Form 990 Department of the Treasury

Return of Organization Exempt From Income Tax

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

▶ Do not enter Social Security numbers on this form as it may be made public.

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

2013
Open to Public

OMB No. 1545-0047

Open to Public Inspection

A For the 2013 calendar year, or tax year beginning , 20 , 2013, and ending C Name of organization D Employer identification number B Check if accide DRUG PREVENTION RESOURCES, INC. Doing Business As 75-0911671 Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Name change 2100 1200 WEST WALNUT HILL LANE (972) 518-1821 Initial return City or town, state or province, country, and ZIP or foreign postal code Terminated Amended return Application pending IRVING, TX 75038 G Gross receipts \$ 1,286,256. Name and address of principal officer. H(a) Is this a group return for MARVIN GROOTE Yes X No 1200 W. WALNUT HILL LANE IRVING, TX 75038 H(b) Are all subordinates included: No X 501(c)(3) Tax-exempt status; 501(c) ((insert no.) 4947(a)(1) or 527 if "No," attach a list, (see instructions) Website: ▶ WWW.DPRI.COM H(c) Group exemption number Form of organization: X | Corporation Trust Association Other > L Year of formation: 1935 M State of legal domicile: ΤX Part | Summary 1 Briefly describe the organization's mission or most significant activities: TO PREVENT YOUTH SUBSTANCE ABUSE THROUGH INNOVATIVE DELIVERY OF EVIDENCE BASED IN STRATEGIES THAT EMPOWER Governance YOUTH, FAMILIES, & COMMUNITIES TO FLOURISH WITHIN THEIR ENVIRONMENTS. 2 Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets. 3 Number of voting members of the governing body (Part VI, line 1a) 8. Activities & Number of independent voting members of the governing body (Part VI, line 1b) 8. 5 Total number of individuals employed in calendar year 2013 (Part V, line 2a) 16. 5 6 Total number of volunteers (estimate if necessary) 6 200. 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a b Net unrelated business taxable income from Form 990-T, line 34 . . . Prior Year **Current Year** Contributions and grants (Part VIII, line 1h) 18,594. 24,983. COPY FOR Program service revenue (Part VIII, line 2g) 1,094,038. 1.123.775. PUBLIC INSPECTION 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 1,152. 941. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 119,813. 204,693. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 1,318,477. 1,269,512. Grants and similar amounts paid (Part IX, column (A), lines 1-3) n Benefits paid to or for members (Part IX, column (A), line 4) 0 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10), 862,451. 836,441. 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) ▶ 66, 172. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 345,952. 409,711. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 1,208,403. 1,246,152. 19 110,074. 23,360. 9 **Beginning of Current Year** End of Year Total assets (Part X, line 16) 646,780. 694,919. 20 21 Total liabilities (Part X, line 26) 104,127. 128,906. 22 Net assets or fund balances. Subtract line 21 from line 20. 542,653. 566,013. Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Sign Signature of officer Here MARVIN GROOTE PRESIDENT Type or print name and title Print/Type preparer's name Preparer's signature PTIN if Check Paid WILLIAM H SIMS WILLIAM H SIMS self-employed P00004539 Preparer Firm's name > SALMON SIMS THOMAS & ASSOC PLLC 05-0568611 Firm's EIN 972-392-1143 Firm's address > 12720 HILLCREST RD., SUITE 500 DALLAS, TX 75230 Phone no. May the IRS discuss this return with the preparer shown above? (see instructions) X Yes For Paperwork Reduction Act Notice, see the separate instructions. Form 990 (2013)

For	m 990 (2013)	Page 2
Pa	art III Statement of Program Service Accomplishments	
_	Check if Schedule O contains a response or note to any line in this Part III	للل
1	Briefly describe the organization's mission:	
	DRUG PREVENTION RESOURCES, INC.IS DEDICATED TO PREVENTING YOUTH	
	SUBSTANCE ABUSE THROUGH INNOVATIVE DELIVERY OF EVIDENCE BASED	
	STRATEGIES THAT EMPOWER YOUTH, FAMILIES, AND COMMUNITIES TO FLOURISH	
_	WITHIN THEIR ENVIRONMENTS.	
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?	No.
	If "Yes," describe these new services on Schedule O.	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	No.
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measurexpenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to complish the services of the services are required to report the amount of grants and allocations to complish the services are required to report the amount of grants and allocations to complish the services are required to report the amount of grants and allocations to complish the services are required to report the amount of grants and allocations to complish the services are required to report the amount of grants and allocations to complish the services are required to report the amount of grants and allocations to complish the services are required to report the amount of grants and allocations to complish the services are required to report the amount of grants and allocations to complish the services are required to report the amount of grants and allocations to complish the services are required to report the amount of grants and allocations are required to report the amount of grants and allocations are required to report the amount of grants are required to report the amount of grants are required to report the amount of grants are required to report the services	
	the total expenses, and revenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$ 1,106,916, including grants of \$ 0) (Revenue \$)	
	PREVENTION PROGRAMMING AND TRAINING WAS PROVIDED TO NUMEROUS	
	GROUPS, ORGANIZATIONS AND INDIVIDUALS, SERVING APPROXIMATELY 5,000	
	YOUTH AND ADULTS. THIS INCLUDED PROVIDING DIRECT PREVENTION	
	SERVICES WITH THE DELIVERY OF EVIDENCE-BASED CURRICULUMS AND	
	FACILITATING COMMUNITY COALITIONS IN PREVENTION STRATEGIES.	
	TACIBITATING COMMONITY COADITIONS IN FREVENTION STRATEGIES.	_
	S. 1	
4b	(Code:) (Expenses \$, including grants of \$) (Revenue \$)	
	PRODUCT DEVELOPMENT DIVISION PROVIDED DRUG EDUCATION MATERIALS TO	
	BE USED IN PREVENTION EDUCATION.	
4c	(Code:) (Expenses \$including grants of \$) (Revenue \$)	
		_
		-
4d	Other program services (Describe in Schedule O.)	
_	(Expenses \$ including grants of \$) (Revenue \$)	
40	Total program service expenses \(\) 1.111.069.	

