

Form **990**

Department of the Treasury  
Internal Revenue Service

**Return of Organization Exempt From Income Tax**  
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

**Do not enter social security numbers on this form as it may be made public.**  
**Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.**

OMB No. 1545-0047

**2020**

**Open to Public Inspection**

**A For the 2020 calendar year, or tax year beginning , and ending**

<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization <b>RONALD MCDONALD HOUSE CHARITIES OF TEMPLE, TEXAS</b> Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite <b>2415 S. 47TH STREET</b> City or town, state or province, country, and ZIP or foreign postal code <b>TEMPLE TX 76504</b>	<b>D</b> Employer identification number <b>74-2345274</b> <b>E</b> Telephone number <b>254-770-0910</b> <b>G</b> Gross receipts \$ <b>1,181,156</b>
<b>F</b> Name and address of principal officer: <b>MARK CERMAK</b>		<b>H(a)</b> Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b)</b> Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions

<b>I</b> Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) <input type="checkbox"/> t (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527	<b>J</b> Website: <b>WWW.RMHC-TEMPLE.ORG</b>	<b>H(c)</b> Group exemption number <b>u</b>
<b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other <b>u</b>	<b>L</b> Year of formation:	<b>M</b> State of legal domicile: <b>TX</b>

**Part I Summary**

<b>Activities &amp; Governance</b>	<b>1</b> Briefly describe the organization's mission or most significant activities: <b>TO PROVIDE LODGING FOR THE FAMILIES OF CHILDREN SEEKING MEDICAL TREATMENTS.</b>		
	<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	<b>3</b> Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>	<b>21</b>
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	<b>21</b>
	<b>5</b> Total number of individuals employed in calendar year 2020 (Part V, line 2a)	<b>5</b>	<b>14</b>
	<b>6</b> Total number of volunteers (estimate if necessary)	<b>6</b>	<b>3200</b>
	<b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12	<b>7a</b>	<b>0</b>
<b>7b</b> Net unrelated business taxable income from Form 990-T, Part I, line 11	<b>7b</b>	<b>0</b>	
<b>Revenue</b>	<b>8</b> Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	<b>9</b> Program service revenue (Part VIII, line 2g)	<b>371,392</b>	<b>348,672</b>
	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)	<b>28,689</b>	<b>9,045</b>
	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	<b>86,053</b>	<b>158,517</b>
	<b>12</b> Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	<b>103,005</b>	<b>72,305</b>
		<b>589,139</b>	<b>588,539</b>
<b>Expenses</b>	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1–3)		<b>0</b>
	<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)		<b>0</b>
	<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	<b>269,119</b>	<b>255,799</b>
	<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)		<b>0</b>
	<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) <b>u</b> <b>17,416</b>		
	<b>17</b> Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	<b>302,187</b>	<b>270,929</b>
<b>18</b> Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	<b>571,306</b>	<b>526,728</b>	
<b>19</b> Revenue less expenses. Subtract line 18 from line 12	<b>17,833</b>	<b>61,811</b>	
<b>Net Assets or Fund Balances</b>	<b>20</b> Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	<b>21</b> Total liabilities (Part X, line 26)	<b>4,131,206</b>	<b>4,453,363</b>
	<b>22</b> Net assets or fund balances. Subtract line 21 from line 20	<b>33,624</b>	<b>23,170</b>
		<b>4,097,582</b>	<b>4,430,193</b>

**Part II Signature Block**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

<b>Sign Here</b>	Signature of officer <b>DANA LANGE</b>	Date _____
	Type or print name and title <b>BOARD MEMBER</b>	

<b>Paid Preparer Use Only</b>	Print/Type preparer's name <b>BLAKE P STAPP</b>	Preparer's signature _____	Date <b>11/04/21</b>	Check <input type="checkbox"/> if self-employed	PTIN <b>P01505663</b>
	Firm's name } <b>LUDWICK, MONTGOMERY &amp; STAPP, PC</b>	Firm's EIN } <b>74-2243906</b>			
	Firm's address } <b>1949 SCOTT BLVD TEMPLE, TX 76504</b>	Phone no. <b>254-771-0061</b>			

May the IRS discuss this return with the preparer shown above? See instructions  Yes  No

**For Paperwork Reduction Act Notice, see the separate instructions.**

**Part III Statement of Program Service Accomplishments**

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

1 Briefly describe the organization's mission:

**TO PROVIDE LODGING FOR THE FAMILIES OF CHILDREN SEEKING MEDICAL TREATMENTS.**

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?  Yes  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?  Yes  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 measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code: ) (Expenses \$ **394,170** including grants of \$ ) (Revenue \$ **492,072** )

**THE GOAL OF RONALD MCDONALD HOUSE CHARITIES OF TEMPLE, TEXAS IS TO PROVIDE LODGING, FOOD, AND COMFORT FOR THE FAMILIEIS OF CHILDREN BEING TREATED FOR MEDICAL ISSUES AT LOCAL HEALTHCARE PROVIDERS.**

4b (Code: ) (Expenses \$ **24,354** including grants of \$ ) (Revenue \$ **5,245** )

**THE RONALD MCDONALD FAMILY ROOM OF TEMPLE, TEXAS IS LOCATED IN BAYLOR SCOTT & WHITE CHILDRENS HOSPITAL IN TEMPLE, TEXAS. THE PURPOSE OF THE ROOM IS TO PROVIDE A SUPPORTIVE ENVIRONMENT WHERE FAMILIEIS CAN GO WITHIN THE HOSPITAL TO GET AWAY FROM THE HOSPITAL TO REST AND REGROUP FROM THE STRESS OF HAVING A CHILD IN THE HOSPITAL, WHILE AT THE SAME TIME ONLY BEING STEPS AWAY FROM THEIR CHILD'S ROOM. THE ROOM PROVIDES ACCESS TO SHOWERS AND LAUNDRY FACILITIES, AS WELL AS COFFEE, DRINKS, AND MISCELLANEOUS SNACKS. IN 2017 THE ROOM HAD OVER 8,000 VISITORS.**

4c (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )

**N/A**

4d Other program services (Describe on Schedule O.)

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

4e Total program service expenses **u 418,524**

**Part IV Checklist of Required Schedules**

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	X	
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		X
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I		X
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		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part V	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	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		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		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX		X
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	X	
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		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	X	
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		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?		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 foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV		X
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		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV		X
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		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	X	
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		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II		X

**Part IV Checklist of Required Schedules** (continued)

		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
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?		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a	<b>Section 501(c)(3), 501(c)(4), and 501(c)(29) 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>		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions):		
a	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i>		X
b	A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i>		X
c	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>		X
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	X	
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>		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
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>		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		X
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>		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?		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)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		X
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.		X

**Part V Statements Regarding Other IRS Filings and Tax Compliance**

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

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		
b	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?	X	

**Part V Statements Regarding Other IRS Filings and Tax Compliance** (continued)

		Yes	No
<b>2a</b>	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	<b>2a</b>	<b>14</b>
<b>b</b>	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)	<b>2b</b>	<b>X</b>
<b>3a</b>	Did the organization have unrelated business gross income of \$1,000 or more during the year?	<b>3a</b>	<b>X</b>
<b>b</b>	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	<b>3b</b>	
<b>4a</b>	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)?	<b>4a</b>	<b>X</b>
<b>b</b>	If "Yes," enter the name of the foreign country <b>u</b> See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
<b>5a</b>	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	<b>5a</b>	<b>X</b>
<b>b</b>	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	<b>5b</b>	<b>X</b>
<b>c</b>	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	<b>5c</b>	
<b>6a</b>	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?	<b>6a</b>	<b>X</b>
<b>b</b>	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	<b>6b</b>	
<b>7</b>	<b>Organizations that may receive deductible contributions under section 170(c).</b>		
<b>a</b>	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?	<b>7a</b>	<b>X</b>
<b>b</b>	If "Yes," did the organization notify the donor of the value of the goods or services provided?	<b>7b</b>	<b>X</b>
<b>c</b>	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	<b>7c</b>	<b>X</b>
<b>d</b>	If "Yes," indicate the number of Forms 8282 filed during the year	<b>7d</b>	
<b>e</b>	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<b>7e</b>	<b>X</b>
<b>f</b>	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	<b>7f</b>	<b>X</b>
<b>g</b>	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	<b>7g</b>	<b>X</b>
<b>h</b>	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	<b>7h</b>	<b>X</b>
<b>8</b>	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	<b>8</b>	
<b>9</b>	<b>Sponsoring organizations maintaining donor advised funds.</b>		
<b>a</b>	Did the sponsoring organization make any taxable distributions under section 4966?	<b>9a</b>	
<b>b</b>	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	<b>9b</b>	
<b>10</b>	<b>Section 501(c)(7) organizations.</b> Enter:		
<b>a</b>	Initiation fees and capital contributions included on Part VIII, line 12	<b>10a</b>	
<b>b</b>	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	<b>10b</b>	
<b>11</b>	<b>Section 501(c)(12) organizations.</b> Enter:		
<b>a</b>	Gross income from members or shareholders	<b>11a</b>	
<b>b</b>	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	<b>11b</b>	
<b>12a</b>	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?	<b>12a</b>	
<b>b</b>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	<b>12b</b>	
<b>13</b>	<b>Section 501(c)(29) qualified nonprofit health insurance issuers.</b>		
<b>a</b>	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.	<b>13a</b>	
<b>b</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	<b>13b</b>	
<b>c</b>	Enter the amount of reserves on hand	<b>13c</b>	
<b>14a</b>	Did the organization receive any payments for indoor tanning services during the tax year?	<b>14a</b>	<b>X</b>
<b>b</b>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	<b>14b</b>	
<b>15</b>	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N.	<b>15</b>	<b>X</b>
<b>16</b>	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	<b>16</b>	<b>X</b>

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

**Section A. Governing Body and Management**

		Yes	No
<b>1a</b>	Enter the number of voting members of the governing body at the end of the tax 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 on Schedule O.		
	<b>1a</b> 21		
<b>b</b>	Enter the number of voting members included on line 1a, above, who are independent		
	<b>1b</b> 21		
<b>2</b>	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?		<b>X</b>
<b>3</b>	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?		<b>X</b>
<b>4</b>	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		<b>X</b>
<b>5</b>	Did the organization become aware during the year of a significant diversion of the organization's assets?		<b>X</b>
<b>6</b>	Did the organization have members or stockholders?		<b>X</b>
<b>7a</b>	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?		<b>X</b>
<b>b</b>	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		<b>X</b>
<b>8</b>	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
<b>a</b>	The governing body?	<b>X</b>	
<b>b</b>	Each committee with authority to act on behalf of the governing body?	<b>X</b>	
<b>9</b>	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 on Schedule O.		<b>X</b>

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

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

**Section C. Disclosure**

- 17** List the states with which a copy of this Form 990 is required to be filed **u NONE**
- 18** Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  
 Own website     Another's website     Upon request     Other (explain on Schedule O)
- 19** Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records **u**

**RONALD MCDONALD HOUSE CHARITIES OF 2415 S 47TH ST.**

**TEMPLE**

**TX 76504**

**254-770-0910**

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

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

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

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

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

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

(A) Name and title	(B) Average hours per week per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) SUSAN BOLTON	40.00									
EXECUTIVE DIRECTOR	0.00	X		X			30,607	0	0	
(2) MARK CERMAK	40.00									
DIRECTOR OF FINANCE	0.00	X		X			21,465	0	0	
(3) MARK BAIN	1.00									
BOARD MEMBER	0.00	X					0	0	0	
(4) CRISTINA COOL	1.00									
BOARD MEMBER	0.00	X					0	0	0	
(5) CAROLYN COSPER	1.00									
BOARD MEMBER	0.00	X					0	0	0	
(6) SHELISA COURTAINE	1.00									
BOARD MEMBER	0.00	X					0	0	0	
(7) CHANTZ CUTTS	1.00									
BOARD MEMBER	0.00	X					0	0	0	
(8) BILL GALINSKY	1.00									
BOARD MEMBER	0.00	X					0	0	0	
(9) SHANNON GOWAN	1.00									
BOARD MEMBER	0.00	X					0	0	0	
(10) JENNIFER GREEN	1.00									
BOARD MEMBER	0.00	X					0	0	0	
(11) JAYLEE HILLARD	1.00									
BOARD MEMBER	0.00	X					0	0	0	

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

(A) Name and title	(B) Average hours per week per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(12) <b>MARK KIECKHAFFER</b>	1.00									
BOARD MEMBER	0.00	X						0	0	
(13) <b>DANA LANGE</b>	1.00									
BOARD MEMBER	0.00	X						0	0	
(14) <b>PAT MCCRAY</b>	1.00									
BOARD MEMBER	0.00	X						0	0	
(15) <b>SHARON MURPHY</b>	1.00									
BOARD MEMBER	0.00	X						0	0	
(16) <b>RUSS NELSON</b>	1.00									
BOARD MEMBER	0.00	X						0	0	
(17) <b>JERRY PRZADA</b>	1.00									
BOARD MEMBER	0.00	X						0	0	
(18) <b>TRUDY ROSADO</b>	1.00									
BOARD MEMBER	0.00	X						0	0	
(19) <b>JASON SCOTT</b>	1.00									
BOARD MEMBER	0.00	X						0	0	
<b>1b Subtotal</b>								<b>52,072</b>		
<b>c Total from continuation sheets to Part VII, Section A</b>										
<b>d Total (add lines 1b and 1c)</b>								<b>52,072</b>		

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

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

**Section B. Independent Contractors**

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

(A) Name and business address	(B) Description of services	(C) Compensation

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



**Part VIII Statement of Revenue**

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	<b>1a</b> Federated campaigns	<b>1a</b>					
	<b>b</b> Membership dues	<b>1b</b>					
	<b>c</b> Fundraising events	<b>1c</b>					
	<b>d</b> Related organizations	<b>1d</b>					
	<b>e</b> Government grants (contributions)	<b>1e</b>					
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above	<b>1f</b>	<b>348,672</b>				
	<b>g</b> Noncash contributions included in lines 1a-1f	<b>1g</b>	<b>\$ 93,075</b>				
	<b>h Total.</b> Add lines 1a-1f	<b>u</b>	<b>348,672</b>				
<b>Program Service Revenue</b>	<b>2a</b> <b>GUEST REVENUE</b>	Business Code	<b>9,045</b>	<b>9,045</b>			
	<b>b</b>						
	<b>c</b>						
	<b>d</b>						
	<b>e</b>						
	<b>f</b> All other program service revenue						
	<b>g Total.</b> Add lines 2a-2f	<b>u</b>	<b>9,045</b>				
<b>Other Revenue</b>	<b>3</b> Investment income (including dividends, interest, and other similar amounts)	<b>u</b>	<b>60,861</b>			<b>60,861</b>	
	<b>4</b> Income from investment of tax-exempt bond proceeds	<b>u</b>					
	<b>5</b> Royalties	<b>u</b>					
	<b>6a</b> Gross rents	<b>6a</b>	(i) Real				
			(ii) Personal				
	<b>b</b> Less: rental expenses	<b>6b</b>					
	<b>c</b> Rental inc. or (loss)	<b>6c</b>					
	<b>d</b> Net rental income or (loss)	<b>u</b>					
	<b>7a</b> Gross amount from sales of assets other than inventory	<b>7a</b>	(i) Securities	<b>597,931</b>	<b>74,398</b>		
			(ii) Other				
	<b>b</b> Less: cost or other basis and sales exps.	<b>7b</b>	<b>574,673</b>				
	<b>c</b> Gain or (loss)	<b>7c</b>	<b>23,258</b>	<b>74,398</b>			
	<b>d</b> Net gain or (loss)	<b>u</b>	<b>97,656</b>	<b>23,258</b>		<b>74,398</b>	
<b>8a</b> Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18	<b>8a</b>		<b>90,249</b>				
<b>b</b> Less: direct expenses	<b>8b</b>	<b>17,944</b>					
<b>c</b> Net income or (loss) from fundraising events	<b>u</b>	<b>72,305</b>					
<b>9a</b> Gross income from gaming activities. See Part IV, line 19	<b>9a</b>						
<b>b</b> Less: direct expenses	<b>9b</b>						
<b>c</b> Net income or (loss) from gaming activities	<b>u</b>						
<b>10a</b> Gross sales of inventory, less returns and allowances	<b>10a</b>						
<b>b</b> Less: cost of goods sold	<b>10b</b>						
<b>c</b> Net income or (loss) from sales of inventory	<b>u</b>						
<b>Miscellaneous Revenue</b>	<b>11a</b>	Business Code					
	<b>b</b>						
	<b>c</b>						
	<b>d</b> All other revenue						
	<b>e Total.</b> Add lines 11a-11d	<b>u</b>					
<b>12 Total revenue.</b> See instructions	<b>u</b>	<b>588,539</b>	<b>32,303</b>	<b>0</b>	<b>135,259</b>		

