

***Andrew S. White***  
**P.O. Box 49612**  
**Austin, Texas 78765**

July 29, 2011

**VIA CERTIFIED MAIL**  
**Internal Revenue Service**  
**201 West Rivercenter Blvd.**  
**Extracting Stop 312**  
**Covington, KY 41011**

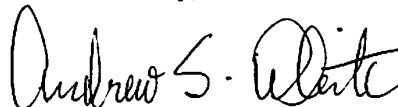
**RE: Standish Foundation for Children; Federal ID Number 45-2575814 (“Corporation”)-  
Application for tax exempt status**

**Ladies and Gentlemen:**

**On behalf of the Corporation, please accept the enclosed Application for Recognition of  
Exemption Under Section 501(c)(3) of the Internal Revenue Code.**

**We appreciate your consideration of this application at your earliest convenience.**

**Sincerely,**

  
**Andrew S. White**

# Form 1023 Checklist

## (Revised June 2006)

### Application for Recognition of Exemption under Section 501(c)(3) of the Internal Revenue Code

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**Note.** Retain a copy of the completed Form 1023 in your permanent records. Refer to the General Instructions regarding Public Inspection of approved applications.

**Check each box to finish your application (Form 1023). Send this completed Checklist with your filled-in application. If you have not answered all the items below, your application may be returned to you as incomplete.**

- Assemble the application and materials in this order:
  - Form 1023 Checklist
  - Form 2848, *Power of Attorney and Declaration of Representative* (if filing)
  - Form 8821, *Tax Information Authorization* (if filing)
  - Expedite request (if requesting)
  - Application (Form 1023 and Schedules A through H, as required)
  - Articles of organization
  - Amendments to articles of organization in chronological order
  - Bylaws or other rules of operation and amendments
  - Documentation of nondiscriminatory policy for schools, as required by Schedule B
  - Form 5768, *Election/Revocation of Election by an Eligible Section 501(c)(3) Organization To Make Expenditures To Influence Legislation* (if filing)
  - All other attachments, including explanations, financial data, and printed materials or publications. Label each page with name and EIN.
  
- User fee payment placed in envelope on top of checklist. DO NOT STAPLE or otherwise attach your check or money order to your application. Instead, just place it in the envelope.
  
- Employer Identification Number (EIN)
  
- Completed Parts I through XI of the application, including any requested information and any required Schedules A through H.
  - You must provide specific details about your past, present, and planned activities.
  - Generalizations or failure to answer questions in the Form 1023 application will prevent us from recognizing you as tax exempt.
  - Describe your purposes and proposed activities in specific easily understood terms.
  - Financial information should correspond with proposed activities.
  
- Schedules. Submit only those schedules that apply to you and check either "Yes" or "No" below.

Schedule A	Yes ___ No <input checked="" type="checkbox"/>	Schedule E	Yes ___ No <input checked="" type="checkbox"/>
Schedule B	Yes ___ No <input checked="" type="checkbox"/>	Schedule F	Yes ___ No <input checked="" type="checkbox"/>
Schedule C	Yes ___ No <input checked="" type="checkbox"/>	Schedule G	Yes ___ No <input checked="" type="checkbox"/>
Schedule D	Yes ___ No <input checked="" type="checkbox"/>	Schedule H	Yes ___ No <input checked="" type="checkbox"/>

## Power of Attorney and Declaration of Representative

▶ Type or print. ▶ See the separate instructions.

OMB No. 1545-0150  
**For IRS Use Only**  
 Received by: \_\_\_\_\_  
 Name \_\_\_\_\_  
 Telephone \_\_\_\_\_  
 Function \_\_\_\_\_  
 Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_

**Part I Power of Attorney**

*Caution: Form 2848 will not be honored for any purpose other than representation before the IRS.*

**1 Taxpayer information.** Taxpayer(s) must sign and date this form on page 2, line 9.

Taxpayer name(s) and address  <b>Standish Foundation for Children</b> <b>900 RR 620 South, C101-103</b> <b>Austin, Texas 78734</b>	Social security number(s) : : : : Daytime telephone number ( )	Employer identification number  <b>45 : 2575814</b>  Plan number (if applicable)
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hereby appoint(s) the following representative(s) as attorney(s)-in-fact:

**2 Representative(s) must sign and date this form on page 2, Part II.**

Name and address  <b>Andrew S. White</b> <b>P.O. Box 49612</b> <b>Austin, Texas 78765</b>	CAF No. .... <u>n/a</u> ..... Telephone No. .... <u>512-484-0236</u> ..... Fax No. .... <u>512-441-1501</u> ..... Check if new: Address <input type="checkbox"/> Telephone No. <input type="checkbox"/> Fax No. <input type="checkbox"/>
Name and address	CAF No. .... Telephone No. .... Fax No. .... Check if new: Address <input type="checkbox"/> Telephone No. <input type="checkbox"/> Fax No. <input type="checkbox"/>
Name and address	CAF No. .... Telephone No. .... Fax No. .... Check if new: Address <input type="checkbox"/> Telephone No. <input type="checkbox"/> Fax No. <input type="checkbox"/>

to represent the taxpayer(s) before the Internal Revenue Service for the following tax matters:

**3 Tax matters**

Type of Tax (Income, Employment, Excise, etc.) or Civil Penalty (see the instructions for line 3)	Tax Form Number (1040, 941, 720, etc.)	Year(s) or Period(s) (see the instructions for line 3)
<b>Income - determination of exempt status under</b>	<b>n/a</b>	<b>n/a</b>
<b>IRC Section 501(c)(3)</b>		

**4 Specific use not recorded on Centralized Authorization File (CAF).** If the power of attorney is for a specific use not recorded on CAF, check this box. See the instructions for Line 4. **Specific Uses Not Recorded on CAF**

**5 Acts authorized.** The representatives are authorized to receive and inspect confidential tax information and to perform any and all acts that I (we) can perform with respect to the tax matters described on line 3, for example, the authority to sign any agreements, consents, or other documents. The authority does not include the power to receive refund checks (see line 6 below), the power to substitute another representative or add additional representatives, the power to sign certain returns, or the power to execute a request for disclosure of tax returns or return information to a third party. See the line 5 instructions for more information.

**Exceptions.** An unenrolled return preparer cannot sign any document for a taxpayer and may only represent taxpayers in limited situations. See **Unenrolled Return Preparer** on page 1 of the instructions. An enrolled actuary may only represent taxpayers to the extent provided in section 10.3(d) of Treasury Department Circular No. 230 (Circular 230). An enrolled retirement plan administrator may only represent taxpayers to the extent provided in section 10.3(e) of Circular 230. See the line 5 instructions for restrictions on tax matters partners. In most cases, the student practitioner's (levels k and l) authority is limited (for example, they may only practice under the supervision of another practitioner).

List any specific additions or deletions to the acts otherwise authorized in this power of attorney: **Power to submit request for determination of tax exempt status and to receive and respond to all correspondence, inquiries or other matters related thereto.**

**6 Receipt of refund checks.** If you want to authorize a representative named on line 2 to receive, **BUT NOT TO ENDORSE OR CASH**, refund checks, initial here \_\_\_\_\_ and list the name of that representative below.

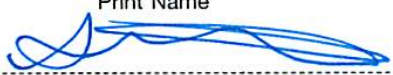
Name of representative to receive refund check(s) ▶

- 7 Notices and communications.** Original notices and other written communications will be sent to you and a copy to the first representative listed on line 2.
- a** If you also want the second representative listed to receive a copy of notices and communications, check this box
- b** If you do not want any notices or communications sent to your representative(s), check this box

- 8 Retention/revocation of prior power(s) of attorney.** The filing of this power of attorney automatically revokes all earlier power(s) of attorney on file with the Internal Revenue Service for the same tax matters and years or periods covered by this document. If you do not want to revoke a prior power of attorney, check here.

**YOU MUST ATTACH A COPY OF ANY POWER OF ATTORNEY YOU WANT TO REMAIN IN EFFECT.**

- 9 Signature of taxpayer(s).** If a tax matter concerns a joint return, both husband and wife must sign if joint representation is requested, otherwise, see the instructions. If signed by a corporate officer, partner, guardian, tax matters partner, executor, receiver, administrator, or trustee on behalf of the taxpayer, I certify that I have the authority to execute this form on behalf of the taxpayer.
- ▶ IF NOT SIGNED AND DATED, THIS POWER OF ATTORNEY WILL BE RETURNED.**

Signature	Date	Title (if applicable)
 Signature	7/29/11 Date	<b>Standish Foundation for Children</b> Print name of taxpayer from line 1 if other than individual <b>Executive Director</b> Title (if applicable)
Print Name	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> PIN Number	
Andrea Standish Print Name	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> PIN Number	

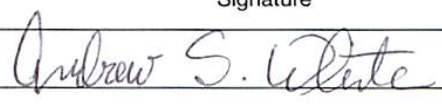
**Part II Declaration of Representative**

**Caution:** Students with a special order to represent taxpayers in qualified Low Income Taxpayer Clinics or the Student Tax Clinic Program (levels k and l), see the instructions for Part II.

Under penalties of perjury, I declare that:

- I am not currently under suspension or disbarment from practice before the Internal Revenue Service;
- I am aware of regulations contained in Circular 230 (31 CFR, Part 10), as amended, concerning the practice of attorneys, certified public accountants, enrolled agents, enrolled actuaries, and others;
- I am authorized to represent the taxpayer(s) identified in Part I for the tax matter(s) specified there; and
- I am one of the following:
  - a Attorney—a member in good standing of the bar of the highest court of the jurisdiction shown below.
  - b Certified Public Accountant—duly qualified to practice as a certified public accountant in the jurisdiction shown below.
  - c Enrolled Agent—enrolled as an agent under the requirements of Circular 230.
  - d Officer—a bona fide officer of the taxpayer’s organization.
  - e Full-Time Employee—a full-time employee of the taxpayer.
  - f Family Member—a member of the taxpayer’s immediate family (for example, spouse, parent, child, brother, or sister).
  - g Enrolled Actuary—enrolled as an actuary by the Joint Board for the Enrollment of Actuaries under 29 U.S.C. 1242 (the authority to practice before the Internal Revenue Service is limited by section 10.3(d) of Circular 230).
  - h Unenrolled Return Preparer—the authority to practice before the Internal Revenue Service is limited by Circular 230, section 10.7(c)(1)(viii). You must have prepared the return in question and the return must be under examination by the IRS. See **Unenrolled Return Preparer** on page 1 of the instructions.
  - k Student Attorney—student who receives permission to practice before the IRS by virtue of their status as a law student under section 10.7(d) of Circular 230.
  - l Student CPA—student who receives permission to practice before the IRS by virtue of their status as a CPA student under section 10.7(d) of Circular 230.
  - r Enrolled Retirement Plan Agent—enrolled as a retirement plan agent under the requirements of Circular 230 (the authority to practice before the Internal Revenue Service is limited by section 10.3(e)).

**▶ IF THIS DECLARATION OF REPRESENTATIVE IS NOT SIGNED AND DATED, THE POWER OF ATTORNEY WILL BE RETURNED.** See the Part II instructions.

Designation—Insert above letter (a–r)	Jurisdiction (state) or identification	Signature	Date
a	Texas		7/29/11

- An exact copy of your complete articles of organization (creating document). Absence of the proper purpose and dissolution clauses is the number one reason for delays in the issuance of determination letters.
  - Location of Purpose Clause from Part III, line 1 (Page, Article and Paragraph Number) Art 5 Para 1
  - Location of Dissolution Clause from Part III, line 2b or 2c (Page, Article and Paragraph Number) or by operation of state law Art 5 Para 5
- Signature of an officer, director, trustee, or other official who is authorized to sign the application.
  - Signature at Part XI of Form 1023.
- Your name on the application must be the same as your legal name as it appears in your articles of organization.

Send completed Form 1023, user fee payment, and all other required information, to:

Internal Revenue Service  
P.O. Box 192  
Covington, KY 41012-0192

If you are using express mail or a delivery service, send Form 1023, user fee payment, and attachments to:

Internal Revenue Service  
201 West Rivercenter Blvd.  
Attn: Extracting Stop 312  
Covington, KY 41011

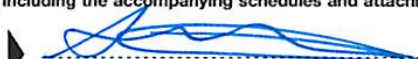
**Part XI User Fee Information**

You must include a user fee payment with this application. It will not be processed without your paid user fee. If your average annual gross receipts have exceeded or will exceed \$10,000 annually over a 4-year period, you must submit payment of \$750. If your gross receipts have not exceeded or will not exceed \$10,000 annually over a 4-year period, the required user fee payment is \$300. See instructions for Part XI, for a definition of **gross receipts** over a 4-year period. Your check or money order must be made payable to the United States Treasury. *User fees are subject to change. Check our website at [www.irs.gov](http://www.irs.gov) and type "User Fee" in the keyword box, or call Customer Account Services at 1-877-829-5500 for current information.*

- 1 Have your annual gross receipts averaged or are they expected to average not more than \$10,000?  **Yes**  **No**  
 If "Yes," check the box on line 2 and enclose a user fee payment of \$300 (Subject to change—see above).  
 If "No," check the box on line 3 and enclose a user fee payment of \$750 (Subject to change—see above).
- 2 Check the box if you have enclosed the reduced user fee payment of \$300 (Subject to change).
- 3 Check the box if you have enclosed the user fee payment of \$750 (Subject to change).