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Part	t IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"	١.,	_x	
2	complete Schedule A	1 2	<u> </u>	Х
2 3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
3	candidates for public office? If "Yes," complete Schedule C, Part I	3		х
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		х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,	-	-	- 1
3	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,	1		
	Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			- 11
•	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	<u> </u>		
_	complete Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a			
_	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,	7-1-7	17-17-2	
	VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a	x	
b	Did the organization report an amount for investments-other securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
C	Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		_X
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes,"			
	·	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if		i	
	the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate	l l		••
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	-	Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	ا ۔۔ ا		v
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			v
4-	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	-	Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	ا ــــ ا		v
40	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	4.		х
40	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	46		Х
20 ~	If "Yes," complete Schedule G, Part III	19		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a 20b		Λ.
		FVU		

Part	Checklist of Required Schedules (continued)			
24	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	$\overline{}$	Yes	No
21	government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		х
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		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		Х
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25a	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
ď	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
þ	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part L	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payable to any			
	current or former officers, directors, trustees, key employees, highest compensated employees, or	_		1.0
_	disqualified persons? If so, complete Schedule L, Part II	26		Х
7	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,	1		
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			v
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
8	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
_	Part IV instructions for applicable filing thresholds, conditions, and exceptions): A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		х
a b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete	204	-	-
U	Schedule L, Part IV	28b		х
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)	200		
•	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Х
9	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
0	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		Х
1	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		X
2	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		X
3	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
4	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
	or IV, and Part V, line 1	34		X
5 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
6	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? If "Yes," complete Schedule R,	,		v
	Part VI Side the constitution of the Con	37		_X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and	38	x	
	19? Note. All Form 990 filers are required to complete Schedule O	J0 1	47	2013

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Par	t 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			$. \square$
			Yes	No
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 0			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c	Х	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return . 2a 16			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	form.Or
9	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		2000	v
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a 3b		Х
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	30		
44	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		Х
ь	If "Yes," enter the name of the foreign country: ▶	1000		
-	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			20
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		х
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
	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		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or		}	
	gifts were not tax deductible?	6b		
7		10000		
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	1	X
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	\vdash	
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	7.		v
d	required to file Form 8282?	7с		Х
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х
f	Did the organization during the year, pay premiums, directly or indirectly, no a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
-	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting	Total Control	1000	200
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			
	organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	NEWS	1000	
	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:		NET!	FINE
	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:	- 31		
	Gross income from members or shareholders			Hay
D	Gross income from other sources (Do not net amounts due or paid to other sources	T-		
12-	against amounts due or received from them.)	420	-	
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12a	5000 I	- 2
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?	13a		- 16
a	Note. See the instructions for additional information the organization must report on Schedule O.	.54	- 1	Comment of the Contract of the
ь	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	1123	- 100	300
C	Enter the amount of reserves on hand		200	2.0
14a		14a		Х
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

Par	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O.			
	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	в		
	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.			
ь	·	A		
2		Ŧ		
-	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	2		x
•	any other officer, director, trustee, or key employee?		_	112
3	Did the organization delegate control over management duties customarily performed by or under the direct	١.		v
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4_		-
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	_5_		X
6	Did the organization have members or stockholders?	6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			
	one or more members of the governing body?	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
	stockholders, or persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:			
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Revenue	Code	9.)	
			Yes	No
102	Did the organization have local chapters, branches, or affiliates?	10a	х	_
	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	x	
44-		11a	X	
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form?	IId		
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	40-	х	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	<u>12a</u>	Λ.	-
þ	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give		v	
	rise to conflicts?	12b	Λ	
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			-
	describe in Schedule O how this was done	12c		
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b	Х	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a		Х
ь	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b		
Sect	on C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ► NONE REQUIRED			
18				
10	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public inspection. Indicate how you made these available. Check all that apply.	50 T(C	.)(J)S	only)
	X Own website Another's website X Upon request Other (explain in Schedule O)			
40				
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of int	erest	policy	, and
	financial statements available to the public during the tax year.			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization: MANUS Y. LLOYD 1200 WEST WALNUT HILL LANE, STE 2100 IRVING, TX 75038 972-518-1821	ne		
JSA	Organization: ►MAVIS Y, LLOYD 1200 WEST WALNUT HILL LANE, STE 2100 IRVING, TX 75038 972-518-1821	Form	990	(2013)

(201	-,					1000				22012	Lohos
Part VII	Compensation	of	Officers,	Directors,	Trustees,	Key	Employees,	Highest	Compensated	Employees	, and
	Independent Co	onti	ractors								
	Check if Schedu	ıle	O contains	a response	or note to	any li	ne in this Part	VII			. 🖂

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	box,	unle: er an:	Pos heck ss pe	rson	is both for/trust employee	an	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
	12.00									
(2)STEVE MOORE VICE CHAIR/DIRECTOR	20.00	X		X				0	0	0
(3)DR OLLIE MALONE VGICE CHAIR/DIRECTOR	3.00	х		х				0	0	C
14)JERRY ASHCRAFT TREASURER/DIRECTOR	3.00	Х		х				0	0	0
(5)MAURICE MOSS DIRECTOR	1.00	х						0	0	0
(6)ALVIE BURDINE DIRECTOR	1.00	Х						0	0	0
(7)MICHELE HOPKINS DIRECTOR	0	х						0	0	0
(8)CHANDA D. MCGHEE, PH.D DIRECTOR	0	х						0	0	0
(9)DANYEL SURRENCY DIRECTOR	1.00	Х						0	0	0
(10)KATHERINE TRUNGALE DIRECTOR	3.00	х						0	0	0
(11)MAVIS Y. LLOYD CEO	35.00			х				91,837.	0	13,790.
(12)LORA KAY MAXWELL CFO (13)	35.00			Х				72,744.	0	12,149.
(14)										

Form 990 (2013)

Form 990 (2013)

