Form	990

Return of Organization Exempt From Income Tax

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

Department of the Treasury

►

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

20**14** Open to Public Inspection

OMB No. 1545-0047

		2014 cal	endar year, or tax year begin	nning 10/1/2014	, and e	nding	0/3	0/2015	
		applicable:		e Goodtimes Project	, and c	manig			cation number
	Address	••	Doing business as	e Goodlinies i Tojeci		-			
\square'	Audress	change	-	x if mail is not delivered to street address)	Room/suite	-	46-248991	6	
۱ <u> </u>	Name ch	ange	7400 Sand Point Way S		#101		E Telephone		r
	nitial retu	urn	City or town	State	ZIP code				
			Seattle	WA	98115		(206) 940-(0062	
F	inal return	n/terminated	Foreign country name	Foreign province/state/county	Foreign postal	code			
□ ⁄	Amended	d return					G Gross rec	eipts \$	575,288
\square	Annligatio	on pending	F Name and address of principa	officer				(dinates? Yes X No
□ ′	Applicatio	on penuing					is a group return		= $=$
				I Point Way S Suite 101, Seattle					
<u>і</u> т	ax-exem	npt status:	X 501(c)(3) 501(c)) ◀ (insert no.) 4947(a)(1	1) or 527	I†	No," attach a li	st. (see i	nstructions)
JV	Vebsite	e: 🕨 www	v.thegoodtimesproject.org			H(c) Gro	oup exemption	number	•
ΚF	orm of o	rganization:	X Corporation Trust	Association Other ►	L Yea	ar of form	ation: 2012	мs	tate of legal domicile: WA
_	art I	· ·	nmary				2012		
				mission or most significant activ	ities: The	Goodtir	nes Project	oviete	to offer
ė	· ·	-	-	amilies affected by childhood ca				CAISIS	
anc				annies anected by childhood ca	incer a cost-r	iee wee			•••••
Activities & Governance		summer							
Š	2			ization discontinued its operation				1 1	
ଅ	3		-	governing body (Part VI, line 1a)				3	12
ŝ	4			mbers of the governing body (Pa				4	12
įĘ	5			/ed in calendar year 2014 (Part)	,			5	4
Ġ	6			ate if necessary)				6	200
◄	7a			from Part VIII, column (C), line 1				7a	0
	b	Net unre	lated business taxable inc	ome from Form 990-T, line 34.		<u></u>		7b	0
							Prior Year		Current Year
ne	8			, line 1h)			888	8,386	531,797
Revenue	9			I, line 2g)					0
Š	10		-	mn (A), lines 3, 4, and 7d)				639	1,311
-	11			A), lines 5, 6d, 8c, 9c, 10c, and 1				6,943	-125
	12			(must equal Part VIII, column (A),			882	2,082	532,983
	13			Part IX, column (A), lines 1–3) .					0
	14			art IX, column (A), line 4)					0
es	15			ee benefits (Part IX, column (A), line	•		109	9,939	144,747
Expenses	16a			IX, column (A), line 11e)				0	0
ăX	b			K, column (D), line 25) ►	60,140				
ш	17			A), lines 11a–11d, 11f–24e)				1,299	246,092
	18		· · · · · · · · · · · · · · · · · · ·	must equal Part IX, column (A),	,			1,238	390,839
	19	Revenu	e less expenses. Subtract	line 18 from line 12				0,844	142,144
Net Assets or Fund Balances						Beginn	ing of Current		End of Year
sset Bala	20		,					6,080	682,600
et A Ind I	21							3,259	7,708
				ract line 21 from line 20			532	2,821	674,892
	rt II		nature Block					<u> </u>	
				nis return, including accompanying schedu reparer (other than officer) is based on all					-
			Jonathan Werner					15, 2	
Sig	jn		Jonathan Werner (Apr 15, 2016) Signature of officer				Date	10, 2	.010
He	re		•		Troo	surer	Dale		
			Jonathan Werner Type or print name and title		Ilea	ISUIEI			
		Print	Type or print name and title /Type preparer's name	Preparer's signature		Date	-		PTIN
Pai	hi			Changel White Dahus an	- 4			heck	if
	eparer	, Sha	reef Abduhr-Rahmaan,	CPA hareef Abduhr-Rahmaan (Apr 15, 2016	š)		s	self-empl	oyed P01911167
	-		's name ► 501 Common	s			Firm's EIN 🕨	94-30	089631
US	e Only	v —		e S Suite 1101 Seattle, WA 9	8144				2.6704
Mai	the I						. none no. –		
way	y une ll	NO UISCUS	s this return with the prepa	arer shown above? (see instruct	10115)			• •	. X Yes No