I declare under the penalties of perjury that I am authorized to sign this application on behalf of the above organization and that I have examined this application, including the accompanying schedules and attachments, and to the best of my knowledge it is true, correct, and complete.

Please  
Sign  
Here

  
 (Signature of Officer, Director, Trustee, or other  
authorized official)

**Andrea Standish**

(Type or print name of signer)

**Executive Director**

(Type or print title or authority of signer)

**7/29/11**  
 (Date)

**Reminder:** Send the completed Form 1023 Checklist with your filled-in-application.

Form **1023** (Rev. 6-2006)

**Application for Recognition of Exemption  
 Under Section 501(c)(3) of the Internal Revenue Code**

Use the instructions to complete this application and for a definition of all **bold** items. For additional help, call IRS Exempt Organizations Customer Account Services toll-free at 1-877-829-5500. Visit our website at [www.irs.gov](http://www.irs.gov) for forms and publications. If the required information and documents are not submitted with payment of the appropriate user fee, the application may be returned to you.

Attach additional sheets to this application if you need more space to answer fully. Put your name and EIN on each sheet and identify each answer by Part and line number. Complete Parts I - XI of Form 1023 and submit only those Schedules (A through H) that apply to you.

**Part I Identification of Applicant**

1 Full name of organization (exactly as it appears in your organizing document) <b>Standish Foundation for Children</b>		2 c/o Name (if applicable)
3 Mailing address (Number and street) (see instructions) <b>900 RR 620 South, C101-103</b>	Room/Suite	4 Employer Identification Number (EIN) <b>45-2575814</b>
City or town, state or country, and ZIP + 4 <b>Austin, Texas 78734</b>		5 Month the annual accounting period ends (01 - 12) <b>December</b>
6 Primary contact (officer, director, trustee, or authorized representative) a Name: <b>Andrea Standish, President</b>		b Phone: c Fax: (optional)
7 Are you represented by an authorized representative, such as an attorney or accountant? If "Yes," provide the authorized representative's name, and the name and address of the authorized representative's firm. Include a completed Form 2848, <i>Power of Attorney and Declaration of Representative</i> , with your application if you would like us to communicate with your representative.		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
8 Was a person who is not one of your officers, directors, trustees, employees, or an authorized representative listed in line 7, paid, or promised payment, to help plan, manage, or advise you about the structure or activities of your organization, or about your financial or tax matters? If "Yes," provide the person's name, the name and address of the person's firm, the amounts paid or promised to be paid, and describe that person's role.		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
9a Organization's website: <a href="http://www.standishfoundation.org">www.standishfoundation.org</a>		
b Organization's email: (optional)		
10 Certain organizations are not required to file an information return (Form 990 or Form 990-EZ). If you are granted tax-exemption, are you claiming to be excused from filing Form 990 or Form 990-EZ? If "Yes," explain. See the instructions for a description of organizations not required to file Form 990 or Form 990-EZ.		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
11 Date incorporated if a corporation, or formed, if other than a corporation. (MM/DD/YYYY)		<b>10 / 22 / 2010</b>
12 Were you formed under the laws of a foreign country? If "Yes," state the country.		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

**Part II Organizational Structure**

You must be a corporation (including a limited liability company), an unincorporated association, or a trust to be tax exempt. (See instructions.) **DO NOT file this form unless you can check "Yes" on lines 1, 2, 3, or 4.**

- 1 Are you a **corporation**? If "Yes," attach a copy of your articles of incorporation showing **certification of filing** with the appropriate state agency. Include copies of any amendments to your articles and be sure they also show state filing certification.  **Yes**  **No**

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- 2 Are you a **limited liability company (LLC)**? If "Yes," attach a copy of your articles of organization showing certification of filing with the appropriate state agency. Also, if you adopted an operating agreement, attach a copy. Include copies of any amendments to your articles and be sure they show state filing certification. Refer to the instructions for circumstances when an LLC should not file its own exemption application.  **Yes**  **No**

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- 3 Are you an **unincorporated association**? If "Yes," attach a copy of your articles of association, constitution, or other similar organizing document that is dated and includes at least two signatures. Include signed and dated copies of any amendments.  **Yes**  **No**

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- 4a Are you a **trust**? If "Yes," attach a signed and dated copy of your trust agreement. Include signed and dated copies of any amendments.  **Yes**  **No**
- b Have you been funded? If "No," explain how you are formed without anything of value placed in trust.  **Yes**  **No**

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- 5 Have you adopted **bylaws**? If "Yes," attach a current copy showing date of adoption. If "No," explain how your officers, directors, or trustees are selected.  **Yes**  **No**

**Part III Required Provisions in Your Organizing Document**

The following questions are designed to ensure that when you file this application, your organizing document contains the required provisions to meet the organizational test under section 501(c)(3). Unless you can check the boxes in both lines 1 and 2, your organizing document does not meet the organizational test. **DO NOT file this application until you have amended your organizing document.** Submit your original and amended organizing documents (showing state filing certification if you are a corporation or an LLC) with your application.

- 1 Section 501(c)(3) requires that your organizing document state your exempt purpose(s), such as charitable, religious, educational, and/or scientific purposes. Check the box to confirm that your organizing document meets this requirement. Describe specifically where your organizing document meets this requirement, such as a reference to a particular article or section in your organizing document. Refer to the instructions for exempt purpose language. Location of Purpose Clause (Page, Article, and Paragraph): Article 5 Paragraph 1

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- 2a Section 501(c)(3) requires that upon dissolution of your organization, your remaining assets must be used exclusively for exempt purposes, such as charitable, religious, educational, and/or scientific purposes. Check the box on line 2a to confirm that your organizing document meets this requirement by express provision for the distribution of assets upon dissolution. If you rely on state law for your dissolution provision, do not check the box on line 2a and go to line 2c.
- 2b If you checked the box on line 2a, specify the location of your dissolution clause (Page, Article, and Paragraph). Do not complete line 2c if you checked box 2a. Article 5 Paragraph 5
- 2c See the instructions for information about the operation of state law in your particular state. Check this box if you rely on operation of state law for your dissolution provision and indicate the state: \_\_\_\_\_

**Part IV Narrative Description of Your Activities**

Using an attachment, describe your *past*, *present*, and *planned* activities in a narrative. If you believe that you have already provided some of this information in response to other parts of this application, you may summarize that information here and refer to the specific parts of the application for supporting details. You may also attach representative copies of newsletters, brochures, or similar documents for supporting details to this narrative. Remember that if this application is approved, it will be open for public inspection. Therefore, your narrative description of activities should be thorough and accurate. Refer to the instructions for information that must be included in your description.

**Part V Compensation and Other Financial Arrangements With Your Officers, Directors, Trustees, Employees, and Independent Contractors**

- 1a List the names, titles, and mailing addresses of all of your officers, directors, and trustees. For each person listed, state their total annual **compensation**, or proposed compensation, for all services to the organization, whether as an officer, employee, or other position. Use actual figures, if available. Enter "none" if no compensation is or will be paid. If additional space is needed, attach a separate sheet. Refer to the instructions for information on what to include as compensation.

Name	Title	Mailing address	Compensation amount (annual actual or estimated)
see attached		.....	
		.....	
		.....	
		.....	
		.....	



**Part V Compensation and Other Financial Arrangements With Your Officers, Directors, Trustees, Employees, and Independent Contractors (Continued)**

**b** List the names, titles, and mailing addresses of each of your five highest compensated employees who receive or will receive compensation of more than \$50,000 per year. Use the actual figure, if available. Refer to the instructions for information on what to include as compensation. Do not include officers, directors, or trustees listed in line 1a.

Name	Title	Mailing address	Compensation amount (annual actual or estimated)
n/a			

**c** List the names, names of businesses, and mailing addresses of your five highest compensated independent contractors that receive or will receive compensation of more than \$50,000 per year. Use the actual figure, if available. Refer to the instructions for information on what to include as compensation.

Name	Title	Mailing address	Compensation amount (annual actual or estimated)
n/a			

The following "Yes" or "No" questions relate to *past, present, or planned* relationships, transactions, or agreements with your officers, directors, trustees, highest compensated employees, and highest compensated independent contractors listed in lines 1a, 1b, and 1c.

**2a** Are any of your officers, directors, or trustees **related** to each other through **family or business relationships**? If "Yes," identify the individuals and explain the relationship.  Yes  No

**b** Do you have a business relationship with any of your officers, directors, or trustees other than through their position as an officer, director, or trustee? If "Yes," identify the individuals and describe the business relationship with each of your officers, directors, or trustees.  Yes  No

**c** Are any of your officers, directors, or trustees related to your highest compensated employees or highest compensated independent contractors listed on lines 1b or 1c through family or business relationships? If "Yes," identify the individuals and explain the relationship.  Yes  No

**3a** For each of your officers, directors, trustees, highest compensated employees, and highest compensated independent contractors listed on lines 1a, 1b, or 1c, attach a list showing their name, qualifications, average hours worked, and duties.

**b** Do any of your officers, directors, trustees, highest compensated employees, and highest compensated independent contractors listed on lines 1a, 1b, or 1c receive compensation from any other organizations, whether tax exempt or taxable, that are related to you through **common control**? If "Yes," identify the individuals, explain the relationship between you and the other organization, and describe the compensation arrangement.  Yes  No

**4** In establishing the compensation for your officers, directors, trustees, highest compensated employees, and highest compensated independent contractors listed on lines 1a, 1b, and 1c, the following practices are recommended, although they are not required to obtain exemption. Answer "Yes" to all the practices you use.

**a** Do you or will the individuals that approve compensation arrangements follow a conflict of interest policy?  Yes  No

**b** Do you or will you approve compensation arrangements in advance of paying compensation?  Yes  No

**c** Do you or will you document in writing the date and terms of approved compensation arrangements?  Yes  No

**Part V Compensation and Other Financial Arrangements With Your Officers, Directors, Trustees, Employees, and Independent Contractors (Continued)**

- d** Do you or will you record in writing the decision made by each individual who decided or voted on compensation arrangements?  **Yes**  **No**
- e** Do you or will you approve compensation arrangements based on information about compensation paid by **similarly situated** taxable or tax-exempt organizations for similar services, current compensation surveys compiled by independent firms, or actual written offers from similarly situated organizations? Refer to the instructions for Part V, lines 1a, 1b, and 1c, for information on what to include as compensation.  **Yes**  **No**
- f** Do you or will you record in writing both the information on which you relied to base your decision and its source?  **Yes**  **No**
- g** If you answered "No" to any item on lines 4a through 4f, describe how you set compensation that is **reasonable** for your officers, directors, trustees, highest compensated employees, and highest compensated independent contractors listed in Part V, lines 1a, 1b, and 1c.
- 
- 5a** Have you adopted a **conflict of interest policy** consistent with the sample conflict of interest policy in Appendix A to the instructions? If "Yes," provide a copy of the policy and explain how the policy has been adopted, such as by resolution of your governing board. If "No," answer lines 5b and 5c.  **Yes**  **No**
- b** What procedures will you follow to assure that persons who have a conflict of interest will not have influence over you for setting their own compensation?
- c** What procedures will you follow to assure that persons who have a conflict of interest will not have influence over you regarding business deals with themselves?
- Note:** A conflict of interest policy is recommended though it is not required to obtain exemption. Hospitals, see Schedule C, Section I, line 14.
- 
- 6a** Do you or will you compensate any of your officers, directors, trustees, highest compensated employees, and highest compensated independent contractors listed in lines 1a, 1b, or 1c through **non-fixed payments**, such as discretionary bonuses or revenue-based payments? If "Yes," describe all non-fixed compensation arrangements, including how the amounts are determined, who is eligible for such arrangements, whether you place a limitation on total compensation, and how you determine or will determine that you pay no more than reasonable compensation for services. Refer to the instructions for Part V, lines 1a, 1b, and 1c, for information on what to include as compensation.  **Yes**  **No**
- b** Do you or will you compensate any of your employees, other than your officers, directors, trustees, or your five highest compensated employees who receive or will receive compensation of more than \$50,000 per year, through non-fixed payments, such as discretionary bonuses or revenue-based payments? If "Yes," describe all non-fixed compensation arrangements, including how the amounts are or will be determined, who is or will be eligible for such arrangements, whether you place or will place a limitation on total compensation, and how you determine or will determine that you pay no more than reasonable compensation for services. Refer to the instructions for Part V, lines 1a, 1b, and 1c, for information on what to include as compensation.  **Yes**  **No**
- 
- 7a** Do you or will you purchase any goods, services, or assets from any of your officers, directors, trustees, highest compensated employees, or highest compensated independent contractors listed in lines 1a, 1b, or 1c? If "Yes," describe any such purchase that you made or intend to make, from whom you make or will make such purchases, how the terms are or will be negotiated at **arm's length**, and explain how you determine or will determine that you pay no more than **fair market value**. Attach copies of any written contracts or other agreements relating to such purchases.  **Yes**  **No**
- b** Do you or will you sell any goods, services, or assets to any of your officers, directors, trustees, highest compensated employees, or highest compensated independent contractors listed in lines 1a, 1b, or 1c? If "Yes," describe any such sales that you made or intend to make, to whom you make or will make such sales, how the terms are or will be negotiated at **arm's length**, and explain how you determine or will determine you are or will be paid at least fair market value. Attach copies of any written contracts or other agreements relating to such sales.  **Yes**  **No**
- 
- 8a** Do you or will you have any leases, contracts, loans, or other agreements with your officers, directors, trustees, highest compensated employees, or highest compensated independent contractors listed in lines 1a, 1b, or 1c? If "Yes," provide the information requested in lines 8b through 8f.  **Yes**  **No**
- b** Describe any written or oral arrangements that you made or intend to make.
- c** Identify with whom you have or will have such arrangements.
- d** Explain how the terms are or will be negotiated at **arm's length**.
- e** Explain how you determine you pay no more than fair market value or you are paid at least fair market value.
- f** Attach copies of any signed leases, contracts, loans, or other agreements relating to such arrangements.
- 
- 9a** Do you or will you have any leases, contracts, loans, or other agreements with any organization in which any of your officers, directors, or trustees are also officers, directors, or trustees, or in which any individual officer, director, or trustee owns more than a 35% interest? If "Yes," provide the information requested in lines 9b through 9f.  **Yes**  **No**

**Part V Compensation and Other Financial Arrangements With Your Officers, Directors, Trustees, Employees, and Independent Contractors (Continued)**

- b** Describe any written or oral arrangements you made or intend to make.
- c** Identify with whom you have or will have such arrangements.
- d** Explain how the terms are or will be negotiated at arm's length.
- e** Explain how you determine or will determine you pay no more than fair market value or that you are paid at least fair market value.
- f** Attach a copy of any signed leases, contracts, loans, or other agreements relating to such arrangements.