Part VIISection A. Officers, Directors, To (A) Name and title	(B) Average hours per week (list any hours for	(C) Position (do not check more than or box, unless person is both a officer and a director/truste					one an	(D) Reportable compensation from the	(E) Reportable compensation fro related organizations	(F) Estimated
Xw	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC	from the organization and related organizations
									"	
•••••										
	5.24									j.
								"		
									. "	
b Sub-total c Total from continuation sheets to Part VII, s d Total (add lines 1b and 1c)	Section A .						* * *	164,581. 0 164,581.		0 25,939 0 25,939
Total number of individuals (including but no reportable compensation from the organization)	limited to the		liste				o re		\$100,000 of	30,000
3 Did the organization list any former offi employee on line 1a? If "Yes," complete Scheo	cer, directo	r, or	tru	ste	e, I	key e	emp	loyee, or highest	compensated	Yes No
For any individual listed on line 1a, is the organization and related organizations gindividual	eater than	\$15 • • •	0,0	00?		"Yes	," (complete Schedu	le J for such	4 X
5 Did any person listed on line 1a receive or for services rendered to the organization? If ")	accrue coi es," complet	mpen te Sch	satio ledu	on f <i>le J</i>	rom for	any such	uni pers	elated organization	on or individual	5 X
Section B. Independent Contractors 1 Complete this table for your five highest cor compensation from the organization. Report year.										
(A) Name and business ad	(A) Name and business address							(B) Description of se	rvices	(C) Compensation
2 Total number of independent contractors (more than \$100,000 in compensation from t				ited		thos	e li	sted above) who	received	

Pa	rt VI	Statement of Reve Check if Schedule O		ense or note to an	v line in this Part V	 III		
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
활	1a	Federated campaigns	1a					1 2 2 2 2 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1
E IN	ь	.						
A P	c	Fundraising events	<u>1c</u>			250 11541		
율	d	Related organizations	<u>1d</u>					1 30 30
Sin	e	Government grants (contribu	utions) 1e		1 200 200	200		I E SIIIIA I
le in	f	All other contributions, gifts, grad	nts,					
# <u>5</u> 2		and similar amounts not include	dabove . 1f	24,983.				_ [SS = S]\
Contributions, Giffs, Grants and Other Similar Amounts	g	Noncash contributions included						
	h	Total. Add lines 1a-1f	<u> </u>	Business Code	24,983.			
JE J	۱	DEPURISHED PROGRAMME		Busiliess Code	1 100 005			
Program Service Revenue	2a	PREVENTION PROGRAMMING			1,123,775.	1,123,775		
	b					+		
	4							
E	l "							
Ē	f	All other program service rev	Menue					
P.	g	Total. Add lines 2a-2f			1,123,775.	week ye his		
	3	Investment income (includin						
		other similar amounts)			941.			941.
	4	Income from investment of			0		<u></u>	
	5	Royalties • • • • • • •			113,424.			113,424.
			(i) Real	(ii) Personal				
	6a	Gross rents	<u> </u>		SERVICE DE LA CONTRACTION DE L			
	b	Less: rental expenses		-				
	С	Rental income or (loss)						
	d	Net rental income or (loss	(i) Securities	(ii) Other	0			
	7a	Gross amount from sales of	(i) Securities	(II) Other				
		assets other than inventory		 				
	b	Less: cost or other basis			-900x (T			医正常 医外
		and sales expenses			LU SV HIM			
	d	Gain or (loss)			0			
•		Gross income from fundra						Park - The
Ē	Ua	events (not including \$	-					
9.4		of contributions reported on						
æ		See Part IV, line 18	•					
Other Revenu	b	Less: direct expenses						
Ö	С	Net income or (loss) from ful	ndraising events .	▶	0			
	9a	Gross income from gaming a						
		See Part IV, line 19						
	þ	Less: direct expenses						
	С	Net income or (loss) from ga	=		0			
	10a	Gross sales of invento						
		returns and allowances		23, 133.		3 10 9		
	D C	Less: cost of goods sold Net income or (loss) from sal	b		6 200	6 300		
		Miscellaneous Reven		Business Code	6,389.	6,389	e 1100-11	
	11a			-				
	ь							
	c							
	d	All other revenue						
	e	Total. Add lines 11a-11d •			0			
	12	Total revenue. See instructio			1,269,512.	1,130,164.		114,365.

75-0911671

Part IX Statement of Functional Expenses

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

	Check if Schedule O contains a response or note to any line in this Part IX									
	not include amounts reported on lines 6b, 7b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses					
1	Grants and other assistance to governments and									
	organizations in the United States. See Part IV, line 21	d								
2	Grants and other assistance to individuals in									
_	the United States. See Part IV, line 22	o								
3	Grants and other assistance to governments,									
	organizations, and individuals outside the									
	United States. See Part IV, lines 15 and 16	o								
4	Benefits paid to or for members	0								
5	Compensation of current officers, directors,									
	trustees, and key employees	190,521.	169,868.	10,536.	10,117.					
6	Compensation not included above, to disqualified									
	persons (as defined under section 4958(f)(1)) and									
	persons described in section 4958(c)(3)(B)	O								
7	Other salaries and wages	531,706.	474,069.	29,403.	28,234.					
	Pension plan accruals and contributions (include section									
	401(k) and 403(b) employer contributions)	34,081.	30,386.	1,885.	1,810.					
9	Other employee benefits	35,672.	31,805.	1,973.	1,894.					
10	* *	44,461.	39,641.	2,459.	2,361.					
11	Fees for services (non-employees):									
	Management	0								
	Legal	300.	267.	17.	16.					
c	Accounting	15,309.	13,649.	847.	813.					
d	Lobbying	0								
	Professional fundraising services. See Part IV, line 17.	0								
f	Investment management fees	0								
g	Other. (If line 11g amount exceeds 10% of line 25, column									
	(A) amount, list line 11g expenses on Schedule O.)	37,388.	33,336.	2,067.	1,985.					
12	Advertising and promotion	5,938.	5,295.	328.	315.					
13	Office expenses	170,687.	152,185.	9,437.	9,065.					
14	Information technology	0								
15	Royalties	0								
16	Occupancy	75,899.	67,671.	4,197.	4,031.					
17	Travel	36,025.	32,120.	1,992.	1,913.					
18	Payments of travel or entertainment expenses									
	for any federal, state, or local public officials	0								
	Conferences, conventions, and meetings	0								
20	Interest	0								
21	Payments to affiliates	0	5 5 5 5	240	207					
22	Depreciation, depletion, and amortization	6,184.	5,515.	342.	327.					
23	Insurance	U								
24										
	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.)		55.040		2.000					
а	STRATEGIC IMPLEMENTATION	61,981.	55,262.	3,428.	3,291.					
b										
C										
d	Attachan									
	All other expenses	1 246 152	1 111 060	60 011	66 170					
	Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the	1,246,152.	1,111,069.	68,911.	66,172.					
-0	organization reported in column (B) joint costs from a combined educational campaign and fundralsing solicitation. Check here	ļ								
	following SOP 98-2 (ASC 958-720)	0								

