Did the organization have members or stockholders?			L	6		X
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?			L	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,						
	stockholders, or persons other than the governing body?			L	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year b						
а	The governing body?			L	8a	Х	
b	Each committee with authority to act on behalf of the governing body?			L	8b	X	
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		X
<u>Sec</u>	tion B. Policies (This Section B requests information about policies not required by the Inter-	nal Re	evenue	<u>Code</u>	.)		
				_		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			🗠	I0a		X
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?				l0b		<u> </u>
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the	form?		L	11a	Х	
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				I2a	X	<u> </u>
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to	conflic	ts?	🗠	I2b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"						
	describe in Schedule O how this was done				I2c	X	<u> </u>
13	Did the organization have a written whistleblower policy?			· · · · ·	13	X	
14	Did the organization have a written document retention and destruction policy?				14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by						1
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?				_	77	
а	The organization's CEO, Executive Director, or top management official				15a	Х	37
b	Other officers or key employees of the organization			🗠	15b		X
40-	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				166		v
L	with a taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			<u>F</u>	16a		X
b	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the						
					I.C.L.		
Sec	organization's exempt status with respect to such arrangements?				16b		
17	List the states with which a copy of this Form 990 is required to be filed u VA,CO						
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c	 \(3\e 0	oly)				
	available for public inspection. Indicate how you made these available. Check all that apply.	_{/(} 0/3 0	·· y /				
	Own website Another's website X Upon request Other (explain in Schedule O)						
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest	ooliev -	and				
.,	financial statements available to the public during the tax year.	Joney, (uilu				
20	State the name, physical address, and telephone number of the person who possesses the books and records of the						
_0	organization: u THE ORGANIZATION 1031 33RD STREET, S		235				
DI	ENVER CO 8020			720-	460	0-1	046

Form 990 (2013)	BRIDGES	TO	PROSPERITY,	INC.
FUIIII 990 (2013)			T MODI DIVITIE	T110

4 –				

Page 7

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, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Check this box if neither the organization nor any related organizations compensated any current officer, director, or trustee.

		_					_			_
(A) Name and Title	(B) Average hours per week (list any	bo	x, unle	ess pe	ition more rson i	than one s both a or/trustee	n	(D) Reportable compensation from the	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(1) ELIE HOMSI										
	2.00									
BOARD CHAIR	0.00	x		x				0	0	0
(2) BOB SOWELL										
•	2.00									
BOARD TREASURER	0.00	x		x				0	0	0
(3) MELODY PICKETT										
(-)	2.00									
BOARD SECRETARY	0.00	x		x				0	0	0
(4) PAUL DRISCOLL		 								
(.,	2.00									
BOARD MEMBER	0.00	x						0	0	0
(5) KEN FRANTZ		 								
(0)	2.00									
BOARD MEMBER	0.00	x						0	0	0
(6) ALVIN GARRISON	0.00	 						·	- J	
(0)1-1-11	2.00									
BOARD MEMBER	0.00	x						0	o	0
(7) MARIA GIBBS	0.00	1							•	
(/)IIIICIII GIBBB	2.00									
BOARD MEMBER	0.00	$ \mathbf{x} $						0	o	0
(8) PAX GOODSON	0.00	122								
(0) I PAR GOODBON	2.00									
BOARD MEMBER	0.00	x						0	o	0
(9) KEN HODGE	0.00	122								
(9) KEN HODGE	2.00									
BOARD MEMBER	0.00	x						0	o	0
(10) JENNA KUSMIEREK	0.00	122								
(10) O ENTIFICE R	2.00									
BOARD MEMBER	0.00	x						0	0	0
(11) SCOTT MCNARY	0.00	1								
(, bcoll months)	2.00									
BOARD MEMBER	0.00	x						0	o	0
DAA PIEFIBER		42		<u> </u>				<u> </u>	<u> </u>	Form 990 (2013)