Form 9	90 (2014)	The Goodtimes Project	46-2489916	Page 2
Ра	rt III	Statement of Program Service Accomplishments		
		Check if Schedule O contains a response or note to any line in this Part III		
1	Briefly d	escribe the organization's mission:		
•	The Goo	dtimes Project exists to offer Western Washington and Alaska families affected by d cancer a cost-free week of summer camp.		
2	the prior	organization undertake any significant program services during the year which were not listed on Form 990 or 990-EZ?		X No
3	services	brganization cease conducting, or make significant changes in how it conducts, any program ? .	· · Yes	X No
4	Describe expense	e the organization's program service accomplishments for each of its three largest program servi s. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and expenses, and revenue, if any, for each program service reported.		
4a	The Goo week-lor adventu sponsor campers) (Expenses \$ 306,165 including grants of \$) (Revenue of times Project hosts Camp Good times and The Kayak Adventure Camp. Camp Good times is a ng sleep-over camp for children with cancer, survivors, and their siblings. Kayak re camp is a week of kayaking in the San Juan Islands for young adult survivors. TGP also s holiday cruises and family get-togethers on a year-round basis. We welcome up to 255 of or summer camp and 200 campers/families to our year-round activities.		
4b) (Expenses \$ including grants of \$) (Revenu		
4c	(Code:) (Expenses \$ including grants of \$) (Revenue)	ie \$)
4d	Other pr	ogram services. (Describe in Schedule O.)		
	(Expens		0)	
4e		ogram service expenses		

Form 990 (2014) The Goodtimes Project
Part IV Checklist of Required Schedules

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

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Par	t IV Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Х
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		Х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines			
	24b through 24d and complete Schedule K. If "No," go to line 25a	24a		Х
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a			
	prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or			
	990-EZ? If "Yes," complete Schedule L, Part I	. 25b		Х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any			
	current or former officers, directors, trustees, key employees, highest compensated employees, or			
	disqualified persons? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete</i>			
	Schedule L, Part IV	28b		Х
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV			X
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	. 29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	. 31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?			v
••	If "Yes," complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			v
• •	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	. 33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II,			v
05-	III, or IV, and Part V, line 1	34		Х
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	. <u>35a</u>		
a	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled	0.51		
20	entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related			v
27	organization? If "Yes," complete Schedule R, Part V, line 2	36		Х
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</i>			v
	VI	37	$\left - \right $	Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
	19? Note. All Form 990 filers are required to complete Schedule O	38		

Form **990** (2014)

Form 9	90 (2014)	The Goodtimes Project 46-24	189916	F	age 5
Par	t V	Statements Regarding Other IRS Filings and Tax Compliance			
		Check if Schedule O contains a response or note to any line in this Part V			
				Yes	No
1a	Enter t	he number reported in Box 3 of Form 1096. Enter -0- if not applicable	2		
b	Enter t	he number of Forms W-2G included in line 1a. Enter -0- if not applicable	0		
С	Did the	e organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming	g (gambling) winnings to prize winners?	1c	X	
2a	Enter t	he number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statem	ents, filed for the calendar year ending with or within the year covered by this return . 2a	4		
b	If at lea	ast one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note. I	f the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file.</i> (see instructions)			
3a	Did the	e organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b	If "Yes	" has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any	time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a	financial account in a foreign country (such as a bank account, securities account, or other financial			
	accour	nt)?	4a		X
b	If "Yes	," enter the name of the foreign country: ►			
	See ins	structions for filing requirements for FinCen Form 114, Report of Foreign Bank and Financial Accounts			
	(FBAR				
5a	Was th	ne organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did an	y taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	. 5b		X
С	If "Yes	to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a		he organization have annual gross receipts that are normally greater than \$100,000, and did the			
		zation solicit any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes	," did the organization include with every solicitation an express statement that such contributions or			
	gifts we	ere not tax deductible?	6b		
7	Organi	izations that may receive deductible contributions under section 170(c).			
а	Did the	organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and se	rvices provided to the payor?	7a		X
b	If "Yes	," did the organization notify the donor of the value of the goods or services provided?	7b		
с		organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
		d to file Form 8282?	7c		X
d	If "Yes	," indicate the number of Forms 8282 filed during the year			
е		e organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f		organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g		ganization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	. 7g		
ĥ		ganization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?			
8		oring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	-	pring organization have excess business holdings at any time during the year?	8		
9	-	oring organizations maintaining donor advised funds.			
а	-	sponsoring organization make any taxable distributions under section 4966?	9a		
b		sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10		n 501(c)(7) organizations. Enter:			
а		on fees and capital contributions included on Part VIII, line 12			
b		receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11		n 501(c)(12) organizations. Enter:			
а		income from members or shareholders			
b	Gross	income from other sources (Do not net amounts due or paid to other sources			
		t amounts due or received from them.)			
12a	-	n 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b		" enter the amount of tax-exempt interest received or accrued during the year 12b			
13		n 501(c)(29) qualified nonprofit health insurance issuers.			
а		organization licensed to issue qualified health plans in more than one state?	13a		
		See the instructions for additional information the organization must report on Schedule O.			
b		he amount of reserves the organization is required to maintain by the states in which			
		anization is licensed to issue qualified health plans			
с	-	he amount of reserves on hand			
14a		e organization receive any payments for indoor tanning services during the tax year?	14a		X
b		" has it filed a Form 720 to report these payments? <i>If "No," provide an explanation in Schedule O</i>	14b		

