efile	e GRAPH	IIC print - DO NOT PROCESS As Filed Data -		DL	N: 93493321054274
	990	Return of Organization Exempt Fro	m Income	Tax	OMB No 1545-0047
Form 😴	ココリ	Under section 501(c), 527, or 4947(a)(1) of the Internal Rev			2013
	=	foundations)			
•	ent of the Treas	generally cannot redact the information on	the form	, iaw, the IRS	Open to Public Inspection
A F-	-	▶ Information about Form 990 and its instructions is at <u>www.IRS</u>			
	<b>r the 2013</b> eck if applical	calendar year, or tax year beginning 01-01-2013 , 2013, and ending 12	2-31-2013	D Emplover	identification number
	еск іг арріісаі Iress change	True Colors Fund Inc		45-2489	
_	ne change	Doing Business As		J-2409	
	al return	Number and street (or P O box if mail is not delivered to street address) Room	/suite	Г.Т.I I	
- Terr	minated	330 West 38th Street Suite 405	,	E Telephone	
– Ame	ended return	City or town, state or province, country, and ZIP or foreign postal code		(212)46	1-4401
Арр	lication pend	New York, NY 10018 Ing		<b>G</b> Gross rece	pts \$ 874,467
		F Name and address of principal officer	H(a) Is th	nis a group ref	
		LISA BARBARIS 330 West 38th Street		ordinates?	🔽 Yes 🔽 No
		NEWYORK, NY 10018	H(b) Are	all subordınat	es 「Yes「No
т	x-exempt sta	tus ▼ 501(c)(3)  501(c)()  ()  (Insert no)  4947(a)(1) or  527	inclu	uded?	
	•				ist (see instructions)
		WWW TRUECOLORSFUND ORG	H(c) Gro	up exemption	number 🕨
		tion 🔽 Corporation 🗍 Trust 🦳 Association 🦳 Other 🕨	L Year of f	ormation 2010	M State of legal domicile DE
	2 Chec	AISE AWARENESS ABOUT & BRING AN END TO GAY, LESBIAN, BIS EKS TO INSPIRE EVERYONE TO GET INVOLVED IN ADVANCING EN k this box I if the organization discontinued its operations or dispose			1
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	2 Chec 3 Numb 4 Numb 5 Total 6 Total 7a Total b Net u 8 Co	k this box I if the organization discontinued its operations or dispose ber of voting members of the governing body (Part VI, line 1a) ber of independent voting members of the governing body (Part VI, line 2a) number of individuals employed in calendar year 2013 (Part V, line 2a) number of volunteers (estimate if necessary) unrelated business revenue from Part VIII, column (C), line 12 nrelated business taxable income from Form 990-T, line 34	d of more than  Lb)   	25% of its ne	3     8       4     6       5     6       6     0       7a     0       7b     0       5     653,926
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	2 Chec 3 Numb 4 Numb 5 Total 6 Total 6 Total 7a Total b Net u 8 Co 9 Pro 10 Inv 11 Ottl 12 Tot 12	EKS TO INSPIRE EVERYONE TO GET INVOLVED IN ADVANCING EXAMPLE         k this box         if the organization discontinued its operations or dispose         beer of voting members of the governing body (Part VI, line 1a)         beer of independent voting members of the governing body (Part VI, line 1a)         number of individuals employed in calendar year 2013 (Part V, line 2a)         number of volunteers (estimate if necessary)         unrelated business revenue from Part VIII, column (C), line 12         ntributions and grants (Part VIII, line 1h)         orgram service revenue (Part VIII, line 2g)         vestment income (Part VIII, column (A), lines 3, 4, and 7d)         her revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)         cal revenue—add lines 8 through 11 (must equal Part VIII, column (A), lines 1–3)	d of more than	25% of its ne	3     8       4     6       5     6       6     0       7a     0       7b     0       5     653,926       0     0       0     8,730       5     211,811       1     874,467
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Kavenue	2 Chec 3 Numb 4 Numb 5 Total 6 Total 6 Total 7a Total b Net u 8 Co 9 Pro 10 Inv 11 Otl 12 Total 12 Total 13 Gra 14 Bel 15 Sal	EKS TO INSPIRE EVERYONE TO GET INVOLVED IN ADVANCING EXAMPLE         k this box         if the organization discontinued its operations or dispose         beer of voting members of the governing body (Part VI, line 1a)         beer of independent voting members of the governing body (Part VI, line 1a)         number of individuals employed in calendar year 2013 (Part V, line 2a)         number of volunteers (estimate if necessary)         unrelated business revenue from Part VIII, column (C), line 12         ntributions and grants (Part VIII, line 1h)         orgram service revenue (Part VIII, line 2g)         vestment income (Part VIII, column (A), lines 3, 4, and 7d)         her revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)         cal revenue—add lines 8 through 11 (must equal Part VIII, column (A), lines 1–3)	d of more than	25% of its ne 	3     8       4     6       5     6       6     0       7a     0       7b     0       5     653,926       0     0       5     653,926       0     0       6     211,811       4     874,467       2     28,765       0     0
Havenue	2 Chec 3 Numb 4 Numb 5 Total 6 Total 7a Total b Net u 8 Co 9 Pro 10 Inv 11 Ottl 12 Total 13 Gra 14 Ber 15 Sal 5-	EKS TO INSPIRE EVERYONE TO GET INVOLVED IN ADVANCING EXAMPLE         k this box         if the organization discontinued its operations or dispose         ber of voting members of the governing body (Part VI, line 1a)         ber of independent voting members of the governing body (Part VI, line 1a)         number of individuals employed in calendar year 2013 (Part V, line 2a)         number of volunteers (estimate if necessary)         nurelated business revenue from Part VIII, column (C), line 12         ntributions and grants (Part VIII, line 1h)         orgram service revenue (Part VIII, line 2g)         vestment income (Part VIII, column (A), lines 3, 4, and 7d)         cal revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)         cal revenue add lines 8 through 11 (must equal Part VIII, column (A), lines 1-3)         ants and similar amounts paid (Part IX, column (A), lines 1-3)         nefits paid to or for members (Part IX, column (A), line 4)	d of more than	25% of its ne 	3     8       4     6       5     6       6     0       7a     0       7b
enueven	2 Chec 3 Numb 4 Numb 5 Total 6 Total 6 Total 7a Total b Net u 8 Co 9 Pro 10 Inv 11 Otl 12 Tot 12 13 Gra 14 Ben 15 Sal 5- 16a Pro	EKS TO INSPIRE EVERYONE TO GET INVOLVED IN ADVANCING EXAMPLE         k this box         if the organization discontinued its operations or dispose         ber of voting members of the governing body (Part VI, line 1a)         ber of independent voting members of the governing body (Part VI, line 1a)         number of individuals employed in calendar year 2013 (Part V, line 2a)         number of volunteers (estimate if necessary)         unrelated business revenue from Part VIII, column (C), line 12         number of volunteers (estimate if necessary)         inrelated business revenue from Part VIII, column (C), line 12         intributions and grants (Part VIII, line 1h)         intributions and grants (Part VIII, line 2g)         intributions and grants (Part VIII, line 2g)         intributions and grants (Part VIII, column (A), lines 3, 4, and 7d)         intributions and grants (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)         cal revenue—add lines 8 through 11 (must equal Part VIII, column (A), line         iarts and similar amounts paid (Part IX, column (A), lines 1–3)         iartes, other compensation, employee benefits (Part IX, column (A), line         10)	d of more than	25% of its ne 	3     8       4     6       5     6       6     0       7a     0       7b
enueven	2 Chec 3 Numb 4 Numb 5 Total 6 Total 6 Total 7 Total b Net u 8 Co 9 Pro 10 Inv 11 Ott 12 Tot 13 Gra 14 Bea 15 Sal 5- 16a Pro b Total 17 Ott	EKS TO INSPIRE EVERYONE TO GET INVOLVED IN ADVANCING EVERYONE TO GET INVOLVE IN ADVANCING EVERYONE TO GET IX, column (A), lines 1-3 )	d of more than	25% of its ne 	3       8         4       6         5       6         6       0         7a       0         7b       0         7current Year       0
Revenue	2 Chec 3 Numb 4 Numb 5 Total 6 Total 6 Total 7a Total b Net u 8 Co 9 Pro 10 Inv 11 Otl 12 Total 13 Gra 14 Bei 15 Sal 5- 16a Pro b Total 17 Otl 18 Total	EKS TO INSPIRE EVERYONE TO GET INVOLVED IN ADVANCING EVERYONE TO GET INVOLVED IN ADVANCING EVERYONE TO GET INVOLVED IN ADVANCING EVERYONE TO INTOLVED IN ADVANCING EVERYONE TO GET INVOLVED IN ADVANCING EVERYONE TO GET INTO UNIT ADVANCING EVERYONE TO INTOLVE TO INTO UNIT ADVANCING EVERYONE TO INTOLVE TO INTOLLY ADVE TO INTOLVE TO INTOLVE TO INTOLVE TO I	d of more than	2 5% of its ne 	3       8         4       6         5       6         6       0         7a       0         7b       0         7b       0         5       653,926         0       0         0       8,730         0       8,730         5       211,811         1       874,467         2       28,765         0       0         3       391,500         3       22,256         5       391,437         3       833,958
Expenses Revenue Avanues a	2 Chec 3 Numb 4 Numb 5 Total 6 Total 6 Total 7a Total b Net u 8 Co 9 Pro 10 Inv 11 Otl 12 Total 13 Gra 14 Bei 15 Sal 5- 16a Pro b Total 17 Otl 18 Total	EKS TO INSPIRE EVERYONE TO GET INVOLVED IN ADVANCING EVERYONE TO GET INVOLVE IN ADVANCING EVERYONE TO GET IX, column (A), lines 1-3 )	d of more than	25% of its ne 	3       8         4       6         5       6         6       0         7a       0         7b       0         7current Year       0
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EXpenses Revenue Acumues a	2 Chec 3 Numb 4 Numb 5 Total 6 Total 7a Total b Net u 8 Co 9 Pro 10 Inv 11 Otl 12 Tot 12 13 Gra 14 Bel 15 Sal 15 Sal 16 Pro 10 Total 17 Otl 18 Tot 19 Rev	EKS TO INSPIRE EVERYONE TO GET INVOLVED IN ADVANCING EVERYONE TO GET INVOLVED IN ADVANCING EVERYONE TO GET INVOLVED IN ADVANCING EVERYONE TO INTOLVED IN ADVANCING EVERYONE TO GET INVOLVED IN ADVANCING EVERYONE TO GET INTO UNIT ADVANCING EVERYONE TO INTOLVE TO INTO UNIT ADVANCING EVERYONE TO INTOLVE TO INTOLLY ADVE TO INTOLVE TO INTOLVE TO INTOLVE TO I	d of more than	25% of its ne 	3       8         4       6         5       6         6       0         7a       0         7b       0         7current Year       0
Net Assets of Expenses Revenue Activities & Governance	2 Chec 3 Numb 4 Numb 5 Total 6 Total 6 Total 7a Total b Net u 8 Co 9 Pro 10 Inv 11 Ottl 12 Tot 13 Gra 14 Bel 15 Sal 15 Sal 16 Pro 17 Ottl 18 Total 19 Rev 20 Total 21 Total 21 Total 21 Total 21 Total 20 Total 21 Total 21 Total 21 Total 20 Total 21 Total 2	EKS TO INSPIRE EVERYONE TO GET INVOLVED IN ADVANCING Exercises         k this box ▶         if the organization discontinued its operations or dispose         beer of voting members of the governing body (Part VI, line 1a)         number of independent voting members of the governing body (Part VI, line 2a)         number of volunteers (estimate if necessary)         number of volunteers (estimate if necessary)         number of volunteers (estimate if necessary)         nurelated business revenue from Part VIII, column (C), line 12         ninelated business taxable income from Form 990-T, line 34         netributions and grants (Part VIII, line 1h)         orgam service revenue (Part VIII, column (A), lines 3, 4, and 7d)         eestment income (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)         cal revenue—add lines 8 through 11 (must equal Part VIII, column (A),         intributions and similar amounts paid (Part IX, column (A), lines 1-3)         nefits paid to or for members (Part IX, column (A), line 4)         offersional fundraising fees (Part IX, column (A), line 11e)         if undraising expenses (Part IX, column (D), line 25)         al expenses Add lines 13-17 (must equal Part IX, column (A), line 25         venue less expenses Subtract line 18 from line 12	d of more than	2 5% of its ne 	3       8         4       6         5       6         6       0         7a       0         7b       0         7current Year       0         8       874,467         2       28,765         70       0         70       0         71       3         72       391,437         73       333,958         74       40,509         75       490,569         76       490,569         77       31,158