Part VII

(A) Name and title	(B) Average hours per week (list any	bo	x, unle	Pos check ess pe	rson i	than o s both or/truste	an	(D) Reportable compensation from the	(E) Reportable compensation from related organizations	coi	(F) Estimated amount of other compensation from the		
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	or a	rganization and related ganizations	l	
(12) MIREK OLMER	2.00												
BOARD MEMBER	2.00	x						0	0			0	
(13) STEVE ORMSBY													
	2.00												
BOARD MEMBER	0.00	Х						0	0			0	
(14) MIKE PADDOCK	2.00												
BOARD MEMBER	0.00	x						0	0			0	
(15) LARRY COHEN													
	2.00								_				
BOARD MEMBER	0.00	Х						0	0			0	
(16) CHRIS RESEIGH	2.00												
BOARD MEMBER	0.00	x						0	0			0	
(17) LOU STOVER													
	2.00								_				
BOARD MEMBER	0.00	X						0	0			0	
(18) AMY FLOREN	2.00												
BOARD MEMBER	0.00	x						0	0			0	
(19) AVERY BANG													
	40.00												
CEO	0.00			X				86,937 86,937	0		4	187 187	
1b Sub-total		ectic	Δ					80,937				1,10/	
d Total (add lines 1b and 1c)							u	86,937			4	187	
2 Total number of individuals (inc	-		_	ose	listed	d abo	ve)	who received more than \$10	00,000 in				
reportable compensation from	the organization	u_	0								Ye	es No	
3 Did the organization list any for													
employee on line 1a? If "Yes," 4 For any individual listed on line	complete Schedu	ile J	for s	uch	indiv	idual	ion	and other companyation from			3	X	
organization and related organi									ii uie				
individual											4	X	
5 Did any person listed on line 1st for services rendered to the org											5	х	
Section B. Independent Contracto								•					
1 Complete this table for your five compensation from the organization.													
	(A) business address	ipen	Salio	11 101	uic	Calci	luai		(B) ion of services		(C Compe)	
Name and	DUSINESS AUGIESS							Descript	ion of services		Compe	ISduon	
							\vdash						
2 Total number of independent of	ontractors (includ	ing h	ut n	ot lie	nitod	to th	000	listed above) who		-			
received more than \$100,000 c							-	iloted above) WIIO	•				

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

Form 990 (2013) BRIDGES TO PROSPERITY, INC. 54-2031102 Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (A) (B) Related or (D) Revenue excluded from tax exempt husiness function revenue 512-514 revenue 1a Federated campaigns 1,467 1a **b** Membership dues 1b **c** Fundraising events 1c d Related organizations 1d e Government grants (contributions) f All other contributions, gifts, grants, and similar amounts not included above 2,814,107 \$ 1,442,295 g Noncash contributions included in lines 1a-1f: h Total. Add lines 1a-1f . 2,815,574 u Program Service Revenue Busn. Code 900099 14,327 14,327 REGISTRATIONS AND FEES 900099 8,000 8,000 ENGINEERING SERVICES f All other program service revenue 22,327 g Total. Add lines 2a-2f Investment income (including dividends, interest, and other similar amounts) 2,530 2,530 u Income from investment of tax-exempt bond proceeds $\, \mathbf{u} \,$ Royalties (ii) Personal 6a Gross rents **b** Less: rental exps. c Rental inc. or (loss) d Net rental income or (loss) 7a Gross amount from (ii) Other (i) Securities sales of assets other than inventory **b** Less: cost or other basis & sales exps. c Gain or (loss) d Net gain or (loss) **8a** Gross income from fundraising events Other Revenue (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18 **b** Less: direct expenses b c Net income or (loss) from fundraising events 9a Gross income from gaming activities. See Part IV, line 19 **b** Less: direct expenses b c Net income or (loss) from gaming activities u 10a Gross sales of inventory, less returns and allowances **b** Less: cost of goods sold b c Net income or (loss) from sales of inventory u Miscellaneous Revenue Busn. Code 900099 41,010 41,010 11a OTHER INCOME

> 41,010 2,881,441

63,337

2,530

d All other revenue

12 Total revenue. See instructions. ...

e Total. Add lines 11a–11d

Form 990 (2013)

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 (A) Total expenses (B) Program service (C) Management and (D) Fundraising Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21 Grants and other assistance to individuals in the U.S. See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees 104,772 84,593 20,179 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salaries and wages 154,414 113,086 24,141 17,187 Pension plan accruals and contributions (include 6,120 5,340 471 309 section 401(k) and 403(b) employer contributions) Other employee benefits 5,017 2,622 1,635 760 9 10,225 6,392 2,518 Payroll taxes 1,315 10 Fees for services (non-employees): a Management 6,644 13,667 7,023 b Legal 37,928 12,820 25,108 c Accounting Professional fundraising services. See Part IV, line 17 Investment management fees **g** Other. (If line 11g amount exceeds 10% of line 25, column 1,773 (A) amount, list line 11g expenses on Schedule O.) 86,549 76,043 8,733 6,689 22,006 7,829 7,488 12 Advertising and promotion 27,972 9,831 17,841 300 13 Office expenses Information technology 14 Royalties 15 30,527 23,039 7,488 16 Occupancy 70,996 70,733 212 51 Travel 17 Payments of travel or entertainment expenses for any federal, state, or local public officials 47,312 Conferences, conventions, and meetings 45,932 540 840 19 20 Payments to affiliates 21 11,776 Depreciation, depletion, and amortization 10,513 1,263 Insurance 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.) 1,342,037 1,300,338 21,575 20,124 DONATED MATERIALS/LABOR FIELD LABOR 292,417 289,339 3,078 204,660 204,660 BRIDGE BUILDING SUPPLIES 84,859 84,859 REIMBURSED COSTS d 25,599 e All other expenses 90,473 64,837 37 2,643,727 2,419,109 166,909 57,709 25 Total functional expenses. Add lines 1 through 24e . 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 **u** following SOP 98-2 (ASC 958-720)