**Part VI Your Members and Other Individuals and Organizations That Receive Benefits From You**

The following "Yes" or "No" questions relate to goods, services, and funds you provide to individuals and organizations as part of your activities. Your answers should pertain to *past*, *present*, and *planned* activities. (See instructions.)

- 1a** In carrying out your exempt purposes, do you provide goods, services, or funds to individuals? If "Yes," describe each program that provides goods, services, or funds to individuals.  Yes  No
- b** In carrying out your exempt purposes, do you provide goods, services, or funds to organizations? If "Yes," describe each program that provides goods, services, or funds to organizations.  Yes  No
- 2** Do any of your programs limit the provision of goods, services, or funds to a specific individual or group of specific individuals? For example, answer "Yes," if goods, services, or funds are provided only for a particular individual, your members, individuals who work for a particular employer, or graduates of a particular school. If "Yes," explain the limitation and how recipients are selected for each program.  Yes  No
- 3** Do any individuals who receive goods, services, or funds through your programs have a family or business relationship with any officer, director, trustee, or with any of your highest compensated employees or highest compensated independent contractors listed in Part V, lines 1a, 1b, and 1c? If "Yes," explain how these related individuals are eligible for goods, services, or funds.  Yes  No

**Part VII Your History**

The following "Yes" or "No" questions relate to your history. (See instructions.)

- 1** Are you a **successor** to another organization? Answer "Yes," if you have taken or will take over the activities of another organization; you took over 25% or more of the fair market value of the net assets of another organization; or you were established upon the conversion of an organization from for-profit to non-profit status. If "Yes," complete Schedule G.  Yes  No
- 2** Are you submitting this application more than 27 months after the end of the month in which you were legally formed? If "Yes," complete Schedule E.  Yes  No

**Part VIII Your Specific Activities**

The following "Yes" or "No" questions relate to specific activities that you may conduct. Check the appropriate box. Your answers should pertain to *past*, *present*, and *planned* activities. (See instructions.)

- 1** Do you support or oppose candidates in **political campaigns** in any way? If "Yes," explain.  Yes  No
- 2a** Do you attempt to **influence legislation**? If "Yes," explain how you attempt to influence legislation and complete line 2b. If "No," go to line 3a.  Yes  No
- b** Have you made or are you making an **election** to have your legislative activities measured by expenditures by filing Form 5768? If "Yes," attach a copy of the Form 5768 that was already filed or attach a completed Form 5768 that you are filing with this application. If "No," describe whether your attempts to influence legislation are a substantial part of your activities. Include the time and money spent on your attempts to influence legislation as compared to your total activities.  Yes  No
- 3a** Do you or will you operate bingo or **gaming** activities? If "Yes," describe who conducts them, and list all revenue received or expected to be received and expenses paid or expected to be paid in operating these activities. **Revenue and expenses** should be provided for the time periods specified in Part IX, Financial Data.  Yes  No
- b** Do you or will you enter into contracts or other agreements with individuals or organizations to conduct bingo or gaming for you? If "Yes," describe any written or oral arrangements that you made or intend to make, identify with whom you have or will have such arrangements, explain how the terms are or will be negotiated at arm's length, and explain how you determine or will determine you pay no more than fair market value or you will be paid at least fair market value. Attach copies or any written contracts or other agreements relating to such arrangements.  Yes  No
- c** List the states and local jurisdictions, including Indian Reservations, in which you conduct or will conduct gaming or bingo.

**Part VIII Your Specific Activities (Continued)**

- 4a** Do you or will you undertake **fundraising**? If "Yes," check all the fundraising programs you do or will conduct. (See instructions.)  **Yes**  **No**
- mail solicitations
  - email solicitations
  - personal solicitations
  - vehicle, boat, plane, or similar donations
  - foundation grant solicitations
  - phone solicitations
  - accept donations on your website
  - receive donations from another organization's website
  - government grant solicitations
  - Other

Attach a description of each fundraising program.

- b** Do you or will you have written or oral contracts with any individuals or organizations to raise funds for you? If "Yes," describe these activities. Include all revenue and expenses from these activities and state who conducts them. Revenue and expenses should be provided for the time periods specified in Part IX, Financial Data. Also, attach a copy of any contracts or agreements.  **Yes**  **No**
- c** Do you or will you engage in fundraising activities for other organizations? If "Yes," describe these arrangements. Include a description of the organizations for which you raise funds and attach copies of all contracts or agreements.  **Yes**  **No**
- d** List all states and local jurisdictions in which you conduct fundraising. For each state or local jurisdiction listed, specify whether you fundraise for your own organization, you fundraise for another organization, or another organization fundraises for you.
- e** Do you or will you maintain separate accounts for any contributor under which the contributor has the right to advise on the use or distribution of funds? Answer "Yes" if the donor may provide advice on the types of investments, distributions from the types of investments, or the distribution from the donor's contribution account. If "Yes," describe this program, including the type of advice that may be provided and submit copies of any written materials provided to donors.  **Yes**  **No**

**5** Are you **affiliated** with a governmental unit? If "Yes," explain.  **Yes**  **No**

**6a** Do you or will you engage in **economic development**? If "Yes," describe your program.  **Yes**  **No**

**b** Describe in full who benefits from your economic development activities and how the activities promote exempt purposes.

**7a** Do or will persons other than your employees or volunteers **develop** your facilities? If "Yes," describe each facility, the role of the developer, and any business or family relationship(s) between the developer and your officers, directors, or trustees.  **Yes**  **No**

**b** Do or will persons other than your employees or volunteers **manage** your activities or facilities? If "Yes," describe each activity and facility, the role of the manager, and any business or family relationship(s) between the manager and your officers, directors, or trustees.  **Yes**  **No**

**c** If there is a business or family relationship between any manager or developer and your officers, directors, or trustees, identify the individuals, explain the relationship, describe how contracts are negotiated at arm's length so that you pay no more than fair market value, and submit a copy of any contracts or other agreements.

**8** Do you or will you enter into **joint ventures**, including partnerships or **limited liability companies** treated as partnerships, in which you share profits and losses with partners other than section 501(c)(3) organizations? If "Yes," describe the activities of these joint ventures in which you participate.  **Yes**  **No**

**9a** Are you applying for exemption as a childcare organization under section 501(k)? If "Yes," answer lines 9b through 9d. If "No," go to line 10.  **Yes**  **No**

**b** Do you provide child care so that parents or caretakers of children you care for can be **gainfully employed** (see instructions)? If "No," explain how you qualify as a childcare organization described in section 501(k).  **Yes**  **No**

**c** Of the children for whom you provide child care, are 85% or more of them cared for by you to enable their parents or caretakers to be gainfully employed (see instructions)? If "No," explain how you qualify as a childcare organization described in section 501(k).  **Yes**  **No**

**d** Are your services available to the general public? If "No," describe the specific group of people for whom your activities are available. Also, see the instructions and explain how you qualify as a childcare organization described in section 501(k).  **Yes**  **No**

**10** Do you or will you publish, own, or have rights in music, literature, tapes, artworks, choreography, scientific discoveries, or other **intellectual property**? If "Yes," explain. Describe who owns or will own any copyrights, patents, or trademarks, whether fees are or will be charged, how the fees are determined, and how any items are or will be produced, distributed, and marketed.  **Yes**  **No**

**Part VIII Your Specific Activities (Continued)**

- 11** Do you or will you accept contributions of: real property; conservation easements; closely held securities; intellectual property such as patents, trademarks, and copyrights; works of music or art; licenses; royalties; automobiles, boats, planes, or other vehicles; or collectibles of any type? If "Yes," describe each type of contribution, any conditions imposed by the donor on the contribution, and any agreements with the donor regarding the contribution.  **Yes**  **No**
- 
- 12a** Do you or will you operate in a **foreign country or countries**? If "Yes," answer lines 12b through 12d. If "No," go to line 13a.  **Yes**  **No**
- b** Name the foreign countries and regions within the countries in which you operate.
- c** Describe your operations in each country and region in which you operate.
- d** Describe how your operations in each country and region further your exempt purposes.
- 
- 13a** Do you or will you make grants, loans, or other distributions to organization(s)? If "Yes," answer lines 13b through 13g. If "No," go to line 14a.  **Yes**  **No**
- b** Describe how your grants, loans, or other distributions to organizations further your exempt purposes.
- c** Do you have written contracts with each of these organizations? If "Yes," attach a copy of each contract.  **Yes**  **No**
- d** Identify each recipient organization and any **relationship** between you and the recipient organization.
- e** Describe the records you keep with respect to the grants, loans, or other distributions you make.
- f** Describe your selection process, including whether you do any of the following:
- (i)** Do you require an application form? If "Yes," attach a copy of the form.  **Yes**  **No**
- (ii)** Do you require a grant proposal? If "Yes," describe whether the grant proposal specifies your responsibilities and those of the grantee, obligates the grantee to use the grant funds only for the purposes for which the grant was made, provides for periodic written reports concerning the use of grant funds, requires a final written report and an accounting of how grant funds were used, and acknowledges your authority to withhold and/or recover grant funds in case such funds are, or appear to be, misused.  **Yes**  **No**
- g** Describe your procedures for oversight of distributions that assure you the resources are used to further your exempt purposes, including whether you require periodic and final reports on the use of resources.
- 
- 14a** Do you or will you make grants, loans, or other distributions to foreign organizations? If "Yes," answer lines 14b through 14f. If "No," go to line 15.  **Yes**  **No**
- b** Provide the name of each foreign organization, the country and regions within a country in which each foreign organization operates, and describe any relationship you have with each foreign organization.
- c** Does any foreign organization listed in line 14b accept contributions earmarked for a specific country or specific organization? If "Yes," list all earmarked organizations or countries.  **Yes**  **No**
- d** Do your contributors know that you have ultimate authority to use contributions made to you at your discretion for purposes consistent with your exempt purposes? If "Yes," describe how you relay this information to contributors.  **Yes**  **No**
- e** Do you or will you make pre-grant inquiries about the recipient organization? If "Yes," describe these inquiries, including whether you inquire about the recipient's financial status, its tax-exempt status under the Internal Revenue Code, its ability to accomplish the purpose for which the resources are provided, and other relevant information.  **Yes**  **No**
- f** Do you or will you use any additional procedures to ensure that your distributions to foreign organizations are used in furtherance of your exempt purposes? If "Yes," describe these procedures, including site visits by your employees or compliance checks by impartial experts, to verify that grant funds are being used appropriately.  **Yes**  **No**

**Part VIII** Your Specific Activities (Continued)

- |           |  |   |
|-----------|--|---|
| <b>15</b> | Do you have a <b>close connection</b> with any organizations? If "Yes," explain.   | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| <b>16</b> | Are you applying for exemption as a <b>cooperative hospital service organization</b> under section 501(e)? If "Yes," explain.  | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| <b>17</b> | Are you applying for exemption as a <b>cooperative service organization of operating educational organizations</b> under section 501(f)? If "Yes," explain.  | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| <b>18</b> | Are you applying for exemption as a <b>charitable risk pool</b> under section 501(n)? If "Yes," explain.   | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| <b>19</b> | Do you or will you operate a <b>school</b> ? If "Yes," complete Schedule B. Answer "Yes," whether you operate a school as your main function or as a secondary activity.   | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| <b>20</b> | Is your main function to provide <b>hospital or medical care</b> ? If "Yes," complete Schedule C.  | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| <b>21</b> | Do you or will you provide <b>low-income housing</b> or housing for the <b>elderly or handicapped</b> ? If "Yes," complete Schedule F.   | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| <b>22</b> | Do you or will you provide scholarships, fellowships, educational loans, or other educational grants to individuals, including grants for travel, study, or other similar purposes? If "Yes," complete Schedule H. | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

**Note:** Private foundations may use Schedule H to request advance approval of individual grant procedures.

**Part IX Financial Data**

For purposes of this schedule, years in existence refer to completed tax years. If in existence 4 or more years, complete the schedule for the most recent 4 tax years. If in existence more than 1 year but less than 4 years, complete the statements for each year in existence and provide projections of your likely revenues and expenses based on a reasonable and good faith estimate of your future finances for a total of 3 years of financial information. If in existence less than 1 year, provide projections of your likely revenues and expenses for the current year and the 2 following years, based on a reasonable and good faith estimate of your future finances for a total of 3 years of financial information. (See instructions.)