my knowledge and belief, it is true, correct, and complete Declaration of prepar preparer has any knowledge

	**	****						
Sign	F Si	gnature of officer						
Here		A BARBARIS PRESIDENT/TREASURER						
	Г Ту	ype or print name and title						
Paid		Print/Type preparer's name JAMES J REILLY	Preparer's signature					
Prepare	r	Firm's name 🕨 CONDON O'MEARA MCG	INTY & DONNELLY L					
Use Onl		Firm's address 🕨 ONE BATTERY PARK PLAZA						
		NEW YORK, NY 100041	405					

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

For Paperwork Reduction Act Notice, see the separate instructions.

Form	n 990 (2013)				Page <b>2</b>
Par		ment of Program Servic			
1	Briefly descri	be the organization's mission			
TRA	NSGENDER YO			BRING AN END TO GAY, LESBIAN, B RYONE, ESPECIALLY STRAIGHT PEC	
2	the prior Form	1990 or 990-EZ?		g the year which were not listed on	
	If "Yes," desc	ribe these new services on Sch	iedule O		
3	Did the organi services?	zation cease conducting, or ma	ike significant changes in	how it conducts, any program	. 🔽 Yes 🔽 No
	If "Yes," desc	ribe these changes on Schedul	e O		
4	expenses Se		organizations are required	h of its three largest program services I to report the amount of grants and all rted	
4a	(Code	) (Expenses \$	545,256 including grar	ts of \$ ) (Revenue \$	)
	transgender you to none The Fo	uth homelessness, the Forty to None Forty to None Forty to None Project is acheiving this g	Project is working to bring the r oal by educating and engaging	sing awareness about and bringing an end to g umber of homeless youth who identify as gay the public, advocating within government and providers in building their capacity and creating	or transgender from 40 percent media, creating empowering
4b	(Code	) (Expenses \$	135,955 including grar	ts of \$ ) (Revenue \$	)
15	Give a Damn C straight people	ampaign Through its website, online	engagement, and award winni r all, regardless of sexual orien	ng public service announcements, the Give a Da tation or gender identity and expression. The G	
	(Codo				
4c	(Code General Prograr Campaıgn	) (Expenses \$ n The True Colors Fund conducts pro	23,476 including grar grammatic activities that benef	ts of \$	) Project and the Give a Damn
	0 +h				
4d	Other progra (Expenses \$	m services (Describe in Sched	ule O) ling grants of \$	) (Revenue \$	ì
		m service expenses 🕨	704,687	) (Nevenue \$	/
40	rocar program	in service expenses F	/04,00/		