Pa	art X	Balance Sheet					
		Check if Schedule O contains a response or no	te to any line in th	is Part X			
					(A) Beginning of year		(B) End of year
	1	Cash—non-interest bearing			283,642	1	21,322
	2	Savings and temporary cash investments			-	2	153,643
	3	Pledges and grants receivable, net			187,246	3	414,969
	4	Accounts receivable, net		l	•	4	•
	5	Loans and other receivables from current and former					
		trustees, key employees, and highest compensated e	•	,			
		Complete Part II of Schedule I				5	
	6	Loans and other receivables from other disqualified p					
		4958(f)(1)), persons described in section 4958(c)(3)(E					
		sponsoring organizations of section 501(c)(9) volunta		• • •			
s		organizations (see instructions). Complete Part II of S				6	
Assets	7	Notes and loans receivable, net		7			
As		Inventories for sale or use		8	135,151		
	9	Dropoid avanage and deferred shares				9	30,539
		Land, buildings, and equipment: cost or					
		other basis. Complete Part VI of Schedule D	10a	72,176			
	b	Less: accumulated depreciation	10b	15,902	2,322	10c	56,274
	11	Investments—publicly traded securities				11	
	12	Investments—other securities. See Part IV, line 11				12	
	13	Investments—program-related. See Part IV, line 11				13	
	14	Intangible assets				14	
	15	Other assets Cas Dart IV line 44		·····		15	36,921
	16	Total assets. Add lines 1 through 15 (must equal line			473,210	16	848,819
	17	Accounts payable and accrued expenses			22,776	17	137,706
	18	Grants payable				18	
	19	Deferred revenue			19	22,965	
	20	Tax-exempt bond liabilities				20	•
	21	Escrow or custodial account liability. Complete Part IV	/ of Schedule D			21	
		Loans and other payables to current and former office					
Liabilities		trustees, key employees, highest compensated employees					
iliq		disqualified persons. Complete Part II of Schedule L				22	
Ë	23	Secured mortgages and notes payable to unrelated the	alast as a still a			23	
		Unsecured notes and loans payable to unrelated third				24	
		Other liabilities (including federal income tax, payables					
		parties, and other liabilities not included on lines 17-2					
		of Schedule D	, ,			25	
	26	Total liabilities. Add lines 17 through 25			22,776	26	160,671
		Organizations that follow SFAS 117 (ASC 958), cl		X and	_		•
es		complete lines 27 through 29, and lines 33 and 34	_	_			
nc	27	Unrestricted net assets			347,183	27	91,883
3ala	28	T 1 12. t. 1 t t.			103,251	28	596,265
ρ	29	B d C. d l d d.			-	29	•
Ξ		Organizations that do not follow SFAS 117 (ASC					
Net Assets or Fund Balances		complete lines 30 through 34.					
ets	30					30	
Ass	31	Paid-in or capital surplus, or land, building, or equipm				31	
et	32	Retained earnings, endowment, accumulated income,				32	
Z		T. (al., at a contract of a 11 alone of			450,434	33	688,148
	34	Total liabilities and net assets/fund balances			473,210	34	848,819

Pa	art XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	2,8	81,4	$4\overline{41}$
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,6	43,	<u> 727</u>
3	Revenue less expenses. Subtract line 2 from line 1	3	2	37,	<u>714</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	4	50,	<u>434</u>
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10	6	88,	148
Pa	art XII Financial Statements and Reporting				_
	Check if Schedule O contains a response or note to any line in this Part XII				oxdot
				Yes	No
1	Accounting method used to prepare the Form 990:				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in				
	Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				
	reviewed on a separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a				
	separate basis, consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight				
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in				
	Schedule O.				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in				1
	the Single Audit Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		3b		

Form **990** (2013)

SCHEDULE A

(Form 990 or 990-EZ)

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.

u Attach to Form 990 or Form 990-EZ.

