

CERTIFIED PUBLIC ACCOUNTANTS

September 29, 2021

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To the Board of Directors Ronald McDonald House Charities of the Ozarks, Inc.

We have audited the financial statements of Ronald McDonald House Charities of the Ozarks, Inc. for the years ended December 31, 2020 and 2019, and have issued our report thereon dated September 29, 2021. Professional standards require that we provide you with information about our responsibilities under generally accepted auditing standards, as well as certain information related to the planned scope and timing of our audit. We have communicated such information in our letter to you dated June 22, 2021. Professional standards also require that we communicate to you the following information related to our audit.

Significant Audit Findings

Qualitative Aspects of Accounting Practices

Management is responsible for the selection and use of appropriate accounting policies. The significant accounting policies used by Ronald McDonald House Charities of the Ozarks, Inc. are described in Note 1 to the financial statements. We noted no transactions entered into by the Organization during the year for which there is a lack of authoritative guidance or consensus. All significant transactions have been recognized in the financial statements in the proper period.

Accounting estimates are an integral part of the financial statements prepared by management and are based on management's knowledge and experience about past and current events and assumptions about future events. Certain accounting estimates are particularly sensitive because of their significance to the financial statements and because of the possibility that future events affecting them may differ significantly from those expected. The most sensitive estimate affecting the financial statements were:

- Management's estimate of the depreciation is based on the assets estimated useful life.
 We evaluated the key factors and assumptions used to develop the economic lives in determining that it is reasonable in relation to the financial statements taken as a whole.
- Management's estimate of the functional expense allocations. We have evaluated the key factors and assumptions used and feel they are reasonable in relation to the financials taken as a whole.

Certain financial statement disclosures are particularly sensitive because of their significance to financial statement users. The most sensitive disclosure affecting the financial statements was:

• The disclosure of the Organization's relationship with The Tooth Truck, Inc. in Note 11 to the financial statements.

The financial statement disclosures are neutral, consistent, and clear.

September 29, 2021 Ronald McDonald House Charities of the Ozarks, Inc. Page 2

Difficulties Encountered in Performing the Audit

We encountered no significant difficulties in dealing with management in performing and completing our audit.

Corrected and Uncorrected Misstatements

Professional standards require us to accumulate all misstatements identified during the audit, other than those that are clearly trivial, and communicate them to the appropriate level of management. No misstatements were detected as a result of our audit procedures.

Disagreements with Management

For purposes of this letter, a disagreement with management is a financial accounting, reporting, or auditing matter, whether or not resolved to our satisfaction, that could be significant to the financial statements or the auditor's report. We are pleased to report that no such disagreements arose during the course of our audit.

Management Representations

We have requested certain representations from management that are included in the management representation letter dated September 29, 2021.

Management Consultations with Other Independent Accountants

In some cases, management may decide to consult with other accountants about auditing and accounting matters, similar to obtaining a "second opinion" on certain situations. If a consultation involves application of an accounting principle to the Organization's financial statements or a determination of the type of auditor's opinion that may be expressed on those statements, our professional standards require the consulting accountant to check with us to determine that the consultant has all the relevant facts. To our knowledge, there were no such consultations with other accountants.

Other Audit Findings or Issues

We generally discuss a variety of matters, including the application of accounting principles and auditing standards, with management each year prior to retention as the Organization's auditors. However, these discussions occurred in the normal course of our professional relationship and our responses were not a condition to our retention.

September 29, 2021 Ronald McDonald House Charities of the Ozarks, Inc. Page 3

This information is intended solely for the use of the Board of Directors and management of Ronald McDonald House Charities of the Ozarks, Inc. and is not intended to be and should not be used by anyone other than these specified parties.

Very truly yours,

Decker & DeGood

SPRINGFIELD, MISSOURI

FINANCIAL STATEMENTS AND INDEPENDENT AUDITOR'S REPORT

FOR THE YEARS ENDED DECEMBER 31, 2020 AND 2019

CONTENTS

	PAGE NO.
Independent Auditor's Report	1
Financial Statements:	
Statements of Financial Position	2
Statements of Activities	3
Statement of Changes in Net Assets – 2020	4
Statement of Changes in Net Assets – 2019	5
Statement of Functional Expenses - 2020	6
Statement of Functional Expenses - 2019	7
Statements of Cash Flows	8
Notes to Financial Statements	9-23



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INDEPENDENT AUDITOR'S REPORT

The Board of Directors Ronald McDonald House Charities of the Ozarks, Inc. Springfield, Missouri

We have audited the accompanying financial statements of Ronald McDonald House Charities of the Ozarks, Inc. (a nonprofit organization), which comprise the statements of financial position as of December 31, 2020 and 2019, and the related statements of activities, changes in net assets, functional expenses, and cash flows for the years then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on our audits. We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audits to obtain reasonable assurance about whether the financial statements are free of material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of Ronald McDonald House Charities of the Ozarks, Inc. (a nonprofit organization) as of December 31, 2020 and 2019, and the changes in its net assets and its cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America.

September 29, 2021

Decker & DeGood

STATEMENTS OF FINANCIAL POSITION DECEMBER 31, 2020 AND 2019

ASSETS

		2020		2019
Current Assets	Φ.	0.67.005	Φ	5 00 104
Cash and cash equivalents Pledges and accounts receivable	\$	867,905	\$	588,194
rieuges and accounts receivable		119,718		88,233
Total Current Assets		987,623		676,427
Property and Equipment				
Cost		3,122,557		3,134,243
Accumulated depreciation		(1,459,376)		(1,380,305)
Net Property and Equipment		1,663,181		1,753,938
Other Assets				
Cash value - life insurance		10,433		10,062
Certificate of Deposit		160,840		100,000
Investments		2,250,065		2,027,722
Pledge receivable- land and facility usage		913,122		928,066
Total Other Assets		3,334,460		3,065,850
TOTAL ASSETS	\$	5,985,264	\$	5,496,215
<u>LIABILITIES AND NET ASSETS</u>				
Liabilities				
Accounts payable	\$	36,597	\$	8,320
Accrued payroll withholding		9,469		4,337
PPP Forgiveable Loan Proceeds		109,491		
Total Liabilities		155,557		12,657
Net Assets				
Without donor restrictions		2,473,415		2,100,453
With donor restrictions		3,356,292		3,383,105
Total Net Assets		5,829,707		5,483,558
TOTAL LIABILITIES AND NET ASSETS	\$	5,985,264	\$	5,496,215

The notes to financial statements are an integral part of these financial statements.

STATEMENTS OF ACTIVITIES FOR THE YEARS ENDED DECEMBER 31, 2020 AND 2019

	2020	2019
CHANGES IN NET ASSETS WITHOUT DONOR RESTRICTIONS		
Revenue and other support		
Special events	\$ 249,769	\$ 374,674
Donations	458,857	149,429
Investment return, net	13,818	17,793
Total Revenues and Gains Without Donor Restrictions	722,444	541,896
Net assets released from restrictions	1,367,215	1,358,180
Total Revenues, Gains and Other Support Without Donor Restrictions Expenses	2,089,659	1,900,076
Program services	1,161,651	1,200,576
Program - Ronald McDonald Care Mobile Grant	168,563	213,211
1 rogram - Romaid McDonaid Care Moone Gram	100,505	213,211
Total Program Expenses	1,330,214	1,413,787
Cost of direct donor benefits	46,892	94,631
Management and general	96,927	86,477
Fundraising	242,664	234,726
Total Expenses	1,716,697	1,829,621
Increase in Net Assets Without Donor Restrictions	372,962	70,455
CHANGES IN NET ASSETS WITH DONOR RESTRICTIONS		
Revenue and other support		
Special events	255,974	275,434
Donations	796,183	1,240,539
Room receipts and vending	6,932	9,484
Memorials and tributes	54,323	11,529
Investment return, net	226,690	316,125
Gain (Loss) on disposal of equipment	300	500
Net assets released from restrictions	(1,367,215)	(1,358,180)
Increase (Decrease) in Net Assets With Donor Restrictions	(26,813)	495,431
mercane (Desicane) in Net Anne Mill Dollor Resultations	(20,013)	
INCREASE IN NET ASSETS	346,149	565,886
NET ASSETS AT BEGINNING OF YEAR	5,483,558	4,917,672
NET ASSETS AT END OF YEAR	\$ 5,829,707	\$ 5,483,558

STATEMENT OF CHANGES IN NET ASSETS FOR THE YEAR ENDED DECEMBER 31, 2020

	Without Donor			With Donor					
		Restrict	ions				Restrictions		
	Land	, Building			Lan	d, Building	Current	Endowment	
	and E	Equipment	Un	designated	and	Equipment	Fund	Funds	Total
Net Assets									
December 31, 2019	\$	1,754,577	\$	345,876	_\$_	941,911	\$1,258,641	\$ 1,182,553	\$ 5,483,558
Revenues, Other Support and Transfers:									
Revenues and Support		7,002		701,624		70,105	1,270,297	-	2,049,028
Investment Return, net		-		13,818		-	-	-	13,818
Net assets released from restriction		10,399		1,356,816					 1,367,215
Total Revenues, Other Support, and Transfe	21	17,401		2,072,258		70,105	1,270,297	-	3,430,061
Expenses		108,114		1,608,583		-	-	-	1,716,697
Net assets released from restriction				<u>-</u>		83,950	1,283,265		 1,367,215
Change in Net Assets		(90,713)		463,675		(13,845)	(12,968)		 346,149
Net Assets									
December 31, 2020	\$	1,663,864	\$	809,551	\$	928,066	\$1,245,673	\$ 1,182,553	\$ 5,829,707

STATEMENT OF CHANGES IN NET ASSETS FOR THE YEAR ENDED DECEMBER 31, 2019

	Without Donor				With Donor							
		Restrict	ions		_	Restrictions						
	Land	, Building]	Lan	d, Building	Current	Е	ndowment		
	and E	Equipment	Un	designated	2	and	Equipment	Fund		Funds	_	Total
Net Assets												
December 31, 2018	\$	1,820,800	\$	209,198	-	\$	954,734	\$ 750,387	\$	1,182,553	_\$	4,917,672
Revenues, Other Support and Transfers:												
Revenues and Support		22,832		501,271			71,127	1,782,484		-		2,377,714
Investment Return, net		-		17,793			-	-		-		17,793
Net assets released from restriction		23,956		1,334,224	_							1,358,180
Total Revenues, Other Support, and Transfe	1	46,788		1,853,288			71,127	1,782,484		-		3,753,687
Expenses		113,011		1,716,610			-	-		-		1,829,621
Net assets released from restriction					_		83,950	1,274,230			_	1,358,180
Change in Net Assets		(66,223)		136,678	-		(12,823)	508,254			_	565,886
Net Assets												
December 31, 2019	\$	1,754,577	\$	345,876	_	\$	941,911	\$1,258,641	\$	1,182,553	_\$	5,483,558