**Part IX Statement of Functional Expenses**

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	52,072	43,221	5,206	3,645
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	139,758	114,556	13,174	12,028
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	3,254	2,831	325	98
9 Other employee benefits	46,845	45,891	418	536
10 Payroll taxes	13,870	11,458	1,303	1,109
11 Fees for services (nonemployees):				
a Management				
b Legal				
c Accounting	27,080		27,080	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	15,359		15,359	
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	101	101		
12 Advertising and promotion	1,666	1,666		
13 Office expenses	16,138	467	15,671	
14 Information technology				
15 Royalties				
16 Occupancy	33,110	33,110		
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	62,814	58,794	4,020	
23 Insurance	25,962	24,300	1,662	
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a <b>DONATED FOOD AND SUPPLIES</b>	39,617	39,617		
b <b>UTILITIES</b>	26,548	24,848	1,700	
c <b>REPAIRS AND MAINT</b>	12,734	11,919	815	
d <b>BANK CHARGES</b>	3,319		3,319	
e All other expenses	6,481	5,745	736	
25 Total functional expenses. Add lines 1 through 24e	526,728	418,524	90,788	17,416
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

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

		(A) Beginning of year		(B) End of year
<b>Assets</b>	<b>1</b> Cash—non-interest-bearing .....	<b>343,283</b>	<b>1</b>	<b>483,211</b>
	<b>2</b> Savings and temporary cash investments .....		<b>2</b>	
	<b>3</b> Pledges and grants receivable, net .....		<b>3</b>	
	<b>4</b> Accounts receivable, net .....	<b>12,661</b>	<b>4</b>	<b>2,635</b>
	<b>5</b> Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons .....		<b>5</b>	
	<b>6</b> Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) .....		<b>6</b>	
	<b>7</b> Notes and loans receivable, net .....		<b>7</b>	
	<b>8</b> Inventories for sale or use .....	<b>46,109</b>	<b>8</b>	<b>51,063</b>
	<b>9</b> Prepaid expenses and deferred charges .....	<b>20,000</b>	<b>9</b>	<b>20,600</b>
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D .....	<b>10a</b> <b>2,378,812</b>		
	<b>b</b> Less: accumulated depreciation .....	<b>10b</b> <b>1,738,555</b>	<b>10c</b>	<b>640,257</b>
	<b>11</b> Investments—publicly traded securities .....	<b>3,040,991</b>	<b>11</b>	<b>3,255,597</b>
	<b>12</b> Investments—other securities. See Part IV, line 11 .....		<b>12</b>	
	<b>13</b> Investments—program-related. See Part IV, line 11 .....		<b>13</b>	
	<b>14</b> Intangible assets .....		<b>14</b>	
	<b>15</b> Other assets. See Part IV, line 11 .....		<b>15</b>	
<b>16 Total assets.</b> Add lines 1 through 15 (must equal line 33) .....	<b>4,131,206</b>	<b>16</b>	<b>4,453,363</b>	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses .....	<b>18,962</b>	<b>17</b>	<b>15,345</b>
	<b>18</b> Grants payable .....		<b>18</b>	
	<b>19</b> Deferred revenue .....	<b>12,702</b>	<b>19</b>	<b>4,810</b>
	<b>20</b> Tax-exempt bond liabilities .....		<b>20</b>	
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D .....		<b>21</b>	
	<b>22</b> Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons .....		<b>22</b>	
	<b>23</b> Secured mortgages and notes payable to unrelated third parties .....		<b>23</b>	
	<b>24</b> Unsecured notes and loans payable to unrelated third parties .....		<b>24</b>	
	<b>25</b> Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D .....	<b>1,960</b>	<b>25</b>	<b>3,015</b>
	<b>26 Total liabilities.</b> Add lines 17 through 25 .....	<b>33,624</b>	<b>26</b>	<b>23,170</b>
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/></b> <b>and complete lines 27, 28, 32, and 33.</b>			
	<b>27</b> Net assets without donor restrictions .....	<b>3,529,865</b>	<b>27</b>	<b>3,875,909</b>
	<b>28</b> Net assets with donor restrictions .....	<b>567,717</b>	<b>28</b>	<b>554,284</b>
	<b>Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/></b> <b>and complete lines 29 through 33.</b>			
	<b>29</b> Capital stock or trust principal, or current funds .....		<b>29</b>	
	<b>30</b> Paid-in or capital surplus, or land, building, or equipment fund .....		<b>30</b>	
	<b>31</b> Retained earnings, endowment, accumulated income, or other funds .....		<b>31</b>	
<b>32</b> Total net assets or fund balances .....	<b>4,097,582</b>	<b>32</b>	<b>4,430,193</b>	
<b>33</b> Total liabilities and net assets/fund balances .....	<b>4,131,206</b>	<b>33</b>	<b>4,453,363</b>	

**Part XI Reconciliation of Net Assets**

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

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12)	<b>1</b>	<b>588,539</b>
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	<b>526,728</b>
<b>3</b>	Revenue less expenses. Subtract line 2 from line 1	<b>3</b>	<b>61,811</b>
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	<b>4</b>	<b>4,097,582</b>
<b>5</b>	Net unrealized gains (losses) on investments	<b>5</b>	<b>221,944</b>
<b>6</b>	Donated services and use of facilities	<b>6</b>	
<b>7</b>	Investment expenses	<b>7</b>	
<b>8</b>	Prior period adjustments	<b>8</b>	
<b>9</b>	Other changes in net assets or fund balances (explain on Schedule O)	<b>9</b>	<b>48,856</b>
<b>10</b>	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	<b>10</b>	<b>4,430,193</b>

**Part XII Financial Statements and Reporting**

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

		Yes	No
<b>1</b>	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
<b>2a</b>	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: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		<b>X</b>
<b>2b</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: <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	<b>X</b>	
<b>2c</b>	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 on Schedule O.	<b>X</b>	
<b>3a</b>	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>X</b>
<b>3b</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 on Schedule O and describe any steps taken to undergo such audits		

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

(A) Name and title	(B) Average hours per week per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(20) <b>TOM TUCKER</b>	1.00									
BOARD MEMBER	0.00	X					0	0	0	
(21) <b>DELL INGRAM WALKER</b>	1.00									
BOARD MEMBER	0.00	X					0	0	0	
<b>1b Subtotal</b> .....							<b>u</b>			
<b>c Total from continuation sheets to Part VII, Section A</b> .....							<b>u</b>			
<b>d Total (add lines 1b and 1c)</b> .....							<b>u</b>			

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

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

**Section B. Independent Contractors**

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

(A) Name and business address	(B) Description of services	(C) Compensation

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

**SCHEDULE A**  
(Form 990 or 990-EZ)

**Public Charity Status and Public Support**

OMB No. 1545-0047

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

**2020**

Department of the Treasury  
Internal Revenue Service

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

**Open to Public Inspection**

**u Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.**

Name of the organization <b>RONALD MCDONALD HOUSE CHARITIES OF TEMPLE, TEXAS</b>	Employer identification number <b>74-2345274</b>
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**Part I Reason for Public Charity Status.** (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1  A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2  A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990 or 990-EZ).)
- 3  A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4  A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: .....
- 5  An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6  A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7  An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8  A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9  An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: .....
- 10  An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 11  An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 12  An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
  - a  **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
  - b  **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
  - c  **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
  - d  **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
  - e  Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
  - f Enter the number of supported organizations .....
  - g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
<b>Total</b>						

**Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	579,999	621,047	327,887	371,204	348,672	2,248,809
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge						
<b>4 Total.</b> Add lines 1 through 3	579,999	621,047	327,887	371,204	348,672	2,248,809
<b>5</b> 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)						
<b>6</b> Public support. Subtract line 5 from line 4						2,248,809

**Section B. Total Support**

Calendar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
<b>7</b> Amounts from line 4	579,999	621,047	327,887	371,204	348,672	2,248,809
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	101,371	63,433	52,971	82,319	60,861	360,955
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on						
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
<b>11 Total support.</b> Add lines 7 through 10						2,609,764

**12** Gross receipts from related activities, etc. (see instructions) 12 497,590

**13 First 5 years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

**Section C. Computation of Public Support Percentage**

<b>14</b> Public support percentage for 2020 (line 6, column (f) divided by line 11, column (f))	<b>14</b>	86.17 %
<b>15</b> Public support percentage from 2019 Schedule A, Part II, line 14	<b>15</b>	84.41 %

**16a 33 1/3% support test—2020.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here**. The organization qualifies as a publicly supported organization

**b 33 1/3% support test—2019.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here**. The organization qualifies as a publicly supported organization

**17a 10%-facts-and-circumstances test—2020.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here**. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

**b 10%-facts-and-circumstances test—2019.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here**. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

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

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Table with 7 columns: (a) 2016, (b) 2017, (c) 2018, (d) 2019, (e) 2020, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Gross receipts from admissions, merchandise sold or services performed; 3 Gross receipts from activities that are not an unrelated trade or business under section 513; 4 Tax revenues levied for the organization's benefit; 5 The value of services or facilities furnished by a governmental unit; 6 Total. Add lines 1 through 5; 7a Amounts included on lines 1, 2, and 3 received from disqualified persons; 7b Amounts included on lines 2 and 3 received from other than disqualified persons; 7c Add lines 7a and 7b; 8 Public support. (Subtract line 7c from line 6.)

Section B. Total Support

Table with 7 columns: (a) 2016, (b) 2017, (c) 2018, (d) 2019, (e) 2020, (f) Total. Rows include: 9 Amounts from line 6; 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources; 10b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975; 10c Add lines 10a and 10b; 11 Net income from unrelated business activities not included in line 10b; 12 Other income. Do not include gain or loss from the sale of capital assets; 13 Total support. (Add lines 9, 10c, 11, and 12.); 14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here

Section C. Computation of Public Support Percentage

Table with 2 columns: Line number, Percentage. Row 15: Public support percentage for 2020 (line 8, column (f), divided by line 13, column (f)) 15 %; Row 16: Public support percentage from 2019 Schedule A, Part III, line 15 16 %

Section D. Computation of Investment Income Percentage

Table with 2 columns: Line number, Percentage. Row 17: Investment income percentage for 2020 (line 10c, column (f), divided by line 13, column (f)) 17 %; Row 18: Investment income percentage from 2019 Schedule A, Part III, line 17 18 %

- 19a 33 1/3% support tests—2020. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization
b 33 1/3% support tests—2019. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions



**Part IV Supporting Organizations**

(Complete only if you checked a box in line 12 on Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

**Section A. All Supporting Organizations**

		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
b	<b>Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c	<b>Substitutions only.</b> Was the substitution the result of an event beyond the organization's control?		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
c	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i>		
b	Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

**Part IV Supporting Organizations** *(continued)*

		Yes	No
<b>11</b>	Has the organization accepted a gift or contribution from any of the following persons?		
<b>a</b>	A person who directly or indirectly controls, either alone or together with persons described in lines 11b and 11c below, the governing body of a supported organization?		
<b>11a</b>			
<b>b</b>	A family member of a person described in line 11a above?		
<b>11b</b>			
<b>c</b>	A 35% controlled entity of a person described in line 11a or 11b above? <i>If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.</i>		
<b>11c</b>			

**Section B. Type I Supporting Organizations**

		Yes	No
<b>1</b>	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
<b>1</b>			
<b>2</b>	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.</i>		
<b>2</b>			

**Section C. Type II Supporting Organizations**

		Yes	No
<b>1</b>	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>		
<b>1</b>			

**Section D. All Type III Supporting Organizations**

		Yes	No
<b>1</b>	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
<b>1</b>			
<b>2</b>	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
<b>2</b>			
<b>3</b>	By reason of the relationship described in line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		
<b>3</b>			

**Section E. Type III Functionally-Integrated Supporting Organizations**

<b>1</b>	<i>Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).</i>		
<b>a</b>	<input type="checkbox"/> The organization satisfied the Activities Test. <i>Complete line 2 below.</i>		
<b>b</b>	<input type="checkbox"/> The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>		
<b>c</b>	<input type="checkbox"/> The organization supported a governmental entity. <i>Describe in Part VI how you supported a governmental entity (see instructions).</i>		
<b>2</b>	Activities Test. <i>Answer lines 2a and 2b below.</i>		
<b>a</b>	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>		
<b>2a</b>			
<b>b</b>	Did the activities described in line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>		
<b>2b</b>			
<b>3</b>	Parent of Supported Organizations. <i>Answer lines 3a and 3b below.</i>		
<b>a</b>	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>If "Yes" or "No," provide details in Part VI.</i>		
<b>3a</b>			
<b>b</b>	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		
<b>3b</b>			

**Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations**

- 1  Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A – Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3.	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	<b>Adjusted Net Income</b> (subtract lines 5, 6, and 7 from line 4)	8	
Section B – Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	<b>Total</b> (add lines 1a, 1b, and 1c)	1d	
e	<b>Discount</b> claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 0.035.	6	
7	Recoveries of prior-year distributions	7	
8	<b>Minimum Asset Amount</b> (add line 7 to line 6)	8	
Section C – Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

**Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations** *(continued)*

Section D – Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required— <i>provide details in Part VI</i> )	
6 Other distributions ( <i>describe in Part VI</i> ). See instructions.	
7 <b>Total annual distributions.</b> Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive ( <i>provide details in Part VI</i> ). See instructions.	
9 Distributable amount for 2020 from Section C, line 6	
10 Line 8 amount divided by line 9 amount	

Section E – Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2020	(iii) Distributable Amount for 2020
1 Distributable amount for 2020 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2020 (reasonable cause required— <i>explain in Part VI</i> ). See instructions.			
3 Excess distributions carryover, if any, to 2020			
a From 2015 .....			
b From 2016 .....			
c From 2017 .....			
d From 2018 .....			
e From 2019 .....			
f <b>Total</b> of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2020 distributable amount			
i Carryover from 2015 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2020 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2020 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2020, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
6 Remaining underdistributions for 2020 Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
7 <b>Excess distributions carryover to 2021.</b> Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2016 .....			
b Excess from 2017 .....			
c Excess from 2018 .....			
d Excess from 2019 .....			
e Excess from 2020 .....			

**Part VI** **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

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**Schedule B**(Form 990, 990-EZ,  
or 990-PF)Department of the Treasury  
Internal Revenue Service**Schedule of Contributors****u** Attach to Form 990, Form 990-EZ, or Form 990-PF.  
**u** Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2020**

Name of the organization

**RONALD MCDONALD HOUSE CHARITIES OF  
TEMPLE, TEXAS**

Employer identification number

**74-2345274**

Organization type (check one):

**Filers of:****Section:**

Form 990 or 990-EZ

 501(c)( **3** ) (enter number) organization 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation 527 political organization

Form 990-PF

 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundationCheck if your organization is covered by the **General Rule** or a **Special Rule**.**Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.**General Rule**

- 
- For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

**Special Rules**

- 
- For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33
- <sup>1</sup>
- /
- <sub>3</sub>
- % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of
- (1)**
- \$5,000; or
- (2)**
- 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

- 
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000
- exclusively*
- for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

- 
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions
- exclusively*
- for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an
- exclusively*
- religious, charitable, etc., purpose. Don't complete any of the parts unless the
- General Rule**
- applies to this organization because it received
- nonexclusively*
- religious, charitable, etc., contributions totaling \$5,000 or more during the year ..... ► \$ .....

**Caution:** An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization

RONALD MCDONALD HOUSE CHARITIES OF

Employer identification number

74-2345274

**Part I Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	BIG GAME ENTERPRISES, INC. P.O. BOX 1167 LAMPASAS TX 76550	\$ 16,001	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	MAXTAB, INC. JCF'S RESTAURANT N. STORES 1508 DESSAU RDIGE LANE 801 AUSTIN TX 78754	\$ 29,801	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	KADES CORPORATION 5621 RED BLUFF RD PASADENA TX 77505	\$ 8,480	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	TEMPUR-PEDIC 2415 S. 47TH STREET TEMPLE TX 76504	\$ 8,545	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	MARTIN-BROWER COMPANY, LLC. 2415 S. 47TH ST. TEMPLE TX 76504	\$ 7,563	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	HJORTH, TYLER 501 LOVEJOY LANE SAN MARCOS TX 78666	\$ 7,500	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

u Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization

RONALD MCDONALD HOUSE CHARITIES OF TEMPLE, TEXAS

Employer identification number

74-2345274

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate value of contributions, aggregate value of grants, aggregate value at end of year, and two questions about donor advisement.

Part II Conservation Easements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include purpose of conservation easements, total number of easements, total acreage, number of easements on historic structures, and monitoring expenses.

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

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include questions about reporting art and historical treasures.



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

**3** Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):

- a**  Public exhibition
- b**  Scholarly research
- c**  Preservation for future generations
- d**  Loan or exchange program
- e**  Other .....