2013

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

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

BRIDGES TO PROSPERITY, INC. Employer identification number

54-2031102

Pa	art i	Reas	on for Public Charity	Status (All organizations i	must co	mpiete	tnis pa	rt.) Se	e instr	uctions	3.			
The	orgar	nization is not a	a private foundation because	it is: (For lines 1 through 11, che	ck only o	ne box.)								
1	Ш	A church, cor	nvention of churches, or asso	ciation of churches described in	section '	170(b)(1)(A)(i).							
2		A school desc	cribed in section 170(b)(1)(A	A)(ii). (Attach Schedule E.)										
3		A hospital or	a cooperative hospital service	e organization described in secti	ion 170(b)(1)(A)(iii)	-							
4		A medical res	search organization operated	in conjunction with a hospital des	scribed in	section	170(b)(1)(A)(iii).	Enter th	ne hospi	tal's na	me,		
		city, and state	э:											
5		An organization	on operated for the benefit of	a college or university owned or	operated	by a gove	ernmenta	al unit de	scribed	in				
		section 170	(b)(1)(A)(iv). (Complete Part I	I.)										
6		A federal, sta	te, or local government or go	vernmental unit described in sec	ction 170	(b)(1)(A)(v	/).							
7	X	An organization	on that normally receives a su	ubstantial part of its support from	a govern	mental un	it or fron	n the ger	neral pu	ıblic				
		described in	section 170(b)(1)(A)(vi). (Co	mplete Part II.)										
8		A community	trust described in section 1	70(b)(1)(A)(vi). (Complete Part II	.)									
9		An organization	on that normally receives: (1)	more than 33 1/3% of its suppo	rt from co	ntributions	, memb	ership fe	es, 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	he organization after June 30,	1975. See section 509(a)(2). (Complete	Part III.)								
10	Ш	An organization	on organized and operated ex	clusively to test for public safety	. See sec	tion 509(a)(4).							
11	Ш	An organization	on organized and operated ex	clusively for the benefit of, to per	rform the	functions (of, or to	carry out	t the					
		purposes of c	one or more publicly supported	d organizations described in sec	tion 509(a)(1) or se	ction 509	9(a)(2). S	See sec	tion				
		509(a)(3). Ch	neck the box that describes th	e type of supporting organization	and com	plete lines	11e thr	ough 11l	h.					
	_	a Type	I b Type II	c Type III–Functiona	ally integra	ated	d	Туре	e III–No	on-functio	onally i	ntegrate	∍d	
е	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		-		nination from the IRS that it is a	Type I, Ty	/pe II, or T	ype III s	supporting	g					
		•	check this box											Ш
g		Since August	17, 2006, has the organization	on accepted any gift or contribution	on from ar	ny of the								
		following per												_
			•	trols, either alone or together wit	•								Yes	No
				supported organization?								11g(i)	<u> </u>	
			member of a person describe	***************************************								11g(ii)	<u> </u>	
			controlled entity of a person de	******								11g(iii)	<u> </u>	
h			following information about the		Tax		() =							
(i		e of supported ganization	(ii) EIN	(iii) Type of organization (described on lines 1–9		organization sted in your	. , ,	ou notify nization in	(VI) organizati	ls the on in col.	(vii)	Amount o supp		ary
	Org	gar ii zadori		above or IRC section	1,7	document?	col. (i)	of your	(i) organi	zed in the		очрр	<i>,</i> 100	
				(see instructions))	V		supp		U.:					
/A\					Yes	No	Yes	No	Yes	No				
(A)														
(B)														
٠,														
(C)														
,														
(D)														
(E)														
Tota														
ı Uld	<u> </u>													

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

Schedule A (Form 990 or 990-EZ) 2013

Page 2

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

Sec	tion A. Public Support				•	,	
Caler	ndar year (or fiscal year beginning in) u	(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.")	313,708	1,636,810	2,133,577	2,852,763	2,815,574	9,752,432
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	313,708	1,636,810	2,133,577	2,852,763	2,815,574	9,752,432
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)						155,513
6	Public support. Subtract line 5 from line 4.						9,596,919
	tion B. Total Support	() 0000	(1) 2242	() 2044	/ N 20/2	() 0040	(0 T : 1
	ndar year (or fiscal year beginning in) u	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7	Amounts from line 4	313,708	1,636,810	2,133,577	2,852,763	2,815,574	9,752,432
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	5,565	5,277	1,759	1,710	2,530	16,841
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.)		5,529	695	7,839	41,010	55,073
11	Total support. Add lines 7 through 10						9,824,346
12	Gross receipts from related activities, etc. (see instructions)				12	63,337
13	First five years. If the Form 990 is for the	organization's first,	second, third, fourth	n, or fifth tax year a	s a section 501(c)(3)	
	organization, check this box and stop here						▶
Sec	tion C. Computation of Public Su						
14	Public support percentage for 2013 (line 6,	column (f) divided b	y line 11, column (f))		14	97.69 %
15	Public support percentage from 2012 Scheo	lule A, Part II, line 1	14				97.96%
16a	33 1/3% support test—2013. If the organization qualification qualification and stop here. The organization qualification qualification qualification are supported by the content of t					ck this	▶ X
b	33 1/3% support test—2012. If the organize check this box and stop here. The organize						▶ □
17a	10%-facts-and-circumstances test—201						
	10% or more, and if the organization meets						
	Part IV how the organization meets the "factorganization"		ŭ	•	. ,		▶ □
b	10%-facts-and-circumstances test—201						L
-	15 is 10% or more, and if the organization	· ·			·	-	
	Explain in Part IV how the organization med	ets the "facts-and-ci	rcumstances" test.	The organization q	ualifies as a public	•	▶ □
18	supported organization Private foundation. If the organization did	not check a box on	line 13 16a 16h	17a or 17h check	this hox and see		, _
.5	instructions						▶ □

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.)