STATEMENT OF FUNCTIONAL EXPENSES FOR THE YEAR ENDED DECEMBER 31, 2020

		Program S	ervices	Supporting	g Services		
	Total Expenses	Ronald McDonald Houses	Tooth Truck	Management and General	Fund Raising	Cost of Direct Donor Benefits	
Salaries	\$ 716,039	\$ 437,879	\$ 97,472	\$ 61,781	\$ 118,907	\$ -	
Other Expenses:							
Publications	4,772	4,772	-	-	-	-	
Telephone	8,155	3,056	1,056	2,870	1,173	-	
Insurance	36,261	36,261	-	-	-	-	
Publicity	56,938	19,575	-	-	37,363	-	
Payroll taxes	51,553	32,112	7,036	4,411	7,994		
Retirement plan	14,213	7,181	2,778	1,071	3,183		
Donor recognition	1,151	249	-	-	902	-	
Education	427	348	-	-	79	-	
Office & computer	13,883	11,321	-	2,115	447	-	
Postage	2,744	915	-	216	1,613	-	
Professional fees	87,348	-	-	18,918	68,430	-	
Miscellaneous	5,894	3,613	-	2,014	267	-	
Memberships	2,282	1,944	-	-	338	-	
Depreciation	108,115	108,115	-	-	-	_	
Investment management fee	1,107	-	-	1,107	-	-	
Grounds	900	900	-	-	-	-	
Rent	83,950	83,950	-	-	-	-	
Utilities	30,120	29,420	700	-	-	-	
Volunteer	4,185	4,185	-	-	-	-	
Printing	5,505	1,252	-	2,424	1,829	-	
Travel	68	(80)	228	-	(80)	-	
Family fund	1,468	1,468	-	-	-	-	
Van expense	2,683	2,683	-	-	-	-	
Supplies	281,323	234,431	-	-	-	46,892	
Repairs	14,803	14,803	-	-	-	-	
Contract services	6,573	6,354	-	-	219	-	
Vending	2,579	2,579	_	_	_	_	
Loss on Asset Retirement	3,095	3,095					
	\$ 1,548,134	\$ 1,052,381	\$ 109,270	\$ 96,927	\$ 242,664	\$ 46,892	

STATEMENT OF FUNCTIONAL EXPENSES FOR THE YEAR ENDED DECEMBER 31, 2019

		Program Services		Supporting			
	Total Expenses	Ronald McDonald Houses	d Tooth Truck	Management and General	Fund Raising	Cost of Direct Donor Benefits	
Salaries	\$ 686,731	\$ 418,341	\$ 95,877	\$ 58,538	\$ 113,975	\$ -	
Other Expenses:							
Publications	4,599	4,599	-	-	-	-	
Telephone	7,980	5,880	1,200	400	500	-	
Insurance	31,008	31,008	-	-	-	-	
Publicity	51,328	17,236	-	-	34,092	-	
Payroll taxes	48,598	30,142	6,643	4,220	7,593	-	
Retirement plan	13,548	6,745	2,697	1,027	3,078	-	
Donor recognition	1,884	1,326	-	-	558	-	
Education	3,521	3,430	-	12	79	-	
Office & computer	7,821	6,370	_	919	532	-	
Postage	2,480	1,873	_	515	92	-	
Professional fees	87,502	-	_	17,531	69,971	-	
Miscellaneous	6,554	5,535	_	42	977	-	
Memberships	2,982	2,137	_	_	845	-	
Depreciation	113,012	113,012	_	-	-	-	
Investment management fee	1,165	-	_	1,165	-	-	
Grounds	1,071	1,071	_	_	-	_	
Rent	93,950	83,950	_	_	-	10,000	
Utilities	35,127	34,427	700	-	_	-	
Volunteer	18,144	18,144	_	_	_	_	
Printing	6,003	2,001	_	2,001	2,001	_	
Travel	1,582	736	306	107	433	_	
Family fund	701	701	_	-	-	-	
Van expense	4,584	4,584	_	_	-	_	
Supplies	307,554	274,018	_	_	-	33,536	
Repairs	9,446	9,446	_	_	-	-	
Contract services	4,936	4,936	_	_	_	_	
Vending	6,752	6,752	_	_	-	-	
Food	30,171	-	_	_	_	30,171	
Entertainment	20,924	-	_	_	-	20,924	
Loss on Assest Retirement	4,754	4,754	<u> </u>				
	\$ 1,616,410	\$ 1,093,153	\$ 107,423	\$ 86,477	\$ 234,726	\$ 94,631	

STATEMENTS OF CASH FLOWS FOR THE YEARS ENDED DECEMBER 31, 2020 AND 2019

	2020	2019
OPERATING ACTIVITIES:		
Increase (Decrease) in net assets	\$ 346,149	\$ 565,886
Non-cash items included in net increase:		
Depreciation	108,115	113,012
Increase in cash value of life insurance	(371)	(395)
Net realized and unrealized gain on investments	(203,153)	(292,998)
Loss on disposal of equipment	3,096	4,754
(Increase) in operating assets:		
Pledges and accounts receivable	(16,541)	(9,539)
Increase (Decrease) in operating liabilities:		
Accrued expenses and accounts payable	142,900	3,849
Net Cash Provided by Operating Activities	380,195	384,569
INVESTING ACTIVITIES:		
Acquisition of property and equipment	(14,843)	(52,897)
Investment in securities	(436,975)	(507,753)
Proceeds from sale of securities	412,174	549,595
Purchase of Certificate of Deposit	(60,840)	(100,000)
Net Cash Used for Investing Activities	(100,484)	(111,055)
INCREASE IN CASH	279,711	273,514
CASH AT BEGINNING OF YEAR	588,194	314,680
CASH AT END OF YEAR	\$ 867,905	\$ 588,194
SUPPLEMENTAL DATA:		
Non-cash investing activities:		
Gifts of fixed assets	\$ 5,602	\$ 22,334
Gifts of cash surrender value	\$ 371	\$ 395
Gifts of facility and land usage	\$ 69,006	\$ 70,107
Gifts of utility usage	\$ 12,000	\$ 12,000

NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2020 AND 2019

NOTE 1 – NATURE OF OPERATIONS AND SUMMARY OF SIGNIFICANT ACCOUNTING PRINICIPLES

Nature of Operations

Ronald McDonald House Charities of the Ozarks, Inc. ("the Organization") is a not-for-profit corporation located in Springfield, Missouri. The Corporation's first priority is to provide lodging, hope and comfort at the Ronald McDonald House for families of seriously ill and injured children. Secondly, the Organization awards grants and additional support to other projects in the Ozarks that help children and families reach their full potential.

Cash and Cash Equivalents

For purposes of the statement of cash flows, cash equivalents include time deposits, money market funds, and highly liquid debt instruments with maturities of three months or less at the date of their acquisition.

Accounting Method

The Organization uses the accrual method of accounting which recognizes revenue when earned and expenses when incurred.

Net Assets and Donor-Imposed Restrictions

The Organization records and reports its assets, liabilities, net assets, revenues, expenses, gains and losses, and other support based on the existence or absence of donor-imposed restrictions.

The Organization reports gifts of cash and other assets as restricted support if they are received with donor stipulations that limit the use of the donated assets. When a donor restriction expires, that is, when a stipulated time restriction ends or purpose restriction is accomplished, net assets with donor restrictions are reclassified to net assets without donor restrictions and reported in the statement of activities as net assets released from restrictions. If donors contribute long-lived assets or cash for the purchase of long-lived assets without explicit asset use time restrictions, then the Organization treats the restriction as met when the asset is placed in service.

The Organization reports gifts as unrestricted support unless explicit donor stipulations specify how the donated assets must be used.

Net assets of the Organization consist of the following:

<u>Without Donor Restrictions: Undesignated</u> – These net assets are available for general obligations of the Ronald McDonald House, as well as for grants from Ronald McDonald House Charities of the Ozarks.

<u>Without Donor Restrictions: Land, Building and Equipment</u> – These net assets reflect the total carrying value of The Ronald McDonald Houses <u>after</u> accumulated depreciation.

NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2020 AND 2019

NOTE 1 – NATURE OF OPERATIONS AND SUMMARY OF SIGNIFICANT ACCOUNTING PRINCIPLES (Continued)

Net Assets and Donor-Imposed Restrictions (Continued)

<u>With Donor Restrictions: Current Fund</u> – These net assets are available for the day-to-day operations of Ronald McDonald House and for support of the Ronald McDonald Care Mobile and cannot be used for funding grants.

<u>With Donor Restrictions: Land, Building and Equipment</u> – These net assets reflect the discounted present value of land and facility usage pledges.

<u>With Donor Restrictions: Endowment Funds</u> – These net assets are permanently restricted by donors and cannot be used by the Organization. Income and capital gains are to be used to operate the Ronald McDonald House. Accordingly, these earnings are reflected in With Donor Restrictions: Current, until appropriated for expenditure.

Investments

Investments in common stock, government and corporate bonds, and mutual and other publicly traded funds are stated at fair value based on quoted market values. Investments in cash management funds are stated at cost, which approximates fair value. Net realized and unrealized gains and losses on investments are reflected in the statement of activities and net of management fees.

Fair Value Measurements

The Organization applies the U.S. GAAP authoritative guidance for *Fair Value Measurements and Disclosures*, which defines fair value, establishes a framework for measuring fair value, and requires certain disclosures about fair value measurements.

The standard describes three levels of inputs that may be used to measure fair value:

Level 1- Quoted prices in active markets for identical assets or liabilities.

Level 2- Observable inputs other than Level 1 prices, such as quoted prices for similar assets or liabilities, quoted prices in inactive markets, or other inputs that are observable or can be corroborated by observable market data for substantially the full term of the assets or liabilities.

Level 3- Unobservable inputs that are supported by little or no market activity and that are significant to the fair value of the assets or liabilities.

NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2020 AND 2019

NOTE 1 – NATURE OF OPERATIONS AND SUMMARY OF SIGNIFICANT ACCOUNTING PRINCIPLES (Continued)

Fair Value Measurements (Continued)

Valuation techniques used in fair value measurements need to maximize the use of observable inputs and minimize the use of unobservable inputs. A valuation method may produce a fair value measurement that may not be indicative of net realizable value or reflective of future fair values. Furthermore, although the Organization believes its valuation methods are appropriate and consistent with those used by other market participants, the use of different methodologies or assumptions could result in different fair value measurements at the reporting date.

Contributions

Pledges receivable represent unconditional promises to give (contributions) that are considered to be available for unrestricted use unless specifically restricted by the donor. Amounts received that are designated for future periods or restricted by the donor for specific purposes are reported as with donor restrictions that increases that net asset class.

Revenue recognition

In May 2014, the FASB issued Accounting Standards Update ("ASU") No. 2014-09, "Revenue from Contracts with Customers." This Standard, along with its related amendments, requires organizations to recognize revenue to depict the transfer of promised goods or services to customers in an amount that reflects the consideration to which the entity expects to be entitled in exchange for those goods or services. The adoption of this standard in 2020 did not have a material effect on the Organization's financial statements and required no adjustment.

Property and Depreciation

Property and equipment are stated at cost if purchased or fair value if contributed. Depreciation of property and equipment is provided using the straight-line method over the estimated useful lives of each class as follows:

	Origina	Depreciable				
	2020		2019	Lives		
Landscaping	\$ 52,834	\$	52,834	10-20 Years		
Building	2,486,154		2,490,660	10-50 Years		
Furniture	398,387		406,309	10 Years		
Vehicles	20,952		20,952	10 Years		
Equipment	 164,230		163,488	6-10 Years		
	\$ 3,122,557	\$	3,134,243			

NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2020 AND 2019

NOTE 1 – NATURE OF OPERATIONS AND SUMMARY OF SIGNIFICANT ACCOUNTING PRINCIPLES (Continued)

Property and Depreciation (Continued)

Property and equipment purchases of individual items costing below \$500 are expensed.

Depreciation expense charged to operations for the year ended December 31, 2020 and 2019 was \$ 108,115 and \$ 113,012, respectively.

Donated Materials and Services

The Organization records as contributions the fair market value of donated goods. Donated services that create or enhance non-financial assets or that require specialized skills, are provided by individuals possessing those skills, and would have to be purchased if not donated, are reflected as contributions in the accompanying statements at their estimated values at date of receipt. In addition, many individuals volunteer their time and perform a variety of tasks that assist the Organization, but these services do not meet the criteria for recognition as contributed services. The Organization receives more than 10,000 volunteer hours per year.

Total in-kind donations for the years ending December 31, 2020 and 2019 are as follows:

	 2020	2019
Ronald McDonald House operating supplies and services	\$ 202,539	\$ 254,994
Dental supplies and services	-	9,510
Ronald McDonald House improvements and equipment	5,602	22,334
Land and facility usage	70,106	70,107
Professional accounting services	5,915	4,915
Utilities	 12,000	 12,000
	\$ 296,162	\$ 373,860

In addition, the Directors provide advisory services to the Organization without compensation and whose value has not been reported.