**A. Statement of Revenues and Expenses**

Type of revenue or expense	Current tax year	3 prior tax years or 2 succeeding tax years			(e) Provide Total for (a) through (d)	
	(a) From <u>01/01/11</u> To <u>12/31/11</u>	(b) From <u>01/01/12</u> To <u>12/31/12</u>	(c) From <u>01/01/13</u> To <u>12/31/13</u>	(d) From <u>01/01/14</u> To <u>12/31/14</u>		
Revenues	<b>1</b> Gifts, grants, and contributions received (do not include unusual grants)	50,000	60,000	39,000	70,000	219,000
	<b>2</b> Membership fees received	-	-	-	-	-
	<b>3</b> Gross investment income	-	-	-	-	-
	<b>4</b> Net unrelated business income	-	-	-	-	-
	<b>5</b> Taxes levied for your benefit	-	-	-	-	-
	<b>6</b> Value of services or facilities furnished by a governmental unit without charge (not including the value of services generally furnished to the public without charge)	-	-	-	-	-
	<b>7</b> Any revenue not otherwise listed above or in lines 9-12 below (attach an itemized list)	7,000	20,000	15,000	25,000	67,000
	<b>8</b> Total of lines 1 through 7	57,000	80,000	54,000	95,000	286,000
	<b>9</b> Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to your exempt purposes (attach itemized list)	-	-	-	-	-
	<b>10</b> Total of lines 8 and 9	57,000	80,000	54,000	95,000	286,000
	<b>11</b> Net gain or loss on sale of capital assets (attach schedule and see instructions)	-	-	-	-	-
	<b>12</b> Unusual grants	-	-	-	-	-
	<b>13</b> Total Revenue Add lines 10 through 12	57,000	80,000	54,000	95,000	286,000
Expenses	<b>14</b> Fundraising expenses	11,500	9,500	12,000	11,000	
	<b>15</b> Contributions, gifts, grants, and similar amounts paid out (attach an itemized list)	-	-	-	-	
	<b>16</b> Disbursements to or for the benefit of members (attach an itemized list)	-	-	-	-	
	<b>17</b> Compensation of officers, directors, and trustees	-	-	-	-	
	<b>18</b> Other salaries and wages	-	-	-	-	
	<b>19</b> Interest expense	-	-	-	-	
	<b>20</b> Occupancy (rent, utilities, etc.)	-	-	-	-	
	<b>21</b> Depreciation and depletion	-	-	-	-	
	<b>22</b> Professional fees	5,200	3,200	3,500	3,000	
	<b>23</b> Any expense not otherwise classified, such as program services (attach itemized list)	36,050	89,200	41,150	79,150	
	<b>24</b> Total Expenses Add lines 14 through 23	52,750	101,700	56,650	93,150	

**Part IX Financial Data (Continued)**

**B. Balance Sheet (for your most recently completed tax year)**

Year End: **6/30/11**

<b>Assets</b>		(Whole dollars)
1	Cash . . . . .	18,000
2	Accounts receivable, net . . . . .	-
3	Inventories . . . . .	-
4	Bonds and notes receivable (attach an itemized list) . . . . .	-
5	Corporate stocks (attach an itemized list) . . . . .	-
6	Loans receivable (attach an itemized list) . . . . .	-
7	Other investments (attach an itemized list) . . . . .	-
8	Depreciable and depletable assets (attach an itemized list) . . . . .	-
9	Land . . . . .	-
10	Other assets (attach an itemized list) . . . . .	-
11	<b>Total Assets (add lines 1 through 10)</b> . . . . .	<b>18,000</b>
<b>Liabilities</b>		
12	Accounts payable . . . . .	-
13	Contributions, gifts, grants, etc. payable . . . . .	-
14	Mortgages and notes payable (attach an itemized list) . . . . .	-
15	Other liabilities (attach an itemized list) . . . . .	-
16	<b>Total Liabilities (add lines 12 through 15)</b> . . . . .	-
<b>Fund Balances or Net Assets</b>		
17	<b>Total fund balances or net assets</b> . . . . .	<b>18,000</b>
18	<b>Total Liabilities and Fund Balances or Net Assets (add lines 16 and 17)</b> . . . . .	<b>18,000</b>

19 Have there been any substantial changes in your assets or liabilities since the end of the period shown above? If "Yes," explain.  Yes  No

**Part X Public Charity Status**

Part X is designed to classify you as an organization that is either a **private foundation** or a **public charity**. Public charity status is a more favorable tax status than private foundation status. If you are a private foundation, Part X is designed to further determine whether you are a **private operating foundation**. (See instructions.)

1a Are you a private foundation? If "Yes," go to line 1b. If "No," go to line 5 and proceed as instructed.  Yes  No  
If you are unsure, see the instructions.

b As a private foundation, section 508(e) requires special provisions in your organizing document in addition to those that apply to all organizations described in section 501(c)(3). Check the box to confirm that your organizing document meets this requirement, whether by express provision or by reliance on operation of state law. Attach a statement that describes specifically where your organizing document meets this requirement, such as a reference to a particular article or section in your organizing document or by operation of state law. See the instructions, including Appendix B, for information about the special provisions that need to be contained in your organizing document. Go to line 2.

2 Are you a private operating foundation? To be a private operating foundation you must engage directly in the active conduct of charitable, religious, educational, and similar activities, as opposed to indirectly carrying out these activities by providing grants to individuals or other organizations. If "Yes," go to line 3. If "No," go to the signature section of Part XI.  Yes  No

3 Have you existed for one or more years? If "Yes," attach financial information showing that you are a private operating foundation; go to the signature section of Part XI. If "No," continue to line 4.  Yes  No

4 Have you attached either (1) an affidavit or opinion of counsel, (including a written affidavit or opinion from a certified public accountant or accounting firm with expertise regarding this tax law matter), that sets forth facts concerning your operations and support to demonstrate that you are likely to satisfy the requirements to be classified as a private operating foundation; or (2) a statement describing your proposed operations as a private operating foundation?  Yes  No

5 If you answered "No" to line 1a, indicate the type of public charity status you are requesting by checking one of the choices below. You may check only one box.

The organization is not a private foundation because it is:

- a 509(a)(1) and 170(b)(1)(A)(i)—a church or a convention or association of churches. Complete and attach Schedule A.
- b 509(a)(1) and 170(b)(1)(A)(ii)—a school. Complete and attach Schedule B.
- c 509(a)(1) and 170(b)(1)(A)(iii)—a hospital, a cooperative hospital service organization, or a medical research organization operated in conjunction with a hospital. Complete and attach Schedule C.
- d 509(a)(3)—an organization supporting either one or more organizations described in line 5a through c, f, g, or h or a publicly supported section 501(c)(4), (5), or (6) organization. Complete and attach Schedule D.



**Part X Public Charity Status (Continued)**

- e 509(a)(4)—an organization organized and operated exclusively for testing for public safety.
- f 509(a)(1) and 170(b)(1)(A)(iv)—an organization operated for the benefit of a college or university that is owned or operated by a governmental unit.
- g 509(a)(1) and 170(b)(1)(A)(vi)—an organization that receives a substantial part of its financial support in the form of contributions from publicly supported organizations, from a governmental unit, or from the general public.
- h 509(a)(2)—an organization that normally receives not more than one-third of its financial support from gross investment income and receives more than one-third of its financial support from contributions, membership fees, and gross receipts from activities related to its exempt functions (subject to certain exceptions).
- i A publicly supported organization, but unsure if it is described in 5g or 5h. The organization would like the IRS to decide the correct status.

**6** If you checked box g, h, or i in question 5 above, you must request either an **advance** or a **definitive ruling** by selecting one of the boxes below. Refer to the instructions to determine which type of ruling you are eligible to receive.

- a **Request for Advance Ruling:** By checking this box and signing the consent, pursuant to section 6501(c)(4) of the Code you request an advance ruling and agree to extend the statute of limitations on the assessment of excise tax under section 4940 of the Code. The tax will apply only if you do not establish public support status at the end of the 5-year advance ruling period. The assessment period will be extended for the 5 advance ruling years to 8 years, 4 months, and 15 days beyond the end of the first year. You have the right to refuse or limit the extension to a mutually agreed-upon period of time or issue(s). Publication 1035, *Extending the Tax Assessment Period*, provides a more detailed explanation of your rights and the consequences of the choices you make. You may obtain Publication 1035 free of charge from the IRS web site at [www.irs.gov](http://www.irs.gov) or by calling toll-free 1-800-829-3676. Signing this consent will not deprive you of any appeal rights to which you would otherwise be entitled. If you decide not to extend the statute of limitations, you are not eligible for an advance ruling.

**Consent Fixing Period of Limitations Upon Assessment of Tax Under Section 4940 of the Internal Revenue Code**

For Organization

..... (Date)  
 (Signature of Officer, Director, Trustee, or other authorized official) (Type or print name of signer)  
 ..... (Type or print title or authority of signer)

For IRS Use Only

..... (Date)  
 IRS Director, Exempt Organizations

- b **Request for Definitive Ruling:** Check this box if you have completed one tax year of at least 8 full months and you are requesting a definitive ruling. To confirm your public support status, answer line 6b(i) if you checked box g in line 5 above. Answer line 6b(ii) if you checked box h in line 5 above. If you checked box i in line 5 above, answer both lines 6b(i) and (ii).
- (i) (a) Enter 2% of line 8, column (e) on Part IX-A. Statement of Revenues and Expenses. \_\_\_\_\_
- (b) Attach a list showing the name and amount contributed by each person, company, or organization whose gifts totaled more than the 2% amount. If the answer is "None," check this box.
- (ii) (a) For each year amounts are included on lines 1, 2, and 9 of Part IX-A. Statement of Revenues and Expenses, attach a list showing the name of and amount received from each **disqualified person**. If the answer is "None," check this box.
- (b) For each year amounts are included on line 9 of Part IX-A. Statement of Revenues and Expenses, attach a list showing the name of and amount received from each payer, other than a disqualified person, whose payments were more than the larger of (1) 1% of line 10, Part IX-A. Statement of Revenues and Expenses, or (2) \$5,000. If the answer is "None," check this box.

**7** Did you receive any unusual grants during any of the years shown on Part IX-A. Statement of Revenues and Expenses? If "Yes," attach a list including the name of the contributor, the date and amount of the grant, a brief description of the grant, and explain why it is unusual.  Yes  No

**Standish Foundation for Children**  
**Federal Identification Number 45-2575814**

Index of Attachments to Form 1023, Application for Tax Exempt Status

Supplement to response to Part I, Item 7 (with Form 2842)

Supplement to response to Part II, Item 1 (with Certificate of Organization)

Supplement to response to Part II, Item 5 (with Bylaws)

Supplement to response to Part IV

Supplement to response to Part V, Item 1a and 3a

Supplement to response to Part V, Item 5a (with Conflicts of Interest Policy)

Supplement to response to Part VI, Items 1a and b

Supplement to response to Part VIII, Item 4a

Supplement to response to Part VIII, Item 4d

Supplement to response to Part VIII, Item 11

Supplement to response to Part VIII, Items 12b, c and d

Supplement to response to Part IXA, Item 7

Supplement to response to Part IXA, Item 23

Standish Foundation for Children  
Federal Identification Number 45-2575814  
Form 1023, Application for Tax Exempt Status  
Part I, Item 7 - Authorized Representative's name and address

The Applicant's authorized representative is:

Andrew S. White  
1010 MoPac Circle, Suite 201  
Austin, Texas 78746

A completed Form 2848, *Power of Attorney and Declaration of Representative*, is included with this application.

**Power of Attorney  
 and Declaration of Representative**

▶ Type or print. ▶ See the separate instructions.