Sec	tion A. Public Support	quanty arraior in	To toolo notou i	below, please c	ompioto i art ii	•/	
	ndar year (or fiscal year beginning in) u	(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	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						
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						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
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						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c from						
<u></u>	line 6.)						
	tion B. Total Support ndar year (or fiscal year beginning in) u	(=) 0000	(h) 0040	(=) 0044	(4) 0040	(-) 0040	(f) T-4-1
	, , , , , , , , , , , , , , , , , , ,	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)						
14	First five years. If the Form 990 is for the	organization's first,	second, third, four	th, or fifth tax year a	as a section 501(c)	(3)	
	organization, check this box and stop here						>
Sec	tion C. Computation of Public Su	• •					
15	Public support percentage for 2013 (line 8,	column (f) divided	by line 13, column	(f))		15	%
16	Public support percentage from 2012 Sched						%
	tion D. Computation of Investme						
17	Investment income percentage for 2013 (lin			column (f))			%_
18	Investment income percentage from 2012						<u>%</u>
19a	33 1/3% support tests—2013. If the organ						. □
I-	17 is not more than 33 1/3%, check this box	•					▶ ∟
b	33 1/3% support tests—2012. If the organ line 18 is not more than 33 1/3%, check this						▶ □
20	Private foundation. If the organization did						······ [-

Schedule A	(Form	990 or 990)-EZ) 2(013	BR:	IDGI	ES '	TO	PRO	SPE	RITY,	IN	C.		54	-203	1102	2	ı	Page 4
Part IV	S	uppleme	ental	Info	rmati	ion. F	Provid	de th	е ехр	lanati	ons req	uired	by Part I	I, line 10	0; Part	II, line	e 17a	or 17b	; and	
	Р	art III, lin	e 12.	Als	o com	nplete	this	part	for a	ny ad	ditional	inforn	nation. (S	See instr	ruction	s).				
PART	II,	LINE	10	. 	OTH	ER	INC	OME	DE	TAII										
											}	5.	5,073							
•																				
•																				
•																				
•																				
•																				
•																				
•																				
•																				
• • • • • • • • • • • • • • • • • • • •																				
• • • • • • • • • • • • • • • • • • • •																				

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements u Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. u Attach to Form 990.

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

OMB No. 1545-0047 Open to Public Inspection

Name of the organization Employer identification number

Bl	RIDGES TO PROSPERITY, INC.		54-2031102
	rt I Organizations Maintaining Donor Advised Fun Complete if the organization answered "Yes" to Fo	ds or Other Similar Funds or A	ccounts.
	<u> </u>	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	A consistent of a set of the late of the set	I	
5	Aggregate value at end of year		
5	funds are the organization's property, subject to the organization's exclus		Yes No
6	Did the organization inform all grantees, donors, and donor advisors in wi		Tes No
U	only for charitable purposes and not for the benefit of the donor or donor		
	conferring impermissible private benefit?		Yes No
Pa	rt II Conservation Easements.		
	Complete if the organization answered "Yes" to Fe	orm 990, Part IV, line 7.	
1	Purpose(s) of conservation easements held by the organization (check al	I that apply).	
	Preservation of land for public use (e.g., recreation or education)	Preservation of an historically imp	ortant land area
	Protection of natural habitat	Preservation of a certified historic	structure
	Preservation of open space	_	
2	Complete lines 2a through 2d if the organization held a qualified conserva	ation contribution in the form of a conserva-	tion
	easement on the last day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		
С	Number of conservation easements on a certified historic structure include	ed in (a)	2c
d	Number of conservation easements included in (c) acquired after 8/17/06		
	historia atmostras listad in the National Deviates	·	2d
3	Number of conservation easements modified, transferred, released, exting		
-	tax year u	g ,	3
4	Number of states where property subject to conservation easement is loc	cated u	
5	Does the organization have a written policy regarding the periodic monitor		
Ŭ	violations, and enforcement of the conservation easements it holds?	• .	☐ Yes ☐ No
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcin		
٠		g conservation casements during the year	
7	Amount of expenses incurred in monitoring, inspecting, and enforcing con	eservation easements during the year	
•		iscivation casements during the year	
8	Does each conservation easement reported on line 2(d) above satisfy the	requirements of section 170/b)(4)(P)	
0	(i) and section 170(h)(4)(B)(ii)?	e requirements of section (70(f)(4)(b)	☐ Yes ☐ No
•		to in its revenue and evenue statement of	
9	In Part XIII, describe how the organization reports conservation easemen balance sheet, and include, if applicable, the text of the footnote to the or	•	
	organization's accounting for conservation easements.	rganization's infancial statements that descri	ribes trie
Pa	rt III Organizations Maintaining Collections of Art,	Historical Treasures or Other S	Similar Assets
	Complete if the organization answered "Yes" to Fo		
1a	If the organization elected, as permitted under SFAS 116 (ASC 958), not	to report in its revenue statement and bala	ance sheet
	works of art, historical treasures, or other similar assets held for public ex		
	public service, provide, in Part XIII, the text of the footnote to its financial		
b	If the organization elected, as permitted under SFAS 116 (ASC 958), to r		sheet
-	works of art, historical treasures, or other similar assets held for public ex	•	
	public service, provide the following amounts relating to these items:	, , , , , , , , , , , , , , , , , , , ,	
	(i) Revenues included in Form 990, Part VIII, line 1		u \$
	(ii) Assets included in Form 990, Part X		u \$
2	If the organization received or held works of art, historical treasures, or of		
_	following amounts required to be reported under SFAS 116 (ASC 958) re		0 410
•		•	\$
a h	Revenues included in Form 990, Part VIII, line 1 Assets included in Form 990, Part X		u \$ u \$
J	, 100010 monado m i omi odo, i alt A		• Ψ