Estimates

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the revenues and expenses during the reporting period. Actual results could differ from those estimates.

NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2020 AND 2019

NOTE 1 – NATURE OF OPERATIONS AND SUMMARY OF SIGNIFICANT ACCOUNTING PRINCIPLES (Continued)

Risks and Uncertainties

The Organization invests or holds a variety of investment vehicles, including common stock, corporate and governmental obligations, and mutual funds. These investments are exposed to interest rate, market, credit and other risks depending upon the nature of the investment. Accordingly, it is reasonably possible that these factors will result in changes in the value of the Organization's investments, which could materially affect amounts reported in the financial statements.

The Organization maintains significantly all of its cash balances in one financial institution. Accounts are insured by the FDIC up to \$250,000 per depositor. At December 31, 2020, the Organization had \$651,575 in bank accounts.

The majority of the Organization's contributions are received from donors located in the greater Springfield, Missouri area. As such, the Organization's ability to generate resources via contributions is dependent upon the economic health of that area. An economic downturn could cause a decrease in contributions that coincides with an increase in need among the individuals, families and organizations that the Organization supports.

Functional Expense Allocation

The costs of providing various programs and other activities have been summarized on a functional basis in the Statements of Functional Expenses. Certain categories of expenses that are attributable to more than one program or supporting function require allocation on a reasonable basis that is consistently applied. The expenses that are allocated include depreciation, and office and occupancy, which are allocated on a square-footage basis, as well as salaries and benefits, which are allocated on the basis of estimates of time and effort.

Date of Management's Review

Subsequent events have been evaluated through September 29, 2021, which is the date of the financial statements were available to be issued.

Long-Lived Assets

The organization reviews its long-lived assets for impairment whenever events or changes in circumstances indicate that the carrying amount of an asset may not be recoverable. Impairment is evaluated by comparing an asset's carrying value to the undiscounted estimated cash flows expected from the asset's operations and eventual disposition. If the sum of the undiscounted estimated future cash flows is less than the carrying value of the asset, an impairment loss is recognized based on the fair value of the asset. If impairment occurs, the fair value of an asset is deemed to be the amount a willing buyer would pay a willing seller for such asset in a current transaction.

NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2020 AND 2019

NOTE 2 – PLEDGES AND ACCOUNTS RECEIVABLE

Receivables include the following pledges:

	 2020	2019
Unrestricted Contributions	\$ 81,028	\$ 37,711
Contributions restricted for maintenance of house	17,093	7,736
Ronald McDonald Care Mobile	2,645	25,300
Land and facility usage	83,950	83,950
Less interest element of 6% and 8%	(69,006)	(70,106)
Deferred FICA Tax	 4,008	
Total Pledges Receivable, due in less than 1 year	\$ 119,718	\$ 84,591

Land and facility usage due in 1 to 5 years and thereafter is as follows:

Year Ending	
December 31	Amount
2021	83,950
2022	83,950
2023	83,950
2024	83,950
Thereafter	1,966,923
Less interest element of 6% and 8%	(1,374,657)
Total	\$ 928,066
1 Otal	\$ 920,000

NOTE 3 – INCOME TAXES

The Organization qualifies as a tax-exempt organization under Section 501 (c)(3) of the Internal Revenue Code and, therefore, has no provision for federal income tax. The Organization is not classified as a private foundation.

The most significant tax position of the Organization is its assertion that it is exempt from income taxes. Other significant tax positions include its determination of whether any amounts are subject to unrelated business tax (UBIT). Management has determined the Organization had no activities subject to UBIT in the years ended December 31, 2020. All significant tax positions have been considered by management and it has determined that it is more likely than not that all tax positions would be sustained upon examination by taxing authorities.

NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2020 AND 2019

NOTE 3 – INCOME TAXES (Continued)

The Organization is required to file Form 990 (Return of Organization Exempt from Income Tax) which is subject to examination by the Internal Revenue Service (IRS) up to three years from the extended due date of the tax return. The Forms 990 for 2017 through 2019 are open to examination by the IRS as of December 31, 2020.

NOTE 4 – INVESTMENTS AND FAIR VALUE OF FINANCIAL INSTRUMENTS

The Organization held the following investments, stated at fair market value:

		2020			20	19			
Description	Level	Fair Market Value			Cost		Fair Market Value		Cost
Money Market Funds	1	\$	116,208	\$	116,208	\$	396,048	\$	396,048
The Community Foundation Funds	1		123,607		81,739		118,760		76,145
Bond Funds	1		488,527		468,835		262,493		256,601
Common Stock Funds	1		1,521,723		1,115,669		1,250,421	_	1,043,889
		\$	2,250,065	\$	1,782,451	\$	2,027,722	\$	1,772,683

The following methods and assumptions were used by the Organization in estimating its fair value disclosures for financial instruments:

- Cash, cash equivalents, certificates of deposit, short-term unconditional promises to give and accounts receivable: The carrying amounts reported in the statement of financial position approximate fair values because of the short maturities of those instruments.
- Short-term investments include cash equivalents and fixed income investments with maturities of less than one year. Short-term investments are valued using observable market data and are categorized a Level 1 to the degree that they can be valued based on quoted market prices in active markets. The majority of these short-term investments are held in U.S. Treasury money market accounts. Although these cash equivalents are readily available, it is the intent of the Organization to hold these cash equivalents for investment purposes and therefore has classified them as investments.
- Equity investments consist of corporates stocks held in mutual and exchange-traded funds. Securities held in corporate stocks are generally valued based on quoted market prices in active markets obtained from exchange or dealer markets for identical assets, and are accordingly categorized as Level 1, with no valuation adjustments applied. Corporate stocks that are traded in inactive markets are categorized as Level 2.

NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2020 AND 2019

NOTE 4 – INVESTMENTS AND FAIR VALUE OF FINANCIAL INSTRUMENTS (Continued)

• Debt investments consist of U.S. Government obligations, corporate bonds and notes and daily traded mutual funds. All investments in debt securities are valued based on quoted market prices in active markets and are categorized as Level 1.

The underlying investments in common stocks, mutual and exchange-traded funds, and fixed income are exposed to various risks, such as interest rate, market, and credit risks. Due to the level of risk associated with certain marketable securities, and the level of uncertainty related to changes in the value of the common stocks and mutual funds, it is at least reasonably possible that changes in risks in the near term could materially affect account balances and the amounts reported in the statement of financial position and the statement of activities.

Investments are held for the following purposes:

		2020	
Investments	Without Donor Restrictions	With Donor Restrictions	Total
Perpetual endowment Appreciation and earnings held for house operations	\$ - -	\$ 1,182,554 720,734	\$ 1,182,554 720,734
Funds held for house family fund Funds held for Tooth Truck Inc operations Funds held for any purpose	105,415	10,242 231,120	10,242 231,120 105,415
	\$ 105,415	\$ 2,144,650	\$ 2,250,065
		2019	
Investments	Without Donor Restrictions	With Donor Restrictions	Total
Perpetual endowment Appreciation and earnings held for house operations	\$ - -	\$ 1,182,554 526,918	\$ 1,182,554 526,918
Funds held for house family fund Funds held for Tooth Truck Inc operations Funds held for any purpose	- - 102,644	10,242 205,364	10,242 205,364 102,644
	\$ 102,644	\$ 1,925,078	\$ 2,027,722

NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2020 AND 2019

NOTE 4 – INVESTMENTS AND FAIR VALUE OF FINANCIAL INSTRUMENTS (Continued)

The following schedule summarizes the investment return and its classification in the statement of activities for the year:

	2020						
	Inve	Investment Return, Net					
	Without Donor Restrictions	With Donor Restrictions	Total				
Perpetual endowment Tooth Truck Inc House maintenance Any purpose	\$ - - 13,818	\$ 199,514 25,762 1,414	\$ 199,514 25,762 1,414 13,818				
Net investment return	\$ 13,818	\$ 226,690	\$ 240,508				
		2019					
		estment Return, N	et				
	Without Donor Restrictions						
Perpetual endowment Tooth Truck Inc House maintenance Any purpose	\$ - - 17,793	\$ 282,872 32,318 935	Total \$ 282,872 32,318 935 17,793				
Net investment return	\$ 17,793	\$ 316,125	\$ 333,918				

NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2020 AND 2019

NOTE 4 – INVESTMENTS AND FAIR VALUE OF FINANCIAL INSTRUMENTS (Continued)

ENDOWMENT FUND

The Organization's endowment consists of funds established for Ronald McDonald House improvements and maintenance. Its endowment consists solely of donor-restricted endowment funds. As required by accounting principles generally accepted in the United States of America (GAAP), net assets associated with endowment funds, are classified and reported based on the existence or absence of donor-imposed restrictions.

The State of Missouri enacted the Uniform Prudent Management of Institutional Funds Act (UPMIFA) in 2009, the provisions of which apply to endowment funds existing on or established after that date. The Board of Directors of the Organization has interpreted the UPMIFA as requiring the preservation of the fair value of the original gift as of the gift date of the donor-restricted endowment funds unless there are explicit donor stipulations to the contrary. As a result of this interpretation, the Organization classifies as net assets with donor restrictions (a) the original value of gifts donated to the permanent endowment, (b) the original value of subsequent gifts to the permanent endowment, and (c) accumulations to the permanent endowment made in accordance with the direction of the applicable donor gift instrument at the time the accumulation is added to the fund. The remaining portion of the donor-restricted endowment fund that is not classified in permanently restricted assets is classified as temporarily restricted net assets until those amounts are appropriated for expenditure by the Organization in a manner consistent with the standards of prudence prescribed by UPMIFA. In accordance with UPMIFA, the Organization considers the following factors in making a determination to appropriate or accumulate donor-restricted endowment funds:

- 1. The duration and preservation of the fund
- 2. The purposes of the Organization and the donor-restricted endowment fund
- 3. General economic conditions
- 4. The possible effect of inflation and deflation
- 5. The expected total return from income and the appreciation of investments
- 6. Other resources of the Organization
- 7. The investment policies of the Organization

NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2020 AND 2019

NOTE 4 – INVESTMENTS AND FAIR VALUE OF FINANCIAL INSTRUMENTS (Continued)

Endowment net assets composition by type of fund as of December 31, 2020 and 2019:

	 	Donoriction:	=
	2020		2019
Original donor restricted endowments required to be held in perpetuity	\$ 1,182,553	\$	1,182,553
Accumulated investment gains	 720,734		526,918
Total endowment funds	\$ 1,903,287	\$	1,709,471

Changes in endowment net assets for year ended December 31, 2020 and 2019:

	With I Restric	
	2020	2019
Endowment net assets, beginning of year	\$ 1,709,471	\$ 1,506,951
Donation	<u> </u>	
Net investment return	198,403	282,872
Amounts appropriated by: Spending-rate policy Board action	(4,587)	(75,000) (5,352)
Endowment net asset, end of year	\$ 1,903,287	\$ 1,709,471

Funds with deficiencies: From time to time, the fair value of assets associated with individual donor-restricted endowment funds may fall below the level that the donor or UPMIFA requires the Organization to retain as a fund of perpetual duration. In accordance with GAAP, deficiencies of this nature that are reported in net assets without donor restrictions were \$0 as of December 31, 2020 and 2019, respectively.

NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2020 AND 2019

NOTE 4 – INVESTMENTS AND FAIR VALUE OF FINANCIAL INSTRUMENTS (Continued)

Return objectives and risk parameters: The Organization has adopted investment and spending policies for endowment assets that attempt to provide a predictable stream of funding to programs supported by its endowment while seeking to maintain the purchasing power of the endowment assets. Endowment assets include those assets of donor-restricted funds that the Organization must hold in perpetuity. Under this policy, as approved by the Board, the endowment assets are invested in a manner that is intended to produce results that exceed the spending rate, aggregate costs of portfolio management, the long-term inflation rate and any growth factor that the Board may, from time to time, determine appropriate while assuming a moderate level of investment risk.