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Par	t VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S Check if Schedule O contains a response or note to any line in this Part VI.	ee ins	tructi	ions.
Sect	ion A. Governing Body and Management			
1a	Enter the number of voting members of the governing body at the end of the tax year 1a <u>12</u> If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.		Yes	No
b 2	Enter the number of voting members included in line 1a, above, who are independent <u>1b</u> 12 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		X
3 4 5 6 7a	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders?	3 4 5 6		X X X X
b	one or more members of the governing body?	7a		x
8 a	stockholders, or persons other than the governing body?	7b 8a	x	X
b 9	Each committee with authority to act on behalf of the governing body?	8b 9	X	x
Sect	ion B. Policies (This Section B requests information about policies not required by the Internal Revenue Co	ode.)		
40-	Did the encoderation have been been been as affiliate 2	40-	Yes	No
b	Did the organization have local chapters, branches, or affiliates?	10a 10b		X
11a b 12a b	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? . Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>	11a 12a 12b	X X X	
с 13 14	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy?	12c 13 14	<u>х</u>	X X
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a b	The organization's CEO, Executive Director, or top management official.	15a 15b	X X	
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?	16a		X
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
-	ion C. Disclosure			
17 18	List the states with which a copy of this Form 990 is required to be filed Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(a available for public inspection. Indicate how you made these available. Check all that apply.	:)(3)s	only)	
19 20	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records 501 Commons (206) 682-6704		, and	
	7400 Sand Point Way S No 101. Seattle, WA 98115			

Form 990 (2014)	The Goodtimes Project	46-2489916	Page 7
Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compe	nsated	
	Employees, and Independent Contractors		
	Check if Schedule O contains a response or note to any line in this Part VII		
Section A.	Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees		

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

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

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

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

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

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

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

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

	1				<u></u>					
(A) Name and Title	(B) Average hours per week (list any	box, office	unles er an	Pos neck ss pe d a d	rson irect	e than c is both or/truste	an ee)	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) Laura Sr. Germain	4.00									
Director	0.00	X								
(2) Doug Kieper Director	3.00									
(3) Dr. Kara Menzer	3.00									
Director	0.00	X								
(4) Santo Criscuolo	0.50									
Director	0.00	X								
(5) Alia Ahmed	2.00									
Director	0.00									
(6) Erin Wilson	5.00	-								
Director	0.00									
(7) Sarah Swanberg	5.00									
Secretary	0.00			X						
(8) Jonathan Werner	3.00									
Treasurer	0.00			X						
(9) Kyle Krum	0.50									
Vice President	0.00			X						
(10) Cory Hoeppner	5.00									
Co-President	0.00			X						
(11) Brick Spangler	5.00									
Co-President	0.00			X						
(12) Tanya Krohn	33.75									
Camp Director	0.00			X				45,600		
(13) Tina Davis	40.00							50 (00)		
Fund Development Dir.	0.00			X				52,100		
(14) Carol Mastenbrook	40.00									
Executive Director	0.00			X				22,143		- 000