OMB No. 1545-0150  
 For IRS Use Only  
 Received by: \_\_\_\_\_  
 Name \_\_\_\_\_  
 Telephone \_\_\_\_\_  
 Function \_\_\_\_\_  
 Date \_\_\_\_/\_\_\_\_/\_\_\_\_

**Part I Power of Attorney**

**Caution: Form 2848 will not be honored for any purpose other than representation before the IRS.**

**1 Taxpayer information.** Taxpayer(s) must sign and date this form on page 2, line 9.

Taxpayer name(s) and address  Standish Foundation for Children 900 RR 620 South, C101-103 Austin, Texas 78734	Social security number(s) : : : :	Employer identification number  45 : 2575814
	Daytime telephone number ( )	Plan number (if applicable)

hereby appoint(s) the following representative(s) as attorney(s)-in-fact:

**2 Representative(s) must sign and date this form on page 2, Part II.**

Name and address  Andrew S. White P.O. Box 49612 Austin, Texas 78765	CAF No. .... n/a Telephone No. .... 512-484-0236 Fax No. .... 512-441-1501 Check if new: Address <input type="checkbox"/> Telephone No. <input type="checkbox"/> Fax No. <input type="checkbox"/>
Name and address	CAF No. .... Telephone No. .... Fax No. .... Check if new: Address <input type="checkbox"/> Telephone No. <input type="checkbox"/> Fax No. <input type="checkbox"/>
Name and address	CAF No. .... Telephone No. .... Fax No. .... Check if new: Address <input type="checkbox"/> Telephone No. <input type="checkbox"/> Fax No. <input type="checkbox"/>

to represent the taxpayer(s) before the Internal Revenue Service for the following tax matters:

**3 Tax matters**

Type of Tax (Income, Employment, Excise, etc.) or Civil Penalty (see the instructions for line 3)	Tax Form Number (1040, 941, 720, etc.)	Year(s) or Period(s) (see the instructions for line 3)
Income - determination of exempt status under	n/a	n/a
IRC Section 501(c)(3)		

**4 Specific use not recorded on Centralized Authorization File (CAF).** If the power of attorney is for a specific use not recorded on CAF, check this box. See the instructions for Line 4. **Specific Uses Not Recorded on CAF**

**5 Acts authorized.** The representatives are authorized to receive and inspect confidential tax information and to perform any and all acts that I (we) can perform with respect to the tax matters described on line 3, for example, the authority to sign any agreements, consents, or other documents. The authority does not include the power to receive refund checks (see line 6 below), the power to substitute another representative or add additional representatives, the power to sign certain returns, or the power to execute a request for disclosure of tax returns or return information to a third party. See the line 5 instructions for more information.

**Exceptions.** An unenrolled return preparer cannot sign any document for a taxpayer and may only represent taxpayers in limited situations. See Unenrolled Return Preparer on page 1 of the instructions. An enrolled actuary may only represent taxpayers to the extent provided in section 10.3(d) of Treasury Department Circular No. 230 (Circular 230). An enrolled retirement plan administrator may only represent taxpayers to the extent provided in section 10.3(e) of Circular 230. See the line 5 instructions for restrictions on tax matters partners. In most cases, the student practitioner's (levels k and l) authority is limited (for example, they may only practice under the supervision of another practitioner).

List any specific additions or deletions to the acts otherwise authorized in this power of attorney: **Power to submit request for determination of tax exempt status and to receive and respond to all correspondence, inquiries or other matters related thereto.**

**6 Receipt of refund checks.** If you want to authorize a representative named on line 2 to receive, **BUT NOT TO ENDORSE OR CASH**, refund checks, initial here \_\_\_\_\_ and list the name of that representative below.

Name of representative to receive refund check(s) ▶

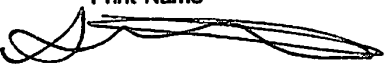
- 7 Notices and communications.** Original notices and other written communications will be sent to you and a copy to the first representative listed on line 2.
- a If you also want the second representative listed to receive a copy of notices and communications, check this box
- b If you do not want any notices or communications sent to your representative(s), check this box

- 8 Retention/revocation of prior power(s) of attorney.** The filing of this power of attorney automatically revokes all earlier power(s) of attorney on file with the Internal Revenue Service for the same tax matters and years or periods covered by this document. If you do not want to revoke a prior power of attorney, check here.

**YOU MUST ATTACH A COPY OF ANY POWER OF ATTORNEY YOU WANT TO REMAIN IN EFFECT.**

- 9 Signature of taxpayer(s).** If a tax matter concerns a joint return, both husband and wife must sign if joint representation is requested, otherwise, see the instructions. If signed by a corporate officer, partner, guardian, tax matters partner, executor, receiver, administrator, or trustee on behalf of the taxpayer, I certify that I have the authority to execute this form on behalf of the taxpayer.

**▶ IF NOT SIGNED AND DATED, THIS POWER OF ATTORNEY WILL BE RETURNED.**

Signature		Date	Title (if applicable)
 Signature	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> PIN Number	7/29/11 Date	Standish Foundation for Children Print name of taxpayer from line 1 if other than individual Executive Director Title (if applicable)
Andrea Standish Print Name	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> PIN Number		

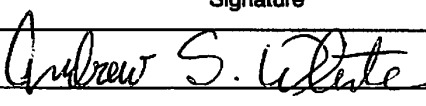
**Part II Declaration of Representative**

**Caution:** Students with a special order to represent taxpayers in qualified Low Income Taxpayer Clinics or the Student Tax Clinic Program (levels k and l), see the instructions for Part II.

Under penalties of perjury, I declare that:

- I am not currently under suspension or disbarment from practice before the Internal Revenue Service;
- I am aware of regulations contained in Circular 230 (31 CFR, Part 10), as amended, concerning the practice of attorneys, certified public accountants, enrolled agents, enrolled actuaries, and others;
- I am authorized to represent the taxpayer(s) identified in Part I for the tax matter(s) specified there; and
- I am one of the following:
  - a Attorney—a member in good standing of the bar of the highest court of the jurisdiction shown below.
  - b Certified Public Accountant—duly qualified to practice as a certified public accountant in the jurisdiction shown below.
  - c Enrolled Agent—enrolled as an agent under the requirements of Circular 230.
  - d Officer—a bona fide officer of the taxpayer's organization.
  - e Full-Time Employee—a full-time employee of the taxpayer.
  - f Family Member—a member of the taxpayer's immediate family (for example, spouse, parent, child, brother, or sister).
  - g Enrolled Actuary—enrolled as an actuary by the Joint Board for the Enrollment of Actuaries under 29 U.S.C. 1242 (the authority to practice before the Internal Revenue Service is limited by section 10.3(d) of Circular 230).
  - h Unenrolled Return Preparer—the authority to practice before the Internal Revenue Service is limited by Circular 230, section 10.7(c)(1)(viii). You must have prepared the return in question and the return must be under examination by the IRS. See Unenrolled Return Preparer on page 1 of the instructions.
  - k Student Attorney—student who receives permission to practice before the IRS by virtue of their status as a law student under section 10.7(d) of Circular 230.
  - l Student CPA—student who receives permission to practice before the IRS by virtue of their status as a CPA student under section 10.7(d) of Circular 230.
  - r Enrolled Retirement Plan Agent—enrolled as a retirement plan agent under the requirements of Circular 230 (the authority to practice before the Internal Revenue Service is limited by section 10.3(e)).

**▶ IF THIS DECLARATION OF REPRESENTATIVE IS NOT SIGNED AND DATED, THE POWER OF ATTORNEY WILL BE RETURNED. See the Part II instructions.**

Designation—Insert above letter (a–r)	Jurisdiction (state) or identification	Signature	Date
a	Texas		7/29/11

**Standish Foundation for Children  
Federal Identification Number 45-2575814  
Form 1023, Application for Tax Exempt Status  
Part II, Item 1 - Copy of articles of incorporation**

**Included with this application**

Corporations Section  
P.O.Box 13697  
Austin, Texas 78711-3697



Hope Andrade  
Secretary of State

## Office of the Secretary of State

### CERTIFICATE OF FILING OF

Standish Foundation for Children  
801322331

The undersigned, as Secretary of State of Texas, hereby certifies that a Restated Certificate of Formation for the above named domestic nonprofit corporation has been received in this office and has been found to conform to the applicable provisions of law.

ACCORDINGLY, the undersigned, as Secretary of State, and by virtue of the authority vested in the secretary by law, hereby issues this certificate evidencing filing effective on the date shown below.

Dated: 07/27/2011

Effective: 07/27/2011



A handwritten signature in black ink, appearing to read "Hope Andrade".

Hope Andrade  
Secretary of State

**Form 414**  
**(Revised 05/11)**

Submit in duplicate to:  
Secretary of State  
P.O. Box 13697  
Austin, TX 78711-3697  
512 463-5555  
FAX: 512/463-5709  
**Filing Fee: See instructions**



**Restated Certificate of  
Formation  
With New Amendments**

This space reserved for office use.

**FILED**  
**In the Office of the**  
**Secretary of State of Texas**  
**JUL 27 2011**  
**Corporations Section**

**Entity Information**

The name of the filing entity is:

**Standish Foundation for Children**

State the name of the entity as currently shown in the records of the secretary of state. If the amendment changes the name of the entity, state the old name and not the new name.

The filing entity is a: (Select the appropriate entity type below.)

- |   |   |
|---|---|
| <input type="checkbox"/> For-profit Corporation           | <input type="checkbox"/> Professional Corporation               |
| <input checked="" type="checkbox"/> Nonprofit Corporation | <input type="checkbox"/> Professional Limited Liability Company |
| <input type="checkbox"/> Cooperative Association          | <input type="checkbox"/> Professional Association               |
| <input type="checkbox"/> Limited Liability Company        | <input type="checkbox"/> Limited Partnership                    |

The file number issued to the filing entity by the secretary of state is: 801322331

The date of formation of the filing entity is: September 22, 2010

**Amendments to Certificate of Formation**

**This restated certificate of formation makes new amendments to the certificate of formation. Provided below is an identification by reference or description of each added, altered, or deleted provision.**

**Identification of New Amendments**

(Indicate the changes that have been made by checking the appropriate box or boxes.)

- The entity name has been amended.
- The registered agent name or registered office address has changed.
- The purpose of the entity has been amended.
- The period of duration of the entity has been amended.
- A general partner has withdrawn or been admitted to the limited partnership.



**Identification of New Amendments** (continued)

(Indicate the changes that have been made by checking and completing the appropriate box or boxes.)

**Other changes.** The certificate of formation has been amended as follows:

**Add** Each of the following provisions is added to the certificate of formation. The identification or reference of each added provision is set forth below. The full text of each added provision is contained in the amended and restated certificate of formation attached hereto.

**Alter** The following identified provisions of the certificate of formation are amended. The full text of each amended provision is contained in the amended and restated certificate of formation attached hereto.

Article Three - to set the size of the board and identify initial directors

Article Four - to contain a reference to the Texas Business Organizations Code

Article Five - to replace statements of specific activities with statements regarding purposes consistent with Section 501(c)(3) of the Internal Revenue Code

**Delete** Each of the provisions identified below are deleted from the certificate of formation.

**Statement of Approval**

Each new amendment has been made in accordance with the provisions of the Texas Business Organizations Code. The amendments to the certificate of formation and the restated certificate of formation have been approved in the manner required by the Code and by the governing documents of the entity.

**Required Statements**

The restated certificate of formation, which is attached to this form, accurately states the text of the certificate of formation being restated and each amendment to the certificate of formation being restated that is in effect, and as further amended by the restated certificate of formation. The attached restated certificate of formation does not contain any other change in the certificate of formation being restated except for the information permitted to be omitted by the provisions of the Texas Business Organizations Code applicable to the filing entity.

Attach the text of the amended and restated certificate of formation to the completed statement form. Identify the attachment as "Restated Certificate of Formation of [Name of Entity]."

Printed or typed name of authorized person (see instructions)  
Andrea Stansh, Executive Director

Signature of authorized person  


By:

Date: July 21, 2011

The undersigned affirms that the person designated as registered agent in the restated certificate of formation has consented to the appointment. The undersigned signs this document subject to the penalties imposed by law for the submission of a materially false or fraudulent instrument and certifies under penalty of perjury that the undersigned is authorized under the provisions of law governing the entity to execute the filing instrument.

**Execution**

[Empty rectangular box for additional information]

The following event or fact will cause the document to take effect in the manner described below:

- A.  This document becomes effective when the document is filed by the secretary of state.
- B.  This document becomes effective at a later date, which is not more than ninety (90) days from the date of signing. The delayed effective date is: \_\_\_\_\_
- C.  This document takes effect upon the occurrence of the future event or fact, other than the passage of time. The 90<sup>th</sup> day after the date of signing is: \_\_\_\_\_

**Effectiveness of Filing (Select either A, B, or C)**

# **AMENDED AND RESTATED CERTIFICATE OF FORMATION OF STANDISH FOUNDATION FOR CHILDREN**

## **ARTICLE 1 – ENTITY NAME AND TYPE**

The filing entity being formed is a non-profit corporation. The name of the entity is Standish Foundation for Children (the "Corporation").

## **ARTICLE 2 - REGISTERED AGENT AND REGISTERED OFFICE**

The initial registered agent is an individual resident in the state of Texas. The name of its initial registered agent is Andrea M. Standish. The business address of the registered agent and the registered office address of the Corporation is c/o State Farm, 3700 RR 620 S., Austin, TX 78738.

## **ARTICLE 3 - MANAGEMENT**

The management of the affairs of the Corporation is vested in the board of directors (the "Board of Directors"). The number of directors constituting the initial Board of Directors (collectively, the "Directors" and singularly, a "Director") shall be five. The names and addresses of the persons who are to serve as Directors of the Corporation until their successors are elected and qualified are as follows:

**Cheri Oliveri**  
401 Bella Montagna Circle  
Austin, TX 78734

**Philip Diehl**  
4514 Autumnleaf Hollow  
Austin, TX 78731

**Carry Welch**  
c/o State Farm, 3700 RR 620 S.  
Austin, TX 78738

**Andrea Standish**  
c/o State Farm, 3700 RR 620 S.  
Austin, TX 78738

## **ARTICLE 4 - MEMBERS**

The Corporation shall have no "Members", as that term is used in the Texas Business Organizations Code, as now enacted or as the same may be amended (the "TBOC").

## **ARTICLE 5 - PURPOSE**

The Corporation is organized and shall be operated and administered exclusively for religious, charitable, scientific, testing for public safety, literary or educational purposes, and the definition of such purposes shall be the same as the definition of such purposes used in connection with Section 501(c)(3) of the Internal Revenue Code of 1986 or corresponding provisions of subsequent federal tax laws (the "Code").