**4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

**5** During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Yes  No

**Part IV Escrow and Custodial Arrangements.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

**1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  Yes  No

**b** If "Yes," explain the arrangement in Part XIII and complete the following table:

- c** Beginning balance .....
- d** Additions during the year .....
- e** Distributions during the year .....
- f** Ending balance .....

	Amount
<b>1c</b>	
<b>1d</b>	
<b>1e</b>	
<b>1f</b>	

**2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?  Yes  No

**b** If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

**Part V Endowment Funds.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
<b>1a</b> Beginning of year balance .....			2,716,871	2,345,289	2,187,448
<b>b</b> Contributions .....					
<b>c</b> Net investment earnings, gains, and losses .....		454,555	-130,354	385,580	170,691
<b>d</b> Grants or scholarships .....					
<b>e</b> Other expenditures for facilities and programs .....					
<b>f</b> Administrative expenses .....		15,120	15,201	13,998	12,850
<b>g</b> End of year balance .....		3,040,991	2,571,316	2,716,871	2,345,289

**2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a** Board designated or quasi-endowment **u** .....
- b** Permanent endowment **u** .....
- c** Term endowment **u** .....

The percentages on lines 2a, 2b, and 2c should equal 100%.

**3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i)** Unrelated organizations .....
- (ii)** Related organizations .....

	Yes	No
<b>3a(i)</b>		X
<b>3a(ii)</b>		X
<b>3b</b>		

**b** If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? .....

**4** Describe in Part XIII the intended uses of the organization's endowment funds.

**Part VI Land, Buildings, and Equipment.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
<b>1a</b> Land .....		130,580		130,580
<b>b</b> Buildings .....		1,657,416	1,196,831	460,585
<b>c</b> Leasehold improvements .....				
<b>d</b> Equipment .....		576,561	527,984	48,577
<b>e</b> Other .....		14,255	13,740	515
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) .....			<b>u</b>	640,257

**Part VII Investments – Other Securities.**

Complete if the organization answered "Yes" on 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) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 12.)	<b>u</b>	

**Part VIII Investments – Program Related.**

Complete if the organization answered "Yes" on Form 990, 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)		
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 13.)	<b>u</b>	

**Part IX Other Assets.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 15.)	<b>u</b>

**Part X Other Liabilities.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) <b>OTHER LIABILITIES</b>	<b>3,015</b>
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 25.)	<b>u 3,015</b>

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 FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

Table with 5 main rows and sub-rows (a-e) for adjustments. Totals are shown in column 5. Values include 588,539.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

Table with 5 main rows and sub-rows (a-e) for adjustments. Totals are shown in column 5. Values include 526,728.

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.

Dotted lines for providing supplemental information.



**SCHEDULE G  
(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Information Regarding Fundraising or Gaming Activities**

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

⚡ Attach to Form 990 or Form 990-EZ.

⚡ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2020**

Open to Public Inspection

Name of the organization

**RONALD MCDONALD HOUSE CHARITIES OF  
TEMPLE, TEXAS**

Employer identification number

**74-2345274**

**Part I Fundraising Activities.** Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

**1** Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a**  Mail solicitations
- b**  Internet and email solicitations
- c**  Phone solicitations
- d**  In-person solicitations
- e**  Solicitation of non-government grants
- f**  Solicitation of government grants
- g**  Special fundraising events

**2a** Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?  Yes  No

**b** If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

	(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
			Yes	No			
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
<b>Total</b>							

**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.

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**Part II Fundraising Events.** Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		<u>MISC FUNDRAISER</u> (event type)	<u>GOLF TOURNAMENT</u> (event type)	<u>NONE</u> (total number)	(add col. (a) through col. (c))
Revenue	1	Gross receipts	70,003	20,246	90,249
	2	Less: Contributions			
	3	Gross income (line 1 minus line 2)	70,003	20,246	90,249
Direct Expenses	4	Cash prizes			
	5	Noncash prizes			
	6	Rent/facility costs			
	7	Food and beverages			
	8	Entertainment			
	9	Other direct expenses	14,766	3,178	17,944
	10	Direct expense summary. Add lines 4 through 9 in column (d)			
11	Net income summary. Subtract line 10 from line 3, column (d)				72,305

**Part III Gaming.** Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))	
Revenue	1	Gross revenue				
Direct Expenses	2	Cash prizes				
	3	Noncash prizes				
	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	<input type="checkbox"/> Yes ..... % <input type="checkbox"/> No	<input type="checkbox"/> Yes ..... % <input type="checkbox"/> No	<input type="checkbox"/> Yes ..... % <input type="checkbox"/> No	
	7	Direct expense summary. Add lines 2 through 5 in column (d)				
	8	Net gaming income summary. Subtract line 7 from line 1, column (d)				

9 Enter the state(s) in which the organization conducts gaming activities: \_\_\_\_\_  
 a Is the organization licensed to conduct gaming activities in each of these states?  Yes  No  
 b If "No," explain: \_\_\_\_\_

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year?  Yes  No  
 b If "Yes," explain: \_\_\_\_\_

- 11 Does the organization conduct gaming activities with nonmembers?  Yes  No
- 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?  Yes  No
- 13 Indicate the percentage of gaming activity conducted in:
- |   |                             |     |   |
|---|-----------------------------|-----|---|
| a | The organization's facility | 13a | % |
| b | An outside facility         | 13b | % |

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name **u** .....

Address **u** .....

- 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?  Yes  No
- b If "Yes," enter the amount of gaming revenue received by the organization **u** \$ ..... and the amount of gaming revenue retained by the third party **u** \$ .....
- c If "Yes," enter name and address of the third party:

Name **u** .....

Address **u** .....

16 Gaming manager information:

Name **u** .....

Gaming manager compensation **u** \$ .....

Description of services provided **u** .....

Director/officer       Employee       Independent contractor

- 17 Mandatory distributions:
- a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?  Yes  No
- b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year **u** \$ .....

**Part IV Supplemental Information.** 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 provide any additional information. See instructions.

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**SCHEDULE M  
(Form 990)**

**Noncash Contributions**

OMB No. 1545-0047

**2020**

**Open To Public  
Inspection**

Department of the Treasury  
Internal Revenue Service

**u** Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.  
**u** Attach to Form 990.  
**u** Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

Name of the organization

**RONALD MCDONALD HOUSE CHARITIES OF  
TEMPLE, TEXAS**

Employer identification number

**74-2345274**

**Part I Types of Property**

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art — Works of art				
2 Art — Historical treasures				
3 Art — Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities — Publicly traded				
10 Securities — Closely held stock				
11 Securities — Partnership, LLC, or trust interests				
12 Securities — Miscellaneous				
13 Qualified conservation contribution — Historic structures				
14 Qualified conservation contribution — Other				
15 Real estate — Residential				
16 Real estate — Commercial				
17 Real estate — Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other <b>u</b> ( )	<b>X</b>	<b>1</b>	<b>93,075</b>	
26 Other <b>u</b> ( )				
27 Other <b>u</b> ( )				
28 Other <b>u</b> ( )				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement

**29**

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?

	Yes	No
30a		<b>X</b>
31		<b>X</b>
32a		<b>X</b>

b If "Yes," describe the arrangement in Part II.

31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?

b If "Yes," describe in Part II.

33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.



**Part II** **Supplemental Information.** Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

[Dotted lines for supplemental information entry]

**SCHEDULE O**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

**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.

u Attach to Form 990 or 990-EZ.

u Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2020**

**Open to Public  
Inspection**

Name of the organization	<b>RONALD MCDONALD HOUSE CHARITIES OF TEMPLE, TEXAS</b>	Employer identification number <b>74-2345274</b>
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FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990  
TAX RETURN IS REVIEWED AT BOARD MEETING PRIOR TO FILING.

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY  
AFFECTED BOARD MEMBERS AND EXECUTIVE DIRECTOR ARE PROHIBITED FROM  
DISCUSSION AND DECISIONS REGARDING THE TRANSACTION.

FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL  
COMPENSATION IS REVIEWED AND VOTED BY THE BOARD.

FORM 990, PART VI, LINE 15B - COMPENSATION PROCESS FOR OFFICERS  
COMPENSATION IS REVIEWED AND VOTED BY THE BOARD.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION  
NO DOCUMENTS AVAILABLE TO THE PUBLIC

FORM 990, PART XI, LINE 9 - OTHER CHANGES IN NET ASSETS EXPLANATION  
PPP LOAN \$ 48,856

Form **4562**

Department of the Treasury  
Internal Revenue Service (99)

**Depreciation and Amortization**  
(Including Information on Listed Property)

u Attach to your tax return.

u Go to [www.irs.gov/Form4562](http://www.irs.gov/Form4562) for instructions and the latest information.

OMB No. 1545-0172

**2020**

Attachment Sequence No. **179**

Name(s) shown on return **RONALD MCDONALD HOUSE CHARITIES OF TEMPLE, TEXAS**

Identifying number  
**74-2345274**

Business or activity to which this form relates

**INDIRECT DEPRECIATION**

**Part I Election To Expense Certain Property Under Section 179**

**Note:** If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions)	1	<b>1,040,000</b>
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	<b>2,590,000</b>
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the <b>smaller</b> of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2019 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions	11	
12	Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11	12	
13	Carryover of disallowed deduction to 2021. Add lines 9 and 10, less line 12	13	

**Note:** Don't use Part II or Part III below for listed property. Instead, use Part V.

**Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.)**

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year. See instructions	14	<b>15,231</b>
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	<b>59,960</b>

**Part III MACRS Depreciation (Don't include listed property. See instructions.)**

**Section A**

17	MACRS deductions for assets placed in service in tax years beginning before 2020	17	<b>116</b>
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here <input checked="" type="checkbox"/> u		

**Section B—Assets Placed in Service During 2020 Tax Year Using the General Depreciation System**

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property			27.5 yrs.	MM	S/L	
			27.5 yrs.	MM	S/L	
i Nonresidential real property			39 yrs.	MM	S/L	
				MM	S/L	

**Section C—Assets Placed in Service During 2020 Tax Year Using the Alternative Depreciation System**

20a Class life					S/L	
b 12-year			12 yrs.		S/L	
c 30-year			30 yrs.	MM	S/L	
d 40-year			40 yrs.	MM	S/L	

**Part IV Summary (See instructions.)**

21	Listed property. Enter amount from line 28	21	
22	<b>Total.</b> Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions	22	<b>75,307</b>
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.

Form **4562** (2020)

## Federal Asset Report

## Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	Per Conv Meth	Prior	Current
<b>5-year GDS Property:</b>										
181	Mark's PC	1/03/20	874			X	0	5 HY 200DB	0	874
185	TRS Telephone System	8/26/20	11,738			X	0	5 HY 200DB	0	11,738
188	New Computers for ED	12/16/20	2,619			X	0	5 HY 200DB	0	2,619
			<u>15,231</u>				<u>0</u>		<u>0</u>	<u>15,231</u>
<b>Prior MACRS:</b>										
12	A/C Unit	9/09/10	1,975			X	0	5 HY 200DB	1,975	0
13	Donated Exterior Signs	11/28/11	1,772			X	174	10 HY 200DB	1,598	116
18	Horizontal Furn & A-Coi	6/20/12	6,799			X	3,400	5 HY 200DB	6,799	0
20	New Fire Panel	10/05/12	1,750			X	875	5 HY 200DB	1,750	0
21	New Escucheons	9/24/12	1,639			X	820	5 HY 200DB	1,639	0
28	2011 Toyota Sienna	9/03/10	27,566			X	13,783	5 HY 200DB	27,566	0
70	2 Side Chairs	12/31/98	250				250	7 HY 200DB	250	0
95	TRS Telephone Systems	2/06/02	4,213			X	2,949	5 HY 200DB	4,213	0
96	Boardroom Chairs	1/29/02	9,520			X	6,664	7 HY 200DB	9,520	0
97	Classic Tool-Pictures	3/11/02	3,595			X	2,517	7 HY 200DB	3,595	0
98	Ronald on a Bench	3/20/02	1,059			X	741	7 HY 200DB	1,059	0
99	Casey's Furniture	3/26/02	4,587			X	3,211	7 HY 200DB	4,587	0
100	Southwest Cont - Furniture	3/29/02	11,101			X	7,771	7 HY 200DB	11,101	0
101	Blinds/Shades	4/09/02	2,260			X	1,582	7 HY 200DB	2,260	0
102	Playground	5/13/02	9,603			X	6,722	7 HY 200DB	9,603	0
103	Casey's Furniture - Lamp	5/23/02	218			X	153	7 HY 200DB	218	0
104	Ice Maker	6/25/02	983			X	688	7 HY 200DB	983	0
105	Exceed Software	4/26/02	6,890			X	4,823	5 HY 200DB	6,890	0
106	Casey's Furniture	3/28/02	26,210			X	18,347	7 HY 200DB	26,210	0
107	Casey's Furniture	4/09/02	8,071			X	5,650	7 HY 200DB	8,071	0
108	Class Picture Co	4/09/02	802			X	562	7 HY 200DB	802	0
109	SW Contract - Furniture	2/15/02	10,228			X	7,160	7 HY 200DB	10,228	0
110	Security Desk	2/10/04	1,017			X	509	7 HY 200DB	1,017	0
115	A/C Unit Room 5	5/12/06	1,100				1,100	5 HY 200DB	1,100	0
116	A/C Unit Room 14	7/12/06	1,100				1,100	5 HY 200DB	1,100	0
117	A/C Unit Room 6	8/18/06	1,100				1,100	5 HY 200DB	1,100	0
118	A/C #2	10/27/06	1,200				1,200	5 HY 200DB	1,200	0
124	2 dryers - donated	7/01/08	780			X	390	5 HY 200DB	780	0
125	1 donated dishwasher	7/01/08	417			X	208	5 HY 200DB	417	0
126	3 ton AC unit	9/26/08	1,895			X	947	5 HY 200DB	1,895	0
130	Tempur Pedic Beds	2/01/12	72,354			X	36,177	5 HY 200DB	72,354	0
150	1 Washers-doanted	7/01/08	450			X	225	5 HY 200DB	450	0
163	Classic Tool - Pictures	4/01/02	3,229			X	2,260	7 HY 200DB	3,229	0
177	2 Lenovo ThinkCentre PC	9/12/19	3,697			X	0	5 HY 200DB	3,697	0
178	Dell Tower Server	9/12/19	5,199			X	0	5 HY 200DB	5,199	0
			<u>234,629</u>				<u>134,058</u>		<u>234,455</u>	<u>116</u>
<b>Other Depreciation:</b>										
1	Building	9/30/86	307,966				307,966	19 MO S/L	307,966	0
2	Building Addition	12/01/92	19,694				19,694	19 MO S/L	19,694	0
3	Bldg Addition-Donated	3/19/93	12,000				12,000	19 MO S/L	12,000	0
4	Building Addition	3/19/93	14,902				14,902	19 MO S/L	14,902	0
8	Crw-Porch-Driveway	6/22/00	17,436				17,436	19 MO S/L	17,436	0
9	Building Addition	5/19/02	1,211,530				1,211,530	30 MO S/L	724,423	40,384
11	Gutters	9/29/09	1,499				1,499	10 MO S/L	1,499	0
15	2 Outdoor A/C Units	3/18/11	4,440				4,440	10 MO S/L	2,811	444
16	3 PTAC Units	9/09/11	1,693				1,693	10 MO S/L	1,693	0
17	New Gutters	5/18/12	2,645				2,645	10 MO S/L	1,984	264
19	Replace A/C Unit	12/31/12	2,296				2,296	10 MO S/L	2,296	0
22	Hoescher Flooring Install	2/17/16	12,065				12,065	7 MO S/L	6,033	1,723
23	Metflor Corp-Flooring	1/15/16	14,619				14,619	7 MO S/L	7,310	2,088
24	Lochridge Priest-HVAC	10/10/16	4,900				4,900	5 MO S/L	3,430	980
25	Kaba Lock System	10/10/16	12,685				12,685	5 MO S/L	8,880	2,537
26	New 5 ton Goodman HVAC	2/27/17	3,111				3,111	5 MO S/L	1,556	622
27	Trailer	5/01/01	3,730				3,730	7 MO S/L	3,730	0
29	Donated 3-Disney Print	12/31/98	9,000				9,000	7 MO S/L	9,000	0
30	Donated Picture-Noah	12/31/98	178				178	7 MO S/L	178	0
31	Donated Picture-Ocean	12/31/98	171				171	7 MO S/L	171	0
32	Donated Picture-Dinosaur	12/31/98	331				331	7 MO S/L	331	0