The Organization expects its endowment funds, over time, to provide an average rate of return of approximately 6 percent net of investment management fees. Actual returns in any given year may vary from this amount.

Strategies employed for achieving objectives: To satisfy its long-term rate-of-return objectives, the Organization relies on a total return strategy in which investment returns are achieved through both capital appreciation (realized and unrealized) and current yield (interest and dividends). The Organization targets a diversified asset allocation that places a greater emphasis on equity-based investments to achieve it long-term return objectives within prudent risk constraints.

Spending policies and how the investment objectives relate to spending policy: The Organization has a policy of appropriating for distribution each year \$75,000 to meet the financial resources needed to support operations of the Ronald McDonald House. In establishing this policy, the Organization considered the long-term expected return on its endowment. Accordingly, over the long-term, the Organization expects the current spending policy to allow its endowment to grow at a modest rate annually. This is consistent with the Organization's objective to maintain the purchasing power of the endowment assets held in perpetuity as well as to provide additional real growth through new gifts and investment return.

NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2020 AND 2019

NOTE 5 – FINANCIAL ASSETS

The following reflects the Organization's financial assets as of the balance sheet date, reduced by amounts not available for general use because of contractual or donor-imposed restrictions within one year of the balance sheet dates. Amounts not available include amounts set aside for long-term investing in the quasi-endowment that could be drawn upon if the governing board approves that action. However, amounts already appropriated from the donor-restricted endowment for general expenditure within one year of the balance sheet date have not been subtracted as unavailable.

	2020	2019
Financial assets, at year- end	\$ 4,322,083	\$ 3,742,277
Less those unavailable for general expenditures within		
one year, due to:		
Contractual or donor-imposed restrictions:		
Restricted by donor for house operations	(1,237,614)	(1,390,929)
Restricted by donor for Tooth Truck operations	(217,510)	(284,800)
Donor restrictioned for house operations	(720,734)	(526,917)
endowment earnings		
Investments held in perpetuity	(1,182,554)	(1,182,554)
Investment in life insurance policy	(10,433)	(10,062)
Board designations:		
Quasi-endowment fund, primarily for	(115,656)	(102,644)
long-term investing		
Amounts set aside for liquidity reserve	(50,000)	(50,000)
Financial assets available to meet cash		
needs for general expenditures within one year	\$ 787,582	\$ 194,371

The Organization is substantially supported by restricted contributions. Because a donor's restriction requires resources to be used in a particular manner or in a future period, the organization must maintain sufficient resources to meet those responsibilities to its donors. Thus, financial assets may not be available for general expenditure within one year. As part of the organization's liquidity management, it has a policy to structure its financial assets to be available as its general expenditures, liabilities, and excess of daily requirements in short-term investments. The board designates a portion of any operating surplus to its liquidity reserve, which was \$50,000 as of December 31, 2020 and 2019.

NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2020 AND 2019

NOTE 6 – ALLOCATION OF JOINT COSTS

For the years ended December 31, 2020 and 2019, the Organization incurred joint costs of \$67,215 and \$61,930, respectively, for informational materials and activities that included fundraising appeals. Of these costs, \$25,599 and \$23,836, respectively, were allocated to program services, \$2,424 and \$2,000, respectively, to management and general, and \$39,192 and \$36,092, respectively, were allocated to fundraising expense.

NOTE 7 – LONG-TERM LEASES

The Organization leases the tract of land on which it operates the Cox House from the Lester E. Cox Medical Center for a term of ninety-nine years at an annual rental of \$1. The lease expires in January, 2085.

The Mercy House is operated in Mercy Hospital under a 25-year lease for \$1 annually. The lease expires in March, 2037.

These pledges of land and facility usage have been recorded as pledges receivable at their discounted present value.

NOTE 8 – LICENSING AGREEMENT

The Organization has obtained a license to use the trademarks and related copyrights of the McDonald's Corporation. The term of this license continues until terminated by either party upon thirty days written notice. The Organization must continue to operate and maintain temporary housing for seriously ill children and their families, secure and maintain certain insurance policies, and use the trademarks of the McDonald's Corporation properly in order to comply with this agreement.

NOTE 9 – EMPLOYEE RETIREMENT PLAN

All employees are eligible to participate in the Organization's Simple IRA Retirement Plan. Employees may, at their own discretion, defer up to \$16,000 of their gross earnings before the contribution deduction. The Organization is required to match the employee deferral up to 3% of the employees' gross earnings. The Organization contributed \$14,213 and \$13,548 in 2020 and 2019, respectively.

NOTE 10 – CONCENTRATION OF SUPPORT

In 2020 and 2019, the Organization received donations from two fundraising events which consisted of 12.7% and 13.7%, respectively, of its total donations and fundraising revenues, with one event comprising 6.9% and 7.8%, respectively.

NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2020 AND 2019

NOTE 11 – COMMITMENTS & CONTINGENCIES

During 2002, Ronald McDonald House Charities of the Ozarks, Inc. entered into a Cooperation Agreement with The Tooth Truck, Inc. The Tooth Truck, Inc. (known as the Ronald McDonald Care Mobile) is a non-profit organization located in Springfield, Missouri established to provide free (at no cost to the patients), high quality mobile medical and/or dental care directly to underserved children in the Springfield, Missouri area. The agreement commits the Organization to making grants to The Tooth Truck, Inc. to cover all operating expense shortfalls. The Cooperation Agreement requires The Tooth Truck, Inc. to obtain the Organization's approval of its operating budget and preapproval of all expenses in excess of its budget.

NOTE 12 – NET ASSETS WITH DONOR RESTRICTIONS

Net assets are available for the following purposes:

	2020		 2019
Subject to expenditure for specified purpose:			
Ronald McDonald Care Mobile operations	\$ 217,510		\$ 284,200
Ronald McDonald House operations	307,429		 447,523
	524,939		731,723
Subject to the passage of time:			
Land and facility usage	928,066		941,911
Subject to Organization spending policy and appropriation:			
Investment in perpetuity including amounts over			
original gift of \$720,734 and \$526,918, at year-end			
2020 and 2019, respectively; which once			
appropriated, is expendable to support			
house operations.	1,903,287		 1,709,471
	\$ 3,356,292	;	\$ 3,383,105

NOTE 13 – SUBSEQUENT EVENTS

The Organization has been impacted by COVID-19 both in its ability to raise funds with live fundraising events and providing services with proper social distancing. The Organization has found alternative sources of funding and new fundraising and does not expect a significant change in its ability to deliver services. The Organization applied for and received approximately \$109,000 in loan proceeds from the Small Business Administration under the CARES Act. The Paycheck Protection Program loan was forgiven in 2021 as it will be used for payroll and utility costs. Plans have been made to hold 2021 fundraising events virtually with efforts by board and staff to secure cash donations and sponsorships prior to each event. Throughout the pandemic, the Organization has continued fulfilling its mission in every way possible using a phased approach, keeping the safety of families, patients, staff and the public top of mind.

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

► Do not enter social security numbers on this form as it may be made public. ► Go to www.irs.gov/Form990 for instructions and the latest information.

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В	Check	if applicable:	C		D Employ	er ident	ification number	
	А	ddress change	RONALD McDONALD HOUSE CHARITIES OF THE		43-	1371	143	
	N	ame change	OZARKS, INC.		E Telepho	ne num	ber	
	\mathbf{H}	_	949 E PRIMROSE		117	006	0225	
	\vdash	itial return	SPRINGFIELD, MO 65807		417	-886	-0225	
	Fi	nal return/terminated	'				_	
	A	mended return			G Gross re			845.
	Α	pplication pending	F Name and address of principal officer:	, ,	Is this a group retur		103	X No
			949 E PRIMROSE SPRINGFIELD, MO 65807	H(b)	Are all subordinates If "No," attach a list	include	d? Yes	No
ī	Tax	exempt status:	X 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 527	27	ii No, allacii a iist	See IIIs	Structions	
J		•	w.RMHCozarks.org	H(c)	Group exemption nu	ımher 🕨	•	
K		n of organization:	X Corporation Trust Association Other L Year of fo	(-,			egal domicile: MO	
Pa			7.5555.date.ii St.io. 2.16d. 61.16	omation.	1900	itate of i	egai domicile. MO	
Γđ		Summar Driefly deseri	y ha tha arganization's mission or most significant activities. The common state of th		61 - A A			
	1		be the organization's mission or most significant activities:To crea					1S
မွ			ectly improve the health and well being of o					
Activities & Governance			y through the Ronald McDonald House and Rona	<u>ald M</u>	<u>ICDonald Ca</u>	ire I	Mobile	
ᇤ		<u>Programs</u>						
8	2	Check this bo				- 1	sets.	
<u>ص</u>	3		oting members of the governing body (Part VI, line 1a)			3		18
တ္သ	4		dependent voting members of the governing body (Part VI, line 1b)			4		18
i≌	5		of individuals employed in calendar year 2020 (Part V, line 2a)			5		27
흦	6		of volunteers (estimate if necessary)			6		150
Ă			ed business revenue from Part VIII, column (C), line 12			7a		0.
	b	Net unrelated	I business taxable income from Form 990-T, Part I, line 11			7b		0.
					Prior Year		Current Ye	
d)	8		and grants (Part VIII, line 1h)		1,918,9	62.	1,719,	
Revenue	9	-	rice revenue (Part VIII, line 2g)			77.	6,	932.
ě	10		ncome (Part VIII, column (A), lines 3, 4, and 7d)		77,6	63.	30,	237.
ď	11		e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		-41,1	87.	-38,	506.
	12	Total revenue	e – add lines 8 through 11 (must equal Part VIII, column (A), line 12).		1,962,5	15.	1,717,	663.
	13	Grants and si	imilar amounts paid (Part IX, column (A), lines 1-3)		213,2	11.	168,	563.
	14	Benefits paid	to or for members (Part IX, column (A), line 4)	🗀	·			
	15		er compensation, employee benefits (Part IX, column (A), lines 5-10).		748,8	76	7.9.1	805.
es	10-			-				
ŝ	10 a		fundraising fees (Part IX, column (A), line 11e)	_	69,9	11.	68,	430.
Expenses	b	Total fundrais	sing expenses (Part IX, column (D), line 25) ► 242, 66	54.				
ш	17	Other expens	ses (Part IX, column (A), lines 11a-11d, 11f-24e)		606,9	82.	549,	142.
	18	Total expense	es. Add lines 13-17 (must equal Part IX, column (A), line 25)		1,639,0	40.	1,567,	940.
	19	Revenue less	expenses. Subtract line 18 from line 12	🗀	323,4			723.
r or			'		Seginning of Curren		End of Ye	
a is	20	Total assets	(Part X, line 16)		5,496,2		5,985,	
Bal	21		s (Part X, line 26)		12,6			557.
Net Assets Fund Balan				-	•		•	
<u> z</u> r	22		fund balances. Subtract line 21 from line 20		5,483,5	58.	5,829,	707.
	rt II	Signatur						
Unde	er pena	Ities of perjury, I de	eclare that I have examined this return, including accompanying schedules and statements, an arer (other than officer) is based on all information of which preparer has any knowledge.	nd to the b	est of my knowledge	and beli	ef, it is true, correct,	and
		I.	(
		Signatu	re of officer		Doto			
Siç He	jn 💮	Signatu	re of officer		Date			
He	re		inda Thurman	Ι	reasurer			
		- ''	print name and title					
		Print/Type p	preparer's name Preparer's signature Date		Check	if	PTIN	
Pa	id	Greg I	DeGood Greg DeGood		self-employe	ed	P00608698	
	epar						<u> </u>	
Us	e Or	ily Firm's addre			Firm's FIN	1 2	-1604407	
_	_	addire	Springfield, MO 65804		Phone no.		-887-1888	
Mar	/ the	IRS discuss th	is return with the preparer shown above? See instructions				X Yes	No
ivid	y tile	u.scuss III	no retain with the proparer onewit above: dee instructions				. 21 1 5	110

Par	rt III Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III	X
1	· · · · · · · · · · · · · · · · · · ·	А
•	To create, find and support programs that directly improve the health and we	ll boing
	of children in the Ozarks, primarily through the Ronald McDonald House and F	. <u>011a1u</u>
	McDonald Care Mobile Programs.	
2	Did the organization undertake any significant program services during the year which were not listed on the prior	
_		res X No
	If "Yes," describe these new services on Schedule O.	
3		Yes X No
	If "Yes," describe these changes on Schedule O.	<u> </u>
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured	by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the to and revenue, if any, for each program service reported.	tal expenses,
	and revenue, if any, for each program service reported.	
4.	a (Code:) (Expenses \$ 956.431, including grants of \$) (Revenue \$)
4 a		
	See Schedule O	
4h	b (Code:) (Expenses \$ 277,833. including grants of \$ 168,563.) (Revenue \$)
	The Grantmaking Program provides financial assistance to the operations of t	,
	McDonald Care Mobile through The Tooth Truck, Inc.	
4 c	c (Code:) (Expenses \$ including grants of \$) (Revenue \$)
		
4 d	d Other program services (Describe on Schedule O.)	
	(Expenses \$ including grants of \$) (Revenue \$)
	e Total program service expenses ► 1,234,264.	