In pursuit of the foregoing purposes, the Corporation may undertake any other act or action permitted by the TBOC, consistent, however, in all respects with activities permitted of charitable organizations recognized as exempt from federal taxation under Section 501(c)(3) of the Code.

Subject to the foregoing, the Corporation shall be a separate legal entity with sole authority and responsibility for its own policies, procedures, personnel, books and accounts. Absent an express written agreement to the contrary duly authorized, executed and delivered by the party intending to be bound thereby, no member of the Board of Directors, any entity or organization entitled to appoint a member of the Board of Directors nor any officer, employee or agent of any member of the Board of Directors shall be liable for the obligations, liabilities, acts or omissions of the Corporation, members of its Board of Directors, officers, employees or agents.

No part of the net earnings of the Corporation shall inure to the benefit of, or be distributable to, its members, trustees, officers or other private persons, except that the organization shall be authorized and empowered to pay reasonable compensation for services rendered and to make payments and distributions in furtherance of the purposes set forth in the purpose clause hereof. No substantial part of the activities of the organization shall be the carrying on of propaganda, or otherwise attempting to influence legislation, and the organization shall not participate in, or intervene in (including the publishing or distribution of statements) any political campaign on behalf of any candidate for public office. Notwithstanding any other provision of this document, the organization shall not carry on any other activities not permitted to be carried on (a) by an organization exempt from federal income tax under section 501(c)(3) of the Code, or (b) by an organization, contributions to which are deductible under section 170 (c)(1) or (2) of the Code.

In the event of the dissolution of the Corporation, after payment of or provision for all liabilities of the Corporation, all of the assets of the Corporation shall be distributed to, or its assets shall be sold and the proceeds distributed to, another organization organized and operating for the same or similar purpose for which the Corporation is organized and operating, or to one or more corporations, funds or foundations organized and operating exclusively for charitable, scientific, literary or educational purposes, which shall be selected by the Board of Directors of the Corporation; provided, however, that any such recipient organization or organizations shall at that time qualify as exempt from taxation under the provisions of Section 501(c)(3) of the Code or be described by section 170(c)(1) or (2) of the Code.

#### ARTICLE 6 - ORGANIZER

The name and address of the organizer is:

Andrea Standish  
c/o State Farm  
3700 RR 620 S.  
Austin, Texas 78738

The undersigned affirms that the person designated as registered agent has consented to the appointment. The undersigned signs this document subject to penalties imposed by law for the submission of a materially false or fraudulent instrument and certifies under penalty of perjury that he is authorized to execute the filing instrument.

Dated: 6/20, 2011.

Standish Foundation for Children

By: 

Name/Title: ANDREA STANDISH, EXECUTIVE DIRECTOR

**Standish Foundation for Children  
Federal Identification Number 45-2575814  
Form 1023, Application for Tax Exempt Status  
Part II, Item 5 - Copy of bylaws**

**Included with this application**

**By-Laws  
of the  
Standish Foundation for Children**

**ARTICLE 1: NAME PURPOSE, OFFICES AND AGENT**

1.1 **NAME.** The name of this corporation shall be the **Standish Foundation for Children** (hereafter referred to as the "Corporation").

1.2 **PURPOSE.**

a. **General Purpose.** This Corporation is organized exclusively for charitable and educational purposes within the meaning of Section 501(c)(3) of the Internal Revenue Code of 1986, as amended (the "Internal Revenue Code"), and to carry on other lawful business and activities which are necessary and proper for the accomplishment of such charitable and educational purposes which are incidental to the powers herein named or which enhance the goals of the Corporation.

b. **Specified Purposes.** The mission of the Corporation is to provide education and conduct research, training, and service in the area of improving healthcare services for children.

c. **Restrictions.** In all events and under all circumstances, the following provisions shall apply:

i. The Corporation shall not devote more than an insubstantial part of its activities to attempting to influence legislation (except as provided in Section 501(h) of the Internal Revenue Code), or participate in or intervene in (including the publishing or distribution of statements) any political campaign on behalf of any or in opposition to any candidate for public office.

ii. No part of the net earnings of the Corporation shall inure to the benefit of, or be distributable to, its directors, officers, or other private persons, except that the Corporation shall be authorized and empowered to pay reasonable compensation for services rendered and to make payments and distributions in furtherance of the purposes set forth in Section 1.2. Nothing herein shall preclude directors or officers to also serve as employees of the Corporation.

iii. Notwithstanding any other provisions of these Bylaws, the Corporation shall not carry on any other activities not permitted to be carried on:

(A) By a corporation exempt from federal income tax under Section 501(c)(3) of the Internal Revenue Code (or the corresponding provision of any future United States internal revenue law); or

(B) By a corporation contributions to which are deductible under Section 170(c)(2) of the Internal Revenue Code (or the corresponding provision of any future United States internal revenue law).

d. Disposition on Dissolution. Upon the dissolution of the Corporation, the Board of Directors shall, after paying or making provision for the payment of all of the liabilities of the Corporation, dispose of all of the assets of the Corporation in such a manner, or to such organization or organizations organized or operated exclusively for charitable, educational, religious or scientific purposes as shall at the time qualified as an exempt organization or organizations under Section 501(c)(3) of the Internal Revenue Code or the corresponding provision of any future United States internal revenue law, as the Board of Directors shall determine.

1.3 **PRINCIPAL OFFICE.** The principal office shall be located in Austin, Texas. The Corporation may have offices located at such other places as the board of directors may from time to time determine or as the activities of the Corporation may require.

1.4 **REGISTERED OFFICE.** The registered office of the Corporation required by the Texas Business Organizations Code will be maintained in the State of Texas, but need not be identical with the principal office, and the address of the registered office may be changed from time to time by the Board of Directors.

1.5 **REGISTERED AGENT.** The registered agent of the Corporation required by the Texas Business Organizations Code, shall be an individual resident of the State of Texas. The registered agent of the Corporation may be changed from time to time by the Board of Directors.

## **ARTICLE 2: DIRECTORS**

2.1 **GENERAL POWERS.** Except as provided by applicable law, the Certificate of Formation or in these Bylaws, the direction and management of the affairs of the Corporation and the control and disposition of its properties and funds shall be vested in a board of directors (the "Board"). The Board may delegate the management of the day-to-day operation of the business of the Corporation to a management company or other person(s), provided that the business, property and affairs of the Corporation shall be managed and all corporate powers shall be exercised under the ultimate direction of the Board. The Board may make appropriate delegations of authority to the officers of the Corporation, and may authorize one or more additional committees to act on its behalf under a specific written delegation of authority. Without limiting the general powers, the Board shall have the following powers to:

a. Select and remove all officers, agents, and the Executive Director of the Corporation, and to prescribe such duties and powers for them as may not be inconsistent with law, the Certificate of Formation or these By-laws, or other existing policies, and to require of them service in good faith;

b. Solicit, accept, and collect pledges, donations, contributions in cash or property, real, personal, and mixed, and to take by will or by gift, in trust or absolutely, cash or property, subject to any terms, conditions or limitations which may be contained in the instrument by which said cash or property is acquired;

c. Acquire by purchase, lease, contract or otherwise, any property, real, personal or mixed;

d. Borrow money and execute notes, mortgages, and other contracts;

e. Have and maintain one or more offices and to conduct any or all of its operations and business therefrom;

f. Do any or all things herein set forth as principal, agent, trustee or otherwise, along or in company with others; and

g. Do any and all such further acts and things and to exercise any and all such further powers as may be necessary, incidental, conducive, appropriate or desirable for the accomplishment or carrying out or attainment of all or any of the objectives or purposes enumerated in the Certificate of Formation; and to have and to exercise all the powers conferred by the laws of the State of Texas upon non-profit corporations, as such laws are now in effect or may at any time hereafter be enacted or amended.

**2.2 MEMBERSHIP; ELECTIONS.** The membership of the Board shall consist of a minimum of three (3) voting members and a maximum of ten. The Board may, at its discretion, change the number of board members by amending these By-laws in accordance with Section 10.2 but no decrease shall have the effect of shortening the term of any incumbent director. All members of the Board of this Corporation shall serve without compensation for their service as directors. The annual election of members to the Board shall proceed as follows. From time to time and as appropriate, any member of the Board shall make recommendations to the full Board regarding nominees for election to the Board. The act of a majority of the members of the Board at a meeting at which a quorum is present shall be the act of the Board.

**2.3 ADVISORY BOARDS.** The Board of Directors shall have the right to elect members to one or more Advisory Board(s). Advisory Board members will provide advice and counsel to the Board of Directors but will not be entitled to vote and will not be considered members of the Board of Directors of the Corporation. Such Advisory Board(s) may be designated as the board of directors, committees or such other designations as the Board of Directors may from time to time determine. The members of such Advisory Board(s) may be designated as directors, committee members, or such other designations as the Board of Directors may from time to time determine.

**2.4 TERM OF OFFICE.** The term of office of a director shall be two (2) years. A director may be elected for a total of three (3) consecutive terms of a maximum of six



(6) consecutive years. After a leave of absence of one year, a former director is eligible for re-election. Each director shall hold office until the expiration of his/her term, death, resignation, or removal.

**2.5 RESIGNATION.** Any director may resign at any time by giving written notice to the President or the Board of Directors. Such resignation shall take effect at the time specified therein and, unless otherwise specified therein, the acceptance of such resignation shall not be necessary to make it effective.

**2.6 REMOVAL AUTHORITY.** Directors may be removed from the Board upon two-thirds (2/3) vote at a meeting called expressly and noticed to include that purpose at which there is a quorum present or by resignation tendered in writing by the director to the President. Unless otherwise specified therein, resignation shall take effect upon delivery.

**2.7 VACANCIES.** Any vacancy occurring in the existing Board of Directors and any directorship to be filled by reason of an increase in the number of directors may be filled by the affirmative vote of a majority of the remaining directors. A director elected to fill a vacancy shall be elected for the unexpired term of his/her predecessor in office.

**2.8 ATTENDANCE.** No member of the Board shall be absent without excuse for three consecutive board meetings. A board member so absent will be deemed to have submitted his/her resignation to the board at its next regular meeting.

**2.9 TELEPHONE/ELECTRONIC MEETINGS.** Directors may participate in and hold a meeting of the Board by means of conference telephone or similar communications equipment by means of which all persons participating in the meeting can hear each other, and participation in a meeting pursuant to this Section 2.9 shall constitute presence in person at such meeting, except where a person participates in the meeting for the express purpose of objecting to the transaction of any business on the grounds that the meeting is not lawfully called or convened.

**2.10 ACTION WITHOUT MEETING.** Any action required or permitted to be taken at a meeting of the Board, or any committee thereof, may be taken without a meeting if a consent in writing, setting forth the action so taken, is signed by all the members of the Board, or committee, as the case may be, and such consent shall have the same force and effect as a unanimous vote at a meeting. Such action also may be taken by email, and consent in writing is considered to be met if all members of the Board, or committee, send emails to the Executive Director stating such consent. Such emails shall be sent from an address on record with the Executive Director as the member of the Board's, or committee", email address.

### **ARTICLE 3: BOARD OF DIRECTORS - OFFICERS AND STAFF**

**3.1 GENERALLY.**

a. The BOARD OF DIRECTORS shall have a President and a Secretary, and may have a Vice President, Treasurer and such other officers and assistant officers and agents as the Board of Directors may deem necessary.

b. Officers shall be elected by the Board of Directors on the expiration of an officer's term or whenever a vacancy exists. Officers and agents may be elected by the Board of Directors at any meeting.

c. From time to time and as appropriate, the President shall make recommendations to the full Board of Directors regarding nominees for election as officers. Unless otherwise specified by the Board of Directors at the time of election or appointment, each officer and agent shall serve for two (2) years, ending on December 31 of the calendar year of the effective date of election. Each officer shall serve until the end of his or her term, or, if earlier, his or her death, resignation or removal.

d. Removal. Any officers of the Corporation may be removed at any time by an affirmative vote of a majority of the Board of Directors. The Board of Directors shall meet and elect a new officer to fill the unexpired term of such removed officer.

e. Vacancies. Any vacancy occurring in any office of the Corporation (by death, resignation, removal or otherwise) may be filled by the Board of Directors.

f. Assumption of Duties and Transfer of Records. Each new officer shall assume his or her duties immediately after his or her election, and each outgoing officer shall continue in office until his or her successor is elected and qualified unless earlier removed by the board of directors. Each officer, upon expiration of his or her tenure of office, shall transfer all official records and property of the Corporation then in his or her possession to his or her duly qualified successor in office.

g. Compensation. No salary or other compensation shall be paid any officer of the Corporation, except when specifically provided for by action of the Board of Directors.