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P	art VII	Section A. Officers, D	Directors, Ti	ustees, Key Er	nploy	yee	s, a	nd l	Highe	est	Compensated	Employee	s (cor	ntinuec	d)
		(A) Name and title		(B) Average hours per	box, i	unles	ieck is pe	ition more rson	e than o is both or/trust	an	(D) Reportable compensation	(E) Reportab compensat		Esti	(F) mated punt of
				week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from relate organizatic (W-2/1099-N	ons	compe froi orgar and	ther ensation m the nization related nizations
(15)															
(16)															
(17)															
(18)															
(19)															
(20)															
(21)															
<u>(22)</u>															
<u>(23)</u>															
<u>(24)</u>															
(25)															
1b c d	Total from	n continuation sheets d lines 1b and 1c).	to Part VII,	Section A						►	119,843 0 119,843		0 0 0		0 0 0
2	Total num	ber of individuals (include compensation from the	ding but not	limited to those		l ab					· · ·		-		0
			<u></u> g				<u> </u>							۲	′es No
3		ganization list any form on line 1a? <i>If "Yes," col</i>												3	X
4	-	dividual listed on line 1a zation and related orgar		-	-										
	individual								• •				. F	4	X
5		erson listed on line 1a re es rendered to the organ												5	x
Sec	tion B. Ind	ependent Contractors													
1		this table for your five h ation from the organizati												ı's tax	
		Name ar	(A) nd business add	ress							(B) Description of ser	vices	C	(C) ompensa	ation
															0
															0
															<u> </u>
															0
2		ber of independent cont \$100,000 of compensa			nited ►	to tl	nos	e lis	ted a	bo۱	ve) who received	ł			

	990 (20 ⁻	· · · · · · · · · · · · · · · · · · ·				46-2489	916 Page	
Par	t VIII	Statement of Revenue Check if Schedule O contains a response or r	note to any line i	in this Part \/III				
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under section 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1a b c d e f	Federated campaigns1aMembership dues1bFundraising events1cRelated organizations1dGovernment grants (contributions)1eAll other contributions, gifts, grants, andsimilar amounts not included above1fNoncash contributions included in lines 1a-1f:\$	0 0 322,700 0 209,097 0					
a C	h b	Total. Add lines 1a–1f		531,797				
ice Revenue	2a b c		Business Code	0				
Program Service Revenue	d e f	All other program service revenue		0 0 0				
	3 4 5	Investment income (including dividends, interest, other similar amounts)	and ► ceeds►	1,311 0 0			1,31	
	6a b c 7a b	Gross rents (i) Real Gross rents (i) Real Less: rental expenses 0 Net rental income or (loss) 0 Gross amount from sales of assets other than inventory 0 Less: cost or other basis and sales expenses 0 Gain or (loss) 0 Net gain or (loss) 0	(ii) Personal 0 ► (ii) Other 0 0 0	0				
Other Revenue	b c 9a b c 10a b c	Gross income from fundraising events (not including \$322,700 of contributions reported on line 1c). See Part IV, line 18 a Less: direct expenses b Net income or (loss) from fundraising events . Gross income from gaming activities. See Part IV, line 19 a Less: direct expenses b Net income or (loss) from gaming activities Gross sales of inventory, less returns and allowances a Less: cost of goods sold	0 0 ► 0 0	-305			-30	
	b c d	Misc. Income All other revenue .		180 0 0 0			18	
	е 12	Total. Add lines 11a–11d . . <th .<="" td=""><td></td><td>180 532,983</td><td>0</td><td></td><td>0 1,18</td></th>	<td></td> <td>180 532,983</td> <td>0</td> <td></td> <td>0 1,18</td>		180 532,983	0		0 1,18