1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes', complete Schedule B. Schedule B. Schedule of Contributors See instructions? 2 Is the organization required to complete Schedule B. Schedule of Contributors See instructions? 3 Just the organization engage in idea or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes', complete Schedule C. Part II. 4 Section 501(x)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(t) election in effect during the fax year? If 'Yes', complete Schedule C. Part III. 5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6), organization that receives membership dues assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes', complete Schedule C. Part III. 5 Did the organization maintain any donor advised funds or any similar funds or accounts? If 'Yes', complete Schedule C. Part III. 6 Did the organization maintain any donor advised funds or any similar funds or accounts? If 'Yes', complete Schedule D. Part III. 7 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes', complete Schedule D. Part III. 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes', complete Schedule D. Part III. 9 Did the organization report an amount in Part X, line 21, for escrew or outdoil account liability, serve as a custoding for amounts and listed in Part X iii or provide cordice ourseling, oth management, credit repair, or debt negotiation services? If 'Yes', complete Schedule D. Part IV. 10 Did the organization report an amount for indepting other management, credit repair, or debt negotiation services? If 'Yes, complete Schedule D. Part IV. 11 Did the organization report an amount for investments – program related in Part X, line 12 it 'Yes', complete Schedule D. Part X. 11 Did t				Yes	No
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14a Did the organization maintain an office, employees, or agents outside of the United States? 14a X b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV. 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If 'Yes,' complete Schedule F, Parts II and IV. 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If 'Yes,' complete Schedule F, Parts III and IV. 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I See instructions. 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1 and 8a? If 'Yes,' complete Schedule G, Part II. 18 X 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III. 19 X 20a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H. 20a X b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b Lide organization report more than \$5,000 of grants or other assistance to any domestic organization or	ŀ	Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV. 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If 'Yes,' complete Schedule F, Parts II and IV. 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If 'Yes,' complete Schedule F, Parts III and IV. 16 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I See instructions. 17 X 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II. 18 X 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III. 19 X 20a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H. 20a X 20b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		Х
business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV. 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If 'Yes,' complete Schedule F, Parts III and IV. 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If 'Yes,' complete Schedule F, Parts III and IV. 17 Did the organization report at total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I See instructions. 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II. 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III. 19 Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H. 20a X 20a Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	14 a	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		Χ
foreign organization? If 'Yes,' complete Schedule F, Parts II and IV. Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If 'Yes,' complete Schedule F, Parts III and IV. Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I See instructions. 17 X 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II. 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III. 20a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H. 20a X 20a Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	ŀ	business, investment, and program service activities outside the United States, or aggregate foreign investments valued	14b		Х
or for foreign individuals? If 'Yes,' complete Schedule F, Parts III and IV	15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If 'Yes,' complete Schedule F, Parts II and IV	15		Х
column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I See instructions	16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If 'Yes,' complete Schedule F, Parts III and IV</i>	16		Х
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II. 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III. 20a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H. 20a X 20b Lif 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b Lif 'Yes' to granization report more than \$5,000 of grants or other assistance to any domestic organization or	17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I See instructions	17	Х	
complete Schedule G, Part III	18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18	Х	
b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	19		19		Х
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	20 a	Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20a		X
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	b	If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
	21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II.	21	Х	

Form 990 (2020) RONALD McDONALD HOUSE CHARITIES OF THE

Part IV Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22		X
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J.</i>	23		Х
24 8	a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25a	24a		Х
ı	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
•	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
(d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		Х
ı	s Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If 'Yes,' complete Schedule L, Part II</i>	26		Х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If 'Yes,' complete Schedule L, Part III.	27		Х
	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions):			
í	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If 'Yes,' complete Schedule L, Part IV.	28a		Х
ı	A family member of any individual described in line 28a? If 'Yes,' complete Schedule L, Part IV.	28b		X
(A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If Yes,' complete Schedule L, Part IV.	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If 'Yes,' complete Schedule M</i>	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II.	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If 'Yes,' complete Schedule R, Part I</i>	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Part II, III, or IV, and Part V, line 1.	34		Х
35 a	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
I	o If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If 'Yes,' complete Schedule R, Part V, line 2</i>	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If 'Yes,' complete Schedule R, Part VI</i>	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O.	38	Х	
Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			. No
1:	a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		Yes	NO
	b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
(c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming		3.7	
RΛΛ	(gambling) winnings to prize winners?	1 c	X gan	2020

Form 990 (2020) RONALD McDONALD HOUSE CHARITIES OF THE

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

			Yes	No
	a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a 27			
ı	f at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
	a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a		X
ı	a If 'Yes,' has it filed a Form 990-T for this year? <i>If 'No' to line 3b, provide an explanation on Schedule 0</i>	3 b		
4 8	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4 a		Х
ı	o If 'Yes,' enter the name of the foreign country►			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
	a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		X
•	c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5 c		
6 8	a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6 a		Х
ı	a If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b		
7	Organizations that may receive deductible contributions under section 170(c).			
á	a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and			
	services provided to the payor?	7 a		Х
	f 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7с		Х
	d If 'Yes,' indicate the number of Forms 8282 filed during the year	_		X
	e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e 7 f		X
		/1		Λ
	g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 g		
	Form 1098-C?	7 h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring			
	organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
ä	a Did the sponsoring organization make any taxable distributions under section 4966?	9 a		
ı	bid the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9 b		
	Section 501(c)(7) organizations. Enter:			
	a Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10 b			
	Section 501(c)(12) organizations. Enter:			
	a Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	10.		
	a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b	12a		
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	a Is the organization licensed to issue qualified health plans in more than one state?	13a		
•	Note: See the instructions for additional information the organization must report on Schedule O.	104		
ı	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand			
	a Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
	If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation on Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
-	excess parachute payment(s) during the year?	15		Х
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х
	If 'Yes,' complete Form 4720, Schedule O.			

Form 990 (2020) RONALD McDONALD HOUSE CHARITIES OF THE 43-1371143 Page 6 Part VI Governance, Management, and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI. Section A. Governing Body and Management No Yes 1 a Enter the number of voting members of the governing body at the end of the tax year. 18 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. **b** Enter the number of voting members included on line 1a, above, who are independent. . . . 18 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other Χ 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?..... 3 Χ Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Χ 4 X Did the organization become aware during the year of a significant diversion of the organization's assets?.... 5 Χ Did the organization have members or stockholders?..... 6 7 a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?..... 7 a Χ **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?..... Χ 7 b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body?.... X 8a X **b** Each committee with authority to act on behalf of the governing body?..... 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses on Schedule Q..... 9 **Section B. Policies** (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10 a Did the organization have local chapters, branches, or affiliates?..... 10 a Χ b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?..... Χ b Describe in Schedule O the process, if any, used by the organization to review this Form 990. See Schedule O Χ 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13...... 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise 12b Χ to conflicts?.... c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Χ Schedule O how this was done 12c 13 Did the organization have a written whistleblower policy?..... 13 Χ Χ **14** Did the organization have a written document retention and destruction policy?..... 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? X a The organization's CEO, Executive Director, or top management official...... 15 a **b** Other officers or key employees of the organization..... 15 b X If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?..... 16 a X **b** If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?... 16 b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed None Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply X Upon request Other (explain on Schedule O) See Sch. O Own website Another's website Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to 19 the public during the tax year. See Schedule O State the name, address, and telephone number of the person who possesses the organization's books and records

BONNIE KELLER 949 E PRIMROSE SPRINGFIELD MO 65807 417-886-0225

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

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

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

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

See instructions for the order in which to list the persons above.

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

		Position (do not check more than one box, unless person is both an officer and a director/trustee)								
(A) Name and title	(B) Average hours per						on	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other
	week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	compensation from the organization and related organizations
(1) Bonnie Keller CEO	<u> 50</u> _			V				117 (20	0	0
	0			Χ				117,629.	0.	0.
	2	Х						0.	0.	0.
(3) Tyler Cockrum	2									
Director	0	Χ						0.	0.	0.
(4) Dana Barbo	2									
Director	0	Χ						0.	0.	0.
(5) Laura Robinson	2									
Director	0	Χ						0.	0.	0.
	2									
Director	0	Χ						0.	0.	0.
(7) Peter Connolly	2									
Director	0	Χ						0.	0.	0.
(8) James Hallam	2									
Director	0	X						0.	0.	0.
(9) Scott Meier	2									
Director	0	Χ						0.	0.	0.
(10) Jean Grabeel	2									
Director	0	X						0.	0.	0.
(11) David Taylor	2									
Director	0	X						0.	0.	0.
(12) Melinda Thurman	2									
Treasurer	0	Χ		Χ				0.	0.	0.
(13) Trish Musick	2									
Director	0	X						0.	0.	0.
(14) W. Bradley Risby	2									
Director	0	Χ						0.	0.	0.