## Federal Asset Report

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Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	Per Conv Meth	Prior	Current
33	Donated Pictures-2	12/31/98	350			350	7 MO S/L	350	0
34	Donated F&F	1/01/86	98,978			98,978	7 MO S/L	98,978	0
35	Furn & Fixtures	9/30/86	16,847			16,847	16 MO S/L	16,847	0
36	Furniture & Fixtures	9/30/87	8,906			8,906	7 MO S/L	8,906	0
37	Furniture	10/31/87	2,840			2,840	7 MO S/L	2,840	0
38	Donated F & F	4/01/88	1,598			1,598	7 MO S/L	1,598	0
39	Patio Furniture	6/30/88	148			148	7 MO S/L	148	0
40	Donated Furniture & Fix	4/01/90	550			550	7 MO S/L	550	0
42	Donated F & F	4/01/92	215			215	7 MO S/L	215	0
43	Donated F&F	4/01/93	2,885			2,885	7 MO S/L	2,885	0
44	Addl Sprinkler	8/04/92	548			548	7 MO S/L	548	0
45	Donated F&F	4/01/93	6,025			6,025	7 MO S/L	6,025	0
46	Furnishings	4/15/93	944			944	7 MO S/L	944	0
47	Clock	4/27/93	249			249	7 MO S/L	249	0
48	Laura White Shade	1/07/94	425			425	7 MO S/L	425	0
49	Gutters	3/25/94	368			368	7 MO S/L	368	0
50	Donated Gutters	3/25/94	158			158	7 MO S/L	158	0
51	Sofa & Chair	4/12/94	800			800	7 MO S/L	800	0
52	Office Furniture	4/18/94	200			200	7 MO S/L	200	0
53	Donated Office Furniture	4/18/94	500			500	7 MO S/L	500	0
54	File Cabinet	3/01/95	100			100	7 MO S/L	100	0
56	North Pole Villa	12/01/95	1,003			1,003	7 MO S/L	1,003	0
57	Office Desk	3/01/96	450			450	7 MO S/L	450	0
58	Furniture	3/01/96	2,184			2,184	7 MO S/L	2,184	0
59	Donated-Picnic Table	3/01/96	552			552	7 MO S/L	552	0
63	Sprinkler System	8/05/96	12,547			12,547	7 MO S/L	12,547	0
64	Addn To Fire Alarm	9/16/96	81			81	7 MO S/L	81	0
65	Equip Frm Frinne	6/06/97	6,340			6,340	7 MO S/L	6,340	0
66	4 Office Chairs	12/08/97	2,800			2,800	5 MO S/L	2,800	0
67	Donated Patio Furniture	12/31/98	250			250	7 MO S/L	250	0
69	Donated Desk	12/31/98	300			300	7 MO S/L	300	0
71	File Cabinet	12/31/98	125			125	7 MO S/L	125	0
73	Donated Deep Freezer	12/30/98	279			279	7 MO S/L	279	0
74	Donated Area Rug	12/31/98	50			50	7 MO S/L	50	0
75	Donated Floral Swag	12/31/98	30			30	7 MO S/L	30	0
76	Donated Mirror	12/31/98	35			35	7 MO S/L	35	0
77	Donated Print	12/31/98	35			35	7 MO S/L	35	0
78	Donated-Snow Villa	12/31/98	500			500	7 MO S/L	500	0
79	Display Case	12/01/99	150			150	7 MO S/L	150	0
80	Donated Sectional Couch	7/01/99	2,000			2,000	7 MO S/L	2,000	0
84	Donated N Pole Village	12/01/99	1,000			1,000	7 MO S/L	1,000	0
85	Maid Cart	12/01/99	150			150	7 MO S/L	150	0
86	Dining Table and Chairs	8/18/99	1,050			1,050	7 MO S/L	1,050	0
88	Refrigerator	2/14/00	723			723	7 MO S/L	723	0
90	Telephone System	8/31/01	6,197			6,197	7 MO S/L	6,197	0
91	Freezer	1/17/01	549			549	7 MO S/L	549	0
93	Sofa & 2 Chairs	12/11/01	2,339			2,339	5 MO S/L	2,339	0
94	Appliances from Whirlpool	2/01/02	25,812			25,812	5 MO S/L	25,812	0
111	A/C Units	7/27/05	8,197			8,197	7 MO S/L	8,197	0
113	A/C Condensor	9/23/05	1,980			1,980	7 MO S/L	1,980	0
114	Donated Appliances	9/30/05	3,000			3,000	7 MO S/L	3,000	0
119	A/C Unit	6/19/07	1,100			1,100	5 MO S/L	1,100	0
122	A/C Condenser	9/13/07	2,876			2,876	5 MO S/L	2,876	0
123	Commercial Refrigerator	8/29/07	1,992			1,992	5 MO S/L	1,992	0
127	Furniture-donated	11/04/09	3,350			3,350	5 MO S/L	3,350	0
133	Night Manager's Refrigerator	11/25/13	775			775	5 MO S/L	775	0
135	LazyBoy Recliner x4	8/18/14	1,200			1,200	5 MO S/L	1,200	0
136	Tempurpedic Mattresses	8/31/14	22,100			22,100	5 MO S/L	22,100	0
138	2 Stoves, 1 Dishwasher	8/31/14	2,400			2,400	5 MO S/L	2,400	0
139	2 big washers, 2 dryers	9/21/14	3,054			3,054	5 MO S/L	3,054	0
140	Microwave- Family Room	2/19/15	224			224	5 MO S/L	202	22
141	Security Camera - Family Room	1/23/15	1,279			1,279	5 MO S/L	1,151	128
142	Ice Machine	10/02/15	1,550			1,550	5 MO S/L	1,395	155
143	Washing Machine - Family	10/15/15	494			494	5 MO S/L	445	49
144	Replacement Coil - Large	12/02/15	1,150			1,150	5 MO S/L	1,035	115
145	Conference Room Media	3/07/16	1,097			1,097	5 MO S/L	768	219
146	PTAC Units-5 each	4/26/16	3,325			3,325	5 MO S/L	2,328	665
147	Lazy Boy Chair Sofa Sleeper	2/11/16	1,392			1,392	5 MO S/L	974	279
148	Lazy Boy Love Seat Sofa	2/11/16	1,906			1,906	5 MO S/L	1,334	381
149	Deluxe Office Chair	1/26/16	285			285	5 MO S/L	200	56
151	3 Ton Compressor w/ 50	8/04/15	2,200			2,200	5 MO S/L	1,980	220

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Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	Per Conv Meth	Prior	Current
152	100 Gallon Water Heater	11/17/15	4,491			4,491	5 MO S/L	4,042	449
153	50 Gallon Water Heater	2/24/16	721			721	5 MO S/L	505	144
154	Two Microwaves	9/01/16	263			263	5 MO S/L	184	53
155	Donated 2 - Twin Sofa Slp	2/14/17	2,200			2,200	5 MO S/L	1,100	440
156	Lenovo Desktop Computer	6/23/17	1,011			1,011	5 MO S/L	505	203
157	Dishwasher	9/08/17	414			414	5 MO S/L	180	83
158	12 40" TV's	2/16/17	3,278			3,278	5 MO S/L	1,639	656
159	TV Mounting Brackets	2/13/17	1,407			1,407	5 MO S/L	703	282
160	4 Blue Ray Players	2/09/17	250			250	5 MO S/L	125	50
161	3-32" TV's	2/09/17	597			597	5 MO S/L	298	120
162	24 Q & 7 Twin headboard	10/26/17	3,268			3,268	5 MO S/L	1,634	653
164	Memorial Garden	10/24/94	8,849			8,849	15 MO S/L	8,849	0
165	Memorial Garden	7/10/96	56			56	15 MO S/L	56	0
166	Memorial Garden Improvements	2/16/16	3,000			3,000	5 MO S/L	2,100	600
167	Memorial Garden Fountains	3/04/16	950			950	5 MO S/L	665	190
168	Land	9/30/86	96,000			96,000	0 -- Land	0	0
169	Land-1.172 Acres-Donated	12/03/97	17,580			17,580	0 -- Land	0	0
170	Donated Land	2/01/02	17,000			17,000	0 -- Land	0	0
171	Land Improvements	6/30/98	200			200	7 MO S/L	200	0
172	Two Memorial Trees	2/11/16	1,200			1,200	5 MO S/L	840	240
173	Surveillance for kitchen and play areas	2/23/18	5,933			5,933	5 MO S/L	2,175	1,187
174	Donated LazyBoy Twin Sofa Sleepers (2)	5/31/18	3,598			3,598	5 MO S/L	1,139	720
175	Computer for Mark/Finance Office	10/02/18	1,017			1,017	5 MO S/L	254	203
176	HP 8710 printer	12/05/18	115			115	5 MO S/L	25	23
179	Donated Chest Freezer	9/30/19	400			400	5 MO S/L	20	80
180	Donated Refrigerator for Small Kitchen	8/31/19	500			500	5 MO S/L	33	100
182	Tempur-Pedic Mattresses	5/15/20	8,545			8,545	5 MO S/L	0	1,139
183	Xerox Copier	6/30/20	5,510			5,510	5 MO S/L	0	551
184	Bell Air Conditioning HVAC Donated Serv	7/15/20	3,831			3,831	5 MO S/L	0	383
186	10 Miniture refrgerators for guest rooms	9/29/20	1,490			1,490	5 MO S/L	0	75
187	Wayfair shower mats	12/01/20	300			300	5 MO S/L	0	5
<b>Total Other Depreciation</b>			<u>2,128,956</u>			<u>2,128,956</u>		<u>1,449,595</u>	<u>59,960</u>
<b>Total ACRS and Other Depreciation</b>			<u>2,128,956</u>			<u>2,128,956</u>		<u>1,449,595</u>	<u>59,960</u>
<b>Grand Totals</b>			2,378,816			2,263,014		1,684,050	75,307
<b>Less: Dispositions and Transfers</b>			0			0		0	0
<b>Less: Start-up/Org Expense</b>			0			0		0	0
<b>Net Grand Totals</b>			<u>2,378,816</u>			<u>2,263,014</u>		<u>1,684,050</u>	<u>75,307</u>

**TX Asset Report****Form 990, Page 1**

Asset	Description	Date In Service	Cost	Basis for Depr	TX Prior	TX Current	Federal Current	Difference Fed - TX
<b>5-year GDS Property:</b>								
181	Mark's PC	1/03/20	874	874	0	175	874	699
185	TRS Telephone System	8/26/20	11,738	11,738	0	2,348	11,738	9,390
188	New Computers for ED	12/16/20	2,619	2,619	0	524	2,619	2,095
			<u>15,231</u>	<u>15,231</u>	<u>0</u>	<u>3,047</u>	<u>15,231</u>	<u>12,184</u>
<b>Prior MACRS:</b>								
12	A/C Unit	9/09/10	1,975	1,975	0	0	0	0
13	Donated Exterior Signs	11/28/11	1,772	1,772	1,013	506	116	-390
18	Horizontal Furn & A-Coi	6/20/12	6,799	6,799	0	0	0	0
20	New Fire Panel	10/05/12	1,750	1,750	0	0	0	0
21	New Escucheons	9/24/12	1,639	1,639	0	0	0	0
28	2011 Toyota Sienna	9/03/10	27,566	27,566	0	0	0	0
70	2 Side Chairs	12/31/98	250	250	0	0	0	0
95	TRS Telephone Systems	2/06/02	4,213	4,213	0	0	0	0
96	Boardroom Chairs	1/29/02	9,520	9,520	0	0	0	0
97	Classic Tool-Pictures	3/11/02	3,595	3,595	0	0	0	0
98	Ronald on a Bench	3/20/02	1,059	1,059	0	0	0	0
99	Casey's Furniture	3/26/02	4,587	4,587	0	0	0	0
100	Southwest Cont - Furniture	3/29/02	11,101	11,101	0	0	0	0
101	Blinds/Shades	4/09/02	2,260	2,260	0	0	0	0
102	Playground	5/13/02	9,603	9,603	0	0	0	0
103	Casey's Furniture - Lamp	5/23/02	218	218	0	0	0	0
104	Ice Maker	6/25/02	983	983	0	0	0	0
105	Exceed Software	4/26/02	6,890	6,890	0	0	0	0
106	Casey's Furniture	3/28/02	26,210	26,210	0	0	0	0
107	Casey's Furniture	4/09/02	8,071	8,071	0	0	0	0
108	Class Picture Co	4/09/02	802	802	0	0	0	0
109	SW Contract - Furniture	2/15/02	10,228	10,228	0	0	0	0
110	Security Desk	2/10/04	1,017	1,017	0	0	0	0
115	A/C Unit Room 5	5/12/06	1,100	1,100	0	0	0	0
116	A/C Unit Room 14	7/12/06	1,100	1,100	0	0	0	0
117	A/C Unit Room 6	8/18/06	1,100	1,100	0	0	0	0
118	A/C #2	10/27/06	1,200	1,200	0	0	0	0
124	2 dryers - donated	7/01/08	780	780	0	0	0	0
125	1 donated dishwasher	7/01/08	417	417	0	0	0	0
126	3 ton AC unit	9/26/08	1,895	1,895	0	0	0	0
130	Tempur Pedic Beds	2/01/12	72,354	72,354	0	0	0	0
150	1 Washers-doanted	7/01/08	450	450	0	0	0	0
163	Classic Tool - Pictures	4/01/02	3,229	3,229	0	0	0	0
177	2 Lenovo ThinkCentre PC	9/12/19	3,697	3,697	739	1,183	0	-1,183
178	Dell Tower Server	9/12/19	5,199	5,199	1,040	1,663	0	-1,663
			<u>234,629</u>	<u>234,629</u>	<u>2,792</u>	<u>3,352</u>	<u>116</u>	<u>-3,236</u>
<b>Other Depreciation:</b>								
1	Building	9/30/86	307,966	307,966	307,966	0	0	0
2	Building Addition	12/01/92	19,694	19,694	19,694	0	0	0
3	Bldg Addition-Donated	3/19/93	12,000	12,000	12,000	0	0	0
4	Building Addition	3/19/93	14,902	14,902	1,569	784	0	-784
8	Crw-Porch-Driveway	6/22/00	17,436	17,436	1,835	918	0	-918
9	Building Addition	5/19/02	1,211,530	1,211,530	724,423	40,384	40,384	0
11	Gutters	9/29/09	1,499	1,499	1,499	0	0	0
15	2 Outdoor A/C Units	3/18/11	4,440	4,440	777	444	444	0
16	3 PTAC Units	9/09/11	1,693	1,693	169	170	0	-170
17	New Gutters	5/18/12	2,645	2,645	529	265	264	-1
19	Replace A/C Unit	12/31/12	2,296	2,296	230	229	0	-229
22	Hoescher Flooring Install	2/17/16	12,065	12,065	3,447	1,724	1,723	-1
23	Metflor Corp-Flooring	1/15/16	14,619	14,619	4,177	2,088	2,088	0
24	Lochridge Priest-HVAC	10/10/16	4,900	4,900	1,960	980	980	0
25	Kaba Lock System	10/10/16	12,685	12,685	5,074	2,537	2,537	0
26	New 5 ton Goodman HVAC	2/27/17	3,111	3,111	1,244	623	622	-1
27	Trailer	5/01/01	3,730	3,730	1,066	532	0	-532
29	Donated 3-Disney Print	12/31/98	9,000	9,000	2,571	1,286	0	-1,286
30	Donated Picture-Noah	12/31/98	178	178	51	25	0	-25
31	Donated Picture-Ocean	12/31/98	171	171	49	24	0	-24
32	Donated Picture-Dinosaur	12/31/98	331	331	95	47	0	-47