Part X Balance Sheet

	Check if Schedule O contains a response or note to any line in this Pa	<u>πχ</u>		
		(A) Beginning of year		(B) End of year
•	Cash - non-interest-bearing	54,190.	1	145,522.
2	Savings and temporary cash investments	493,849.		456,560.
3	Pledges and grants receivable, net	(3	
4	Accounts receivable, net	82,806.	4	80,616.
!	Loans and other receivables from current and former officers, directors,			
	trustees, key employees, and highest compensated employees.			
Ι,	Complete Part II of Schedule L Loans and other receivables from other disqualified persons (as defined under section	C	5	
6	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			
2	organizations (see instructions). Complete Part II of Schedule L	<u>C</u>	6	
(i)	Notes and loans receivable, net		7	C
~		500.		500.
2	The state of the s	5,221.	9	7,691.
10	a Land, buildings, and equipment: cost or			
	other basis. Complete Part VI of Schedule D 10a 44, 628. b Less: accumulated depreciation 10b 44, 470.	6 242	4.0	150
		6,342.		158.
11			11	
12			12	0
14			14	0
15		3,872.		3,872.
16		646,780.		694,919.
17		31,905.		29,827.
18			18	23,027.
19	Deferred revenue	72,222.		77,784.
20			20	77,704.
	Escrow or custodial account liability. Complete Part IV of Schedule D		21	0
Liabilities 25			-	
출	trustees, key employees, highest compensated employees, and			
≝	disqualified persons. Complete Part II of Schedule L	0	22	0
23	·		23	0
24	· · ·		24	0
25				
	parties, and other liabilities not included on lines 17-24). Complete Part X			
	of Schedule D	0	25	21,295.
26	Total liabilities. Add lines 17 through 25	104,127	26	128,906.
Se	Organizations that follow SFAS 117 (ASC 958), check here X and complete lines 27 through 29, and lines 33 and 34.			
[27	Unrestricted net assets	542,653.	27	566,013.
흥 28	Temporarily restricted net assets	O	28	0
핃 29	Permanently restricted net assets	ä	29	0
Net Assets or Fund Balances 2 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34.			
표 30	Capital stock or trust principal, or current funds		30	
<u>ي</u> پير 31	Paid-in or capital surplus, or land, building, or equipment fund		31	
≝ 32	Retained earnings, endowment, accumulated income, or other funds		32	· · · · · · · · · · · · · · · · · · ·
울 33		542,653.	33	566,013.
_ 34	Total liabilities and net assets/fund balances	646,780.		694,919.

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Page 12

Check if Schedule O contains a response or note to any line in this Part XII 1 Total revenue (must equal Part VIII, column (A), line 12). 1, 269, 512. 2 Total expenses (must equal Part IX, column (A), line 25). 2 1, 246, 152. 3 Revenue less expenses. Subtract line 2 from line 1. 3 23, 360. 4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)). 4 542, 653. 5 Net unrealized gains (losses) on investments. 5 0 0 0 1 0 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)). 4 542, 653. 6 Donated services and use of facilities	Par	XI Reconciliation of Net Assets								
Total expenses (must equal Part IX, column (A), line 25) Revenue less expenses. Subtract line 2 from line 1 Revenue less expenses. Subtract line 2 from line 1 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) Net unrealized gains (losses) on investments Donated services and use of facilities Donated services and use of facilities Conorded services and use of facilities Prior period adjustments Other changes in net assets or fund balances (explain in Schedule O) Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)) Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII Accounting method used to prepare the Form 990: Cash X Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: X Separate basis Consolidated basis Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis Both consolidated and separate basis If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis Both consolidated and separate basis If "Yes," there is not a separate basis Consolidated basis Both consolidated and separate basis If the organization changed either its oversight process or selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. 3a As a result of		Check if Schedule O contains a response or note to any line in this Part XI								
Revenue less expenses. Subtract line 2 from line 1	1	Total revenue (must equal Part VIII, column (A), line 12)	1							
Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) Net unrealized gains (losses) on investments Donated services and use of facilities Donated services and use of facilities Prior period adjustments Prior period adjustments Other changes in net assets or fund balances (explain in Schedule O) Other changes in net assets or fund balances (explain in Schedule O) Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)) Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII. 1 Accounting method used to prepare the Form 990: Cash X 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? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis. Consolidated basis or both: Separate basis Consolidated basis or both: Separate basis Consolidated basis or both: X Separate basis Consolidated basis or both: X Separate basis Consolidated basis or both: X Separate basis Consolidated basis both consolidated and separate basis Consolidated basis both consolidated and separate basis If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? b If "Yes," did the organization undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a	2	Total expenses (must equal Part IX, column (A), line 25)	2	1,2						
Net unrealized gains (losses) on investments Donated services and use of facilities Net unrealized gains (losses) on investments Donated services and use of facilities Net asserts or fund belances (explain in Schedule O) Prior period adjustments Net asserts or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (8)) Trinancial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII Accounting method used to prepare the Form 990: Cash X Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis Consolidated basis, or both: Separate basis Consolidated basis, or both: Yes No Consolidated basis Both consolidated and separate basis If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis Consolidated basis Both consolidated and separate basis If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis both consolidated and separate basis If the organization changed either its oversight process or selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? If "Yes," did the organization undergo the required audit	3	Revenue less expenses. Subtract line 2 from line 1	3							
6 Donated services and use of facilities	4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	542,653.						
Threstment expenses	5	Net unrealized gains (losses) on investments								
8 Prior period adjustments	6	Donated services and use of facilities								
9 Other changes in net assets or fund balances (explain in Schedule O)	7	Investment expenses								
10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	8	Prior period adjustments	_8_							
Separate basis Consolidated basis Both consolidated and separate basis Consolidated basis Consolidated basis Both consolidated and separate basis Consolidated basis Consolidated basis Both consolidated and separate basis Consolidated basis Conso	9	Other changes in net assets or fund balances (explain in Schedule O)	9			0				
Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII	10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line								
Check if Schedule O contains a response or note to any line in this Part XII . 1			10	5	66,	013.				
Accounting method used to prepare the Form 990: CashX Accrual Other	Part					_				
1 Accounting method used to prepare the Form 990: Cash X 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? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis b Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: X Separate basis Consolidated basis Both consolidated and separate basis c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		Check if Schedule O contains a response or note to any line in this Part XII				Щ				
If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. 2a Were the organization's financial statements compiled or reviewed by an independent accountant? 2a X If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis b Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: X Separate basis Consolidated basis Both consolidated and separate basis c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? 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.					Yes	No				
Schedule O. 2a Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis b Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: X Separate basis Consolidated basis Both consolidated and separate basis If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	1			. -						
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Separate basis Consolidated basis Both consolidated and separate basis b Were the organization's financial statements audited by an independent accountant?		- · · · · · · · · · · · · · · · · · · ·	piled o							
b Were the organization's financial statements audited by an independent accountant?										
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separate basis, consolidated basis, or both: X Separate basis Consolidated basis Both consolidated and separate basis c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	b			•	Х					
X Separate basis Consolidated basis Both consolidated and separate basis c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		If "Yes," check a box below to indicate whether the financial statements for the year were audite	ed on a							
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?										
of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		X Separate basis Consolidated basis Both consolidated and separate basis								
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	¢	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversi	ght							
Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		of the audit, review, or compilation of its financial statements and selection of an independent account	tant?	2c	Х					
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		If the organization changed either its oversight process or selection process during the tax year, ex	plain in							
the Single Audit Act and OMB Circular A-133?		Schedule O.								
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits. 3b	3a	As a result of a federal award, was the organization required to undergo an audit or audits as set	forth in							
required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits. 3b				• —		X				
	b									
		required audit or audits, explain why in Schedule O and describe any steps taken to undergo such aud	its.							