Part VII Section A. Officers, Directors, 110							and	a Hignest Com	ipensated Emp	oyees	(conti	nued)	
	(B)	Position (do not check more than one											
(A)	Average	(do	not o	check	more	than	one	(D)	(E)		(F)		
Name and title	per	waak					tee)	Reportable compensation from	Reportable compensation from	Estim	Estimated amount of other		
	(list any hours	or o	sul	Off	Κe	High	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compe	nsation rganizat	from	
	for related	individual trustee or director	Institutional trustee	Officer	Key employee	nest Noye	mer er			an	d related	d	
	organiza - tions	र्ष्ट्र व	onal		ploy	e car				9			
	below dotted	uste	sn.p		8	pen							
	line)	0	99			Highest compensated employee							
(15) Angolo Dotnick	2												
(15) Angela Patrick Secretary	<u> 2</u>	Х		Х				0.	0.			0.	
(16) Drian Ashanny	2	Λ		Λ				0.	0.			<u> </u>	
Chairperson	0	Х		Χ				0.	0.			0.	
(17) Ryan Blumenstock	2							<u> </u>					
Director	0	Χ						0.	0.			0.	
(18) Eddie Marmouget	2												
Director	0	Х						0.	0.			0.	
(19) Donna Powers	2												
Vice Chair	0	Χ		Χ				0.	0.			0.	
(20)													
(01)													
(21)													
(22)													
(22)													
(23)													
		•											
(24)													
(25)													
1 h Coducted								117 600	^				
1 b Subtotal							•	117,629.	0.			0.	
c Total from continuation sheets to Part VII, Section A								0.					
Total number of individuals (including but not limited							ved			ensatio	n	0.	
from the organization 1				,				,					
											Yes	No	
3 Did the organization list any former officer, direct	tor, truste	e, ke	ey e	mpl	oyee	e, or	high	nest compensated	employee				
on line 1a? If 'Yes,' complete Schedule J for such individual								. 3		X			
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from													
the organization and related organizations greater than \$150,000? If 'Yes,' complete Schedule J for such individual							. 4		Х				
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual													
for services rendered to the organization? If 'Yes,' complete Schedule J for such person								. 5		Χ			
Section B. Independent Contractors	امما امما		ا مر مام				م مالا	t received means th	¢100 000 -f				
1 Complete this table for your five highest compen compensation from the organization. Report compen	sated muc sation for	the c	alen	dar j	year	endi	เกล ng v	with or within the or	ganization's tax year				
(A) Name and business address								(B)		(C)			
Name and business address							Description of	of services	Compe	ensatio	n		
2 Total number of independent contractors (including t	out not limi	ited t	o thr	ose I	lister	d aho	ve)	who received more	than				
\$100,000 of compensation from the organization							-/						
-													

		Check if Schedule O contains a response or note to any	y line in this Part V	TIL		
			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	b c d e f	Federated campaigns				
ontri od O	•	lines 1a-1f				
<u>ෂ</u> ර	h	Total. Add lines 1a-1f ▶ Business Code	1,719,000.			
/enu	2 a	<u>VENDING</u> 722210	6,932.	6,932.		
Program Service Revenue	b		0,302.	0,30=1		
ervic	c d					
mS	е					
ogra		All other program service revenue				
Ā	<u> </u>	Total. Add lines 2a-2f ▶	6,932.			
	3	Investment income (including dividends, interest, and other similar amounts)	37,353.			37,353.
	4	Income from investment of tax-exempt bond proceeds				
	5	Royalties				
	6 a	Gross rents 6a				
		Less: rental expenses 6b				
		Rental income or (loss) 6c Net rental income or (loss)				
		(i) Securities (ii) Other				
	/ a	Gross amount from sales of assets other than inventory 7a 412,174.				
	b	Less: cost or other basis				
	С	and sales expenses 7b 419,290. Gain or (loss) 7c -7,116.				
		Net gain or (loss)	-7,116.	-7,116.		
Other Revenue	8 a	Gross income from fundraising events (not including $\frac{5}{100000000000000000000000000000000000$				
r R		See Part IV, line 18 8a 8,386 Less: direct expenses 8b 46,892				
)the		Less: direct expenses 8b 46,892. Net income or (loss) from fundraising events	-38,506.			-38,506.
)		Gross income from gaming activities. See Part IV, line 19	30,300.			30,300.
	b	Less: direct expenses 9b				
	С	Net income or (loss) from gaming activities ▶				
	10 a	Gross sales of inventory, less				
		Less: cost of goods sold 10b				
	С	Net income or (loss) from sales of inventory				
Snc	11 a	Business Code				
	b					
Miscellaneous Revenue	11 a b c d					
MIS. R		All other revenue Total. Add lines 11a-11d				
	<u>е</u> 12		1,717,663.	-184.	0.	-1,153.

Part IX Statement of Functional Expenses

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

	Check if Schedule O contains a re				
	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	168,563.	168,563.		
2	Grants and other assistance to domestic individuals. See Part IV, line 22	·	·		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members	117,629.	87,946.	10,149.	19,534.
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages	598,410.	447,405.	51,632.	99,373.
-	Pension plan accruals and contributions	330,410.	447,403.	31,032.	33,313.
8	(include section 401(k) and 403(b) employer contributions)	14,213.	9,959.	1,071.	3,183.
9	Other employee benefits				
10	Payroll taxes	51,553.	39,148.	4,411.	7,994.
	Fees for services (nonemployees):				
	Management				
	Legal				
	Accounting	13,003.		13,003.	
	Lobbying				
	Professional fundraising services. See Part IV, line 17	68,430.			68,430.
	Investment management fees	1,107.		1,107.	
	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule 0.) Advertising and promotion				
13	Office expenses				
14	Information technology				
15	Royalties.				
16	Occupancy				
17	Travel	68.	148.		-80.
18	Payments of travel or entertainment expenses for any federal, state, or local public officials		2200		331
19					
20 21	Interest				
	Depreciation, depletion, and amortization	108,115.	100 115		
	Insurance		108,115.		
23 24		36,261.	36,261.		
2-7	covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
á	Supplies	234,431.	234,431.		
	Publicity	56,938.	19,575.		37,363.
(Utilities	18,120.	18,120.		0.,000.
(Repairs	14,803.	14,803.		
	All other expenses.	66,296.	49,790.	9,639.	6,867.
	Total functional expenses. Add lines 1 through 24e	1,567,940.	1,234,264.	91,012.	242,664.
26					,

		Check if Schedule O contains a response or note to	o any line	e in this Part X	<u></u>	<u></u>	<u></u>
					(A) Beginning of year		(B) End of year
	1	Cash — non-interest-bearing				1	
	2	Savings and temporary cash investments	588,194.	2	767,890.		
	3	Pledges and grants receivable, net			88,233.	3	119,718.
	4	Accounts receivable, net				4	
	5	Loans and other receivables from any current or form trustee, key employee, creator or founder, substantia controlled entity or family member of any of these pe	ner officer I contribu	r, director, itor, or 35%			
	_			-		5	
	6	Loans and other receivables from other disqualified p section 4958(f)(1)), and persons described in section				6	
	7	Notes and loans receivable, net				7	
ţ	8	Inventories for sale or use				8	
Assets	9	Prepaid expenses and deferred charges				9	
⋖	10 a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a	3,122,557.			
	b	Less: accumulated depreciation	10 b	1,459,376.	1,753,938.	10 c	1,663,181.
	11	Investments – publicly traded securities			2,027,722.	11	2,360,321.
	12	Investments – other securities. See Part IV, line 11.				12	
	13	Investments - program-related. See Part IV, line 11.				13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11			1,038,128.	15	1,074,154.
	16	Total assets. Add lines 1 through 15 (must equal line	5,496,215.	16	5,985,264.		
	17	Accounts payable and accrued expenses			8,320.	17	36,597.
	18	Grants payable		L	•	18	·
	19	Deferred revenue		<u> </u>		19	
	20	Tax-exempt bond liabilities		<u> </u>		20	
es	21	Escrow or custodial account liability. Complete Part		L		21	
Liabilities	22	Loans and other payables to any current or former of key employee, creator or founder, substantial contribution controlled entity or family member of any of these pe	ficer, dire utor, or 3 ersons	ector, trustee, 5%		22	
_	23	Secured mortgages and notes payable to unrelated the		_		23	
	24	Unsecured notes and loans payable to unrelated third	•	<u> </u>		24	
	25	Other liabilities (including federal income tax, payable and other liabilities not included on lines 17-24). Com	•		4,337.		118,960.
	26	Total liabilities. Add lines 17 through 25			12,657.	26	155,557.
ces		Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33.	e ► [X	·		,
<u>=</u>	27	Net assets without donor restrictions			2,100,453.	27	2,473,415.
Ba	28	Net assets with donor restrictions		-	3,383,105.	28	3,356,292.
Net Assets or Fund Balance		Organizations that do not follow FASB ASC 958, che and complete lines 29 through 33.	ck here	· 🗆	0/000/1001		0,000,132.
F	29	Capital stock or trust principal, or current funds				29	
2	30	Paid-in or capital surplus, or land, building, or equipm		30			
ŝ	31	Retained earnings, endowment, accumulated income		31			
Ž	32	Total net assets or fund balances		<u> </u>	5,483,558.	32	5,829,707.
Š	33	Total liabilities and net assets/fund balances		<u> </u>	5,496,215.	33	5,985,264.
- BA			TEEA0111L		J, 4JU, 21J.		Form 990 (2020)

						<u> </u>
Pai	TXI Reconciliation of Net Assets Chack if Schodula O contains a response or note to any line in this Part XI					
	Check if Schedule O contains a response or note to any line in this Part XI.					
1	Total revenue (must equal Part VIII, column (A), line 12)			•		63.
2	Total expenses (must equal Part IX, column (A), line 25).		1	,56	7,9	40.
3	Revenue less expenses. Subtract line 2 from line 1					23.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))		5	,48	3,5	58.
5	Net unrealized gains (losses) on investments.	5		21	0,2	69.
6	Donated services and use of facilities	6		-1	3,8	343.
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain on Schedule O)	9				0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,	10	_			
	column (B))	10	5	, 82	9,7	07.
Pai	t XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					. 🔲
)	es	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.					
2.	a Were the organization's financial statements compiled or reviewed by an independent accountant?		<u> </u>	2 a		Х
2 6				2 a		
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review separate basis, consolidated basis, or both:	ed on a				
	Separate basis Consolidated basis Both consolidated and separate basis					
	b Were the organization's financial statements audited by an independent accountant?			2 b	Х	
•	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate of the second o	ate		- 10		
	basis, consolidated basis, or both:	atc				
	X Separate basis Consolidated basis Both consolidated and separate basis					
	If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audi	t,				
	review, or compilation of its financial statements and selection of an independent accountant?		2	2 c	Χ	
	If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.					
3 8	a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		:	3 a		Х
ı	If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required au	dit				
•	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			3 b		
BAA	TEEA0112L 10/19/20		Fo	orm \$	990 ((2020)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization Employer identification number RONALD McDONALD HOUSE CHARITIES OF THE OZARKS, 43-1371143 Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or An organization that normally receives (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after 10 June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box in 12 lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.** Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations **q** Provide the following information about the supported organization(s). (i) Name of supported organization (iii) Type of organization (described on lines 1-10 above (see instructions)) (v) Amount of monetary (iv) Is the organization listed (vi) Amount of other support (see instructions) support (see instructions) in your governing document? No (A) (B) (C) (D) (E) Total

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

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

Sec	tion A. Public Support				•		
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')	1,002,146.	1,367,090.	1,428,048.	1,924,957.	1,787,630.	7,509,871.
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0.
4	Total. Add lines 1 through 3	1,002,146.	1,367,090.	1,428,048.	1,924,957.	1,787,630.	7,509,871.
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						449,571.
6	Public support. Subtract line 5 from line 4						7,060,300.
Sec	tion B. Total Support						, ,
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
7	Amounts from line 4	1,002,146.	1,367,090.	1,428,048.	1,924,957.	1,787,630.	7,509,871.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	24,750.	32,080.	41,610.	40,921.	37,353.	176,714.
9	Net income from unrelated business activities, whether or not the business is regularly carried on	= 5, 15 0 1		12,020	50,022	. , , , , , ,	0.
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						0.
11	Total support. Add lines 7 through 10						7,686,585.
12	Gross receipts from related activ	vities, etc. (see ins	structions)			12	0.
13	First 5 years. If the Form 990 is organization, check this box and	for the organization	on's first, second,	third, fourth, or f	ifth tax year as a	section 501(c)(3)	▶
Sec	tion C. Computation of Pu	blic Support P	ercentage				
	Public support percentage for 20						91.85 %
15	Public support percentage from	2019 Schedule A,	Part II, line 14			15	91.63%
16a	33-1/3% support test—2020. If t and stop here. The organization	he organization di qualifies as a pul	id not check the bolicly supported o	oox on line 13, an rganization	d line 14 is 33-1/3	3% or more, check	this box ► X
b	33-1/3% support test—2019. If the and stop here. The organization	ne organization did qualifies as a pu	d not check a box blicly supported o	on line 13 or 16a organization	a, and line 15 is 3	3-1/3% or more, o	heck this box
17a	10%-facts-and-circumstances te or more, and if the organization the organization meets the facts	meets the facts-a	nd-circumstances	test, check this	box and stop here	e. Explain in Part '	VI how
	10%-facts-and-circumstances te or more, and if the organization organization meets the 'facts-an	meets the facts-a d-circumstances	nd-circumstances test. The organiza	s test, check this lation qualifies as	box and stop here a publicly support	e. Explain in Part 'ed organization.	VI how the ►
18	Private foundation. If the organi	zation did not che	ck a box on line	13, 16a, 16b, 17a	, or 17b, check th	is box and see ins	structions ►