Asset	Description	Date In Service	Cost	Basis for Depr	TX Prior	TX Current	Federal Current	Difference Fed - TX
33	Donated Pictures-2	12/31/98	350	350	100	50	0	-50
34	Donated F&F	1/01/86	98,978	98,978	28,279	14,140	0	-14,140
35	Furn & Fixtures	9/30/86	16,847	16,847	2,106	1,053	0	-1,053
36	Furniture & Fixtures	9/30/87	8,906	8,906	2,545	1,272	0	-1,272
37	Furniture	10/31/87	2,840	2,840	811	406	0	-406
38	Donated F & F	4/01/88	0	0	0	0	0	0
39	Patio Furniture	6/30/88	148	148	42	21	0	-21
40	Donated Furniture & Fix	4/01/90	550	550	157	79	0	-79
42	Donated F & F	4/01/92	215	215	61	31	0	-31
43	Donated F&F	4/01/93	2,885	2,885	824	412	0	-412
44	Addl Sprinkler	8/04/92	548	548	157	78	0	-78
45	Donated F&F	4/01/93	6,025	6,025	1,721	861	0	-861
46	Furnishings	4/15/93	944	944	270	135	0	-135
47	Clock	4/27/93	249	249	71	36	0	-36
48	Laura White Shade	1/07/94	425	425	121	61	0	-61
49	Gutters	3/25/94	368	368	105	53	0	-53
50	Donated Gutters	3/25/94	158	158	45	23	0	-23
51	Sofa & Chair	4/12/94	800	800	229	114	0	-114
52	Office Furniture	4/18/94	200	200	57	29	0	-29
53	Donated Office Furniture	4/18/94	500	500	143	71	0	-71
54	File Cabinet	3/01/95	100	100	29	14	0	-14
56	North Pole Villa	12/01/95	1,003	1,003	287	143	0	-143
57	Office Desk	3/01/96	450	450	129	64	0	-64
58	Furniture	3/01/96	0	0	0	0	0	0
59	Donated-Picnic Table	3/01/96	552	552	158	79	0	-79
63	Sprinkler System	8/05/96	12,547	12,547	3,585	1,792	0	-1,792
64	Addn To Fire Alarm	9/16/96	81	81	23	12	0	-12
65	Equip Frm Frinne	6/06/97	6,340	6,340	1,811	906	0	-906
66	4 Office Chairs	12/08/97	2,800	2,800	1,120	560	0	-560
67	Donated Patio Furniture	12/31/98	250	250	71	36	0	-36
69	Donated Desk	12/31/98	300	300	86	43	0	-43
71	File Cabinet	12/31/98	125	125	36	18	0	-18
73	Donated Deep Freezer	12/30/98	279	279	80	40	0	-40
74	Donated Area Rug	12/31/98	50	50	14	7	0	-7
75	Donated Floral Swag	12/31/98	30	30	9	4	0	-4
76	Donated Mirror	12/31/98	35	35	10	5	0	-5
77	Donated Print	12/31/98	35	35	10	5	0	-5
78	Donated-Snow Villa	12/31/98	500	500	143	71	0	-71
79	Display Case	12/01/99	150	150	43	21	0	-21
80	Donated Sectional Couch	7/01/99	2,000	2,000	571	286	0	-286
84	Donated N Pole Village	12/01/99	1,000	1,000	286	143	0	-143
85	Maid Cart	12/01/99	0	0	0	0	0	0
86	Dining Table and Chairs	8/18/99	1,050	1,050	300	150	0	-150
88	Refrigerator	2/14/00	723	723	207	103	0	-103
90	Telephone System	8/31/01	6,197	6,197	1,771	885	0	-885
91	Freezer	1/17/01	549	549	157	78	0	-78
93	Sofa & 2 Chairs	12/11/01	2,339	2,339	936	467	0	-467
94	Appliances from Whirlpool	2/01/02	25,812	25,812	10,325	5,162	0	-5,162
111	A/C Units	7/27/05	8,197	8,197	2,342	1,171	0	-1,171
113	A/C Condensor	9/23/05	1,980	1,980	566	283	0	-283
114	Donated Appliances	9/30/05	3,000	3,000	857	429	0	-429
119	A/C Unit	6/19/07	1,100	1,100	440	220	0	-220
122	A/C Condenser	9/13/07	2,876	2,876	1,150	576	0	-576
123	Commercial Refrigerator	8/29/07	1,992	1,992	797	398	0	-398
127	Furniture-donated	11/04/09	3,350	3,350	1,340	670	0	-670
133	Night Manager's Refrigerator	11/25/13	775	775	310	155	0	-155
135	LazyBoy Recliner x4	8/18/14	1,200	1,200	480	240	0	-240
136	Tempurpedic Mattresses	8/31/14	22,100	22,100	8,840	4,420	0	-4,420
138	2 Stoves, 1 Dishwasher	8/31/14	2,400	2,400	960	480	0	-480
139	2 big washers, 2 dryers	9/21/14	3,054	3,054	1,222	610	0	-610
140	Microwave- Family Room	2/19/15	224	224	90	44	22	-22
141	Security Camera - Family Room	1/23/15	1,279	1,279	512	255	128	-127
142	Ice Machine	10/02/15	1,550	1,550	620	310	155	-155
143	Washing Machine - Family	10/15/15	494	494	198	98	49	-49
144	Replacement Coil - Large	12/02/15	1,150	1,150	460	230	115	-115
145	Conference Room Media	3/07/16	1,097	1,097	439	219	219	0
146	PTAC Units-5 each	4/26/16	3,325	3,325	1,330	665	665	0
147	Lazy Boy Chair Sofa Sleeper	2/11/16	1,392	1,392	557	278	279	1
148	Lazy Boy Love Seat Sofa	2/11/16	1,906	1,906	762	382	381	-1
149	Deluxe Office Chair	1/26/16	285	285	114	57	56	-1
151	3 Ton Compressor w/ 50	8/04/15	2,200	2,200	880	440	220	-220



**TX Asset Report****Form 990, Page 1**

Asset	Description	Date In Service	Cost	Basis for Depr	TX Prior	TX Current	Federal Current	Difference Fed - TX
152	100 Gallon Water Heater	11/17/15	4,491	4,491	1,796	899	449	-450
153	50 Gallon Water Heater	2/24/16	721	721	288	145	144	-1
154	Two Microwaves	9/01/16	263	263	105	53	53	0
155	Donated 2 - Twin Sofa Slp	2/14/17	2,200	2,200	880	440	440	0
156	Lenovo Desktop Computer	6/23/17	1,011	1,011	404	202	203	1
157	Dishwasher	9/08/17	414	414	166	82	83	1
158	12 40" TV's	2/16/17	3,278	3,278	1,311	656	656	0
159	TV Mounting Brackets	2/13/17	1,407	1,407	563	281	282	1
160	4 Blue Ray Players	2/09/17	250	250	100	50	50	0
161	3-32" TV's	2/09/17	597	597	239	119	120	1
162	24 Q & 7 Twin headboard	10/26/17	3,268	3,268	1,307	654	653	-1
164	Memorial Garden	10/24/94	8,849	8,849	1,180	590	0	-590
165	Memorial Garden	7/10/96	56	56	7	4	0	-4
166	Memorial Garden Improvements	2/16/16	900	900	360	180	600	420
167	Memorial Garden Fountains	3/04/16	950	950	380	190	190	0
168	Land	9/30/86	96,000	96,000	0	0	0	0
169	Land-1.172 Acres-Donated	12/03/97	17,580	17,580	0	0	0	0
170	Donated Land	2/01/02	17,000	17,000	0	0	0	0
171	Land Improvements	6/30/98	200	200	57	29	0	-29
172	Two Memorial Trees	2/11/16	1,200	1,200	480	240	240	0
173	Surveillance for kitchen and play areas	2/23/18	5,933	5,933	2,175	1,187	1,187	0
174	Donated LazyBoy Twin Sofa Sleepers (2)	5/31/18	3,598	3,598	1,139	720	720	0
175	Computer for Mark/Finance Office	10/02/18	1,017	1,017	254	203	203	0
176	HP 8710 printer	12/05/18	115	115	25	23	23	0
179	Donated Chest Freezer	9/30/19	400	400	20	80	80	0
180	Donated Refrigerator for Small Kitchen	8/31/19	500	500	33	100	100	0
182	Tempur-Pedic Mattresses	5/15/20	8,545	8,545	0	1,139	1,139	0
183	Xerox Copier	6/30/20	5,510	5,510	0	551	551	0
184	Bell Air Conditioning HVAC Donated Serv	7/15/20	3,831	3,831	0	383	383	0
186	10 Miniture refrgerators for guest rooms	9/29/20	1,490	1,490	0	75	75	0
187	Wayfair shower mats	12/01/20	300	300	0	5	5	0
<b>Total Other Depreciation</b>			<u>2,122,924</u>	<u>2,122,924</u>	<u>1,189,001</u>	<u>104,989</u>	<u>59,960</u>	<u>-45,029</u>
<b>Total ACRS and Other Depreciation</b>			<u>2,122,924</u>	<u>2,122,924</u>	<u>1,189,001</u>	<u>104,989</u>	<u>59,960</u>	<u>-45,029</u>
<b>Grand Totals</b>			2,372,784	2,372,784	1,191,793	111,388	75,307	-36,081
<b>Less: Dispositions</b>			0	0	0	0	0	0
<b>Less: Start-up/Org Expense</b>			0	0	0	0	0	0
<b>Net Grand Totals</b>			<u>2,372,784</u>	<u>2,372,784</u>	<u>1,191,793</u>	<u>111,388</u>	<u>75,307</u>	<u>-36,081</u>

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Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	Per Conv Meth	Prior	Current
<b>5-year GDS Property:</b>									
181	Mark's PC	1/03/20	874		X	0	5 HY 200DB	0	874
185	TRS Telephone System	8/26/20	11,738		X	0	5 HY 200DB	0	11,738
188	New Computers for ED	12/16/20	2,619		X	0	5 HY 200DB	0	2,619
			<u>15,231</u>			<u>0</u>		<u>0</u>	<u>15,231</u>
<b>Prior MACRS:</b>									
12	A/C Unit	9/09/10	1,975		X	0	5 HY 200DB	1,975	0
13	Donated Exterior Signs	11/28/11	1,772		X	0	10 HY 200DB	1,772	0
18	Horizontal Furn & A-Coi	6/20/12	6,799		X	3,400	5 HY 200DB	6,799	0
20	New Fire Panel	10/05/12	1,750		X	875	5 HY 200DB	1,750	0
21	New Escucheons	9/24/12	1,639		X	820	5 HY 200DB	1,639	0
28	2011 Toyota Sienna	9/03/10	27,566		X	13,783	5 HY 200DB	27,566	0
31	Donated Picture-Ocean	12/31/98	171			171	3 HY 150DB	0	0
70	2 Side Chairs	12/31/98	250			250	7 HY 150DB	250	0
95	TRS Telephone Systems	2/06/02	4,213		X	2,949	5 HY 200DB	4,213	0
96	Boardroom Chairs	1/29/02	9,520		X	6,664	7 HY 200DB	9,520	0
97	Classic Tool-Pictures	3/11/02	3,595		X	2,517	7 HY 200DB	3,595	0
98	Ronald on a Bench	3/20/02	1,059		X	741	7 HY 200DB	1,059	0
99	Casey's Furniture	3/26/02	4,587		X	3,211	7 HY 200DB	4,587	0
100	Southwest Cont - Furniture	3/29/02	11,101		X	7,771	7 HY 200DB	11,101	0
101	Blinds/Shades	4/09/02	2,260		X	1,582	7 HY 200DB	2,260	0
102	Playground	5/13/02	9,603		X	6,722	7 HY 200DB	9,603	0
103	Casey's Furniture - Lamp	5/23/02	218		X	153	7 HY 200DB	218	0
104	Ice Maker	6/25/02	983		X	688	7 HY 200DB	983	0
105	Exceed Software	4/26/02	6,890		X	4,823	5 HY 200DB	6,890	0
106	Casey's Furniture	3/28/02	26,210		X	18,347	7 HY 200DB	26,210	0
107	Casey's Furniture	4/09/02	8,071		X	5,650	7 HY 200DB	8,071	0
108	Class Picture Co	4/09/02	802		X	562	7 HY 200DB	802	0
109	SW Contract - Furniture	2/15/02	10,228		X	7,160	7 HY 200DB	10,228	0
110	Security Desk	2/10/04	1,017		X	509	7 HY 200DB	1,017	0
115	A/C Unit Room 5	5/12/06	1,100			1,100	5 HY 150DB	1,100	0
116	A/C Unit Room 14	7/12/06	1,100			1,100	5 HY 150DB	1,100	0
117	A/C Unit Room 6	8/18/06	1,100			1,100	5 HY 150DB	1,100	0
118	A/C #2	10/27/06	1,200			1,200	5 HY 150DB	1,200	0
124	2 dryers - donated	7/01/08	780		X	390	5 HY 200DB	780	0
125	1 donated dishwasher	7/01/08	417		X	208	5 HY 200DB	417	0
126	3 ton AC unit	9/26/08	1,895		X	947	5 HY 200DB	1,895	0
130	Tempur Pedic Beds	2/01/12	72,354		X	36,177	5 HY 200DB	72,354	0
150	1 Washers-doanted	7/01/08	450		X	225	5 HY 200DB	450	0
163	Classic Tool - Pictures	4/01/02	3,229		X	2,260	7 HY 200DB	3,229	0
177	2 Lenovo ThinkCentre PC	9/12/19	3,697		X	0	5 HY 200DB	3,697	0
178	Dell Tower Server	9/12/19	5,199		X	0	5 HY 200DB	5,199	0
			<u>234,800</u>			<u>134,055</u>		<u>234,629</u>	<u>0</u>
<b>Other Depreciation:</b>									
1	Building	9/30/86	307,966			307,966	19 MO S/L	307,966	0
2	Building Addition	12/01/92	0			0	0 HY	0	0
3	Bldg Addition-Donated	3/19/93	0			0	0 HY	0	0
4	Building Addition	3/19/93	0			0	0 HY	0	0
8	Crw-Porch-Driveway	6/22/00	17,436			17,436	19 MO S/L	17,436	0
9	Building Addition	5/19/02	1,211,530			1,211,530	30 MO S/L	724,423	40,384
11	Gutters	9/29/09	0			0	0 HY	0	0
15	2 Outdoor A/C Units	3/18/11	4,440			4,440	10 MO S/L	4,440	0
16	3 PTAC Units	9/09/11	1,693			1,693	10 MO S/L	1,693	0
17	New Gutters	5/18/12	0			0	0 HY	0	0
19	Replace A/C Unit	12/31/12	2,296			2,296	10 MO S/L	2,296	0
22	Hoescher Flooring Install	2/17/16	0			0	0 HY	0	0
23	Metflor Corp-Flooring	1/15/16	0			0	0 HY	0	0
24	Lochridge Priest-HVAC	10/10/16	0			0	0 HY	0	0
25	Kaba Lock System	10/10/16	0			0	0 HY	0	0
26	New 5 ton Goodman HVAC	2/27/17	0			0	0 HY	0	0
27	Trailer	5/01/01	0			0	0 HY	0	0
29	Donated 3-Disney Print	12/31/98	0			0	0 HY	0	0
30	Donated Picture-Noah	12/31/98	0			0	0 HY	0	0
32	Donated Picture-Dinosaur	12/31/98	0			0	0 HY	0	0

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Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	Per Conv	Meth	Prior	Current
33	Donated Pictures-2	12/31/98	0				0	0	HY	0	0
34	Donated F&F	1/01/86	0				0	0	HY	0	0
35	Furn & Fixtures	9/30/86	0				0	0	HY	0	0
36	Furniture & Fixtures	9/30/87	0				0	0	HY	0	0
37	Furniture	10/31/87	0				0	0	HY	0	0
38	Donated F & F	4/01/88	0				0	0	HY	0	0
39	Patio Furniture	6/30/88	0				0	0	HY	0	0
40	Donated Furniture & Fix	4/01/90	0				0	0	HY	0	0
42	Donated F & F	4/01/92	0				0	0	HY	0	0
43	Donated F&F	4/01/93	0				0	0	HY	0	0
44	Addl Sprinkler	8/04/92	0				0	0	HY	0	0
45	Donated F&F	4/01/93	0				0	0	HY	0	0
46	Furnishings	4/15/93	0				0	0	HY	0	0
47	Clock	4/27/93	0				0	0	HY	0	0
48	Laura White Shade	1/07/94	0				0	0	HY	0	0
49	Gutters	3/25/94	0				0	0	HY	0	0
50	Donated Gutters	3/25/94	0				0	0	HY	0	0
51	Sofa & Chair	4/12/94	0				0	0	HY	0	0
52	Office Furniture	4/18/94	0				0	0	HY	0	0
53	Donated Office Furniture	4/18/94	0				0	0	HY	0	0
54	File Cabinet	3/01/95	0				0	0	HY	0	0
56	North Pole Villa	12/01/95	0				0	0	HY	0	0
57	Office Desk	3/01/96	0				0	0	HY	0	0
58	Furniture	3/01/96	0				0	0	HY	0	0
59	Donated-Picnic Table	3/01/96	0				0	0	HY	0	0
63	Sprinkler System	8/05/96	0				0	0	HY	0	0
64	Addn To Fire Alarm	9/16/96	0				0	0	HY	0	0
65	Equip Frm Frinne	6/06/97	0				0	0	HY	0	0
66	4 Office Chairs	12/08/97	0				0	0	HY	0	0
67	Donated Patio Furniture	12/31/98	0				0	0	HY	0	0
69	Donated Desk	12/31/98	0				0	0	HY	0	0
71	File Cabinet	12/31/98	0				0	0	HY	0	0
73	Donated Deep Freezer	12/30/98	0				0	0	HY	0	0
74	Donated Area Rug	12/31/98	0				0	0	HY	0	0
75	Donated Floral Swag	12/31/98	0				0	0	HY	0	0
76	Donated Mirror	12/31/98	0				0	0	HY	0	0
77	Donated Print	12/31/98	0				0	0	HY	0	0
78	Donated-Snow Villa	12/31/98	0				0	0	HY	0	0
79	Display Case	12/01/99	0				0	0	HY	0	0
80	Donated Sectional Couch	7/01/99	0				0	0	HY	0	0
84	Donated N Pole Village	12/01/99	0				0	0	HY	0	0
85	Maid Cart	12/01/99	0				0	0	HY	0	0
86	Dining Table and Chairs	8/18/99	0				0	0	HY	0	0
88	Refrigerator	2/14/00	0				0	0	HY	0	0
90	Telephone System	8/31/01	0				0	0	HY	0	0
91	Freezer	1/17/01	0				0	0	HY	0	0
93	Sofa & 2 Chairs	12/11/01	0				0	0	HY	0	0
94	Appliances from Whirlpool	2/01/02	0				0	0	HY	0	0
111	A/C Units	7/27/05	0				0	0	HY	0	0
113	A/C Condensor	9/23/05	0				0	0	HY	0	0
114	Donated Appliances	9/30/05	0				0	0	HY	0	0
119	A/C Unit	6/19/07	0				0	0	HY	0	0
122	A/C Condenser	9/13/07	0				0	0	HY	0	0
123	Commercial Refrigerator	8/29/07	0				0	0	HY	0	0
127	Furniture-donated	11/04/09	0				0	0	HY	0	0
133	Night Manager's Refrigerator	11/25/13	0				0	0	HY	0	0
135	LazyBoy Recliner x4	8/18/14	0				0	0	HY	0	0
136	Tempurpedic Mattresses	8/31/14	0				0	0	HY	0	0
138	2 Stoves, 1 Dishwasher	8/31/14	0				0	0	HY	0	0
139	2 big washers, 2 dryers	9/21/14	0				0	0	HY	0	0
140	Microwave- Family Room	2/19/15	0				0	0	HY	0	0
141	Security Camera - Family Room	1/23/15	0				0	0	HY	0	0
142	Ice Machine	10/02/15	0				0	0	HY	0	0
143	Washing Machine - Family	10/15/15	0				0	0	HY	0	0
144	Replacement Coil - Large	12/02/15	0				0	0	HY	0	0
145	Conference Room Media	3/07/16	0				0	0	HY	0	0
146	PTAC Units-5 each	4/26/16	0				0	0	HY	0	0
147	Lazy Boy Chair Sofa Sleeper	2/11/16	0				0	0	HY	0	0
148	Lazy Boy Love Seat Sofa	2/11/16	0				0	0	HY	0	0
149	Deluxe Office Chair	1/26/16	0				0	0	HY	0	0
151	3 Ton Compressor w/ 50	8/04/15	0				0	0	HY	0	0