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				
	not include amounts reported on lines 6b, 7b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	domestic governments. See Part IV, line 21	0			
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22	0			
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors,				
	trustees, and key employees	124,010	66,846	14,841	42,323
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	0			
7	Other salaries and wages	6,439	3,471	771	2,197
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	0			
9	Other employee benefits	0			
10	Payroll taxes	14,298	7,707	1,711	4,880
11	Fees for services (non-employees):				
а	Management	0			
b	Legal	0			
С	Accounting	2,505		2,505	
d	Lobbying	0			
е	Professional fundraising services. See Part IV, line 17	0			
f	Investment management fees	0			
g	Other. (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O.)	11,400	11,400		
12	Advertising and promotion	5,628	563		5,065
13	Office expenses	2,703	1,622	270	811
14	Information technology	10,454	8,150	510	1,794
15	Royalties	0			
16	Occupancy	144,991	140,898	1,023	3,070
17	Travel	19,219	18,730	489	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	0			
20	Interest	0			
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	0	0	0	0
23	Insurance	9,310	7,684	1,626	
24	Other expenses. Itemize expenses not covered				
	above (List miscellaneous expenses in line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)				
а	Licenses and Fees	349		349	
b	Bank and Merchant Fees	439		439	
С	Staff Training/Appreciation	8,617	8,617		
d	Program Supplies	30,477	30,477		
е	All other expenses	0			
25	Total functional expenses. Add lines 1 through 24e.	390,839	306,165	24,534	60,140
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 ► if				
	following SOP 98-2 (ASC 958-720)				

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	art X	· · · · · · · · · · · · · · · · · · ·			40-2489916 Page 11
		Check if Schedule O contains a response or note to any line in this Part >	X		
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	402,552	1	543,181
	2	Savings and temporary cash investments	124,868		139,419
	3	Pledges and grants receivable, net	8,660		0
	4	Accounts receivable, net	0		0
	5	Loans and other receivables from current and former officers, directors,		-	
	-	trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and			
		sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary			
ţ		organizations (see instructions). Complete Part II of Schedule L		6	
Assets	7	Notes and loans receivable, net	0	7	0
¥	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or		-	
		other basis. Complete Part VI of Schedule D 10a 0			
	b	Less: accumulated depreciation 10b 0	0	10c	0
	11	Investments—publicly traded securities	0		0
	12	Investments—other securities. See Part IV, line 11	0		0
	13	Investments—program-related. See Part IV, line 11	0		0
	14	Intangible assets	0		0
	15	Other assets. See Part IV, line 11	0		0
	16	Total assets. Add lines 1 through 15 (must equal line 34)	536,080		682,600
	17	Accounts payable and accrued expenses	1,894		7,708
	18	Grants payable	,	18	<u></u>
	19		1,365	19	0
	20	Tax-exempt bond liabilities	,	20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D.		21	
ŝ	22	Loans and other payables to current and former officers, directors,			
Liabilities		trustees, key employees, highest compensated employees, and			
lide		disqualified persons. Complete Part II of Schedule L		22	
Ë	23	Secured mortgages and notes payable to unrelated third parties	0		0
	24	Unsecured notes and loans payable to unrelated third parties	0	24	0
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete			
		Part X of Schedule D	0	25	0
	26	Total liabilities. Add lines 17 through 25	3,259	26	7,708
ses		Organizations that follow SFAS 117 (ASC 958), check here► X and complete lines 27 through 29, and lines 33 and 34.			
an	27	Unrestricted net assets	407,953	27	549,774
Bal	28	Temporarily restricted net assets	0		0
Net Assets or Fund Balances	29	Permanently restricted net assets	124,868		125,118
		Organizations that do not follow SFAS 117 (ASC958), check here and complete lines 30 through 34.	· · · · ·		
	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	<u> </u>
	33	Total net assets or fund balances	532,821	33	674,892
	34	Total liabilities and net assets/fund balances	536,080	i	682,600
	104		555,000		002,000

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Par	t XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI			. [
1	Total revenue (must equal Part VIII, column (A), line 12)	1		532	,983
2	Total expenses (must equal Part IX, column (A), line 25)........................	2		390	,839
3	Revenue less expenses. Subtract line 2 from line 1	3	142,144		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		532	,821
5	Net unrealized gains (losses) on investments	5			-215
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			142
9	Other changes in net assets or fund balances (explain in Schedule O)..............	9			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10		674	,892
Part	XII Financial Statements and Reporting			г	
	Check if Schedule O contains a response or note to any line in this Part XII			. [
		г		Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in				
0	Schedule O.		2a		V
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?				<u>X</u>
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				
	reviewed on a separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b		X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a				
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight	of			
	the audit, review, or compilation of its financial statements and selection of an independent accountant? .		2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in	ו			
	Schedule O.				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in				
	the Single Audit Act and OMB Circular A-133?		3a		<u>X</u>
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		
			Form	990 (2014)