Form 990 (	2013)
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)? <i>If "Yes,"</i> complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕲	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	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	Yes	
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? <i>If "Yes," complete Schedule C, Part III</i>	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 🔞	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	10	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
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	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>	11b		No
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i> <b>D</b>	11d	Yes	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏	11e		No
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII 🔁	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 🕏	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule $E$	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A ), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	<b>Checklist of Required Schedules</b> (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i> .	23		No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>	24a		No
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? $\cdot$ .	24d		
25a	<b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If so, complete Schedule L, Part II</i>	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i> .	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a		No
Ь	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes,"</i> complete Schedule L, Part IV	28b		No
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? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than $$25,000$ in non-cash contributions? If "Yes," complete Schedule M .	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b		
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		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O	38	Yes	

Form **990** (2013)

Form	990 (2013)			Page <b>5</b>
Pa	rt 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		<u>.</u> .	
1-	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable   1a   9		Yes	No
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable <b>1b</b> 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
Ь	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			
	<b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
	Did the organization have unrelated business gross income of \$1,000 or more during the year? $\cdot$ .	3a		No
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		<b> </b>
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
Ь	If "Yes," enter the name of the foreign country ▶ See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? $\cdot$ .	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5a 5b		No
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	50		
C		5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes	
Ь	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as			
_	required?	7g		<u> </u>
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	<b>Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess			
	business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?	9a 9b		<u> </u>
ь 10	Did the organization make a distribution to a donor, donor advisor, or related person?	90		<u> </u>
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club <b>10b</b>			
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources 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?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	1		
а	Is the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> See the instructions for additional information the organization must report on Schedule O	13a		
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			
с	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

Par	t VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7L			
	"No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or chang See instructions. Check if Schedule O contains a response or note to any line in this Part VI	es in	Sched 	ule O 
Se	ection A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax 1a 8			
	year			
	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			
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	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? $$ .	5		No
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? <i>If "Yes," provide the names and addresses in Schedule O</i>	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal Re	even	ue Cod	e.)
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		No
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If "Yes," describe in Schedule O how this was done</i>	12c	Yes	
13	Did the organization have a written whistleblower policy?	13		No
14	Did the organization have a written document retention and destruction policy?	14		No
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
	The organization's CEO, Executive Director, or top management official	153		No
		15a		
	O ther officers or key employees of the organization	15a 15b		110
b	O ther officers or key employees of the organization	15b		No
b 16a	O ther officers or key employees of the organization			No
b 16a	O ther officers or key employees of the organization	15b		
b 16a b	O ther officers or key employees of the organization	15b 16a		

(3)S Unity) availa	Die	for public inspection	1 1	nuicate now you	1 111	aue these available check an	u
🔽 O wn website	Γ	Another's website	~	Upon request	Γ	Other (explain in Schedule O	)

19	Describe in Schedule O whether (and if so,	how) the	organızatıon	made its i	governing documents,	, conflict of
	interest policy, and financial statements av	vailable to	o the public d	uring the f	tax year	

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ►GREGORY LEWIS 330 WEST 38TH STREET SUITE 405 NEW YORK,NY 10018 (212)461-4401

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

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

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

• List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid

• List all of the organization's current key employees, if any See instructions for definition of "key employee "

• List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations

• List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations

• List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

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

(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted line)	more pers	than on is a dii	one bot rect	not box h ar or/tr	n offic rustee	ess er	(D) Reportable compensation from the organization (W- 2/1099- MISC)	<b>(E)</b> Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		trustaa r	Institutional Trustee		0)88	Highest compensated employee				
(1) LISA BARBARIS	15 0	x		x				o	0	0
PRESIDENT/TREASURER/COFOUNDER									_	
(2) JONNY PODELL	4 0	x		x						
SECRETARY/COFOUNDER		^		Â						
(3) CYNDI LAUPER	10 0	x								
DIRECTOR/ COFOUNDER		^								
(4) JOSEPH AVALLONE	2 0	x								
Director										
(5) Nancy Mahon	2 0									
Director		х								
(6) Cathy Nelson	2.0									
Director		х								
(7) Patrick Pocklington	2 0									
Director		Х								
(8) CARSON KRESSLEY	2 0									
DIRECTOR		х								
(9) GREGORY LEWIS	70 0									
EXECUTIVE DIRECTOR						X		142,000		7,396
	1									
										Form <b>990</b> (2013)

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

	<b>(A)</b> Name and Title	Name and Title A verage hours per week (list any hours				oox, an d	heck unless officer stee)	i	<b>(D)</b> Reportable compensation from the organization (W-	<b>(E)</b> Reportable compensation from related organizations (W-	-	(F) Estima amount of compens from t	ted other ation he
		for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)		rganızatı relate organıza	d
											+		
											+		
					-						+		
											+-		
											_		
1b	Sub-Total				•			•					
С	Total from continuation shee				•	•	•	•	142.000		0		7 200
 2	Total (add lines 1b and 1c) Total number of individuals (i \$100,000 of reportable comp	ncluding but not	lımıted	to the	ose	Iste		e) w	142,000 ho received more th		0		7,396
												Yes	No
3	Did the organization list any <b>f</b> on line 1a? <i>If "Yes," complete</i>										3		No
4	For any individual listed on lii organization and related orga												110

		4		No		
5	5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for					
	services rendered to the organization? If "Yes," complete Schedule J for such person	5		No		

### Section B. Independent Contractors

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

	5	
(A) Name and business address	(B) Description of services	(C) Compensation
NONE,		
2 Total number of independent contractors (including but not limited to those listed above \$100,000 of compensation from the organization ►0	) who received more than	

Form 99						Page <b>9</b>
Part V	/111	Statement of Revenue				
		Check if Schedule O contains a response or note to any li	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ωß	1a	Federated campaigns 1a				
ant	Ь	Membership dues 1b				
Contributions, Giffs, Grants and Other Similar Amounts	с	Fundraising events 1c 150,000				
τs,	d	Related organizations 1d				
nila	e	Government grants (contributions) <b>1e</b>				
Sin's						
er	f	All other contributions, gifts, grants, and <b>1f</b> 503,926 similar amounts not included above				
ie e	g	Noncash contributions included in lines	İ			
ont ng	h	Total. Add lines 1a-1f	653,926			
<u>s</u>		•				
lue	2a	Business Code				
Pver	b					
ት ዋ	c					
L N C	d					
Program Service Revenue	e					
Lan.	f	All other program service revenue				
ې م						
	g 3	Total. Add lines 2a−2f	0			
		Investment income (including dividends, interest, and other similar amounts)	8,730			8,730
	4	Income from investment of tax-exempt bond proceeds	0			
	5	Royalties	0			
	67	(I) Real (II) Personal				
	6a b	Gross rents Less rental				
	c	expenses 0 0				
		or (loss)				
	d	Net rental income or (loss)	0			
	7a	(I) Securities (II) Other				
		from sales of assets other				
	Ь	than inventory Less cost or				
		other basis and sales expenses				
	с	Gain or (loss)				
	d	Net gain or (loss)	0			
nue	8a	Gross income from fundraising events (not including \$150,000				
Other Revenue		of contributions reported on line 1c) See Part IV, line 18 <b>a</b> 193,940				
the	Ь	Less direct expenses b				
õ	С	Net income or (loss) from fundraising events 🕨	193,940			193,940
	9a	Gross income from gaming activities See Part IV , line 19 <b>a</b>				
	Ь	Less direct expenses b				
	с	Net income or (loss) from gaming activities	0			
	10a	Gross sales of inventory, less returns and allowances .				
		a 1,850				
	Ь	Less cost of goods sold b				
	с	Net income or (loss) from sales of inventory	1,850	1,850		
		Miscellaneous Revenue Business Code				
	11a	BENEFIT PROCEEDS 900099	16,021	16,021		
	b					
	C .					ļ
	d	All other revenue				
	e	<b>Total.</b> Add lines 11a−11d	16,021			
	12	Total revenue. See Instructions	874,467	17,871		202,670