### 3.2 DUTIES.

a. President. Is a member of the Board of Directors. Is a partner with the Executive Director in achieving the Corporation's mission. Provides leadership to the Board of Directors, which sets policy and to which the Executive Director is accountable. Helps guide and mediate Board actions with respect to Corporation's priorities, strategic planning and governance concerns. In conjunction with the entire Board, evaluates annually the performance and effectiveness of the Corporation in achieving its mission and helps determine future actions accordingly. Chairs meetings of the Board after developing the agenda with the Executive Director. In consultation with other Board members, appoints chairpersons to committees. Serves ex officio as a member of committees and attends their meetings when invited. Monitors financial planning and

financial reports. Plays a leading role in fundraising activities. Formally evaluates the performance of the Executive Director and informally evaluates the effectiveness of the Board members. Performs other responsibilities in consultation with the Executive Director and as requested by the Board.

b. Vice President. Is a member of the Board of Directors. Performs responsibilities of the President when the President cannot be available. Works closely with the President and Executive Director. Participates closely with the President to develop and implement officer transition plans. Performs other responsibilities in consultation with the Executive Director and as requested by the Board.

c. Treasurer. May be a member of the Board of Directors. Manages finances of the organization. Administrates fiscal matters of the Corporation. Provides annual budget to the board for members' approval. Ensures development and Board review of financial policies and procedures. Performs other responsibilities in consultation with the Executive Director and as requested by the Board.

d. Secretary. Is a member of the Board of Directors. Maintains records of the Board and ensures effective management of Corporation's records. Manages minutes of board meetings. Ensures minutes are distributed to members shortly after each meeting. Is sufficiently familiar with legal documents (articles, by-laws, IRS letters, etc.) and liability issues to note applicability during meetings. Performs other responsibilities in consultation with the Executive Director and as requested by the Board.

e. Executive Director. The Executive Director shall be a voting member of the Board of Directors but shall recuse him/herself on any vote related to their termination, performance evaluation or compensation, if any. The Executive Director is responsible for the overall administrative, fiscal, clinical, and volunteer management of the operations for the Corporation subject to the direction of the Board. The Executive Director shall attend all annual and regular meetings.

f. Other staff members. The Executive Director shall propose and Board shall approve the establishment of such staff positions as the Board shall deem appropriate to carry out the programs, services, and objectives of the Corporation.

#### **ARTICLE 4: MEETINGS**

4.1 **MEETINGS**. The Board of Directors shall meet regularly at such time and place as the Board of Directors shall provide, but not less than annually. No notice shall be required to be given of regular meetings held in accordance with the Board of Directors' schedule for regular meetings. Such other meetings of the Board of Directors shall be called by the President or by a majority of the members of the Board of Directors after three (3) days notice of such meetings, as he or they in his or their discretion, shall

deem necessary. The annual meeting of the Board of Directors shall be held upon the date and at the hour designated by the Board of Directors.

**4.2 WAIVER OF NOTICE.** Attendance by a director at any meeting shall constitute a waiver of notice of such meeting except where a director attends the meeting for the express purpose of objecting to the transaction of any business because the meeting is not called in accordance with these By-laws.

**4.3 QUORUM.** A majority of the number of directors then holding office shall constitute a quorum for the transaction of business at any meeting of the board. Each director shall be entitled to one (1) vote. The directors present at a duly organized meeting at which a quorum was established may continue to transact business until adjournment, notwithstanding the withdrawal of directors to leave less than a quorum.

**4.4 VOTING.** Each voting director shall have one vote. All elections shall be held and all questions decided by a simple majority vote of the voting directors present except as otherwise provided in these By-laws. Any voting member with a possible "conflict of interest" shall declare the conflict of interest, and if appropriate abstain from voting on the particular issue, and the conflict shall be recorded in the minutes.

**4.5 PROXIES.** A Director may vote or, to the maximum extent allowed by law, discharge his duties by proxy executed in writing by the Director. No proxy shall be valid after three months from the date of its execution. Each proxy shall be revocable unless expressly provided therein to be irrevocable, and unless otherwise made irrevocable by law.

## **ARTICLE 5: PARLIAMENTARY AUTHORITY AND ORDER OF BUSINESS**

**5.1 RULES OF ORDER.** The rules contained in the current edition of Robert's Rules of Order, newly revised, shall govern the conduct of the Board and its committees on all of their deliberations except as modified by statute, rule or these By-laws. It is the intent of the Board to seek consensus in all deliberations.

**5.2 ORDER OF BUSINESS.** The order of business for meetings shall be determined by the President.

## **ARTICLE 6: COMMITTEES**

**6.1 ORGANIZATION.** The Board may from time to time appoint committees for the purposes as set forth by the Board. The Board shall delegate such powers as it determines are necessary.

**6.2 EXECUTIVE COMMITTEE.** The Executive Committee, if one is appointed, shall consist of members of the Board of Directors. The Executive Committee may meet at

stated times upon notice to all of its members from any one of its members. The Board of Directors may delegate to this committee the authority to exercise all powers of the Board of Directors except the power to amend the By-laws while the Board of Directors is not in session. All business transacted by such committee must be submitted to and ratified by the Board at its next regular meeting or at a special meeting called for that purpose.

**6.3 SPECIAL COMMITTEES.** Special committees may be formed by the President with the approval of the Board, and their powers, the term of appointment, and Chair shall be designated in such appointment. Members of such special committees shall be appointed by the Executive Committee and shall include a minimum of one (1) director. Other committee members may be chosen from interested persons. The committee chairperson of any committee shall be appointed by the Executive Committee. His/her responsibilities will be to conduct activities and fulfill the purposes for which his/her committee was established. The chairperson shall serve a term of one (1) year and may be reappointed for one (1) additional year.

**6.4 QUORUMS AND MANNER OF ACTING.** Except as otherwise provided, the presence at a meeting of a majority of the total authorized membership of a committee (but in no event less than two (2) shall be sufficient to constitute a quorum for the transaction of business.

**6.5 TERMINATION OF COMMITTEE MEMBERS.** Any member of any committee may be removed from a committee at any time by resolution of the Executive Committee or by resignation tendered in writing. Unless otherwise specified therein, resignation shall take effect upon delivery.

**6.6 NEW APPOINTMENTS.** If a vacancy occurs in any committee by reason of death, resignation, removal or otherwise, the remaining committee members shall continue to act, provided they are at least two (2) in number, one of which is a director. Any vacancy may be filled by appointment by the Executive Committee.

**6.7 RECORD OF PROCEEDINGS.** The Board may request a written record of the committee proceedings to be forwarded to the Board or presented orally at an annual, regular, or special Board meeting as appropriate.

## **ARTICLE 7: FISCAL POLICIES**

**7.1 FISCAL YEAR.** The fiscal year will be January 1 to December 31 or as fixed by resolution of the Board.

**7.2 CHECKS, NOTES, ETC.** All checks or demands for money and notes of the Corporation shall be signed by the Executive Director, or such other person or persons as the Board may from time to time designate.

**7.3 BOOKS AND RECORDS.** The Corporation shall keep correct and complete books and records of account.

**7.4 FINANCIAL RECORDS AND ANNUAL REPORTS.** The Corporation shall, for each fiscal year, maintain current and accurate financial records with full entries made with respect to all financial transactions of the Corporation, including all income and expenditures, in accordance with generally accepted accounting practices. Based on these records, the Board shall annually prepare or approve a report of the financial activity of the Corporation for such fiscal year that shall be audited or reviewed by a certified public accountant. The report shall conform with accounting standards as promulgated by the American Institute of Certified Public Accountants and shall include a statement of support, revenue, and expenses and changes in fund balances, a statement of functional expenses, and balance sheets for all funds. All records, books, and annual reports of the financial activity of the Corporation for such fiscal year shall be kept at either the registered office or principal office of the Corporation for at least three (3) years after the closing of such fiscal year and shall be available to the public for inspection and copying there during normal business hours. The Corporation may charge for the reasonable expense of preparing a copy of a record or report.

**7.5 LOANS TO DIRECTORS AND OFFICERS PROHIBITED.** No loan shall be made by the Corporation to its directors or officers.

**7.6 INVESTMENTS.** The Board may invest or cause to be invested the Corporation's funds in securities appropriate for the use of the Corporation.

**7.7 BUDGET.** The Executive Director shall present a budget to the Board or the Finance Committee, when one exists for approval. If the Finance Committee is unavailable, the budget may be approved by 2/3 vote of the Board.

#### **ARTICLE 8: NON-DISCRIMINATION**

It shall be the policy of the Corporation to comply with all state and federal laws, rules, and regulations prohibiting discrimination against any person with regard to employment because of race, color, religion, sex, physical handicap, national origin, age, marital status, change in marital status, or pregnancy. This non-discrimination provision relates to all conditions of employment.

#### **ARTICLE 9: INDEMNIFICATION**

To the greatest extent and in the manner allowed by applicable law, the Corporation shall indemnify a person who was or is threatened to be made a named defendant or respondent in a proceeding because the person is or was a director, officer, employee or agent of the Corporation against judgments, penalties (including excise and similar taxes), fines, settlements, and reasonable expenses actually incurred by the person in

connection with the proceeding; provided the director acted in good faith and in a manner he or she thought was best for the organization.

#### **ARTICLE 10: ADOPTION AND AMENDMENTS**

**10.1 BY-LAWS ADOPTION.** These By-laws shall become effective upon approval by a two-thirds (2/3) vote of the directors.

**10.2 BY-LAWS AMENDMENTS.** These By-laws may be amended, altered, added to or replaced by a two-thirds (2/3) vote of those directors present at a special meeting called expressly and noticed to include that purpose at which there is a quorum present. The amendment shall take effect upon approval.

**10.3 BY-LAWS INTERPRETATION.** In respect to all questions of interpretation of the Bylaws, the decision of the Board shall control and be finally binding.

**10.4 SUBJECT TO ALL LAWS.** The provisions of these Bylaws shall be subject to all valid and applicable laws, including, without limitation, the Texas Business Organizations Code as now or thereafter amended, and in the event that any of the provisions of these bylaws are found to be inconsistent with or contrary to any mandatory provision of such valid laws, the latter shall be deemed to control and these bylaws shall be deemed modified accordingly, and, as so modified, to continue in full force and effect.

Standish Foundation for Children  
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Form 1023, Application for Tax Exempt Status  
Part IV - Describe the organization's past, present and planned activities in a narrative

*Vision and Mission:*

The Applicant's vision is that a hospital and healthcare experience is less traumatic for every child.

Applicant mission is to work with healthcare providers and medical professionals to design, create and deliver programs and services that are child and family friendly. Applicant intends for its educational and networking initiatives to serve as a bridge between healthcare providers and children, helping ill children and their families experience healthcare in a way that promotes hope, healing and happiness – something Applicant believes every child deserves.

Applicant works to implement its vision and mission in four core areas: promoting child and family-centered healthcare in the U.S. and abroad; creating customized programs to allow healthcare providers to offer care in a child and family-centered way; providing funding and material resources to healthcare providers and institutions; and establishing a global N.E.E.D.S. (networking, education exchange, dialogue and support) platform.

*Organization:*

A Texas non-profit corporation has been formed to develop and administer the Applicant's programs and apply for federal and state tax exempt status.

An initial board of three members has been established to develop appropriate criteria for Applicant policies, activities, programs and fund raising. The board will be "self perpetuating", in that existing board members will select incoming board members.

The Applicant has engaged My Healing Place, a Texas non-profit corporation headquartered in Austin, Texas with federal tax exempt status as a 501(c)(3) public charity, to serve as the Applicant's fiscal sponsor and fiscal agent for its fund raising and other activities until such time as the Applicant receives federal and state tax exempt status.

*Planned Activities:*

To accomplish its mission, the Applicant's proposes the following activities:

Working globally and in partnership with local healthcare providers, the Applicant will help hospitals create and deliver child, youth and family friendly sustainable healthcare programs and services. Applicant's services will be provided at no cost or low cost depending upon the healthcare provider's financial need. In particular, Applicant will:



- Send teams of experts to travel to various sites to offer customized curriculums, workshops and presentations titled, “RX for Child and Family Friendly Healthcare” for hospitals and clinics; medical and dental providers; medical residents; allied health professionals; and psychologists, social workers, chaplains, and the like.
- Provide comprehensive on-site program evaluations and recommendations to help assess child life programming and child, youth and family friendly healthcare practices.
- Assess and certify qualified healthcare institutions and healthcare providers as “Child Friendly.”
- Following disasters, send professionals to provide support services to children in hospitals.
- Use technology to facilitate knowledge management by seeking, creating and disseminating quality patient and professional education materials via an online database.
- Organize a multidisciplinary global conference to share ideas, best practices and resources.
- Through our “Kahikatea Collaboration,” establish relationships with global and local organizations and individuals to obtain donations of money, supplies and services, and help to connect people and organizations with these valuable resources.
- We facilitate global N.E.E.D.S.: Networking, Education Exchange, Dialogue and Support - where mentors and teachers connect with students and healthcare professionals, and hospitals, academic institutions and NPO/NGO’s connect with each other.
- Provide funding for hospital playrooms and programming that supports specific child life and child, youth and family friendly healthcare services.
- Provide funding for selected professional educational exchanges and conferences.

In this manner, the exempt purposes of the Applicant will be furthered by promoting, facilitating and advancing education, care and improved health outcomes for underserved populations.

*Past and Present Outreach:*

To begin to implement its goals, since its formation the Applicant has taken the following steps in support of the above described mission:

- Organized under Texas law as a non-profit corporation;
- Recruited and convened a board of directors with deep expertise and experience in the

areas of child and family centered health care to begin developing program and operating policies and procedures to address the Applicant's goals;

- . Established a relationship with My Healing Place (an Austin, Texas based center for grief support with federal tax exempt status under IRS Section 501(c)(3)) to serve as fiscal agent for Applicant's funding;

- . Secured start up support and in-kind contributions for a variety of operational needs; and

- . Identified and established contacts and relationships with organizations that promote child and family centered health care;

*Funding:*

Applicant has secured start up support from individual donors and in-kind support from corporate donors to begin design and implementation of its programming. Applicant has also established a website through which charitable contributions may be solicited or accepted.