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

20**13**

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

Name of	the organization		-	_				Emplo	yer ider	ntificatio	ո ոսուե	er	
DRUG	PREVENTION RES	OURCES, INC.							75	-0911	671		
Part I	Reason for Pub	lic Charity Statu	s (All organizations mu	ıst cor	nplete	this p	art.) Se	e instr	uctions	3,			
The org	· ·		cause it is: (For lines 1 th	_		_		•					
-1 └_		A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).											
2	A school described	school described in section 170(b)(1)(A)(ii). (Attach Schedule E.)											
3	· '	r a cooperative hospital service organization described in section 170(b)(1)(A)(iii).											
4	A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the												
	hospital's name, city, and state:												
5	An organization of	perated for the be	nefit of a college or univ	ersity	owned	or op	erated	by a go	vernme	ental u	nit des	cribe	ni b
	section 170(b)(1)(A)(iv). (Complete F	Part II.)										
6			or governmental unit des										
7	An organization th	at normally receive	es a substantial part of it	s supp	ort fro	m a go	vernme	ental ur	nit or fr	om the	gener	al pu	blic
_	described in section	on 170(b)(1)(A)(vi).	. (Complete Part II.)										
8	A community trust	described in secti	on 170(b)(1)(A)(vi). (Com	iplete l	Part II.)								
9 X	An organization th	at normally receive	es: (1) more than 331/3%	6 of its	suppo	ort from	contrib	outions,	memb	ership	fees, a	nd gr	OSS
			exempt functions - subj										
			ome and unrelated busi						n 511	tax) fr	om bu	sines	ses
			ne 30, 1975. See section										
10			ted exclusively to test for	-					•				
11		-	rated exclusively for the			•							
			pported organizations de									sect	ion
			es the type of supporting	_						_			
	a Type I	b Type II	c Type III-Function				_	Type II				_	
e			e organization is not con										
			other than one or more	publicl	y supp	orted o	rganiza	itions d	lescribe	ed in se	ection 5	09(a)(1)
_	or section 509(a)(2	•											
f	-		n determination from the	e IRS	that it	is a T	ype I, 1	Type II,	or Typ	e III sı	ıpporti	ng _	_
	organization, check		.,, , , , , ,									. L	
9		_	nization accepted any gift	t or co	ntributi	on fron	any of	the					
	following persons?									÷ .	г		-
			tly controls, either alone									Yes	No
	(III) Delow, the	governing body of	the supported organization	on?							11g(i)	-	
			scribed in (i) above?								11g(ii)	_	
			on described in (i) or (ii) a								11g(iii)	\perp	_
<u>h</u>			ut the supported organiza	<u> </u>									
(1)	lame of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9		ls the zation in		ou notify enization		s the zation in	(VII) Ar	nount of suppor		ary
			above or IRC section	col. (i) listed in in co		in col. (i	In col. (i) of your co		rganized			-	
			(see instructions))	docu	ment?		oort?		U.S.?				
		<u> </u>		Yes	No	Yes	No	Yes	No				—
(A)													
	· · · · · · · · · · · · · · · · · · ·							-					—
(B)													
													—
(C)													
													—
(D)													
													_
(E)													
													_
Total													

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

Part II

	Part III. If the organization fa	ils to qualify u	nder the tests	listed below, p	please comple	te Part III.)	
Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3				0-0-0-0-0-0		
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.			A-11-11			
Sec	tion B. Total Support		· · · · · · · · · · · · · · · · · · ·				
Cale	ndar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11	Total support. Add lines 7 through 10	0.000					
12	Gross receipts from related activities, etc. (s	see instructions) .				12	
13	First five years. If the Form 990 is forganization, check this box and stop here	or the organizat	tion's first, secor	d, third, fourth,	or fifth tax ye	ar as a section	501(c)(3)
Sec	tion C. Computation of Public Sup	port Percenta	ge				
14	Public support percentage for 2013 (li	ne 6, column (f)) divided by line	11, column (f))		14	%
15	Public support percentage from 2012						%_
16a	331/3% support test - 2013. If the o						
	this box and stop here. The organization						
b	331/3% support test - 2012. If the o						
	check this box and stop here. The orga						
17a	10%-facts-and-circumstances test - 2	-	•				
	10% or more, and if the organization			•		•	,
	Part IV how the organization meets t						upported
	organization						▶□
D	10%-facts-and-circumstances test - 2				•		
	15 is 10% or more, and if the orga						•
	Explain in Part IV how the organization					•	
18	supported organization						
	instructions				190		
						ichedule A (Form 9	