Part IX Statement of Functional Expenses

	Check if Schedule O contains a response or note to any line in this				· · · · ·
	ot include amounts reported on lines 6b, b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	<b>(C)</b> Management and general expenses	<b>(D)</b> Fundraısıng expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV , line 21	28,765	28,765		
2	Grants and other assistance to individuals in the United States See Part IV, line 22	0			
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	0			
4	, Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	0			
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
7	Other salaries and wages	337,951	290,322	16,125	31,504
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	0			· · · · ·
9	Other employee benefits	27,566	24,354	1,176	2,036
10	Payroll taxes	25,983	22,955	1,109	1,919
11	Fees for services (non-employees)				
а	Management	0			
b	Legal	0			
с	Accounting	21,345		21,345	
d	Lobbying	0			
е	Professional fundraising services See Part IV, line 17	22,256			22,256
f	Investment management fees	0			
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on				
	Schedule O)	181,243	,		
12	Advertising and promotion	10,730			
13	Office expenses	36,007	23,419	1,607	10,981
14	Information technology	28,578	27,978		600
15	Royalties	0			
16	Occupancy	29,297	26,640	1,226	1,431
17	Travel	52,933	50,044		2,889
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	10,521	8,160		2,361
20	Interest	0			
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	0			
23	Insurance	10,803	9,832	448	523
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
а	EVENT SPACE	2,260			2,260
Ь	DONATION PROCESSING FEE	4,653		4,653	,
c	MISCELLANEOUS	3,067	245	70	2,752
d					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	833,958	704,687	47,759	81,512
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here F if following SOP 98-2 (ASC 958-720)		701,007	,	51,512

**Balance Sheet** 

Part X

-. (A) (B) Beginning of year End of year Cash-non-interest-bearing . . . . . . . . 343,913 312,002 1 1 0 0 2 2 Savings and temporary cash investments . . . . . . 50,000 25,000 3 з Pledges and grants receivable, net 4 35.724 4 107.933 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L . . . . . . . . . . . 0 5 0 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L Assets 0 0 6 0 7 7 0 Notes and loans receivable, net 0 0 8 Inventories for sale or use 8 0 0 9 Prepaid expenses and deferred charges . . . . . . . 9 10a Land, buildings, and equipment cost or other basis Complete 4.793 10a Part VI of Schedule D b Less accumulated depreciation . . . . . 10b 0 10c 4,793 0 10.390 11 11 0 12 12 0 Investments—other securities See Part IV, line 11 . . . . . 0 0 13 13 Investments—program-related See Part IV, line 11 . . . . . 0 0 14 14 8,162 30,451 15 15 437,799 16 16 490,569 **Total assets.** Add lines 1 through 15 (must equal line 34) . 17 19,121 21,158 17 Accounts payable and accrued expenses . . . . . . 0 0 18 18 Grants payable . . . . . . . . . . . . 0 19 19 10,000 Deferred revenue 0 0 20 Tax-exempt bond liabilities 20 0 0 21 21 Escrow or custodial account liability Complete Part IV of Schedule D . . \_iabilities 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 0 22 0 0 0 23 Secured mortgages and notes payable to unrelated third parties . . 23 0 0 24 24 Unsecured notes and loans payable to unrelated third parties . . . 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule 0 25 0 D.................. 26 Total liabilities. Add lines 17 through 25 . . . . . . 19,121 31,158 26 Organizations that follow SFAS 117 (ASC 958), check here 🕨 🔽 and complete Fund Balances lines 27 through 29, and lines 33 and 34. Unrestricted net assets . . . . . . . 318,678 27 27 434,411 25,000 100,000 28 28 Temporarily restricted net assets 0 29 29 0 Permanently restricted net assets . . . . . . . Organizations that do not follow SFAS 117 (ASC 958), check here 🕨 🦵 and complete lines 30 through 34. 5 30 Capital stock or trust principal, or current funds 30 Assets 31 31 Paid-in or capital surplus, or land, building or equipment fund 32 32 Retained earnings, endowment, accumulated income, or other funds Net 33 418.678 33 459,411 34 Total liabilities and net assets/fund balances . . . . . . . . . 437.799 490,569 34

Form	990	(201	3)
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Par	<b>t XI</b> Reconcilliation 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		8	374,467
2	Total expenses (must equal Part IX, column (A ), line 25)				
3	Revenue less expenses Subtract line 2 from line 1	2			333,958
_		3			40,509
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		4	18,678
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	5			224
-		6			
7	Investment expenses	7			
8	Prior period adjustments				
9	Other changes in net assets or fund balances (explain in Schedule O)	8			
2		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		4	159,411
Par	t XII Financial Statements and Reporting				<u> </u>
	Check If Schedule O contains a response or note to any line in this Part XII		• •		
				Yes	No
1	Accounting method used to prepare the Form 990  Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revie a separate basis, consolidated basis, or both	ewed or	n		
	☐ Separate basıs ☐ Consolıdated basıs ☐ Both consolıdated and separate basıs				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sep basis, consolidated basis, or both	arate			
	Separate basis Consolidated basis F Both consolidated and separate basis				
с	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversig audit, review, or compilation of its financial statements and selection of an independent accountant?	ht of th	ie 2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain Schedule O	IN			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?	ne	3a		No
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		Зb		

efi	le GF	RAPHIC	print - D	O NOT PROCESS	As File	ed Data -				DLN: 9	34933	2105	64274
SC	HEL	DULE A		 Dublic (	barity C	Statua	nd Dubli		ort		ΟΜΒΝα	154	5-0047
(For	m 990	or 990EZ		PUDIIC C nplete if the organiz	ation is a see					(1)	2	01	3
Treas		of the enue Service	e	<ul> <li>Attach to I</li> <li>Informatio</li> </ul>	n about Sche		m 990 or 990			s at		n to P spect	ublic ion
		he organiz	ation						Employer i	ident if id	cation n	ımber	
True (	Colors F	Fund Inc							45-24890	60			
Ра	rt I	Reaso	on for Pu	blic Charity Sta	tus (All or	anization	s must com	plete this i			ions.		
				te foundation becaus						10 11 4 01			
1	Г			on of churches, or a									
2	Ē			in section 170(b)(1				·					
3	Γ.			perative hospital se				n 170(b)(1	)(A)(iii).				
4	Ē			h organization operat						1)(A)(i	ii). Ente	r the	
	,	hospital	's name, ci	ty, and state	-		-				-		
5	Γ	An orga	nızatıon op	erated for the benefi	t of a college	e or universi	ity owned or o	perated by	a government	al unit	describe	d ın	-
		sect ion	170(b)(1)(	<b>A)(iv).</b> (Complete P	art II )								
6	Γ	A federa	al, state, or	local government o	government	tal unit deso	cribed in <b>sect</b> i	ion 170(b)(	1)(A)(v).				
7 8		describe	ed in <b>sectio</b>	at normally receives <b>n 170(b)(1)(A)(vi).</b> described in <b>sectio</b> i	(Complete F	Part II )	••	5	ental unit or fr	rom the	general	public	:
9	' য		-				-	-	hutions mem	horchin	foos an	d aros	e
5	1.	An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% 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	_			ganized and operated									
10	ŗ	An orga one or n the box	nization org nore public that descri	ganized and operated ly supported organiz bes the type of supp	d exclusively ations descr porting organ	/ for the ben lbed in sect lization and	nefit of, to perf tion 509(a)(1 complete line	form the fun ) or section is 11e throu	ctions of, or t 509(a)(2) Se igh 11h	ee <b>sect</b> i	ion 509(a	a)(3).	Check
e f g	Г	By chec other th section If the or check th Since A	kıng thıs b an foundatı 509(a)(2) ganızatıon nıs box ugust 17, 2	ox, I certify that the ion managers and ot received a written d 2006, has the organ	organızatıon her than one etermınatıon	n is not cont or more pul from the IR	rolled directly blicly support RS that it is a	/ or indirect ed organiza Type I, Typ	Type III - Non-functionally integrated ctly by one or more disqualified persons zations described in section 509(a)(1) or ype II, or Type III supporting organization,				ons 1)or
			g persons? rson who d	rectly or indirectly o	controls of	or along or	togothor with	norcone do	ceribod in (ii)			Yes	No
				governing body of th				persons de		ſ	11g(i)	res	No
				er of a person descr						ŀ			
				lled entity of a perso			200102			ŀ	11g(ii) 11g(iii)		
h				ng information about						l	119(11)		<u> </u>
(i) Name of supported organization		rted	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see	(iv) Is organizati col (i) Iis your gove docume	ion in ted in erning	(v) Did you the organi in col (i) o suppor	zation of your	(vi) Is t organizati col (i) orga in the U	ion in anized	(\		nount of etary port
				instructions))	Yes	No	Yes	No	Yes	No			
Tota	1												