Thereafter, Applicant will seek funding from a variety of corporations, philanthropic institutions and donations from individuals to acquire funding necessary to provide the financial support for the Applicant's proposed activities. A detailed development plan to underwrite these activities will be developed and conducted by the board, with support from volunteers and other persons interested in the Applicant's programming. The Applicant anticipates engaging in appropriate grant writing or application solicitations to private and corporate foundations and government programs when opportunities for such funding are identified. Also in the future, the Applicant may consider fund raising events at which charitable contributions may be solicited or accepted.

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Part V, Items 1a, 3a – Names, titles addresses, qualifications of officers and directors

<u>Name</u>	<u>Title</u>	<u>Mailing Address</u>	<u>Compensation</u>
Philip Diehl	Director	4500 Autumnleaf Hollow, Austin, TX 78731	none
Carrie Welch	Director	c/o State Farm, 3700 RR 620 S., Austin, TX 78738	none
Cheri Oliveri	Director	401 Bella Montagna Circle, Austin, TX 78734	none
Andrea Standish	Exec Director	c/o State Farm, 3700 RR 620 S., Austin, TX 78738	none

### Board Member Biographies

#### **Philip Diehl**

Philip N. Diehl is CEO of the Austin, Texas-based United States Gold Exchange. Much of his career has been in senior government positions in Washington, DC, including chief of staff of the U.S. Treasury Department, director of the United States Mint, and staff director of the U.S. Senate Finance Committee. He also has held executive positions in the public relations and telecommunications industries.

#### **Carrie Welch**

Carrie Welch is a State Farm agent in Austin, TX. Her entire career has been devoted to State Farm; spanning many different positions including claims, finance, IT and consulting work. In her spare time, Carrie is actively involved in Habitat for Humanity as well as serving on an Advisory Board for My Healing Place and Standish Foundation for Children, both non-profit entities.

#### **Cheri Oliveri**

Cheri Oliveri worked for decades in real estate and property management and now works as a consultant in that industry. As a busy mother of six children, Cheri also devotes time to volunteer in the community and in her children's schools.

#### **Andrea Standish**

An experienced Child Life Educator and Certified Child Life Specialist, Andrea Standish is an advocate, educator, practitioner, trainer, volunteer and consultant. She has worked extensively to promote and support the rights and needs of ill children and their families globally. She has made presentations to doctors, residents, nurses, child life specialists, hospital play specialists and allied health workers. Her work has taken her around town and around the world to over 16 countries.

**Standish Foundation for Children**  
**Federal Identification Number 45-2575814**  
**Form 1023, Application for Tax Exempt Status**  
**Part V, Item 5a – Adoption of conflicts of interest policy**

**The Applicant's conflict of interest policy was adopted by unanimous written consent of its board of directors. A copy of the policy as adopted is attached.**

# **Conflict of Interest Policy Standish Foundation for Children**

## **Article I - Purpose**

The purpose of this conflict of interest policy ("Policy") is to protect the interest of Standish Foundation for Children ("Organization") when it is contemplating entering into a transaction or arrangement that might benefit the private interest of an officer or director of the Organization or might result in a possible excess benefit transaction. This policy is intended to supplement but not replace any applicable state and federal laws governing conflict of interest applicable to nonprofit and charitable organizations.

## **Article II - Definitions**

1. **Interested Person:** Any director, principal officer, or member of a committee with governing board delegated powers, who has a direct or indirect financial interest, as defined below, is an interested person.

2. **Financial Interest:** A person has a financial interest if the person has, directly or indirectly, through business, investment, or family:

a. An ownership or investment interest in any entity with which the Organization has a transaction or arrangement,

b. A compensation arrangement with the Organization or with any entity or individual with which the Organization has a transaction or arrangement, or

c. A potential ownership or investment interest in, or compensation arrangement with, any entity or individual with which the Organization is negotiating a transaction or arrangement.

Compensation includes direct and indirect remuneration as well as gifts or favors that are not insubstantial. A financial interest is not necessarily a conflict of interest. Under Article III, Section 2, a person who has a financial interest may have a conflict of interest only if the appropriate governing board or committee decides that a conflict of interest exists.

## **Article III - Procedures**

1. **Duty to Disclose.** In connection with any actual or possible conflict of interest, an interested person must disclose the existence of the financial interest and be given the opportunity to disclose all material facts to the directors and members of committees with governing board delegated powers considering the proposed transaction or arrangement.

2. **Determining Whether a Conflict of Interest Exists.** After disclosure of the financial interest and all material facts, and after any discussion with the interested person, he/she shall leave the governing board or committee meeting while the determination of a conflict of interest is discussed and voted upon. The remaining board or committee members shall decide if a conflict of interest exists.

### **3. Procedures for Addressing the Conflict of Interest.**

a. An interested person may make a presentation at the governing board or committee meeting, but after the presentation, he/she shall leave the meeting during the discussion of, and the vote on, the transaction or arrangement involving the possible conflict of interest.

b. The chairperson of the governing board or committee shall, if appropriate, appoint a disinterested person or committee to investigate alternatives to the proposed transaction or arrangement.

c. After exercising due diligence, the governing board or committee shall determine whether the Organization can obtain with reasonable efforts a more advantageous transaction or arrangement from a person or entity that would not give rise to a conflict of interest.

d. If a more advantageous transaction or arrangement is not reasonably possible under circumstances not producing a conflict of interest, the governing board or committee shall determine by a majority vote of the disinterested directors whether the transaction or arrangement is in the Organization's best interest, for its own benefit, and whether it is fair and reasonable. In conformity with the above determination it shall make its decision as to whether to enter into the transaction or arrangement.

### **4. Violations of the Conflicts of Interest Policy.**

a. If the governing board or committee has reasonable cause to believe a member has failed to disclose actual or possible conflicts of interest, it shall inform the member of the basis for such belief and afford the member an opportunity to explain the alleged failure to disclose.

b. If, after hearing the member's response and after making further investigation as warranted by the circumstances, the governing board or committee determines the member has failed to disclose an actual or possible conflict of interest, it shall take appropriate disciplinary and corrective action.

## **Article IV - Records of Proceedings**

The minutes of the governing board and all committees with board delegated powers shall contain:

a. The names of the persons who disclosed or otherwise were found to have a financial interest in connection with an actual or possible conflict of interest, the nature of the financial interest, any action taken to determine whether a conflict of interest was present, and the governing board's or committee's decision as to whether a conflict of interest in fact existed.

b. The names of the persons who were present for discussions and votes relating to the transaction or arrangement, the content of the discussion, including any alternatives to the proposed transaction or arrangement, and a record of any votes taken in connection with the proceedings.

## **Article V - Compensation**

a. A voting member of the governing board who receives compensation, directly or indirectly, from the Organization for services is precluded from voting on matters pertaining to that member's compensation.

b. A voting member of any committee whose jurisdiction includes compensation matters and who receives compensation, directly or indirectly, from the Organization for services is precluded from voting on matters pertaining to that member's compensation.

c. No voting member of the governing board or any committee whose jurisdiction includes compensation matters and who receives compensation, directly or indirectly, from the Organization, either individually or collectively, is prohibited from providing information to any committee regarding compensation.

#### **Article VI - Annual Statements**

Each director, principal officer and member of a committee with governing board delegated powers shall annually sign a statement which affirms such person:

a. Has received a copy of the conflicts of interest policy,

b. Has read and understands the policy,

c. Has agreed to comply with the policy, and

d. Understands the Organization is charitable and in order to maintain its federal tax exemption it must engage primarily in activities which accomplish one or more of its tax-exempt purposes.

#### **Article VII - Periodic Reviews**

To ensure the Organization operates in a manner consistent with charitable purposes and does not engage in activities that could jeopardize its tax-exempt status, periodic reviews shall be conducted. The periodic reviews shall, at a minimum, include the following subjects:

a. Whether compensation arrangements and benefits are reasonable, based on competent survey information, and the result of arm's length bargaining.

b. Whether partnerships, joint ventures, and arrangements with management organizations conform to the Organization's written policies, are properly recorded, reflect reasonable investment or payments for goods and services, further charitable purposes and do not result in inurement, impermissible private benefit or in an excess benefit transaction.

#### **Article VIII - Use of Outside Experts**

When conducting the periodic reviews as provided for in Article VII, the Organization may, but need not, use outside advisors. If outside experts are used, their use shall not relieve the governing board of its responsibility for ensuring periodic reviews are conducted.

I certify that I am a duly elected and acting officer of the Standish Foundation for Children and that the foregoing policies were duly ratified and adopted by the Organization pursuant to a vote of its board of directors.

Dated to be effective 6/18, 2011.

By: 

Name/Title: ANDREA STANDISH, EXECUTIVE DIRECTOR

Approved by  
Bob D  
via email

6/13/11 3:13pm



**Standish Foundation for Children  
Federal Identification Number 45-2575814  
Form 1023, Application for Tax Exempt Status  
Part VI, Items 1a and b – Services provided to individuals and organizations**

**It is anticipated that services will be provided for the benefit of children and families who will gain access to improved healthcare outcomes as a result of Applicant's programs, both directly and through hospitals and clinics. It is Applicant's vision that all children, regardless of socio-economic status, may have access to the healthcare benefits of family centered healthcare programs and services.**

**Additional detail regarding the Applicant's program in this regard is set out in our response to Part IV of this Form 1023.**

Standish Foundation for Children  
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Form 1023, Application for Tax Exempt Status  
Part VIII, Item 4a - description of fund raising program

The Applicant contemplates engaging in all fund raising activities customarily conducted by a public charity engaged in the advancement of fitness programs and nutritional services. Such activities will be conducted in accordance with all applicable IRS and state and local regulations. Care will be taken to ensure the efficiency and effectiveness of each activity as well as to protect the personal information of donors. The majority of activities will be conducted by Applicant board members.

The primary sources of funding for Applicant programs are anticipated to be a variety of corporations, philanthropic institutions and donations from individuals. Contributions will be solicited by Applicant board members and volunteers through a combination of personal solicitations, email solicitations and direct mail solicitations. Additionally, the Applicant anticipates engaging in appropriate grant writing or application solicitations to private and corporate foundations when opportunities for such funding are identified. Also in the future, the Applicant anticipates soliciting and accepting charitable contributions through its web site, and through the conduct of community based events.

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**Part VIII, Item 4d - states and local jurisdictions where fund raising is conducted**

The Applicant will conduct fund raising activities in all jurisdictions where there are located corporations, institutions or individuals who support or engage in family centered healthcare approaches for children. The Applicant anticipates that fund raising will take place at some time in the future in all fifty states. Through the use of the internet and other outreach through the efforts of members of the board of directors, Applicant can envision reaching sources of financial support around the world.

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Part VIII, Item 11 - non cash contributions**

**While no specific contributions of this type are currently contemplated, such contributions would be accepted if they are readily convertible to cash or may be otherwise directly employed in furtherance of the Applicant's charitable purposes. The Board of Directors will establish, enact and monitor appropriate procedures and policies regarding the receipt, maintenance and use of any such items should such circumstance arise.**

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Part VIII, Items 12b,c and d – Operations in foreign countries

Applicant plans to deliver its programming internationally. Currently the Applicant has identified the Philippines as the first foreign country in which it will deliver programming. Future overseas locations will be determined by the board of directors as part of its strategic planning process. While Applicant intends to deliver its services in foreign countries through and in conjunction with overseas partners, it does not currently anticipate maintaining offices or other facilities outside of its Austin, Texas base of operations.

It is anticipated that services will be provided internationally in the same manner and for the same purposes as services provided domestically - that is, for the benefit of children and families who will gain access to improved healthcare outcomes as a result of Applicant's programs, both directly and through hospitals and clinics. It is Applicant's vision that all children in the U.S. and overseas, regardless of socio-economic status, may have access to the healthcare benefits of family centered healthcare programs and services.

Additional detail regarding the Applicant's program in this regard is set out in our response to Part IV of this Form 1023.

In this manner, the exempt purposes of the Applicant will be furthered by promoting, facilitating and advancing education, care and improved health outcomes for all underserved populations.

**Standish Foundation for Children  
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Part IXA, Item 7 – revenue not otherwise listed**

	<u>2011</u>	<u>2012</u>	<u>2013</u>	<u>2014</u>
<b>Fundraising events</b>	7,000	20,000	15,000	25,000

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Part IXA, Item 23 – expenses not otherwise classified

	<u>2011</u>	<u>2012</u>	<u>2013</u>	<u>2014</u>
Program expenses	23,000	74,500	30,000	69,000
Insurance	750	1,000	750	750
Office supplies	1,200	1,200	1,500	1,500
Travel & Entertainment	1,000	1,400	1,500	1,500
Postage	600	600	600	600
Dues	300	300	300	300
Telephone	1,200	1,200	1,500	1,500
Equipment purchases	1,500	1,500	2,500	2,000
Fiscal sponsor fee	4,000	0	0	0
Business plan & branding	0	5,000	0	0
Website & social media	<u>2,500</u>	<u>2,500</u>	<u>2,500</u>	<u>2,000</u>
Totals	36,050	89,200	41,150	79,150