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

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

Sec	Section A. Public Support							
Cale	ndar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total	
1	Gifts, grants, contributions, and membership fees							
	received. (Do not include any "unusual grants.")	14,323.	14,355.	14,063.	18,595.	24,983.	86,319.	
2	Gross receipts from admissions, merchandise							
	sold or services performed, or facilities			i				
	furnished in any activity that is related to the							
	organization's tax-exempt purpose	1,288,153.	1,125,095	1,124,033.	1,112,581.	1,146,908.	5,796,770.	
3				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	-,,			
	unrelated trade or business under section 513		1				0	
4	Tax revenues levied for the							
	organization's benefit and either paid							
	to or expended on its behalf					i	0	
5	The value of services or facilities							
•	furnished by a governmental unit to the							
	organization without charge							
6	Total. Add lines 1 through 5	242202426	144874567	1.120.000	20.000.000	1,171,891.	5 002 000	
	Amounts included on lines 1, 2, and 3	1,302,476.	1,139,450.	1,138,096.	1,131,176.	1,1/1,891.	5,883,089.	
7 62	received from disqualified persons						-	
ь	Amounts included on lines 2 and 3						- 0	
	received from other than disqualified							
	persons that exceed the greater of \$5,000		1					
	or 1% of the amount on line 13 for the year						0	
	Add lines 7a and 7b						0	
8						-		
<u> </u>	line 6.)						5,883,089.	
	tion B. Total Support	(=) 2000	(b) 2010	(a) 2011	(d) 2012	(=) 2012	(D Tetal	
	ndar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total	
9 10 a	Amounts from line 6,	1,302,476.	1,139,450	1,138,096.	1,131,176.	1,171,891.	5,883,089.	
iva	payments received on securities loans,							
	rents, royalties and income from similar	i						
	sources	10,883.	147,199,	172,959.	191,115.	114,365.	636,521.	
D	Unrelated business taxable income (less							
	section 511 taxes) from businesses							
	acquired after June 30, 1975						0	
	Add lines 10a and 10b	10,883.	147,199.	172,959.	191,115.	114,365.	636,521.	
11	Net income from unrelated business activities not included in line 10b.							
	whether or not the business is regularly					Į		
	carried on						0	
12	Other income. Do not include gain or					ì		
	loss from the sale of capital assets							
	(Explain in Part IV.) ATCH 1	280,	3,	166.			449.	
13	Total support. (Add lines 9, 10c, 11,							
	and 12.)	1,313,639.	1,286,652.	1,311,221.		1,286,256.	6,520,059.	
14	First five years. If the Form 990 is for							
	organization, check this box and stop here.						▶	
	tion C. Computation of Public Sup							
15	Public support percentage for 2013 (line 8,					15	90.23%	
16	Public support percentage from 2012 Sche					16	90.00%	
Sec	tion D. Computation of Investmen							
17	Investment income percentage for 2013 (lin					17	9.76%	
18	Investment income percentage from 2012 5	Schedule A, Part	III, line 17			18	.00%	
19 a	331/3% support tests - 2013. If the org	janization did no	t check the box	on line 14, and	l line 15 is more	than 331/3 %, a	nd line	
	17 is not more than 331/3 %, check thi	s box and stop	here. The orga	nization qualifies	as a publicly s	supported organiz	ation 🕨 X	
b	331/3% support tests - 2012. If the orga	nization did not	check a box on li	ne 14 or line 19	a, and line 16 is	more than 331/3	%, and	
	line 18 is not more than $331/3\%$, check	this box and st	op here. The org	anization qualifie	s as a publicly :	supported organia	ation 🕨 🔛	
20	Private foundation. If the organization of	did not check a	box on line 1	4, 19a, or 19b.	check this bo	k and see instru	ictions 🕨 🔃	
ISA					S	chedule A (Form 99	0 or 990-EZ) 2013	

Page 4

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).								
					ATTACHMENT 1	<u> </u>		
SCHEDULE A, PART	III - OTHER INCOM	E						
DESCRIPTION	2009	2010	2011	2012	2013	TOTAL		
OTHER INCOME	280.	3.	166.			449.		
TOTALS	280_		166.			449_		

SCHEDULE D (Form 990)

Supplemental Financial Statements
► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. OMB No. 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

► Attach to Form 990. ▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

Inspection Name of the organization Employer identification number DRUG PREVENTION RESOURCES, INC. 75-0911671