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Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	Per Conv Meth	Prior	Current
152	100 Gallon Water Heater	11/17/15	0			0	0 HY	0	0
153	50 Gallon Water Heater	2/24/16	0			0	0 HY	0	0
154	Two Microwaves	9/01/16	0			0	0 HY	0	0
155	Donated 2 - Twin Sofa Slp	2/14/17	0			0	0 HY	0	0
156	Lenovo Desktop Computer	6/23/17	0			0	0 HY	0	0
157	Dishwasher	9/08/17	0			0	0 HY	0	0
158	12 40" TV's	2/16/17	0			0	0 HY	0	0
159	TV Mounting Brackets	2/13/17	0			0	0 HY	0	0
160	4 Blue Ray Players	2/09/17	0			0	0 HY	0	0
161	3-32" TV's	2/09/17	0			0	0 HY	0	0
162	24 Q & 7 Twin headboard	10/26/17	0			0	0 HY	0	0
164	Memorial Garden	10/24/94	0			0	0 HY	0	0
165	Memorial Garden	7/10/96	0			0	0 HY	0	0
166	Memorial Garden Improvements	2/16/16	0			0	0 HY	0	0
167	Memorial Garden Fountains	3/04/16	0			0	0 HY	0	0
168	Land	9/30/86	0			0	0 HY	0	0
169	Land-1.172 Acres-Donated	12/03/97	0			0	0 HY	0	0
170	Donated Land	2/01/02	0			0	0 HY	0	0
171	Land Improvements	6/30/98	0			0	0 HY	0	0
172	Two Memorial Trees	2/11/16	0			0	0 HY	0	0
173	Surveillance for kitchen and play areas	2/23/18	0			0	0 HY	0	0
174	Donated LazyBoy Twin Sofa Sleepers (2)	5/31/18	0			0	0 HY	0	0
175	Computer for Mark/Finance Office	10/02/18	0			0	0 HY	0	0
176	HP 8710 printer	12/05/18	0			0	0 HY	0	0
179	Donated Chest Freezer	9/30/19	400			400	5 MO S/L	20	80
180	Donated Refrigerator for Small Kitchen	8/31/19	500			500	5 MO S/L	33	100
182	Tempur-Pedic Mattresses	5/15/20	8,545			8,545	5 MO S/L	0	1,139
183	Xerox Copier	6/30/20	5,510			5,510	5 MO S/L	0	551
184	Bell Air Conditioning HVAC Donated Serv	7/15/20	3,831			3,831	5 MO S/L	0	383
186	10 Miniture refrgerators for guest rooms	9/29/20	1,490			1,490	5 MO S/L	0	75
187	Wayfair shower mats	12/01/20	300			300	5 MO S/L	0	5
<b>Total Other Depreciation</b>			<u>1,565,937</u>			<u>1,565,937</u>		<u>1,058,307</u>	<u>42,717</u>
<b>Total ACRS and Other Depreciation</b>			<u>1,565,937</u>			<u>1,565,937</u>		<u>1,058,307</u>	<u>42,717</u>
<b>Grand Totals</b>			1,815,968			1,699,992		1,292,936	57,948
<b>Less: Dispositions and Transfers</b>			0			0		0	0
<b>Net Grand Totals</b>			<u>1,815,968</u>			<u>1,699,992</u>		<u>1,292,936</u>	<u>57,948</u>

**Bonus Depreciation Report****Form 990, Page 1**

Asset	Property Description	Date In Service	Tax Cost	Bus Pct	Tax Sec 179 Exp	Current Bonus	Prior Bonus	Tax - Basis for Depr
12	A/C Unit	9/09/10	1,975		0	0	1,975	0
13	Donated Exterior Signs	11/28/11	1,772		0	0	1,598	174
18	Horizontal Furn & A-Coi	6/20/12	6,799		0	0	3,399	3,400
20	New Fire Panel	10/05/12	1,750		0	0	875	875
21	New Escucheons	9/24/12	1,639		0	0	819	820
28	2011 Toyota Sienna	9/03/10	27,566		0	0	13,783	13,783
95	TRS Telephone Systems	2/06/02	4,213		0	0	1,264	2,949
96	Boardroom Chairs	1/29/02	9,520		0	0	2,856	6,664
97	Classic Tool-Pictures	3/11/02	3,595		0	0	1,078	2,517
98	Ronald on a Bench	3/20/02	1,059		0	0	318	741
99	Casey's Furniture	3/26/02	4,587		0	0	1,376	3,211
100	Southwest Cont - Furniture	3/29/02	11,101		0	0	3,330	7,771
101	Blinds/Shades	4/09/02	2,260		0	0	678	1,582
102	Playground	5/13/02	9,603		0	0	2,881	6,722
103	Casey's Furniture - Lamp	5/23/02	218		0	0	65	153
104	Ice Maker	6/25/02	983		0	0	295	688
105	Exceed Software	4/26/02	6,890		0	0	2,067	4,823
106	Casey's Furniture	3/28/02	26,210		0	0	7,863	18,347
107	Casey's Furniture	4/09/02	8,071		0	0	2,421	5,650
108	Class Picture Co	4/09/02	802		0	0	240	562
109	SW Contract - Furniture	2/15/02	10,228		0	0	3,068	7,160
110	Security Desk	2/10/04	1,017		0	0	508	509
124	2 dryers - donated	7/01/08	780		0	0	390	390
125	1 donated dishwasher	7/01/08	417		0	0	209	208
126	3 ton AC unit	9/26/08	1,895		0	0	948	947
130	Tempur Pedic Beds	2/01/12	72,354		0	0	36,177	36,177
150	1 Washers-doanted	7/01/08	450		0	0	225	225
163	Classic Tool - Pictures	4/01/02	3,229		0	0	969	2,260
177	2 Lenovo ThinkCentre PC	9/12/19	3,697		0	0	3,697	0
178	Dell Tower Server	9/12/19	5,199		0	0	5,199	0
181	Mark's PC	1/03/20	874		0	874	0	0
185	TRS Telephone System	8/26/20	11,738		0	11,738	0	0
188	New Computers for ED	12/16/20	2,619		0	2,619	0	0
<b>Grand Total</b>			<u>245,110</u>		<u>0</u>	<u>15,231</u>	<u>100,571</u>	<u>129,308</u>

**Depreciation Adjustment Report****All Business Activities**

Form	Unit	Asset	Description	Tax	AMT	AMT Adjustments/ Preferences
<b>MACRS Adjustments:</b>						
Page 1	1	12	A/C Unit	0	0	0
Page 1	1	13	Donated Exterior Signs	116	0	116
Page 1	1	18	Horizontal Furn & A-Coi	0	0	0
Page 1	1	20	New Fire Panel	0	0	0
Page 1	1	21	New Escucheons	0	0	0
Page 1	1	28	2011 Toyota Sienna	0	0	0
Page 1	1	70	2 Side Chairs	0	0	0
Page 1	1	95	TRS Telephone Systems	0	0	0
Page 1	1	96	Boardroom Chairs	0	0	0
Page 1	1	97	Classic Tool-Pictures	0	0	0
Page 1	1	98	Ronald on a Bench	0	0	0
Page 1	1	99	Casey's Furniture	0	0	0
Page 1	1	100	Southwest Cont - Furniture	0	0	0
Page 1	1	101	Blinds/Shades	0	0	0
Page 1	1	102	Playground	0	0	0
Page 1	1	103	Casey's Furniture - Lamp	0	0	0
Page 1	1	104	Ice Maker	0	0	0
Page 1	1	105	Exceed Software	0	0	0
Page 1	1	106	Casey's Furniture	0	0	0
Page 1	1	107	Casey's Furniture	0	0	0
Page 1	1	108	Class Picture Co	0	0	0
Page 1	1	109	SW Contract - Furniture	0	0	0
Page 1	1	110	Security Desk	0	0	0
Page 1	1	115	A/C Unit Room 5	0	0	0
Page 1	1	116	A/C Unit Room 14	0	0	0
Page 1	1	117	A/C Unit Room 6	0	0	0
Page 1	1	118	A/C #2	0	0	0
Page 1	1	124	2 dryers - donated	0	0	0
Page 1	1	125	1 donated dishwasher	0	0	0
Page 1	1	126	3 ton AC unit	0	0	0
Page 1	1	130	Tempur Pedic Beds	0	0	0
Page 1	1	150	1 Washers-doanted	0	0	0
Page 1	1	163	Classic Tool - Pictures	0	0	0
Page 1	1	177	2 Lenovo ThinkCentre PC	0	0	0
Page 1	1	178	Dell Tower Server	0	0	0
Page 1	1	181	Mark's PC	874	874	0
Page 1	1	185	TRS Telephone System	11,738	11,738	0
Page 1	1	188	New Computers for ED	2,619	2,619	0
				<u>15,347</u>	<u>15,231</u>	<u>116</u>

Asset	Description	Date In Service	Cost	Tax	AMT
<b>Prior MACRS:</b>					
12	A/C Unit	9/09/10	1,975	0	0
13	Donated Exterior Signs	11/28/11	1,772	58	0
18	Horizontal Furn & A-Coi	6/20/12	6,799	0	0
20	New Fire Panel	10/05/12	1,750	0	0
21	New Escucheons	9/24/12	1,639	0	0
28	2011 Toyota Sienna	9/03/10	27,566	0	0
70	2 Side Chairs	12/31/98	250	0	0
95	TRS Telephone Systems	2/06/02	4,213	0	0
96	Boardroom Chairs	1/29/02	9,520	0	0
97	Classic Tool-Pictures	3/11/02	3,595	0	0
98	Ronald on a Bench	3/20/02	1,059	0	0
99	Casey's Furniture	3/26/02	4,587	0	0
100	Southwest Cont - Furniture	3/29/02	11,101	0	0
101	Blinds/Shades	4/09/02	2,260	0	0
102	Playground	5/13/02	9,603	0	0
103	Casey's Furniture - Lamp	5/23/02	218	0	0
104	Ice Maker	6/25/02	983	0	0
105	Exceed Software	4/26/02	6,890	0	0
106	Casey's Furniture	3/28/02	26,210	0	0
107	Casey's Furniture	4/09/02	8,071	0	0
108	Class Picture Co	4/09/02	802	0	0
109	SW Contract - Furniture	2/15/02	10,228	0	0
110	Security Desk	2/10/04	1,017	0	0
115	A/C Unit Room 5	5/12/06	1,100	0	0
116	A/C Unit Room 14	7/12/06	1,100	0	0
117	A/C Unit Room 6	8/18/06	1,100	0	0
118	A/C #2	10/27/06	1,200	0	0
124	2 dryers - donated	7/01/08	780	0	0
125	1 donated dishwasher	7/01/08	417	0	0
126	3 ton AC unit	9/26/08	1,895	0	0
130	Tempur Pedic Beds	2/01/12	72,354	0	0
150	1 Washers-doanted	7/01/08	450	0	0
163	Classic Tool - Pictures	4/01/02	3,229	0	0
177	2 Lenovo ThinkCentre PC	9/12/19	3,697	0	0
178	Dell Tower Server	9/12/19	5,199	0	0
181	Mark's PC	1/03/20	874	0	0
185	TRS Telephone System	8/26/20	11,738	0	0
188	New Computers for ED	12/16/20	2,619	0	0
			<u>249,860</u>	<u>58</u>	<u>0</u>

**Other Depreciation:**

1	Building	9/30/86	307,966	0	0
2	Building Addition	12/01/92	19,694	0	0
3	Bldg Addition-Donated	3/19/93	12,000	0	0
4	Building Addition	3/19/93	14,902	0	0
8	Crw-Porch-Driveway	6/22/00	17,436	0	0
9	Building Addition	5/19/02	1,211,530	40,385	40,385
11	Gutters	9/29/09	1,499	0	0
15	2 Outdoor A/C Units	3/18/11	4,440	444	0
16	3 PTAC Units	9/09/11	1,693	0	0
17	New Gutters	5/18/12	2,645	265	0
19	Replace A/C Unit	12/31/12	2,296	0	0
22	Hoescher Flooring Install	2/17/16	12,065	1,724	0
23	Metflor Corp-Flooring	1/15/16	14,619	2,088	0
24	Lochridge Priest-HVAC	10/10/16	4,900	490	0
25	Kaba Lock System	10/10/16	12,685	1,268	0
26	New 5 ton Goodman HVAC	2/27/17	3,111	622	0
27	Trailer	5/01/01	3,730	0	0
29	Donated 3-Disney Print	12/31/98	9,000	0	0
30	Donated Picture-Noah	12/31/98	178	0	0
31	Donated Picture-Ocean	12/31/98	171	0	0
32	Donated Picture-Dinosaur	12/31/98	331	0	0
33	Donated Pictures-2	12/31/98	350	0	0
34	Donated F&F	1/01/86	98,978	0	0