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

Pa	(Complete only if you of						
	Part III. If the organiza						
S	ection A. Public Support			_			
Cal	endar year (or fiscal year beginning in) 🕨	<b>(a)</b> 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	<b>(e)</b> 20	13 <b>(f)</b> Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not include any "unusual						
	arants ")						
2	Tax revenues levied for the						
	organization's benefit and either						
	paıd to or expended on ıts 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						
	ection B. Total Support		1				
Cal	endar year (or fiscal year beginning : المناط	<b>(a)</b> 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	<b>(e)</b> 201	13 <b>(f)</b> Total
7	in) ► A mounts from line 4						
, 8	Gross income from interest,						
Ũ	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar						
9	sources Net income from unrelated						
3	business activities, whether or not						
	the business is regularly carried						
	on Otherse Development and a second						
10	Other income Do not include gain or loss from the sale of capital						
	assets (Explain in Part IV )						
11							
12	10) Gross receipts from related activity	es etc (see inst				12	
13	First five years. If the Form 990 is	, (	,	l third fourth or	fifth tax year ac a		organization chock
13	this box and <b>stop here</b>						
S	ection C. Computation of Pub						
14	Public support percentage for 2013	(lıne 6, column	(f) dıvıded by lıne	11, column (f))		14	
15	Public support percentage for 2012	Schedule A, Pa	rt II, lıne 14			15	
16a	,				ine 14 is 33 1/3%	or more, cl	
L.	and <b>stop here.</b> The organization qua <b>33</b> 1/3% support test—2012. If the				and line 1 E is 22		
U	box and <b>stop here.</b> The organization				, and the 15 is 55	1/3-70 01 110	
17a				-	ne 13, 16a, or 16	b, and line	. ,
	<b>10%-facts-and-circumstances test—2013.</b> 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 <b>stop here.</b> Explain						
	In Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported						
h	organization	-2012 If the era	anization did not	check a hoy on lu	na 13 162 166 /	or 17a and	► F
D	<b>10%-facts-and-circumstances test</b> - 15 is 10% or more, and if the organ						
	Explain in Part IV how the organization						publicly
	supported organization						▶
18	Private foundation. If the organizat instructions	ion did not checl	k a box on line 13	, 16a, 16b, 17a,	or 17b, check this	s box and s	see
	113114110113						F (

Sche	dule A (Form 990 or 990-EZ) 2013						Page <b>3</b>
Pa	Art III Support Schedule f (Complete only if you Part II. If the organiz	checked the	box on line 9 of	Part I or if the	e organization fa		
Se	ction A. Public Support		uality under the		elow, please col		
	ndar year (or fiscal year beginning in) ►	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not		o c	0	610,605	653,926	1,264,531
2	Include any "unusual grants ") 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				112,840	193,940	306,780
3	Gross receipts from activities that are not an unrelated trade or business under section 513						0
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
5	The value of services or facilities furnished by a governmental unit to the organization without charge						0
6	Total. Add lines 1 through 5		0 0	0	723,445	847,866	1,571,311
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons				31,109	5,463	36,572
Ь	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						0
с	Add lines 7a and 7b				31,109	5,463	36,572
8	Public support (Subtract line 7c from line 6)						1,534,739
-	ction B. Total Support				I		
Cale	ndar year (or fiscal year beginning in) 🕨	<b>(a)</b> 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	<b>(e)</b> 2013	<b>(f)</b> Total
9	A mounts from line 6	0	0	0	723,445	847,866	1,571,311
10a b	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable						0
	income (less section 511 taxes) from businesses acquired after June 30, 1975						0
с	Add lines 10a and 10b						0
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						0
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part						0
13	IV ) Total support. (Add lines 9, 10c,	0	0	0	723,445	847,866	1,571,311
14	11, and 12) <b>First five years.</b> If the Form 990 is f check this box and <b>stop here</b>	-	Ŭ	-	-		
<b>Se</b> 15	ction C. Computation of Publ Public support percentage for 2013			13 column (f))		15	
16	Public support percentage from 201					16	U -70
-	ction D. Computation of Inve						
17	Investment income percentage for 2				nn (f))	17	
18	Investment income percentage from	2012 Schedule	A, Part III, line 1	7		18	

**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 ▶ 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 b 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).

Facts And Circumstances Test						
Return Reference	Explanation					

Schedule A (Form 990 or 990-EZ) 2013

efile GRAPHIC	orint - DO NO	T PROCESS As Filed Data	-	DLN	: 93493321054274
SCHEDULE C		Political Campaign and	d Lobbying	Activities	OMBNº 1545-0047
(Form 990 or 990-EZ Department of the Treasury Internal Revenue Service	) For Organ ► Complet	izations Exempt From Income Ta e if the organization is described be arate instructions. Information ab instructions is at <u>www</u>	ax Under section low. ► Attach to l out Schedule C (F	n 501(c) and section 52 Form 990 or Form 990-EZ. orm 990 or 990-EZ) and its	
<ul> <li>Section 501(c)(3)</li> <li>Section 501(c) (o</li> <li>Section 527 organization a</li> <li>Section 501(c)(3)</li> <li>Section 501(c)(3)</li> </ul>	organizations of ther than section nizations Compl answered "Ye organizations the organizations the	s" to Form 990, Part IV, Line 3, or Complete Parts I-A and B Do not com n 501(c)(3)) organizations Complete ete Part I-A only s" to Form 990, Part IV, Line 4, or hat have filed Form 5768 (election und hat have NOT filed Form 5768 (election s" to Form 990, Part IV, Line 5 (Pr	plete Part ⊢C Parts ⊢A and C be Form 990-EZ, Pa der section 501(h); n under section 50	low Do not complete Part I- rt VI, line 47 (Lobbying A ) Complete Part II-A Do not 01(h)) Complete Part II-B Do	B <b>ctivities), then</b> complete Part II-B p not complete Part II-A
<ul> <li>Section 501(c)(4)</li> <li>Name of the organiz</li> <li>True Colors Fund Inc</li> </ul>		anizations Complete Part III		Employer iden	tification number
The colors rund the				45-2489069	
<ul> <li>2 Political expen</li> <li>3 Volunteer hour</li> </ul>	dıtures s	ganization's direct and indirect politi		►	\$
		e tax incurred by the organization ur		▶	\$
2 Enter the amou	int of any excise	e tax incurred by organization manag	jers under sectior	4955 🕨	\$
4a Was a correction	on made?	ection 4955 tax, did it file Form 47	20 for this year?		∏Yes ∏No ∏Yes ∏No
<b>b</b> If "Yes," descr					4(-)(0)
		ganization is exempt under			<u>1(c)(3).</u>
	int of the filing o	ended by the filing organization for si organization's funds contributed to o			\$
3 Total exempt f	unction expendi	tures Add lines 1 and 2 Enter here	and on Form 112	0-POL, line 17b 🕨 🕨	\$
4 Did the filing of	ganızatıon file <b>I</b>	Form 1120-POL for this year?			✓ Yes □ No
5 Enter the name organization m amount of polit	s, addresses an ade payments in Ical contribution	nd employer identification number (E For each organization listed, enter th ns received that were promptly and o political action committee (PAC) If	e amount paid fro lirectly delivered	m the filing organization's f to a separate political orga	unds Also enter the nızatıon, such as a
<b>(a)</b> Nar	ne	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
For Paperwork Reducti	on Act Notice, se	e the instructions for Form 990 or 99	)-EZ.	at No 50084S Schedule C (	Form 990 or 990-EZ) 2013