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

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

Sec	tion A. Public Support		piodes samplets				
Calend	dar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')	.,	,,		.,		
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose.						
3	Gross receipts from activities that are not an unrelated trade or business under section 513.						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year.						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)						
Sec	tion B. Total Support		1			, ,	
	dar year (or fiscal year beginning in) 🕨	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
	Add lines 10a and 10b. Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.).						
	Total support. (Add lines 9, 10c, 11, and 12.)						
	First 5 years. If the Form 990 is organization, check this box and	stop here					▶ □
	tion C. Computation of Pul			10		1 1	
	Public support percentage for 20	•	• • • • • • • • • • • • • • • • • • • •		•		%
	Public support percentage from 2					16	0/0
	tion D. Computation of Inv					T T	
17	Investment income percentage for	•	• • •	-			0,0
18	Investment income percentage fi					LL	%
	33-1/3% support tests—2020. If t is not more than 33-1/3%, check	this box and sto	p here. The organ	ization qualifies a	as a publicly supp	orted organization	▶ 📗
	33-1/3% support tests—2019. If t line 18 is not more than 33-1/3% Private foundation. If the organization	, check this box	and stop here. Th	e organization qu	ualifies as a public	cly supported organ	nization ►

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If 'No,' describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section	•		
	509(a)(1) or (2)? If 'Yes,' explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2		
За	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If 'Yes,' answer lines 3b and 3c below.	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If 'Yes,' describe in Part VI when and how the organization made the determination.	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If 'Yes,' explain in Part VI what controls the organization put in place to ensure such use.	3с		
4 a	Was any supported organization not organized in the United States ('foreign supported organization')? If 'Yes' and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If 'Yes,' describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If 'Yes,' explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c		
5а	Did the organization add, substitute, or remove any supported organizations during the tax year? If 'Yes,' answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If 'Yes,' provide detail in Part VI</i> .	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If 'Yes,' provide detail in Part VI .	9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If 'Yes,' provide detail in Part VI.	9b		
c	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If 'Yes,' provide detail in Part VI .	9с		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations)? If 'Yes,' answer line 10b below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.).	1 0 b		

Part	t IV	Supporting Organizations (continued)				
11	Lloc t	the examination eccented a gift or contribution from any of the following persons?		Yes	No	
		the organization accepted a gift or contribution from any of the following persons? son who directly or indirectly controls, either alone or together with persons described in lines 11b and 11c below,				
		overning body of a supported organization?	11a			
b	A fan	nily member of a person described in line 11a above?	11b			
		controlled entity of a person described in line 11a or 11b above? If 'Yes' to line 11a, 11b, or 11c, provide detail in Part VI .	11c			
Sect	tion I	B. Type I Supporting Organizations				
1	Did #	he governing body, members of the governing body, officers acting in their official capacity, or membership of one		Yes	No	
	or mo office organ than	ore supported organizations have the power to regularly appoint or elect at least a majority of the organization's ers, directors, or trustees at all times during the tax year? If 'No,' describe in Part VI how the supported inization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers				
		g the tax year.	1			
	that o	the organization operate for the benefit of any supported organization other than the supported organization(s) operated, supervised, or controlled the supporting organization? If 'Yes,' explain in Part VI how providing such fit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the orting organization.	2			
Sect	tion (C. Type II Supporting Organizations				
				Yes	No	
1	Were	a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees ch of the organization's supported organization(s)? If 'No,' describe in Part VI how control or management of the				
		orting organization was vested in the same persons that controlled or managed the supported organization(s).	1			
Sect	tion I	D. All Type III Supporting Organizations				
1	Did #	he organization provide to each of its supported organizations, by the last day of the fifth month of the		Yes	No	
	organ	nization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax				
		(ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the nization's governing documents in effect on the date of notification, to the extent not previously provided?	1			
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported					
	organization(s) or (ii) serving on the governing body of a supported organization? If 'No,' explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).					
3	By ros	ason of the relationship described in line 2, above, did the organization's supported organizations have a significant				
	voice	in the organization's investment policies and in directing the use of the organization's income or assets at mes during the tax year? If 'Yes,' describe in Part VI the role the organization's supported organizations played				
		ines duffing the tax year: If Tes, describe in Fait VI the fole the organization's supported organizations played is regard.	3			
Sect	tion I	E. Type III Functionally Integrated Supporting Organizations				
1	Check	k the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).				
а	Т	The organization satisfied the Activities Test. Complete line 2 below.				
b	Пτ	The organization is the parent of each of its supported organizations. Complete line 3 below.				
С	Пτ	he organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see	instrı	ıctions	s).	
•	A - 1::	The Tark Annual Page On and Oh halves	ļ			
		ities Test. Answer lines 2a and 2b below.		Yes	No	
	suppo organ respo	substantially all of the organization's activities during the tax year directly further the exempt purposes of the organization(s) to which the organization was responsive? If 'Yes,' then in Part VI identify those supported **nizations and explain how these activities directly furthered their exempt purposes, how the organization was consive to those supported organizations, and how the organization determined that these activities constituted				
	subst	tantially all of its activities.	2a			
		he activities described in line 2a, above, constitute activities that, but for the organization's involvement, one or of the organization's supported organization(s) would have been engaged in? If 'Yes,' explain in Part VI the				
	reaso	ons for the organization's position that its supported organization(s) would have engaged in these activities or the organization's involvement.	2b			
		nt of Supported Organizations. <i>Answer lines 3a and 3b below.</i>				
а	Did th	the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of				
		of the supported organizations? If 'Yes' or 'No,' provide details in Part VI.	3a			
		ne organization exercise a substantial degree of direction over the policies, programs, and activities of each of its orted organizations? If 'Yes,' describe in Part VI the role played by the organization in this regard.	3b			

	Type III Non Functionally Intervened FOO(s) Supporting Our			71143 Page
Pa				
1	Check here if the organization satisfied the Integral Part Test as a qualifying trus instructions. All other Type III non-functionally integrated supporting organization	t on N	ov. 20, 1970 (explain ir st complete Sections A	n Part VI). See through E.
Sec	tion A — Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
_ 7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sec	tion B — Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
	Average monthly value of securities	1a		
	Average monthly cash balances	1b		
	Fair market value of other non-exempt-use assets	1c		
	Total (add lines 1a, 1b, and 1c)	1d		
	Discount claimed for blockage or other factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sec	tion C — Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functionally inte (see instructions).	egrated	d Type III supporting or	ganization

Schedule A (Form 990 or 990-EZ) 2020

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Pai	t V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (cont	inued)	
Sec	tion D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1	
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3	
4	Amounts paid to acquire exempt-use assets	4	
5	Qualified set-aside amounts (prior IRS approval required – provide details in Part VI)	5	
6	Other distributions (describe in Part VI). See instructions.	6	
7	Total annual distributions. Add lines 1 through 6.	7	
8	Distributions to attentive supported organizations to which the organization is responsive (provide details		
	in Part VI). See instructions.	8	
9	Distributable amount for 2020 from Section C, line 6	9	
10	Line 8 amount divided by line 9 amount	10	

Section E — Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2020	(iii) Distributable Amount for 2020
1 Distributable amount for 2020 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2020 (reasonable cause required — explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2020			
a From 2015			
b From 2016			
c From 2017			
d From 2018			
e From 2019			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2020 distributable amount			
i Carryover from 2015 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2020 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2020 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2020, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6 Remaining underdistributions for 2020. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI . See instructions.			
7 Excess distributions carryover to 2021. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2016			
b Excess from 2017			
c Excess from 2018			
d Excess from 2019			
e Excess from 2020			
DAA		Calaadada A /Ea	000 000 EZ\ 200

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Schedule A (Form 990 or 990-EZ) 2020

Page 8

Part VI

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

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization RONALD McDONALD HOUSE CHARITIES OF THE

PUBLIC DISCLOSURE COPY Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF. ► Go to www.irs.gov/Form990 for the latest information.

Employer identification number

2020

OMB No. 1545-0047

	OZARKS,	INC. 43-1371143						
Organiz	ation type (check one)							
Filers of	f:	Section:						
Form 99	0 or 990-EZ	X 501(c)(3) (enter number) organization						
		4947(a)(1) nonexempt charitable trust not treated as a private foundation						
		527 political organization						
Form 99	0-PF	501(c)(3) exempt private foundation						
		4947(a)(1) nonexempt charitable trust treated as a private foundation						
		501(c)(3) taxable private foundation						
Note: Or	Check if your organization is covered by the General Rule or a Special Rule . Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.							
General	Rule							
		ing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.						
Special	Rules							
X	under sections 509(a) received from any or	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33-1/3% support test of the regulations (1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that he contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.						
	during the year, total purposes, or for the	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational prevention of cruelty to children or animals. Complete Parts I (entering 'N/A' in column (b) instead of the d address), II, and III.						
	during the year, cont \$1,000. If this box is charitable, etc., purp	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, ributions <i>exclusively</i> for religious, charitable, etc., purposes, but no such contributions totaled more than checked, enter here the total contributions that were received during the year for an <i>exclusively</i> religious, ose. Don't complete any of the parts unless the General Rule applies to this organization because <i>sively</i> religious, charitable, etc., contributions totaling \$5,000 or more during the year.						
		isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or lo' on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF,						

Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

RONALD McDONALD HOUSE CHARITIES OF THE

Employer identification number

43-1371143

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional s	pace is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$40,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$252,191.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$50,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>4</u>		\$ <u>53,632.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>5</u>		\$35,366.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>6</u>		\$169,465.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

1

Name of organization Employer identification number

RONALD McDONALD HOUSE CHARITIES OF THE

43-1371143

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
N/A			
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$ 	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date receive
		 \$ 	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date receive
<u> </u>		 \$	

Name of organ	nization				
C.TAMOR	McDONAT.D	HOUSE	CHARTTIES	\bigcirc F	THE

Employer identification number 43-1371143

	or (10) that total more than \$1,000 for the following line entry. For organizations contributions of \$1,000 or less for the year. Use duplicate copies of Part III if additional	ompleting Part III, enter the tota (Enter this information once. So	al of exclusively religio	ous, charitable, etc.,
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(c	d) Description of how gift is held
	N/A			·
		(e) Transfer of gif	t	
	Transferee's name, addres	ss, and ZIP + 4	Relationship	of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(0	d) Description of how gift is held
		(e) Transfer of gif	t	
	Transferee's name, addres			of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(c	d) Description of how gift is held
	Transferee's name, addres	(e) Transfer of gif ss, and ZIP + 4		of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(c	d) Description of how gift is held
	Transferee's name, addres	(e) Transfer of gifes, and ZIP + 4		of transferor to transferee

Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8),

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service Inspection Name of the organization RONALD McDONALD HOUSE CHARITIES OF THE OZARKS, INC. 43-1371143 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Part I Complete if the organization answered 'Yes' on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year..... 1 Aggregate value of contributions to (during year). Aggregate value of grants from (during year)...... Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?... No Yes Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring No impermissible private benefit?.... Yes **Conservation Easements.** Complete if the organization answered 'Yes' on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year a Total number of conservation easements. 2 a **b** Total acreage restricted by conservation easements. 2 b c Number of conservation easements on a certified historic structure included in (a)..... d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register..... Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, No and enforcement of the conservation easements it holds?.... Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 7 ▶\$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?..... In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered 'Yes' on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1. (ii) Assets included in Form 990, Part X..... If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items: a Revenue included on Form 990, Part VIII, line 1.....

b Assets included in Form 990, Part X.....