Asset	Description	Date In Service	Cost	Tax	AMT
35	Furn & Fixtures	9/30/86	16,847	0	0
36	Furniture & Fixtures	9/30/87	8,906	0	0
37	Furniture	10/31/87	2,840	0	0
38	Donated F & F	4/01/88	1,598	0	0
39	Patio Furniture	6/30/88	148	0	0
40	Donated Furniture & Fix	4/01/90	550	0	0
42	Donated F & F	4/01/92	215	0	0
43	Donated F&F	4/01/93	2,885	0	0
44	Addl Sprinkler	8/04/92	548	0	0
45	Donated F&F	4/01/93	6,025	0	0
46	Furnishings	4/15/93	944	0	0
47	Clock	4/27/93	249	0	0
48	Laura White Shade	1/07/94	425	0	0
49	Gutters	3/25/94	368	0	0
50	Donated Gutters	3/25/94	158	0	0
51	Sofa & Chair	4/12/94	800	0	0
52	Office Furniture	4/18/94	200	0	0
53	Donated Office Furniture	4/18/94	500	0	0
54	File Cabinet	3/01/95	100	0	0
56	North Pole Villa	12/01/95	1,003	0	0
57	Office Desk	3/01/96	450	0	0
58	Furniture	3/01/96	2,184	0	0
59	Donated-Picnic Table	3/01/96	552	0	0
63	Sprinkler System	8/05/96	12,547	0	0
64	Addn To Fire Alarm	9/16/96	81	0	0
65	Equip Frm Frinne	6/06/97	6,340	0	0
66	4 Office Chairs	12/08/97	2,800	0	0
67	Donated Patio Furniture	12/31/98	250	0	0
69	Donated Desk	12/31/98	300	0	0
71	File Cabinet	12/31/98	125	0	0
73	Donated Deep Freezer	12/30/98	279	0	0
74	Donated Area Rug	12/31/98	50	0	0
75	Donated Floral Swag	12/31/98	30	0	0
76	Donated Mirror	12/31/98	35	0	0
77	Donated Print	12/31/98	35	0	0
78	Donated-Snow Villa	12/31/98	500	0	0
79	Display Case	12/01/99	150	0	0
80	Donated Sectional Couch	7/01/99	2,000	0	0
84	Donated N Pole Village	12/01/99	1,000	0	0
85	Maid Cart	12/01/99	150	0	0
86	Dining Table and Chairs	8/18/99	1,050	0	0
88	Refrigerator	2/14/00	723	0	0
90	Telephone System	8/31/01	6,197	0	0
91	Freezer	1/17/01	549	0	0
93	Sofa & 2 Chairs	12/11/01	2,339	0	0
94	Appliances from Whirlpool	2/01/02	25,812	0	0
111	A/C Units	7/27/05	8,197	0	0
113	A/C Condensor	9/23/05	1,980	0	0
114	Donated Appliances	9/30/05	3,000	0	0
119	A/C Unit	6/19/07	1,100	0	0
122	A/C Condenser	9/13/07	2,876	0	0
123	Commercial Refrigerator	8/29/07	1,992	0	0
127	Furniture-donated	11/04/09	3,350	0	0
133	Night Manager's Refrigerator	11/25/13	775	0	0
135	LazyBoy Recliner x4	8/18/14	1,200	0	0
136	Tempurpedic Mattresses	8/31/14	22,100	0	0
138	2 Stoves, 1 Dishwasher	8/31/14	2,400	0	0
139	2 big washers, 2 dryers	9/21/14	3,054	0	0
140	Microwave- Family Room	2/19/15	224	0	0
141	Security Camera - Family Room	1/23/15	1,279	0	0
142	Ice Machine	10/02/15	1,550	0	0
143	Washing Machine - Family	10/15/15	494	0	0
144	Replacement Coil - Large	12/02/15	1,150	0	0
145	Conference Room Media	3/07/16	1,097	110	0
146	PTAC Units-5 each	4/26/16	3,325	332	0
147	Lazy Boy Chair Sofa Sleeper	2/11/16	1,392	139	0
148	Lazy Boy Love Seat Sofa	2/11/16	1,906	191	0
149	Deluxe Office Chair	1/26/16	285	29	0
151	3 Ton Compressor w/ 50	8/04/15	2,200	0	0
152	100 Gallon Water Heater	11/17/15	4,491	0	0
153	50 Gallon Water Heater	2/24/16	721	72	0



Asset	Description	Date In Service	Cost	Tax	AMT
154	Two Microwaves	9/01/16	263	26	0
155	Donated 2 - Twin Sofa Slp	2/14/17	2,200	440	0
156	Lenovo Desktop Computer	6/23/17	1,011	202	0
157	Dishwasher	9/08/17	414	83	0
158	12 40" TV's	2/16/17	3,278	655	0
159	TV Mounting Brackets	2/13/17	1,407	281	0
160	4 Blue Ray Players	2/09/17	250	50	0
161	3-32" TV's	2/09/17	597	119	0
162	24 Q & 7 Twin headboard	10/26/17	3,268	654	0
164	Memorial Garden	10/24/94	8,849	0	0
165	Memorial Garden	7/10/96	56	0	0
166	Memorial Garden Improvements	2/16/16	3,000	300	0
167	Memorial Garden Fountains	3/04/16	950	95	0
168	Land	9/30/86	96,000	0	0
169	Land-1.172 Acres-Donated	12/03/97	17,580	0	0
170	Donated Land	2/01/02	17,000	0	0
171	Land Improvements	6/30/98	200	0	0
172	Two Memorial Trees	2/11/16	1,200	120	0
173	Surveilence for kitchen and play areas	2/23/18	5,933	1,186	0
174	Donated LazyBoy Twin Sofa Sleepers (2)	5/31/18	3,598	720	0
175	Computer for Mark/Finance Office	10/02/18	1,017	204	0
176	HP 8710 printer	12/05/18	115	23	0
179	Donated Chest Freezer	9/30/19	400	80	80
180	Donated Refrigerator for Small Kitchen	8/31/19	500	100	100
182	Tempur-Pedic Mattresses	5/15/20	8,545	1,709	1,709
183	Xerox Copier	6/30/20	5,510	1,102	1,102
184	Bell Air Conditioning HVAC Donated Services	7/15/20	3,831	766	766
186	10 Miniture refrgrators for guest rooms	9/29/20	1,490	298	298
187	Wayfair shower mats	12/01/20	300	60	60
	<b>Total Other Depreciation</b>		<u>2,128,956</u>	<u>57,432</u>	<u>44,500</u>
	<b>Total ACRS and Other Depreciation</b>		<u>2,128,956</u>	<u>57,432</u>	<u>44,500</u>
	<b>Grand Totals</b>		<u>2,378,816</u>	<u>57,490</u>	<u>44,500</u>

Asset	Description	Date In Service	Cost	TX
<b>Prior MACRS:</b>				
12	A/C Unit	9/09/10	1,975	0
13	Donated Exterior Signs	11/28/11	1,772	253
18	Horizontal Furn & A-Coi	6/20/12	6,799	0
20	New Fire Panel	10/05/12	1,750	0
21	New Escucheons	9/24/12	1,639	0
28	2011 Toyota Sienna	9/03/10	27,566	0
70	2 Side Chairs	12/31/98	250	0
95	TRS Telephone Systems	2/06/02	4,213	0
96	Boardroom Chairs	1/29/02	9,520	0
97	Classic Tool-Pictures	3/11/02	3,595	0
98	Ronald on a Bench	3/20/02	1,059	0
99	Casey's Furniture	3/26/02	4,587	0
100	Southwest Cont - Furniture	3/29/02	11,101	0
101	Blinds/Shades	4/09/02	2,260	0
102	Playground	5/13/02	9,603	0
103	Casey's Furniture - Lamp	5/23/02	218	0
104	Ice Maker	6/25/02	983	0
105	Exceed Software	4/26/02	6,890	0
106	Casey's Furniture	3/28/02	26,210	0
107	Casey's Furniture	4/09/02	8,071	0
108	Class Picture Co	4/09/02	802	0
109	SW Contract - Furniture	2/15/02	10,228	0
110	Security Desk	2/10/04	1,017	0
115	A/C Unit Room 5	5/12/06	1,100	0
116	A/C Unit Room 14	7/12/06	1,100	0
117	A/C Unit Room 6	8/18/06	1,100	0
118	A/C #2	10/27/06	1,200	0
124	2 dryers - donated	7/01/08	780	0
125	1 donated dishwasher	7/01/08	417	0
126	3 ton AC unit	9/26/08	1,895	0
130	Tempur Pedic Beds	2/01/12	72,354	0
150	1 Washers-doanted	7/01/08	450	0
163	Classic Tool - Pictures	4/01/02	3,229	0
177	2 Lenovo ThinkCentre PC	9/12/19	3,697	710
178	Dell Tower Server	9/12/19	5,199	999
181	Mark's PC	1/03/20	874	280
185	TRS Telephone System	8/26/20	11,738	3,756
188	New Computers for ED	12/16/20	2,619	838
			<u>249,860</u>	<u>6,836</u>

**Other Depreciation:**

1	Building	9/30/86	307,966	0
2	Building Addition	12/01/92	19,694	0
3	Bldg Addition-Donated	3/19/93	12,000	0
4	Building Addition	3/19/93	14,902	784
8	Crw-Porch-Driveway	6/22/00	17,436	918
9	Building Addition	5/19/02	1,211,530	40,385
11	Gutters	9/29/09	1,499	0
15	2 Outdoor A/C Units	3/18/11	4,440	444
16	3 PTAC Units	9/09/11	1,693	169
17	New Gutters	5/18/12	2,645	264
19	Replace A/C Unit	12/31/12	2,296	230
22	Hoescher Flooring Install	2/17/16	12,065	1,723
23	Metflor Corp-Flooring	1/15/16	14,619	2,089
24	Lochridge Priest-HVAC	10/10/16	4,900	980
25	Kaba Lock System	10/10/16	12,685	2,537
26	New 5 ton Goodman HVAC	2/27/17	3,111	622
27	Trailer	5/01/01	3,730	533
29	Donated 3-Disney Print	12/31/98	9,000	1,286
30	Donated Picture-Noah	12/31/98	178	26
31	Donated Picture-Ocean	12/31/98	171	25
32	Donated Picture-Dinosaur	12/31/98	331	47
33	Donated Pictures-2	12/31/98	350	50
34	Donated F&F	1/01/86	98,978	14,140

Asset	Description	Date In Service	Cost	TX
35	Furn & Fixtures	9/30/86	16,847	1,053
36	Furniture & Fixtures	9/30/87	8,906	1,272
37	Furniture	10/31/87	2,840	406
38	Donated F & F	4/01/88	0	0
39	Patio Furniture	6/30/88	148	22
40	Donated Furniture & Fix	4/01/90	550	78
42	Donated F & F	4/01/92	215	31
43	Donated F&F	4/01/93	2,885	413
44	Addl Sprinkler	8/04/92	548	78
45	Donated F&F	4/01/93	6,025	861
46	Furnishings	4/15/93	944	134
47	Clock	4/27/93	249	35
48	Laura White Shade	1/07/94	425	61
49	Gutters	3/25/94	368	52
50	Donated Gutters	3/25/94	158	22
51	Sofa & Chair	4/12/94	800	114
52	Office Furniture	4/18/94	200	28
53	Donated Office Furniture	4/18/94	500	72
54	File Cabinet	3/01/95	100	14
56	North Pole Villa	12/01/95	1,003	143
57	Office Desk	3/01/96	450	64
58	Furniture	3/01/96	0	0
59	Donated-Picnic Table	3/01/96	552	78
63	Sprinkler System	8/05/96	12,547	1,793
64	Addn To Fire Alarm	9/16/96	81	11
65	Equip Frm Frinne	6/06/97	6,340	906
66	4 Office Chairs	12/08/97	2,800	560
67	Donated Patio Furniture	12/31/98	250	36
69	Donated Desk	12/31/98	300	42
71	File Cabinet	12/31/98	125	17
73	Donated Deep Freezer	12/30/98	279	39
74	Donated Area Rug	12/31/98	50	8
75	Donated Floral Swag	12/31/98	30	4
76	Donated Mirror	12/31/98	35	5
77	Donated Print	12/31/98	35	5
78	Donated-Snow Villa	12/31/98	500	72
79	Display Case	12/01/99	150	22
80	Donated Sectional Couch	7/01/99	2,000	286
84	Donated N Pole Village	12/01/99	1,000	142
85	Maid Cart	12/01/99	0	0
86	Dining Table and Chairs	8/18/99	1,050	150
88	Refrigerator	2/14/00	723	103
90	Telephone System	8/31/01	6,197	885
91	Freezer	1/17/01	549	79
93	Sofa & 2 Chairs	12/11/01	2,339	468
94	Appliances from Whirlpool	2/01/02	25,812	5,163
111	A/C Units	7/27/05	8,197	1,171
113	A/C Condensor	9/23/05	1,980	282
114	Donated Appliances	9/30/05	3,000	428
119	A/C Unit	6/19/07	1,100	220
122	A/C Condenser	9/13/07	2,876	575
123	Commercial Refrigerator	8/29/07	1,992	399
127	Furniture-donated	11/04/09	3,350	670
133	Night Manager's Refrigerator	11/25/13	775	155
135	LazyBoy Recliner x4	8/18/14	1,200	240
136	Tempurpedic Mattresses	8/31/14	22,100	4,420
138	2 Stoves, 1 Dishwasher	8/31/14	2,400	480
139	2 big washers, 2 dryers	9/21/14	3,054	611
140	Microwave- Family Room	2/19/15	224	45
141	Security Camera - Family Room	1/23/15	1,279	256
142	Ice Machine	10/02/15	1,550	310
143	Washing Machine - Family	10/15/15	494	99
144	Replacement Coil - Large	12/02/15	1,150	230
145	Conference Room Media	3/07/16	1,097	220
146	PTAC Units-5 each	4/26/16	3,325	665
147	Lazy Boy Chair Sofa Sleeper	2/11/16	1,392	279
148	Lazy Boy Love Seat Sofa	2/11/16	1,906	381
149	Deluxe Office Chair	1/26/16	285	57
151	3 Ton Compressor w/ 50	8/04/15	2,200	440
152	100 Gallon Water Heater	11/17/15	4,491	898
153	50 Gallon Water Heater	2/24/16	721	144

Asset	Description	Date In Service	Cost	TX
154	Two Microwaves	9/01/16	263	53
155	Donated 2 - Twin Sofa Slp	2/14/17	2,200	440
156	Lenovo Desktop Computer	6/23/17	1,011	203
157	Dishwasher	9/08/17	414	83
158	12 40" TV's	2/16/17	3,278	655
159	TV Mounting Brackets	2/13/17	1,407	281
160	4 Blue Ray Players	2/09/17	250	50
161	3-32" TV's	2/09/17	597	119
162	24 Q & 7 Twin headboard	10/26/17	3,268	653
164	Memorial Garden	10/24/94	8,849	590
165	Memorial Garden	7/10/96	56	4
166	Memorial Garden Improvements	2/16/16	900	180
167	Memorial Garden Fountains	3/04/16	950	190
168	Land	9/30/86	96,000	0
169	Land-1.172 Acres-Donated	12/03/97	17,580	0
170	Donated Land	2/01/02	17,000	0
171	Land Improvements	6/30/98	200	28
172	Two Memorial Trees	2/11/16	1,200	240
173	Surveilence for kitchen and play areas	2/23/18	5,933	1,186
174	Donated LazyBoy Twin Sofa Sleepers (2)	5/31/18	3,598	720
175	Computer for Mark/Finance Office	10/02/18	1,017	204
176	HP 8710 printer	12/05/18	115	23
179	Donated Chest Freezer	9/30/19	400	80
180	Donated Refrigerator for Small Kitchen	8/31/19	500	100
182	Tempur-Pedic Mattresses	5/15/20	8,545	1,709
183	Xerox Copier	6/30/20	5,510	1,102
184	Bell Air Conditioning HVAC Donated Services	7/15/20	3,831	766
186	10 Miniture refrgrators for guest rooms	9/29/20	1,490	298
187	Wayfair shower mats	12/01/20	300	60
	<b>Total Other Depreciation</b>		<u>2,122,924</u>	<u>106,771</u>
	<b>Total ACRS and Other Depreciation</b>		<u>2,122,924</u>	<u>106,771</u>
	<b>Grand Totals</b>		<u>2,372,784</u>	<u>113,607</u>

Form <b>990</b>	<b>Event Income and Deduction Worksheet</b>	<b>2020</b>
Description <b>GOLF TOURNAMENT</b>		

Name <b>RONALD MCDONALD HOUSE CHARITIES OF</b>	Taxpayer Identification Number <b>74-2345274</b>
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Use this worksheet to verify data entered for a specific activity on your form 990/990EZ

**Income & Expense Summary:**

1. Gross receipts or sales	1.		<b>20,246</b>
2. Advertising income	2.		
3. Circulation income	3.		
4. Other income	4.		
5. Returns and allowances	5.		
6. Contributions received	6.		
7. <b>Total revenue.</b> Add lines 1 through 6	7.		<b>20,246</b>
8. Cost of Goods Sold	8.		
9. Employment Expense	9.		
10. Fees for services	10.		
11. Indirect Expense	11.		
12. Depreciation Expense	12.		
13. Exempt Activity Expense	13.		
14. Fundraising Expense	14.		<b>3,178</b>
15. <b>Total expenses.</b> Add lines 8 through 14	15.		<b>3,178</b>
16. <b>Net Income/Loss.</b> Line 7 minus Line 15	16.		<b>17,068</b>

**Expense Details - Indirect Expense:**

Advertising and promotion	
Office	
Printing/publication/postage	
Info technology/Maintenance	
Royalties & License Fees	
Occupancy/Real Estate Taxes	
Travel & Repairs	
Travel/entertainment (officials)	
Conferences/meetings	
Interest	
Insurance	
<b>Total Indirect Expense</b>	

**Expense Details - Depreciation Expense:**

On investment property	
On non-investment property	
Amortization	
Depletion	
<b>Total Depreciation Expense</b>	

**Expense Details - Cost of Goods Sold:**

Beginning inventory	
Purchases	
Labor	
Section 263A costs	
Other costs	
Ending inventory	
<b>Total Cost of Goods Sold</b>	

**Expense Details - Exempt Activity Expense:**

Repairs and Maintenance	
Bad debts	
Taxes/licenses	
Charitable contributions	
Dividend recd deductions	
Readership costs	
Other expenses	
<b>Total Exempt Activity Expense</b>	