Cat No 50084S Schedule C (Form 990 or 990-EZ) 2013

Sc	hedule C (Form 990 or 990-EZ) 2013			Page <b>2</b>
Ρ	art II-A Complete if the organization under section 501(h)).	is exempt under section 501(c)(3) and	d filed Form 5768	(election
	expenses, and share of excess lobb	an affiliated group (and list in Part IV each affiliate sying expenditures) x A and "limited control" provisions apply	d group member's name	, address, EIN,
	Limits on Lobbying E (The term "expenditures" means ar		<b>(a)</b> Filing organization's totals	<b>(b)</b> Affiliated group totals
1a	Total lobbying expenditures to influence public o	pinion (grass roots lobbying)		
b	Total lobbying expenditures to influence a legisl	ative body (direct lobbying)	10,522	
С	Total lobbying expenditures (add lines 1a and 1	))	10,522	
d	O ther exempt purpose expenditures	694,165		
e	Total exempt purpose expenditures (add lines 1	704,687		
f	Lobbying nontaxable amount Enter the amount f	130,703		
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500,000	20% of the amount on line 1e		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
	Over \$17,000,000	\$1,000,000		
g	Grassroots nontaxable amount (enter 25% of lir	le 1f)	32,676	
h	Subtract line 1g from line 1a If zero or less, ent	er -0 -		
i	Subtract line 1f from line 1c If zero or less, ente	r - 0 -		
j	If there is an amount other than zero on either lii section 4911 tax for this year?	ne 1h or line 1i, did the organization file Form 4720	) reporting	Yes ┌─ No

# 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

	Lobbying Expenditures During 4-Year Averaging Period						
	Calendar year (or fiscal year beginning in)	<b>(a)</b> 2010	<b>(b)</b> 2011	<b>(c)</b> 2012	<b>(d)</b> 2013	<b>(e)</b> Total	
2a	Lobbying nontaxable amount				130,703	130,703	
Ь	Lobbying ceiling amount (150% of line 2a, column(e))					196,055	
c	Total lobbying expenditures				10,522	10,522	
d	Grassroots nontaxable amount				32,676	32,676	
e	Grassroots ceiling amount (150% of line 2d, column (e))					49,014	
f	Grassroots lobbying expenditures						

Schedule C (Form 990 or 990-EZ) 2013

# Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

	ach "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying	(a	)		(b)	
activity.		Yes	No		Amour	ıt
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of					
а	Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
С	Media advertisements?					
d	Mailings to members, legislators, or the public?					
е	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	O ther activities?					
j	Total Add lines 1c through 1i	_				
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b	If "Yes," enter the amount of any tax incurred under section 4912					
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 5 501(c)(6).	501(c)	)(5),	or s	ectio	n
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		[	1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?			3		
Par	t IIII-B Complete if the organization is exempt under section 501(c)(4), section 5 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered " line 3, is answered "Yes."					
1	Dues, assessments and similar amounts from members	1				
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political	_				
	expenses for which the section 527(f) tax was paid).					
а	Current year	2a				
b	Carryover from last year	2b				
С	Total	2c				
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3				
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4				
5	Taxable amount of lobbying and political expenditures (see instructions)	5				
Pa	art IV Supplemental Information					,
					_	

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, line 2, and Part II-B, line 1 Also, complete this part for any additional information

Return Reference	Explanation

Schedule C (Form 990 or 990-EZ) 2013

Part IV Supplemental Information (continued)							
Return Reference	Explanation						

Schedule D (Form 990) 2013

efile GRAPHIC	print - DO NOT PROCESS As F	Filed Data -			DLN:	93493321	.054274
<b>SCHEDULE D</b> Form 990)			al Statements			ОМВ Nº 15	
			ered "Yes," to Form 990			<b>20</b> <sup>-</sup>	13
epartment of the Treasury nternal Revenue Service	🕨 Attach to Form 990. 🕨 See separate	e instructions. 🕨	c, 11d, 11e, 11f, 12a, or : Information about Sche <u>irs.gov/form990</u> .	edule D	(Form 990)	Open to Inspe	
Name of the orga True Colors Fund Inc					-	ification num	ber
Part I Orga	nizations Maintaining Donor Ad	vised Funds	or Other Similar F		2489069 Dr Accou	nts. Compl	ete ıf the
	nization answered "Yes" to Form 990	), Part IV, line	6.				
		<b>(a)</b> Dor	or advised funds		( <b>b)</b> Funds a	and other acc	ounts
	at end of year						
	ontributions to (during year)						
	ants from (during year) ilue at end of year						
	nue at end of year nization inform all donors and donor advis	ors in writing that	it the assets held in dor	l nor advi	sed		
funds are the	organization's property, subject to the o nization inform all grantees, donors, and d	rganization's ex	clusive legal control?			∏ Yes	∏ No
used only for conferring in	charitable purposes and not for the bene permissible private benefit?	fit of the donor o	r donor advisor, or for a	ny othe	r purpose	☐ Yes	
	ervation Easements. Complete if			o Forn	n 990, Par	rt IV, line 7.	
☐ Preserva	f conservation easements held by the org tion of land for public use (e g , recreatior n of natural habitat						a
☐ Preserva	tion of open space						
	es 2a through 2d ıf the organızatıon held the last day of the tax year	a qualified conse	ervation contribution in t	the form	n of a conse	ervation	
					Held at	the End of th	ne Year
-	r of conservation easements			2a			
	e restricted by conservation easements			2b			
d Number of co	onservation easements on a certified hist onservation easements included in (c) acc cture listed in the National Register			2c 2d			
	onservation easements modified, transfer	red, released, ex	tinguished, or terminate	ed by th	e organızat	tion during	
Number of st	ates where property subject to conservat	tion easement is	located 🕨				
	anization have a written policy regarding of the conservation easements it holds?	the periodic mor	nitoring, inspection, han	dlıng of	violations,	and <b>[ Yes</b>	∏ No
Staff and vol ▶	unteer hours devoted to monitoring, inspe	ecting, and enfor	cing conservation easei	ments d	urıng the y	ear	
	xpenses incurred in monitoring, inspecting	g, and enforcing	conservation easement	s durıng	, the year		
Does each c	onservation easement reported on line 2( 170(h)(4)(B)(ii)?	(d) above satisfy	the requirements of sea	ction 17	'0(h)(4)(B)	(I)	∏ No
balance she	describe how the organization reports co et, and include, if applicable, the text of th tion's accounting for conservation easeme	ne footnote to the					
	nizations Maintaining Collection			or Ot	ner Simil	ar Assets.	
<b>T</b> C + 1	plete if the organization answered "\ zation elected, as permitted under SFAS :			nue cto	tementars	l balance cho	<u></u>
works of art,	historical treasures, or other similar asse vide, in Part XIII, the text of the footnote	ets held for publi	c exhibition, education,	or rese	arch ın furt		
works of art,	zation elected, as permitted under SFAS : historical treasures, or other similar asse ride the following amounts relating to thes	ets held for publi					blic
(i) <sub>Revenue</sub>	s included in Form 990, Part VIII, line 1				►\$_		
(ii) Assets II	ncluded in Form 990, Part X						
If the organı	zation received or held works of art, histoi punts required to be reported under SFAS						
<b>a</b> Revenues in	cluded in Form 990, Part VIII, line 1				►\$		
<b>b</b> Assets inclu	ded in Form 990, Part X				►\$		