Pa	Part I Organizations MaintainIng Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.								
		(a) Donor advised funds	(b) Funds and other accounts						
1	Total number at end of year								
2	Aggregate contributions to (during year)								
3	Aggregate grants from (during year)								
4	Aggregate value at end of year								
5	Did the organization inform all donors and donor	advisors in writing that the assets held i	n donor advised						
	funds are the organization's property, subject to the								
6	Did the organization inform all grantees, donors, as	-							
	only for charitable purposes and not for the benefit	it of the donor or donor advisor, or for an	ny other purpose						
	conferring impermissible private benefit?	<u>, , , , , , , , , , , , , , , , , , , </u>	Yes No						
Pai	t II Conservation Easements. Complete if t	he organization answered "Yes" to Fo	orm 990, Part IV, line 7.						
1	Purpose(s) of conservation easements held by the								
	Preservation of land for public use (e.g., recr	eation or education) Preservation	of an historically important land area						
	Protection of natural habitat	Preservation	of a certified historic structure						
	Preservation of open space								
2	Complete lines 2a through 2d if the organization he	eld a qualified conservation contribution i	in the form of a conservation						
	easement on the last day of the tax year.								
			Held at the End of the Tax Year						
а	Total number of conservation easements								
b	Total acreage restricted by conservation easements								
C	Number of conservation easements on a certified		. 2c						
d	Number of conservation easements included in (c)								
	historic structure listed in the National Register								
3	Number of conservation easements modified, tran	sferred, released, extinguished, or termi	nated by the organization during the						
	tax year ▶								
4	Number of states where property subject to conse								
5	Does the organization have a written policy regard								
	violations, and enforcement of the conservation ea								
6	Staff and volunteer hours devoted to monitoring, in	ispecting, and enforcing conservation ea	sements during the year						
-	Amount of aurona in annut in annut aire in annut								
7	Amount of expenses incurred in monitoring, inspec	iting, and enforcing conservation easeme	ents during the year						
	Page and consequently account on the	0/d) above against the environment of a							
8	Does each conservation easement reported on line								
9	(i) and section 170(h)(4)(B)(ii)?		Yes No						
3	In Part XIII, describe how the organization reports balance sheet, and include, if applicable, the text of								
	organization's accounting for conservation easeme		cial statements that describes the						
Par			er Similar Assets						
	Complete if the organization answered	"Yes" to Form 990, Part IV, line 8.							
1a	If the organization elected, as permitted under SE	AS 116 (ASC 958) not to report in its	revenue statement and halance sheet						
	If the organization elected, as permitted under SF works of art, historical treasures, or other similar public service, provide, in Part XIII, the text of the fo	ar assets held for public exhibition, ed	ucation, or research in furtherance of						
Ь	If the organization elected, as permitted under s	SFAS 116 (ASC 958), to report in its	revenue statement and balance sheet						
	works of art, historical treasures, or other similar public service, provide the following amounts relati	no to these items:	ucation, or research in turtherance or						
	(i) Revenues included in Form 990, Part VIII, line 1	-	> s						
	(ii) Assets included in Form 990, Part X								
2	If the organization received or held works of a								
_	following amounts required to be reported under S		3						
а	Revenues included in Form 990, Part VIII, line 1 .								
<u>b</u>	Assets included in Form 990, Part X	· · · · · · · · · · · · · · · · · · ·	>s						

Schedule D (Form 990) 2013

Page 2

Part III Organizations Maintaining Collections of Art. Historical Treasures, or Other Similar Assets (continued)

				,				
3	Using the organization's acquisition, access collection items (check all that apply):	ssion, and other recor	ds, check any of the	he following that a	re a significant use of its			
а	Public exhibition	d [Loan or exchang	ie programs				
b	Scholarly research	e						
C	Preservation for future generations							
4	Provide a description of the organization's	collections and expla	ain how they furthe	er the organization'	s exempt purpose in Part			
•	XIII.		,		a exempt purpose in tall			
5	During the year, did the organization solicit	or receive donations o	fart historical treas	sures or other simil	ar			
•								
Par	assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No art IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9.							
1 (1)	or reported an amount on Form 9		ic organization an	13WC1CG 1C3 to 1	om 556, raitiv, me 5,			
	or reported air amount our comme	500,1 01174, 11110 211						
1a	Is the organization an agent, trustee, custod	lian or other intermedi	ary for contributions	s or other assets no	t			
14								
h	included on Form 990, Part X?	and complete the following	owing table	• • • • • • • • • • • • • • • • • • • •	L Tes L No			
	ii res, explain the arrangement in rait XIII	and complete the low	DWIIII (ADIC.	Τ	mount			
_	Beginning balance			_	mount			
	Additions during the year							
u								
	Distributions during the year							
	Ending balance							
23	Did the organization include an amount on I	rorm 990, Part X, line	217		Yes No			
Married Street	If "Yes," explain the arrangement in Part XIII							
Par	t V Endowment Funds. Complete if							
4-		rrent year (b) Prio	ryear (c) Two ye	ears back (d) Three y	ears back (e) Four years back			
1a				10.00				
D	Contributions							
C	Net investment earnings, gains,				- 1			
	and losses							
	Grants or scholarships							
8	Other expenditures for facilities		1					
	and programs							
f	Administrative expenses							
9	End of year balance							
2	Provide the estimated percentage of the cur	rent year end balance	(line 1g, column (a))) held as:				
а		%						
þ	Permanent endowment	5753305						
C	Temporarily restricted endowment ▶	%						
	The percentages in lines 2a, 2b, and 2c sho							
3a	Are there endowment funds not in the poss	ession of the organiza	tion that are held a	nd administered for	the			
	organization by:				Yes No			
	(i) unrelated organizations				3a(i)			
	(ii) related organizations				3a(ii)			
b	If "Yes" to 3a(ii), are the related organization	s listed as required on	Schedule R?		3b			
4	Describe in Part XIII the intended uses of the	e organization's endov	vment funds.					
Par	t VI Land, Buildings, and Equipment.							
	Complete if the organization ans							
	Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value			
1a	Land		4-0.001					
b	Buildings							
	Leasehold improvements							
d	Equipment	-	35,383.	35,226.	157.			
	Other		9,244.					
	I. Add lines 1a through 1e. (Column (d) must	equal Form 990, Part			157.			
		y 2000 2 2 2 1 7 20 1 7 2	,	1777				

Part VII	Investments - Other Securities.			
	-	l "Yes" to Form 990	, Part IV, line 11b. See Form 990, Part X, line 12.	
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value	
(1) Financia	Il derivatives			
(2) Closely-	held equity interests			
/ A \				
(C)				
(U)				
(E)				
70				
(G)				
<u>(H)</u>				
	(b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII	Investments - Program Related.		D-48/ E 44- C F 000 D-4 V E 40	
			, Part IV, line 11c. See Form 990, Part X, line 13.	
	(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value	
(1)				
(2)				
_(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)		<u></u>		
	(b) must equal Form 990, Part X, col. (B) line 13.) Other Assets.			
Part IX		"Yes" to Form 990	, Part IV, line 11d. See Form 990, Part X, line 15.	
-		Description	(b) Book value	_
(1)	(0)	o co co i pació	(0) 5001 1230	_
(2)				_
(3)				_
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Colu	mn (b) must equal Form 990, Part X, col. (B) li	ine 15.)		
Part X	Other Liabilities.			
	Complete if the organization answered line 25.	l "Yes" to Form 990,	, Part IV, line 11e or 11f. See Form 990, Part X,	
1.	(a) Description of liability	(b) Book value	e la	16
(1) Federa	al income taxes	<u> </u>		
(2) DEFER	RED RENT	21,	295.	
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Colum	n (b) must equal Form 990, Part X, col. (B) line 25.)	▶ 21,2	295.	13
2. Liability for	r uncertain tax positions. In Part XIII, provide the t	ext of the footnote to the	e 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