Pa	art III Organizations Maintaining (Collections of	Art, Historical T	reasures, o	r Other Simila	ar Assets	(conti	nuec	d)	,
3	Using the organization's acquisition, accession,	and other records,	check any of the follo	wing that are a	significant use of	its	•			
	collection items (check all that apply):	_								
а	Public exhibition	d	Loan or exchange pr	rograms						
b	Scholarly research	е 🔛	Other							
С	Preservation for future generations									
4	Provide a description of the organization's collect	ctions and explain h	now they further the c	rganization's ex	empt purpose in F	Part				
	XIII.									
5	During the year, did the organization solicit or re		•	·						
_	assets to be sold to raise funds rather than to b		art of the organization'	s collection?			Ц	Yes		No
Pa	ert IV Escrow and Custodial Arra		4- F 000 D-	t IV / II: 0			-			
	Complete if the organization a	answered res	to Form 990, Pa	irt IV, iine 9,	or reported ar	i amount c	on For	m		
4-	990, Part X, line 21.									
1a	Is the organization an agent, trustee, custodian		•					V		N
	included on Form 990, Part X?						Ш	Yes	Ш	No
D	If "Yes," explain the arrangement in Part XIII and	a complete the folio	owing table:				Amo			_
	Decimina halana					4.	AIIIC	uni		_
	Beginning balance					1c				_
a	Additions during the year					1d				_
_	Distributions during the year					1e				_
f 20	Ending balance					1f			П	
	Did the organization include an amount on Form If "Yes," explain the arrangement in Part XIII. Ch							Yes	Н	No
	irt V Endowment Funds.	ieck fiere ii tife exp	nariation has been pro	ovided in Part Ai	····					
16	Complete if the organization a	answered "Ves"	to Form 990 Pa	rt IV line 10	1					
	Complete ii tile organization a	(a) Current year	(b) Prior year	(c) Two year		ree years back	(e)	Four year	ars bar	ck
1a	Beginning of year balance	(a) canoni you	(2) you	(6) 1110 year	(2)	Too youro buon	+ (6)	,	4.0 54.	-
	Contributions									
	Net investment earnings, gains, and									
·	losses									
d	Grants or scholarships									
	Other expenditures for facilities and									
·	programs									
f	Administrative expenses									
	End of year balance									
2	Provide the estimated percentage of the current	vear end balance	(line 1g. column (a)) I	neld as:	'		_			
а	Board designated or quasi-endowment u	•	(
	Permanent endowment u %									
С	Temporarily restricted endowment u	%								
	The percentages in lines 2a, 2b, and 2c should									
3a	Are there endowment funds not in the possession		on that are held and	administered for	the					
	organization by:	_						Y	es	No
	(i) unrelated organizations						3a	(i)		
	(ii) related organizations							ii)		
b	If "Yes" to 3a(ii), are the related organizations lis	sted as required on	Schedule R?				3	o		
4	Describe in Part XIII the intended uses of the o									
Pa	rt VI Land, Buildings, and Equip	ment.								
	Complete if the organization a	answered "Yes"	to Form 990, Pa	rt IV, line 11	a. See Form 9	990, Part X	(, line	10.		
	Description of property	(a) Cost or other	basis (b) Cost of	or other basis	(c) Accumulate	d	(d) B	ook valu	ıe	
		(investment)	(c	ther)	depreciation					
1a	Land									
b	Buildings									
С	Leasehold improvements									
	Equipment			9,076		,389			3,6	
е	Other			63,100	10	,513			2,5	
Total	 Add lines 1a through 1e. (Column (d) must equ 	al Form 990 Part 3	X column (B) line 10	(c))		11		56	. 2	74

	orm 990) 2013 BRIDGES TO PROSPERITY	, INC.	54-2031102	Page
Part VII	Investments—Other Securities. Complete if the organization answered "Yes" to I	Form 990, Part IV, line	11b. See Form 990, Pa	ırt X, line 12.
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of Cost or end-of-yea	
(1) Financial o	derivatives			
(2) Closely-hel	d equity interests			
(2) Other				
(A)				
(B)				
(. 9)				
	ı (b) must equal Form 990, Part X, col. (B) line 12.) u			
Part VIII	Investments—Program Related.			
	Complete if the organization answered "Yes" to I	Form 990, Part IV, line	11c. See Form 990, Pa	rt X, line 13.
	(a) Description of investment	(b) Book value	(c) Method of	
			Cost or end-of-year	ar market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(9)				
	(b) must equal Form 990, Part X, col. (B) line 13.) u			
Part IX	Other Assets.	•	•	
	Complete if the organization answered "Yes" to	Form 990, Part IV, line	11d. See Form 990, Pa	·
(4)	(a) Description			(b) Book value
(1)				
(2)				
(3)				
(5)				
(6)				
(7)				
(8)				
(9)				
	(b) must equal Form 990, Part X, col. (B) line 15.)		u	
Part X	Other Liabilities.	F	44 446. O	000 D 4 V
	Complete if the organization answered "Yes" to line 25.	Form 990, Part IV, line	11e or 11f. See Form 9	990, Part X,
1.	(a) Description of liability	(b) Book value	_	
. ,	income taxes			
(2)			-	
(3)			-	
(4)			-	
(5) (6)			-	
(7)			-	
(8)				