**Expense Details - Employment Expense:**

Compensation of officers	
Other salaries and wages	
Pension plan contributions	
Other employee benefits	
Payroll taxes	
<b>Total Employment Expense</b>	

**Expense Details - Fundraising Expense:**

Cash prizes	
Non-cash prizes	
Rent and facility costs	
Food & beverages (Part II only)	
Entertainment (Part II only)	
Other direct expenses	<b>3,178</b>
<b>Total Fundraising Expense</b>	<b>3,178</b>

**Expense Details - Fees for Services:**

Management	
Legal	
Accounting	
Lobbying	
Professional fundraising	
Investment management	
Other	
<b>Total Fees for Services</b>	

**Information is indicated for use on Form 990-T, Schedule A:**

- Part V, Debt Financing
- Part VI, Controlled Org Income
- Part VII, Investments for C(7)(9)(17)
- Part VIII, Exploited Activities
- Part IX, Advertising Income

**Allocation of Expense to Program Service Accomplishments:**

First	
Second	
Third	
All other	

Form <b>990</b>	<b>Event Income and Deduction Worksheet</b>	<b>2020</b>
Description <b>MISC FUNDRAISERS</b>		

Name <b>RONALD MCDONALD HOUSE CHARITIES OF</b>	Taxpayer Identification Number <b>74-2345274</b>
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Use this worksheet to verify data entered for a specific activity on your form 990/990EZ

**Income & Expense Summary:**

1. Gross receipts or sales	1.	<b>70,003</b>
2. Advertising income	2.	
3. Circulation income	3.	
4. Other income	4.	
5. Returns and allowances	5.	
6. Contributions received	6.	
<b>7. Total revenue.</b> Add lines 1 through 6	<b>7.</b>	<b>70,003</b>
8. Cost of Goods Sold	8.	
9. Employment Expense	9.	
10. Fees for services	10.	
11. Indirect Expense	11.	
12. Depreciation Expense	12.	
13. Exempt Activity Expense	13.	
14. Fundraising Expense	14.	<b>14,766</b>
<b>15. Total expenses.</b> Add lines 8 through 14	<b>15.</b>	<b>14,766</b>
<b>16. Net Income/Loss.</b> Line 7 minus Line 15	<b>16.</b>	<b>55,237</b>

**Expense Details - Indirect Expense:**

Advertising and promotion	_____
Office	_____
Printing/publication/postage	_____
Info technology/Maintenance	_____
Royalties & License Fees	_____
Occupancy/Real Estate Taxes	_____
Travel & Repairs	_____
Travel/entertainment (officials)	_____
Conferences/meetings	_____
Interest	_____
Insurance	_____
<b>Total Indirect Expense</b>	_____

**Expense Details - Depreciation Expense:**

On investment property	_____
On non-investment property	_____
Amortization	_____
Depletion	_____
<b>Total Depreciation Expense</b>	_____

**Expense Details - Exempt Activity Expense:**

Repairs and Maintenance	_____
Bad debts	_____
Taxes/licenses	_____
Charitable contributions	_____
Dividend recd deductions	_____
Readership costs	_____
Other expenses	_____
<b>Total Exempt Activity Expense</b>	_____

**Expense Details - Fundraising Expense:**

Cash prizes	_____
Non-cash prizes	_____
Rent and facility costs	_____
Food & beverages (Part II only)	_____
Entertainment (Part II only)	_____
Other direct expenses	<b>14,766</b>
<b>Total Fundraising Expense</b>	<b>14,766</b>

**Expense Details - Cost of Goods Sold:**

Beginning inventory	_____
Purchases	_____
Labor	_____
Section 263A costs	_____
Other costs	_____
Ending inventory	_____
<b>Total Cost of Goods Sold</b>	_____

**Expense Details - Employment Expense:**

Compensation of officers	_____
Other salaries and wages	_____
Pension plan contributions	_____
Other employee benefits	_____
Payroll taxes	_____
<b>Total Employment Expense</b>	_____

**Expense Details - Fees for Services:**

Management	_____
Legal	_____
Accounting	_____
Lobbying	_____
Professional fundraising	_____
Investment management	_____
Other	_____
<b>Total Fees for Services</b>	_____

**Information is indicated for use on Form 990-T, Schedule A:**

- Part V, Debt Financing
- Part VI, Controlled Org Income
- Part VII, Investments for C(7)(9)(17)
- Part VIII, Exploited Activities
- Part IX, Advertising Income

**Allocation of Expense to Program Service Accomplishments:**

First	_____
Second	_____
Third	_____
All other	_____

Form <b>990</b>	<b>Two Year Comparison Report</b>	<b>2019 &amp; 2020</b>
For calendar year 2020, or tax year beginning _____, ending _____		

Name

Taxpayer Identification Number

**RONALD MCDONALD HOUSE CHARITIES OF  
TEMPLE, TEXAS**
**74-2345274**

		2019	2020	Differences
<b>Revenue</b>	1. Contributions, gifts, grants .....	1. <b>371,392</b>	<b>348,672</b>	<b>-22,720</b>
	2. Membership dues and assessments .....	2.		
	3. Government contributions and grants .....	3.		
	4. Program service revenue .....	4. <b>28,689</b>	<b>9,045</b>	<b>-19,644</b>
	5. Investment income .....	5. <b>82,319</b>	<b>60,861</b>	<b>-21,458</b>
	6. Proceeds from tax exempt bonds .....	6.		
	7. Net gain or (loss) from sale of assets other than inventory .....	7. <b>3,734</b>	<b>97,656</b>	<b>93,922</b>
	8. Net income or (loss) from fundraising events .....	8. <b>103,005</b>	<b>72,305</b>	<b>-30,700</b>
	9. Net income or (loss) from gaming .....	9.		
	10. Net gain or (loss) on sales of inventory .....	10.		
	11. Other revenue .....	11.		
	<b>12. Total revenue.</b> Add lines 1 through 11	<b>12. 589,139</b>	<b>588,539</b>	<b>-600</b>
<b>Expenses</b>	13. Grants and similar amounts paid .....	13.		
	14. Benefits paid to or for members .....	14.		
	15. Compensation of officers, directors, trustees, etc. ....	15. <b>65,254</b>	<b>52,072</b>	<b>-13,182</b>
	16. Salaries, other compensation, and employee benefits .....	16. <b>203,865</b>	<b>203,727</b>	<b>-138</b>
	17. Professional fundraising fees .....	17.		
	18. Other professional fees .....	18. <b>28,122</b>	<b>42,540</b>	<b>14,418</b>
	19. Occupancy, rent, utilities, and maintenance .....	19. <b>38,840</b>	<b>33,110</b>	<b>-5,730</b>
	20. Depreciation and Depletion .....	20. <b>63,617</b>	<b>62,814</b>	<b>-803</b>
	21. Other expenses .....	21. <b>171,608</b>	<b>132,465</b>	<b>-39,143</b>
	<b>22. Total expenses.</b> Add lines 13 through 21	<b>22. 571,306</b>	<b>526,728</b>	<b>-44,578</b>
	<b>23. Excess or (Deficit).</b> Subtract line 22 from line 12	<b>23. 17,833</b>	<b>61,811</b>	<b>43,978</b>
<b>Other Information</b>	24. Total exempt revenue .....	24. <b>589,139</b>	<b>588,539</b>	<b>-600</b>
	25. Total unrelated revenue .....	25.		
	26. Total excludable revenue .....	26. <b>114,742</b>	<b>167,562</b>	<b>52,820</b>
	27. Total assets .....	27. <b>4,131,206</b>	<b>4,453,363</b>	<b>322,157</b>
	28. Total liabilities .....	28. <b>33,624</b>	<b>23,170</b>	<b>-10,454</b>
	29. Retained earnings .....	29. <b>4,097,582</b>	<b>4,430,193</b>	<b>332,611</b>
	30. Number of voting members of governing body .....	30. <b>20</b>	<b>21</b>	
	31. Number of independent voting members of governing body .....	31. <b>20</b>	<b>21</b>	
32. Number of employees .....	32. <b>14</b>	<b>14</b>		
33. Number of volunteers .....	33. <b>3200</b>	<b>3200</b>		

Form <b>990</b>	<b>Tax Return History</b>	<b>2020</b>
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Name <b>RONALD MCDONALD HOUSE CHARITIES OF TEMPLE, TEXAS</b>	Employer Identification Number <b>74-2345274</b>
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	2016	2017	2018	2019	2020	2021
Contributions, gifts, grants .....			327,887	371,392	348,672	
Membership dues .....						
Program service revenue .....			19,697	28,689	9,045	
Capital gain or loss .....			152,050	3,734	97,656	
Investment income .....			52,971	82,319	60,861	
Fundraising revenue (income/loss) .....			109,605	103,005	72,305	
Gaming revenue (income/loss) .....						
Other revenue .....						
<b>Total revenue</b> .....			<b>662,210</b>	<b>589,139</b>	<b>588,539</b>	
Grants and similar amounts paid .....						
Benefits paid to or for members .....						
Compensation of officers, etc. ....			94,386	65,254	52,072	
Other compensation .....			174,305	203,865	203,727	
Professional fees .....			29,551	28,122	42,540	
Occupancy costs .....			37,782	38,840	33,110	
Depreciation and depletion .....			66,438	63,617	62,814	
Other expenses .....			199,274	171,608	132,465	
<b>Total expenses</b> .....			<b>601,736</b>	<b>571,306</b>	<b>526,728</b>	
<b>Excess or (Deficit)</b> .....			<b>60,474</b>	<b>17,833</b>	<b>61,811</b>	
<b>Total exempt revenue</b> .....			<b>662,210</b>	<b>589,139</b>	<b>588,539</b>	
Total unrelated revenue .....						
Total excludable revenue .....			224,718	114,742	167,562	
Total Assets .....			3,688,261	4,131,206	4,453,363	
Total Liabilities .....			8,124	33,624	23,170	
Net Fund Balances .....			3,680,137	4,097,582	4,430,193	



**Federal Statements****Taxable Interest on Investments**

<u>Description</u>	<u>Amount</u>	<u>Unrelated Business</u>	<u>Exclusion Code</u>	<u>Postal Code</u>	<u>Acquired after 6/30/75</u>	<u>US Obs (\$ or %)</u>
INTEREST INCOME	\$ 496				14	
TOTAL	\$ 496					

**Taxable Dividends from Securities**

<u>Description</u>	<u>Amount</u>	<u>Unrelated Business</u>	<u>Exclusion Code</u>	<u>Postal Code</u>	<u>Acquired after 6/30/75</u>	<u>US Obs (\$ or %)</u>
ENDOWMENT DIVIDENDS, INT INC	\$ 60,365					18
TOTAL	\$ 60,365					

77525 Ronald McDonald House Charities of  
 74-2345274  
 FYE: 12/31/2020

## Federal Statements

### Form 990, Part IX, Line 11g - Other Fees for Service (Non-employee)

Description	Total Expenses	Program Service	Management & General	Fund Raising
CONTRIBUTION	\$ 101	\$ 101	\$	\$
TOTAL	\$ 101	\$ 101	\$ 0	\$ 0

### Form 990, Part IX, Line 24e - All Other Expenses

Description	Total Expenses	Program Service	Management & General	Fund Raising
SUPPLIES	\$ 2,959	\$ 2,959	\$	\$
AUTO	2,066	2,066		
DUES	736		736	
DONATED SERVICES EXPENSE	720	720		
TOTAL	\$ 6,481	\$ 5,745	\$ 736	\$ 0

77525 Ronald McDonald House Charities of  
74-2345274  
FYE: 12/31/2020

## Federal Statements

### Schedule A, Part II, Line 1(e)

<u>Description</u>	<u>Amount</u>
DONATIONS - NONCASH	\$ 93,075
REVENUES	8,092
REVENUES	147,779
BIG GAME ENTERPRISES, INC. CASH CONTRIBUTION	16,001
FRAZIER DREAM, INC. CASH CONTRIBUTION	5,666
MAXTAB, INC. CASH CONTRIBUTION	29,801
ALLEEN AND JOHN HOOD GARNER CHARTBL CASH CONTRIBUTION	5,000
BAYLOR SCOTT & WHITE HEALTH CASH CONTRIBUTION	5,000
KADES CORPORATION CASH CONTRIBUTION	8,480
ALPHA DELTA PI FOUND, INC. CASH CONTRIBUTION	6,170
TEMPUR-PEDIC CASH CONTRIBUTION	8,545
MARTIN-BROWER COMPANY, LLC. CASH CONTRIBUTION	7,563
HJORTH, TYLER CASH CONTRIBUTION	7,500
TOTAL	\$ <u>348,672</u>

### Schedule A, Part II, Line 8(e)

<u>Description</u>	<u>Amount</u>
INTEREST INCOME	\$ 496
ENDOWMENT DIVIDENDS, INT INC	60,365
TOTAL	\$ <u>60,861</u>

77525 Ronald McDonald House Charities of  
74-2345274  
FYE: 12/31/2020

## Federal Statements

### Schedule A, Part II, Line 12 - Current year

Description

Amount

GUEST REVENUE	\$ 9,045
GOLF TOURNAMENT	20,246
MISC FUNDRAISERS	70,003
TOTAL	\$ <u>99,294</u>

77525 Ronald McDonald House Charities of  
74-2345274  
FYE: 12/31/2020

## Federal Statements

### Schedule A, Part II, Line 12 - Current year

Description

Amount

GUEST REVENUE	\$ 9,045
GOLF TOURNAMENT	20,246
MISC FUNDRAISERS	70,003
TOTAL	\$ <u>99,294</u>

77525 Ronald McDonald House Charities of  
74-2345274  
FYE: 12/31/2020

## Federal Statements

### Schedule A, Part II, Line 12 - Current year

Description

Amount

GUEST REVENUE	\$ 9,045
GOLF TOURNAMENT	20,246
MISC FUNDRAISERS	70,003
TOTAL	\$ <u>99,294</u>

77525 Ronald McDonald House Charities of  
74-2345274  
FYE: 12/31/2020

## Federal Statements

### Schedule A, Part II, Line 12 - Current year

Description

Amount

GUEST REVENUE	\$ 9,045
GOLF TOURNAMENT	20,246
MISC FUNDRAISERS	70,003
TOTAL	\$ <u>99,294</u>

77525 Ronald McDonald House Charities of  
74-2345274  
FYE: 12/31/2020

## Federal Statements

### Schedule A, Part II, Line 12 - Current year

Description

Amount

GUEST REVENUE	\$ 9,045
GOLF TOURNAMENT	20,246
MISC FUNDRAISERS	70,003
TOTAL	\$ <u>99,294</u>



77525 Ronald McDonald House Charities of  
74-2345274  
FYE: 12/31/2020

## Federal Statements

### Schedule A, Part II, Line 12 - Current year

Description

Amount

GUEST REVENUE	\$ 9,045
GOLF TOURNAMENT	20,246
MISC FUNDRAISERS	70,003
TOTAL	\$ <u>99,294</u>

77525 Ronald McDonald House Charities of  
74-2345274  
FYE: 12/31/2020

## Federal Statements

### Schedule A, Part II, Line 12 - Current year

Description

Amount

GUEST REVENUE	\$ 9,045
GOLF TOURNAMENT	20,246
MISC FUNDRAISERS	70,003
TOTAL	\$ <u>99,294</u>

77525 Ronald McDonald House Charities of  
74-2345274  
FYE: 12/31/2020

## Federal Statements

### Schedule A, Part II, Line 12 - Current year

Description

Amount

GUEST REVENUE	\$ 9,045
GOLF TOURNAMENT	20,246
MISC FUNDRAISERS	70,003
TOTAL	\$ <u>99,294</u>

77525 Ronald McDonald House Charities of  
74-2345274  
FYE: 12/31/2020

## Federal Statements

### Schedule A, Part II, Line 12 - Current year

Description

Amount

GUEST REVENUE	\$ 9,045
GOLF TOURNAMENT	20,246
MISC FUNDRAISERS	70,003
TOTAL	\$ <u>99,294</u>

77525 Ronald McDonald House Charities of  
74-2345274  
FYE: 12/31/2020

## Federal Statements

### Schedule A, Part II, Line 12 - Current year

Description

Amount

GUEST REVENUE	\$ 9,045
GOLF TOURNAMENT	20,246
MISC FUNDRAISERS	70,003
TOTAL	\$ <u>99,294</u>

77525 Ronald McDonald House Charities of  
74-2345274  
FYE: 12/31/2020

## Federal Statements

### Schedule A, Part II, Line 12 - Current year

Description

Amount

GUEST REVENUE	\$ 9,045
GOLF TOURNAMENT	20,246
MISC FUNDRAISERS	70,003
TOTAL	\$ <u>99,294</u>

77525 Ronald McDonald House Charities of  
74-2345274  
FYE: 12/31/2020

## Federal Statements

### Schedule A, Part II, Line 12 - Current year

Description

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## Federal Statements

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