JSA 3E1271 1.000

Part XIII Supplemental Information (continued)

PART X, LINE 2: FIN 48 FOOTNOTE-

MANAGEMENT HAS CONCLUDED THAT ANY TAX POSITIONS THAT WOULD NOT MEET THE MORE-LIKELY-THAN-NOT CRITERION OF FINANCIAL ACCOUNTING STANDARDS BOARD (FASB) ACCOUNTING STANDARDS CODIFICATION (ASC) TOPIC 740-10, ACCOUNTING FOR INCOME TAXES, WOULD BE IMMATERIAL TO THE FINANCIAL STATEMENTS TAKEN AS A WHOLE. ACCORDINGLY, THE ACCOMPANYING FINANCIAL STATEMENTS DO NOT INCLUDE ANY PROVISION FOR UNCERTAIN TAX POSITIONS, AND NO RELATED INTEREST OR PENALTIES HAVE BEEN RECORDED IN THE STATEMENT OF ACTIVITIES OR ACCRUED IN THE STATEMENT OF FINANCIAL POSITION. FEDERAL AND STATE TAX RETURNS OF THE ENTITY ARE GENERALLY OPEN TO EXAMINATION BY THE RELEVANT TAXING AUTHORITIES FOR A PERIOD OF THREE YEARS FROM THE DATE THE RETURNS ARE FILED.

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

OMB No. 1545-0047

2013

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

DRUG PREVENTION RESOURCES, INC.

Employer Identification number 75-0911671

PART VI, SECTION B, LINE 11B: 990 REVIEW PROCESSONCE THE FORM 990 IS COMPLETED BY THOSE INDIVIDUALS RESPONSIBLE FOR ITS
COMPLETION, AN ELECTRONIC COPY OF THE FORM 990 IS PROVIDED TO EVERY
MEMBER OF THE BOARD OF DIRECTORS FOR THEIR REVIEW. ONCE THE FORM 990 HAS

BEEN SUBMITTED TO THE IRS, IT IS POSTED ON THE ORGANIZATION'S WEBSITE.

PART VI, SECTION B, LINE 12C: CONFLICT OF INTEREST POLICY—
CONFLICT OF INTEREST OF BOTH EMPLOYEES AND MEMBERS OF THE BOARD IS
ESSENTIALLY MONITORED ON A DAILY BASIS THROUGH THE OPEN, TRANSPARENT
ENVIRONMENT INI WHICH THIS ORGANIZATION IS RUN. THROUGH THE OPEN FLOW OF
COMMUNICATION AND LEVEL OF TRUST WE HAVE SOUGHT TO BUILD OVER THE YEARS,
A CONFLICT OF INTEREST WOULD 1) NOT BE ENTERED INTO BECAUSE OF THE
COMMITMENT TO THE ORGANIZATION AND LEVEL OF ETHICS OF BOTH STAFF AND
BOARD AND 2) IF, FOR ANY UNUSUAL REASON IT DID OCCUR, THE LEVEL OF
RESPECT FOR THE ORGANIZATION HELD BY THE STAFF AND THE BOARD WOULD BE
MOTIVATED FOR THIS ISSUE TO BE EXPEDIENTLY RESOLVED. THIS MATTER IS
FORMALLY ADDRESSED ON AN ANNUAL BASIS.

PART VI, SECTION B, LINE 15A&B: COMPENSATION—

CEO COMPENSATION— THE MEANS BY WHICH THIS IS HANDLED IS A MULTI-PHASE PROCESS 1) THE CEO'S PERFORMANCE IS MONITORED ON AN ONGOING BASIS, PRIMARILIY BY THE BOARD CHAIR, THROUGH THE CLOSE OPEN WORKING RELATIONSHIP THE TWO SHARE, 2) THE CEO IS FORMALLY REVIEWED ON AN ANNUAL BASIS USING A STANDARD INSTRUMENT SHARED WITH ALL OF THE BOARD AND

REQUESTING INPUT FROM ALL BOARD MEMBERS. THE INPOUT FROM ALL THE BOARD IS COMPILED AND THE FORMAL REVIEW IS CONDUCTED BY THE BOARD CHAIR AND ONE OTHER BOARD MEMBER. COMPENSATION IS DETERMINED THROUGH FORMAL REVIEW OF COMPENSATION SCALES OF COMPARABLE NON-PROFIT ORGANIZATIONS PROVIDED TO THE BOARD, ALONG WITH ACHIEVEMENT OR NON-ACHEIVEMENT OF PERFORMANCE MEASURES AND OUTCOMES ESTABLISHED AT THE TIME OF THE FORMAL REVIEW.

VICE PRESIDENTS COMPENSATION- FOR THE VICE PRESIDENTS OF THE
ORGANIZATION, THE SAME FORMAL REVIEW OF COMPENSATION SCALES OF COMPARABLE
NON-PROFIT ORGANIZATIONS IS CONDUCTED BY THE BOARD AND THEY THEN OFFER
THEIR RECOMMENDATIONS TO THE CEO.

PART VI, SECTION C, LINE 19: PUBLIC DISCLOSURE—

DPRI PLACES ITS ANNUAL INDEPENDENT AUDIT ON ITS WEBSITE IMMEDIATELY UPON

THE VOTE OF APPROVAL OF THE BOARD OF DIRECTORS AND ACCEPTANCE BY ITS

FUNDERS. ALL OTHER GOIVERNING DOCUMENTS AND POLCIES ARE AVAILABLE IN THE

ORGANIZATION'S OFFICE. THE PUBLIC IS MADE AWARE OF THIS THROUGH

NOTIFICATIONS ON ITE WEBSITE AND IN MOST, IF NOT ALL, EXTERNAL

COMMUNICATION.