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

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ${f u}$

2e

3

4c

5

2,643,727

2,643,727

Sche	dule D (Form 990) 2013 BRIDGES TO PROSPERITY, INC.	54-2031	102	Page 4
Pa	art XI Reconciliation of Revenue per Audited Financial States	nents With Revenue per	Return.	
	Complete if the organization answered "Yes" to Form 990,	Part IV, line 12a.		
1	Total revenue, gains, and other support per audited financial statements		1	2,881,441
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
а	Net unrealized gains on investments	2a		
b	Donated services and use of facilities	2b		
	Recoveries of prior year grants			
	Other (Describe in Part XIII.)			
	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		. 3	2,881,441
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
	Add lines 4a and 4b		4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			2,881,441
Pa	art XII Reconciliation of Expenses per Audited Financial State		er Return.	
	Complete if the organization answered "Yes" to Form 990,	Part IV, line 12a.		
1	Total expenses and losses per audited financial statements		1	2,643,727
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
а	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
	Other Jesses	20		

4a

Part XIII Supplemental Information

c Add lines 4a and 4b

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line

2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

d Other (Describe in Part XIII.) e Add lines 2a through 2d

Subtract line 2e from line 1

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

b Other (Describe in Part XIII.)

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

Amounts included on Form 990, Part IX, line 25, but not on line 1:

PART X - FIN 48 FOOTNOTE

BRIDGES TO PROSPERITY, INC. FOLLOWS ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES, WHICH REQUIRES THE ORGANIZATION DETERMINE WHETHER A TAX POSITION (AND RELATED TAX BENEFIT) IS MORE LIKELY THAN NOT TO BE SUSTAINED UPON EXAMINATION BY THE APPLICABLE TAXING AUTHORITY, BASED SOLELY ON THE TECHNICAL MERITS OF THE POSITION. THE TAX BENEFIT TO BE RECOGNIZED IS MEASURED AS THE LARGEST AMOUNT OF BENEFIT THAT IS GREATER THAN FIFTY PERCENT LIKELY OF BEING REALIZED UPON SETTLEMENT, PRESUMING THAT THE TAX POSITION IS EXAMINED BY THE APPROPRIATE TAXING AUTHORITY THAT HAS FULL KNOWLEDGE OF ALL RELEVANT INFORMATION. DURING THE YEAR ENDED AUGUST 31, 2014, THE ORGANIZATION'S MANAGEMENT EVALUATED ITS TAX POSITIONS TO DETERMINE THE EXISTENCE OF UNCERTAINTIES, AND DID NOT NOTE ANY MATTERS THAT WOULD REQUIRE RECOGNITION OR WHICH MAY HAVE AN EFFECT ON ITS TAX-EXEMPT STATUS.

SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Statement of Activities Outside the United States

u Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16. u Attach to Form 990. u See separate instructions.

u Attach to Form 990. u See separate instructions. u Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990. OMB No. 1545-0047

Open to Public Inspection

BRIDGES TO PROSPERITY, INC.

Employer identification number 54-2031102

		n on Activities O	utside the	United States.	Complete if th	e organization and	swered "Yes" on
	m 990, Part IV, line						
•	~	zation maintain records		-		•	
	_	or the grants or assistar					Yes X No
grants or assis	stance?						Yes X No
2 For grantmak	ers. Describe in Part	V the organization's pro	ocedures for m	onitoring the use of	its grants and o	other	
assistance out	side the United States	S.					
3 Activities per R	Region. (The following	Part I, line 3 table can	be duplicated i	if additional space is	needed.)		
(a) Region	(b) Number of	(c) Number of		vities conducted in		activity listed in (d) is	(f) Total
	offices in the region	employees, agents, and independent		n (by type) (e.g., g, program services,		program service, cribe specific type of	expenditures for and investments
		contractors	i	nvestments,		ervice(s) in region	in region
		in region		nts to recipients ed in the region)			
CENTRAL AM	ERICA/CARIBBE	ZAN					
(1)		4	3 PROGRAM	SERVICE	BRIDGE	BUILDING	497,191
EAST ASIA 8	PACIFIC						
(2)			PROGRAM	SERVICE	BRIDGE	BUILDING	3,988
SOUTH AMER	CA						
(3)		1 :	1 PROGRAM	SERVICE	BRIDGE	BUILDING	76,432
SUB-SAHARAN	AFRICA						
(4)		1 :	1 PROGRAM	SERVICE	BRIDGE	BUILDING	88,775
(5)							
(6)							
``							
(7)							
. ,							
(8)							
``							
(9)							
. ,							
(10)							
,							
(11)							
,							
(12)							
,							
(13)							
,							
(14)							
,							
(15)							
<u> </u>							
(16)							
(17)							
3a Sub-total		6	5				666,386
b Total from continuation							,
sheets to Part I							
c Totals (add							
lines 3a and 3b)		6	5				666,386