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I OF FAPELWORK REDUCTION ACCINOTICE	

Sche	dule D (Form 990) 2013									Page <b>2</b>
Par	Organizations Maintaining Co	llections of Art	t, His	torical Tr	easur	es, or Ot	her S	Similar A	Assets (a	continued)
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other recoi	ds, ch	neck any of t	he follo	wing that ar	eası	gnıfıcant u	se of its	
а	Public exhibition		d	┌── Loan	orexch	ange progra	ms			
b	✓ Scholarly research		e							
с	Preservation for future generations									
4	Provide a description of the organization's co Part XIII	ollections and expla	iin hov	w they furthe	r the or	ganızatıon's	exen	npt purpos	e in	
5	During the year, did the organization solicit or assets to be sold to raise funds rather than t	o be maintained as	part o	of the organı	zatıon's	collection?			∏ Yes	∏ No
Pai	t IV Escrow and Custodial Arrang					answered	"Yes	" to Form	ı 990,	
	Part IV, line 9, or reported an an									
<b>1</b> a	Is the organization an agent, trustee, custoc included on Form 990, Part X?				tions or	r other asse	ts not		∏ Yes	∏ No
b	If "Yes," explain the arrangement in Part XII	II and complete the	follov	ving table						
-									Amount	
c	Beginning balance						.c			
d	Additions during the year						d			
e	Distributions during the year						-			
f	Ending balance					1	f			
2a	Did the organization include an amount on Fo	orm 990, Part X, lın	e 21?						🗌 Yes	∏ No
b	If "Yes," explain the arrangement in Part XII	II Check here if the	e expla	anation has	been pr	ovided in Pa	rt XII	II		Г
Ра	rt V Endowment Funds. Complete		n ans	wered "Ye						
		(a)Current year	(b	)Prior year	<b>b (c)</b> ⊺w	/o years back	(d)Thr	ree years bad	:k (e)Four	years back
1a	Beginning of year balance	100,000								
b	Contributions	135,000		140,000	)					
С	Net investment earnings, gains, and losses									
d	Grants or scholarships									
е	Other expenditures for facilities	240.000		10.000						
	and programs	210,000		40,000						
f	Administrative expenses									
g	End of year balance	25,000		100,000	)					
2	Provide the estimated percentage of the cur	rent year end balan	ce (lın	ie 1g, colum	n (a)) he	eld as				
а	Board designated or quasi-endowment 🕨									
b	Permanent endowment 🕨									
с	Temporarily restricted endowment F 100 The percentages in lines 2a, 2b, and 2c sho	000 % uld equal 100%								
За	Are there endowment funds not in the posse organization by		ation	that are held	l and ad	Iministered	for the	e	Yes	s No
	(i) unrelated organizations							3	Ba(i)	No
	(ii) related organizations							3	a(ii)	No
b	If "Yes" to 3a(11), are the related organizatio							· · [	3b	
4	Describe in Part XIII the intended uses of th	=								
Par	t VI Land, Buildings, and Equipme		the o	rganızatıor	answ	ered 'Yes'	to Fo	rm 990,	Part IV, l	line
	11a. See Form 990, Part X, line Description of property	10.		(a) Cost o basis (inve		(b)Cost or o basis (othe		(c) Accumu depreciati		Book value
	Land		•							
	Buildings		•							
	Leasehold improvements									
d	Equipment					1				

.

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).)

e Other .

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Schedule D (Form 990) 2013 Part VIII Investments—Other Securities. Com	plate if the organization	answered 'Ves' to Fer	Page 3
See Form 990, Part X, line 12.		-	
<ul> <li>(a) Description of security or category         <ul> <li>(including name of security)</li> </ul> </li> </ul>	( <b>b)</b> Book value	(c) Method of v Cost or end-of-year	
(1)Financial derivatives			
(2)Closely-held equity interests			
Other			
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)			
Part VIIII Investments—Program Related. Cor See Form 990, Part X, line 13.	nplete if the organizatio	n answered 'Yes' to Fo	orm 990, Part IV, line 11c.
(a) Description of investment	(b) Book value	(c) Method of v	aluation
		Cost or end-of-year	market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13 )			
Part IX Other Assets. Complete if the organization		J, Part IV, line 11d See	Form 990, Part X, line 15
(a) Descrip			(b) Book value
(1) SECURITY DEPOSITS			21,670
(2) OTHER ASSETS			8,781
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15.Part XOther Liabilities. Complete if the organ			30,451
Form 990, Part X, line 25.			
1 (a) Description of liability	(b) Book value		
Federal Income taxes	0		
Total. (Column (b) must equal Form 990, Part X, col (B) line 25 )	0		
	0		

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

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Schedule D (Form 990) 2013

Part	XI Reconciliation of Revenue per Audited Financial Statements With Revenue p the organization answered 'Yes' to Form 990, Part IV, line 12a.	er R	<b>eturn</b> Complete ıf
1	Total revenue, gains, and other support per audited financial statements	1	972,372
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
с	Recoveries of prior year grants		
d	Other (Describe in Part XIII )		
е	Add lines <b>2a</b> through <b>2d</b>	2e	97,905
3	Subtract line <b>2e</b> from line <b>1</b>	3	874,467
4	Amounts included on Form 990, Part VIII, line 12, but not on line <b>1</b>		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIII )		
с	Add lines <b>4a</b> and <b>4b</b>	<b>4</b> c	
5	Total revenue Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I, line 12)	5	874,467
Part	XII Reconciliation of Expenses per Audited Financial Statements With Expenses If the organization answered 'Yes' to Form 990, Part IV, line 12a.	per	Return. Complete
1	Total expenses and losses per audited financial statements	1	931,639
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
с	Other losses		
d	Other (Describe in Part XIII )		
е	Add lines <b>2a</b> through <b>2d</b>	2e	97,681
3	Subtract line <b>2e</b> from line <b>1</b>	3	833,958
4	Amounts included on Form 990, Part IX, line 25, but not on line <b>1:</b>		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII )		
с	Add lines <b>4a</b> and <b>4b</b>	<b>4</b> c	
5	Total expenses Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I, line 18)	5	833,958
Part	XIII Supplemental Information		

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

Return Reference	Explanation
Part V - Question 4	Temporarily restricted net assets of True Colors which have been limited by donor-imposed stipulations that either expire with the passage of time or can be fulfilled and removed by the actions of True Colors pursuant to those stipulations
PART X - QUESTION 2	As of December 31, 2013, no amounts have been recognized for uncertain tax positions True Colors' 2012 tax returns and forward are subject to the usual review by the appropriate authorities

Part XIII Supplemental Information (continued)						
Return Reference	Explanation					

Schedule D (Form 990) 2013

efile GRAPHIC prin	t - DO NOT PROCESS	As Filed Dat	a -	DLN:	93493321054274
SCHEDULE G (Form 990 or 990-EZ)	Fun	draising or (	rmation Regard Gaming Activitie	es	омв № 1545-0047 <b>2013</b>
Department of the Treasury nternal Revenue Service	organiza Attach	tion entered more than to Form 990 or Form 99	o Form 990, Part IV, lines 17, \$15,000 on Form 990-EZ, line 0-EZ. PSee separate instructi -EZ) and its instructions is at w	6a. ons.	Open to Public Inspection
Name of the organization True Colors Fund Inc				Employer idei	ntification number
				45-2489069	
	<b>ng Activities.</b> Complete Z filers are not required			to Form 990, Part IV	, line 17.
	e organızatıon raısed funds	through any of the	following activities Che	eck all that apply	
a 🗌 Mail solicitation		е	Solicitation of nor		
<b>b [</b> Internet and em		f	Solicitation of gov	-	
c  Phone solicitati d  In-person solici		g	Special fundraisin	ig events	
	1 have a written or oral agre sted in Form 990, Part VII				
	, highest paid individuals oi			-	
	at least \$5,000 by the orga				
(i) Name and address ındıvıdual or entıty (fundraıser		(iii) Dıd fundraıser have custody or control of contributions?	(iv) Gross receipts from activity	(v) A mount paid to (or retained by) fundraiser listed in col (i)	<b>(vi)</b> Amount paid to (or retained by) organization
1		Yes No	-		
2					
3					
4					
5					
6					
7					
8					
9					
10					
ſotal					