Pa	art IV Foreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations. (see Instructions for Form 5471)	Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain Foreign Partnerships. (see Instructions for Form 8865)	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713)	Yes	X No

Schedule F (Form 990) 2013

Schedule F (Form 990) 2013

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

REGION	EX	PENDITURES	INVEST	IENTS
ENTRAL AMERICA/CARIBBEAN	\$	497,191	\$	0
AST ASIA & PACIFIC	\$	3,988	\$	0
SOUTH AMERICA	\$	76,432	\$	0
UB-SAHARAN AFRICA	\$	88,775	\$	0
				•••••

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Open To Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

u Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

u Attach to Form 990.

 ${f u}$ Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

BDIDGES TO DDOSDEDITY TNO

Employer identification number 54-2031102

Da		<u> </u>	DSPERIII, INC	34-203110				
Pa	rt I Types of Property	I	Г	(a)				
		(a)	(b)	(c) Noncash contribution	(d)			
		Check if	Number of contributions or	amounts reported on	Method of determining			
		applicable	items contributed	Form 990, Part VIII, line 1g	noncash contribution amou	nts		
1	Art — Works of art							
2	Art — Historical treasures							
3	Art — Fractional interests							
4	Books and publications							
5	Clothing and household							
	goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities — Publicly traded							
10	Securities — Closely held stock							
11	Securities — Partnership, LLC,							
• •	or trust interests							
12	Securities — Miscellaneous							
13	Qualified conservation							
13	contribution — Historic							
4.4	structures							
14	Qualified conservation							
4.5	contribution — Other							
15	Real estate — Residential							
16	Real estate — Commercial							
17	Real estate — Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other $\mathbf{u}(\ \mathbf{BRIDGE}\ \ \mathbf{MATERIAL})$	X	10	1,442,295	FMV			
26	Other $\mathbf{u}($)							
27	Other u ()							
28	Other u ()							
29	Number of Forms 8283 received by the	ne organiza	ation during the tax year f	or contributions for				
	which the organization completed For	m 8283, F	art IV, Donee Acknowled	gement [29			
							Yes	No
30a	During the year, did the organization r	eceive by	contribution any property	reported in Part I, lines 1 - 2	28, that			
	it must hold for at least three years from	m the dat	e of the initial contribution,	and which is not required to	o be			
	used for exempt purposes for the enti-	re holding	period?			30a		X
b	If "Yes," describe the arrangement in							
31	Does the organization have a gift according		olicy that requires the revi	ew of any non-standard				
			•	•		31		х
32a	Does the organization hire or use third							
		-	_	•		32a		x
b	If "Yes," describe in Part II.							_
33	If the organization did not report an ar	mount in o	olumn (c) for a type of pro	perty for which column (a) i	s checked.			
	describe in Part II.		(o, .o. a typo of pic	, ,				

Schedule M (Form 9	90) (2013)	BRIDGE	S TO	PROSPERITY	, INC.	54-2031102	Page 2
Part II	Suppleme	ental Info	ormation	. Provide the info	ormation requ	uired by Part I, lines 30b, 32b, and 33, and whether	
						mber of contributions, the number of items received,	
	or a comb	ination of	both. Als	so complete this	part for any	additional information.	

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047 2013

Department of the Treasury Internal Revenue Service

u Attach to Form 990 or 990-EZ.

Open to Public Inspection

u Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. Name of the organization Employer identification number BRIDGES TO PROSPERITY, INC. 54-2031102 FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990 THE 990 IS REVIEWED AND APPROVED BY THE FINANCE COMMITTE AND THE CHAIRMAN OF THE BOARD. THE RETURN IS THEN SIGNED BY THE CHAIRMAN OF THE BOARD AND FILED WITH THE IRS. FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY ALL BOARD MEMBERS SIGN A "CONFLICT OF INTEREST STATEMENT OF ACCEPTANCE" UPON BECOMING A BOARD MEMBER. THIS STATEMENT IS UPDATED AS CIRCUMSTANCES CHANGE. FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL THE CEO'S COMPENSATION IS DISCUSSED AND APPROVED BY THE BOARD. THE COMPENSATION AMOUNT IS BASED ON EXPECTED COMPANY PERFORMANCE AND IS COMPARED TO VARIOUS NON-PROFIT SALARY GUIDES FOR REASONABLENESS. FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION THE ORGANIZATION'S GOVERNING DOCUMENTS AND FORM 990 ARE AVAILABLE TO THE PUBLIC UPON REASONABLE REQUEST.