**3** List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing

		G (Form 990 or 990-EZ) 2013				Page 2
Pa	rt II	Fundraising Events. Com more than \$15,000 of fundr events with gross receipts of	aising event contribut			
			(a) Event #1 CONCERT/AUCTION	(b) Event #2	(c) O ther events	(d) Total events (add col (a) through col (c))
			(event type)	(event type)	(total number)	-
Revenue	1	Gross receipts	343,94	D		343,940
eve:	2	Less Contributions	150,000	o l		150,000
	3	Gross income (line 1 minus line 2)	193,94	0		193,940
	4	Cash prizes				
۵	5	Noncash prizes				
eSUa	6	Rent/facility costs				
Expenses	7	Food and beverages				
Drea	8	Entertainment				
Ā	9	Other direct expenses .				
	10	Dırect expense summary Add lır	nes 4 through 9 in columr	n (d)		( )
	11	Net income summary Subtract li	ne 10 from line 3, colum	ו (d)	🕨	193,940
Par	t II	I Gaming. Complete if the o	rganization answered	"Yes" to Form 990, Pa	irt IV, line 19, or rep	
		\$15,000 on Form 990-EZ, li			() 211	
Reveinue			<b>(a)</b> Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
à	1	Gross revenue				
ses	2	Cash prizes				
xpenses	3	Non-cash prizes				
ш	4	Rent/facility costs				
Direct	5	Other direct expenses				
	_		<b>└ Yes%</b>	Г <u>Yes%</u>	<b>└ Yes</b> %_	1
	6	Volunteer labor	∏ No	└ No	∏ No	
	7	Direct expense summary Add line	es 2 through 5 in column (	(d)	🕨	
	8	Net gaming income summary Sub	tract line 7 from line 1, co	olumn (d)		
•	•					
9 a		ter the state(s) in which the organiz the organization licensed to operate				<b>Г</b> Yes <b>Г</b> No
b		'No," explaın				
10a b		re any of the organization's gaming 'Yes," explain	licenses revoked, suspei	nded or terminated during	the tax year?	]
						]

### Schedule G (Form 990 or 990-EZ) 2013

Doe	s the organization operate gaming activities with nonmembers?
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity
	formed to administer charitable gaming?
13	Indicate the percentage of gaming activity operated in
а	The organization's facility
b	An outside facility
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records
	Name 🕨
	Address 🕨
15a	Does the organization have a contract with a third party from whom the organization receives gaming
104	revenue?
Ь	
	amount of gaming revenue retained by the third party $\blacktriangleright$ \$ and the
_	
С	If "Yes," enter name and address of the third party
	Name 🕨
	Address 🕨
16	Gamıng manager ınformatıon
	Name 🕨
	Gaming manager compensation 🕨 \$
	Description of services provided 🕨
	Director/officer     Employee     Independent contractor
17	Mandatory distributions
а	s the organization required under state law to make charitable distributions from the gaming proceeds to
	retain the state gaming license?
Ь	
_	in the organization's own exempt activities during the tax year 🕨 💲
Pa	<b>rt IV Supplemental Information.</b> Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).
	Return Reference Explanation

Page **3** 

True Colors Fund Inc       45-2489069         Part I       General Information on Grants and Assistance         1       Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?         2       Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States         Part II       Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.	321054274
Name of the organization       Employer identification number of the organization number of the organization number of the organization number of the organization on Grants and Assistance       Employer identification number of the selection number of the organization number of the organization number of the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?       Imployer identification number of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?         2       Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States       Imployer identification number of the grants or assistance to Governments and Organizations in the United States.         Part II       Grants and Other Assistance to Governments and Organizations in the United States.       Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.         (a) Name and address of or government       (b) EIN       (c) IRC Code section if applicable       (d) Amount of cash grant       (e) Amount of non-cash assistance (book, FMV, appraisal, non-cash assistance)       (h) Purp or assistance	3 Jublic
Part I       General Information on Grants and Assistance         1       Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?         2       Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States         Part II       Grants and Other Assistance to Governments and Organizations in the United States.         Part II       Grants and Other Assistance to Governments and Organizations in the United States.         Common Specific Code section of organization or government       (c) IRC Code section if applicable         (a) Name and address of or government       (b) EIN         (c) IRC Code section of organization       (c) IRC Code section if applicable         (d) Amount of cash or government       (c) IRC Code section if applicable         (b) EIN       (c) IRC Code section if applicable         (c) Rec Code section or government       (c) IRC Code section if applicable         (b) Amount of cash assistance       (b) EIN         (c) IRC Code section or government       (b) EIN         (c) IRC Code section or government       (c) Amount of cash assistance         (b) Amount of cash or granization       (b) EIN         (c) IRC Code section or government       (b) EIN         (c) IRC Code section or government	
1       Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?         2       Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States         PartIII       Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.         (a) Name and address of or government       (b) EIN       (c) IRC Code section if applicable       (d) Amount of cash grant       (e) Amount of non-cash assistance       (f) Method of valuation (book, FMV, appraisal, on-cash assistance       (g) Description of non-cash assistance       (h) Purp or assistance	
organization if applicable grant cash valuation non-cash assistance or assist or government in the second	-Yes
	ose of grant ance
(1) One Heartland       39-1763115       501(c)(3)       24,000       donation         2101 Hennepin Ave Ste 200       Minneapolis, MN 55405       600       000       000	

2	Enter total number of section 501(c)(3) and government organizations listed in the line 1 table .										
_		-	-	-							

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Schedule I (Form 990) 2013

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a)Type of grant or assistance	( <b>b)</b> Number of recipients	<b>(c)</b> A mount of cash grant	<b>(d)</b> A mount of non-cash assistance	<b>(e)</b> Method of valuation (book, FMV , appraisal, other)	(f)Description of non-cash assistance
Part IV Supplemental Inform	nation. Provide the inf	ormation required in P	art I, line 2, Part III, co	lumn (b), and any other a	dditional information.
Return Reference	Explanation				

Schedule I (Form 990) 2013

efile GRAPHIC prin	nt - DO NOT PROCESS	As Filed Data -		DLN: 93493321054274		
SCHEDULE O				OMB No 1545-0047		
(Form 990 or 990-EZ)	Supplementa	Supplemental Information to Form 990 or 990-EZ				
Department of the Treasury Internal Revenue Service	2013 Open to Public Inspection					
	Information about	•	or 990-EZ) and its instructions is at	:		
		www.irs.gov/fo	rm990			
	Name of the organization Employer ident					
True Colors Fund Inc						
			45-248	9069		

## 990 Schedule O, Supplemental Information

Return Reference	Explanation
Part VI - Section A Question 2	
Part VI - Section B Question 11b	The 990 Form was filled out by an outside accountant and reviewed by the True Colors Fund's s Executive Director and President/Treasurer In addition both of the True Colors Fund's A udit and Finance Committee and full Board of Directors were given the opportunity to revie w the 990 before being submitted to the IRS PART VI - SECTION B QUESTION 12C Each Decemb er at the winter Board of Directors meeting, the conflict of interest policy is reviewed a nd each member fills out a disclosure statement
Part VI - Section C Question 19	The organization makes its governing documents and financial statements available to the public upon request