Part III Organizations Maintai	ning Collections	of Art, HISTO	oricai	reasures, or	Otner	Similar Ass	ets (C	ontinu	ea)
3 Using the organization's acquisition items (check all that apply):	, accession, and other	records, check a	ny of t	he following that m	ake signi	ficant use of its	collection	n	
a Public exhibition		d Loan	or exc	hange program					
b Scholarly research		e Other							
c Preservation for future gener	ations								
4 Provide a description of the organiz Part XIII.	ation's collections and	explain how they	/ furthe	er the organization's	s exempt	purpose in			
5 During the year, did the organiza to be sold to raise funds rather the	nan to be maintained	as part of the o	organiz	zation's collection?	?		Yes		No
Part IV Escrow and Custodia line 9, or reported an					swered	'Yes' on Fo	rm 99	0, Par 	t IV,
1 a Is the organization an agent, trus on Form 990, Part X?	tee, custodian or oth	er intermediary	for co	ntributions or othe	er assets	not included	Yes	Г	No
b If 'Yes,' explain the arrangement	in Part XIII and com	plete the followi	ng tab	ole:		•			_
							Amoun	t	
c Beginning balance					1 c	:			
d Additions during the year					1 d	I			
e Distributions during the year					1 e				
f Ending balance					1f			-	
2 a Did the organization include an a						liability?	Yes		No
b If 'Yes,' explain the arrangement						-			┪┈
2		oro ii tilo oxpiai		nac scon provide				· · · · · L	_
Part V Endowment Funds. C	omplete if the or	ranization an	ISW/Ar	ed 'Yes' on Fo	rm 990) Part IV lir	ne 10		
Lindowinent i dinds.	(a) Current year	(b) Prior year		(c) Two years back		Three years back		Four years	e hack
1 a Beginning of year balance	1,710,630.	1,508,1		1,695,619		1,635,427.		, 656,	
b Contributions	1,710,630.	1,300,1	11.	1,095,01	9.	1,033,427.		, 656,	000.
D Continuations									
c Net investment earnings, gains,	100 400	202 0	70	107.06	,	1 4 1 1 1 1		60	F 2 1
and losses	198,403.	282,8	12.	-107,963	3.	141,111.		60,	531.
d Grants or scholarships									
e Other expenditures for facilities and programs	-4,587.	80,3	53.	79,54	5.	80,919.		81,	190.
f Administrative expenses	1,160.								
g End of year balance	1,903,286.	1,710,6	30.	1,508,113	1.	1,695,619.	1	,635,	427.
2 Provide the estimated percentage	e of the current year	end balance (lin	ne 1g,	column (a)) held	as:				
a Board designated or quasi-endowm	ent ►	%							
b Permanent endowment ▶	%								
c Term endowment ►	%								
The percentages on lines 2a, 2b, ar	nd 2c should equal 100	1%							
	·								
3 a Are there endowment funds not in t	he possession of the o	rganization that a	are hel	d and administered	for the		ſ	Yes	No
organization by: (i) Unrelated organizations							3a(i)	163	
(ii) Related organizations							,,,		X
• • • • • • • • • • • • • • • • • • • •							3a(ii)		X
b If 'Yes' on line 3a(ii), are the rela	-	•					. 3b		
4 Describe in Part XIII the intended		ation's endowme	ent fur	nds. See Par	t XII	I			
Part VI Land, Buildings, and	• •								
Complete if the organi	zation answered	'Yes' on Forr	n 990	0, Part IV, line	11a. S	See Form 99	0, Par	t X, Iir	ne 10.
Description of property		t or other basis vestment)		Cost or other pasis (other)		ccumulated preciation	(d)	Book va	alue
1 a Land		,			<u> </u>				
b Buildings				2,486,154.	1	040,335.	1	, 445,	. 819
c Leasehold improvements				52,834.		43,371.			, 463.
d Equipment									
· ·				185,182.		105,765.			<u>, 417.</u>
e Other		000 D: 1 Y	1	398,387.		269,905.			<u>, 482.</u>
Total. Add lines 1a through 1e. (Colum	rı (a) must equal For	rri 990, Part X, (columi	n (B), line TUC.)		······	1	, 663,	,181.

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Schedule D (Form 990) 2020

Part VII Investments — Other Securities. Complete if the organization answered	L'Voc' on Form 99	N/A N Part IV lina 11h Saa Farm 9	an Part V lina 12
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of	
(1) Financial derivatives	(D) Doon tunus	(c) mounds of variations cost of one of	your market value
(2) Closely held equity interests.			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
(l)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 12.) ▶			
Part VIII Investments — Program Related.		N/A	
Complete if the organization answered			
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-	of-year market value
(1)			
(2)			
(3)			
(4)			
_ (5)			
(6)			
(7)			
(8)			
(9)			
(10)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) Part IX Other Assets.			
Complete if the organization answered	I 'Yes' on Form 99	0, Part IV, line 11d. See Form 9	90, Part X, line 15
	scription		(b) Book value
(1) CASH VALUE OF LIFE INSURANCE			10,433.
(2) CERTIFICATE OF DEP			150,599.
(3) PLEDGES RECEIVABLE			913,122.
<u>(4)</u> (5)			
(6)			
(7)			
(8)			
(9)			
(10)			
Total. (Column (b) must equal Form 990, Part X, column (c)	B) line 15.)		1,074,154.
Part X Other Liabilities.			
Complete if the organization answered 'Yes' on F		11e or 11f. See Form 990, Part X, line 25.	
	iption of liability		(b) Book value
(1) Federal income taxes			0.460
(2) ACCRUED PAYROLL LIABILITIES (3) PPP LOAN			9,469. 109,491.
(4)			109,491.
(5)			
(6)			
(7)			
(8)			
(9)			
(10)			
(11)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 25.)	·····	>	118,960.
2. Liability for uncertain tax positions. In Part XIII, provide the text of the fo	=		
tay positions under FASR ASC 710. Check here if the text of the footpote has	hoon provided in Part VIII	٩٧	e Part XIII 🛛

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Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per R	eturn.	
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.		
1 Total revenue, gains, and other support per audited financial statements	1	2,062,845.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a Net unrealized gains (losses) on investments		
b Donated services and use of facilities		
c Recoveries of prior year grants 2c d Other (Describe in Part XIII.) See Part XIII 2d 46,892.		
e Add lines 2a through 2d.	2 e	345,182.
3 Subtract line 2e from line 1.	3	1,717,663.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b		
b Other (Describe in Part XIII.) 4b		
c Add lines 4a and 4b.	4 c	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		1,717,663.
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per	Retur	'n.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.		
1 Total expenses and losses per audited financial statements		
1 Total expenses and losses per addited infancial statements	1	1,716,697.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:	ı	1,716,697.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities		1,716,697.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:		1,716,697.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities		1,716,697.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities	-	1,716,697.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities	-	1,716,697. 148,757.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities	-	
2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities	2 e	148,757.
Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities	2 e	148,757.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities	2e 3	148,757.
Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities	2e 3	148,757.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Part V, Line 4 - Intended Uses Of Endowment Fund

Part XIII Supplemental Information.

BAA

Permanently Restricted Endowment - These net assets are permanently restricted by donors and cannot be used by the Organization. Income and capital gains are to be used to operate the Ronald McDonald House.

Temporarily Restricted Endowment - These net assets are temporarily restricted for use to operate the Ronald McDonald House and are generated by income and capital

gains from the permanently restricted endowment.

Schedule D (Form 990) 2020

Part XIII Supplemental Information (continued)

Part X - FASB ASC 740 Footnote

The Organization qualifies as a tax-exempt organization under Section 501 (c)(3) of the Internal Revenue Code and, therefore, has no provision for federal income tax.

The Organization is not classified as a private foundation.

The most significant tax position of the Organization is its assertion that it is exempt from income taxes. Other significant tax positions include its determination of whether any amounts are subject to unrelated business tax (UBIT). Management has determined the Organization had no activities subject to UBIT in the years ended December 31, 2020 or 2019. All significant tax positions have been considered by management and it has determined that it is more likely than not that all tax positions would be sustained upon examination by taxing authorities.

The Organization is required to file Form 990 (Return of Organization Exempt from Income Tax) which is subject to examination by the Internal Revenue Service (IRS) up to three years from the extended due date of the tax return. The Forms 990 for 2017 through 2019 are open to examination by the IRS as of December 31, 2020.

Schedule D, Part XI, Line 2d Other Revenue Included In F/S But Not Included On Form 990

COST OF DIRECT DONOR BENEFITS \$ 46,892.

Total \$ 46,892.

Schedule D, Part XII, Line 2d Other Expenses And Losses Per Audited F/S

COST OF DIRECT DONOR BENEFITS \$ 46,892.

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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

Attach to Form 990 or Form 990-EZ.

► Go to www.irs.gov/Form990 for instructions and the latest information. Name of the organization RONALD McDONALD HOUSE CHARITIES OF THE

OMB No. 1545-0047

Open to Public Inspection

Employer identification number OZARKS, 43-1371143 Fundraising Activities. Complete if the organization answered 'Yes' on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply. X Mail solicitations Solicitation of non-government grants Internet and email solicitations Solicitation of government grants Phone solicitations Special fundraising events X In-person solicitations X Yes **b** If 'Yes,' list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (v) Amount paid to (vi) Amount paid to (i) Name and address of individual (iii) Did fundraiser (iv) Gross receipts (or retained by) (ii) Activity (or retained by) or entity (fundraiser) have custody or control of contributions? from activity fundraiser listed in organization column (i) TRUESENSE MARKETING Yes No 502 KEYSTONE DR DIGITAL Χ 120,711. 68,430 WARRENDALE PA 15086 52,281. MARKETING 2 3 5 6 7 9 10 Total. 120,711 52,281. List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

Schedule G (Form 990 or 990-EZ) 2020 RONALD McDONALD HOUSE CHARITIES OF THE 43-1371143 Fundraising Events. Complete if the organization answered 'Yes' on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. **(b)** Event #2 (d) Total events (a) Event #1 (c) Other events (add column (a) RED SHOE GALA HOUSE ANNUAL through column (c) (event type) (event type) (total number) Revenue **1** Gross receipts..... 158,682. 135,502. 475,892. 770,076. 2 Less: Contributions..... 150,296 135,502. 475,892 761,690. **3** Gross income (line 1 minus line 2)..... 8,386 8,386. Direct Expenses Rent/facility costs..... 7 Food and beverages **9** Other direct expenses..... 36,692. 10,200. 46,892. 10 Direct expense summary. Add lines 4 through 9 in column (d)..... 46,892. Net income summary. Subtract line 10 from line 3, column (d)..... -38,506. Gaming. Complete if the organization answered 'Yes' on Form 990, Part IV, line 19, or reported more than Part III \$15,000 on Form 990-EZ, line 6a. (b) Pull tabs/instant (d) Total gaming Revenue (add column (a) through column (c)) (a) Bingo bingo/progressive bingo (c) Other gaming Gross revenue..... **2** Cash prizes..... Direct Expenses Rent/facility costs..... **5** Other direct expenses..... Yes Yes Yes No No No 7 Direct expense summary. Add lines 2 through 5 in column (d)...... 8 Net gaming income summary. Subtract line 7 from line 1, column (d)..... **9** Enter the state(s) in which the organization conducts gaming activities: a Is the organization licensed to conduct gaming activities in each of these states?..... **b** If 'No,' explain:

b If 'Yes,' explain:

10 a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year?.....

Sche	edule G (Form 990 or 990-EZ) 2020 RONALD McDONALD HOUSE CHARITIES OF THE 43	3-1371143	Page 3
	Does the organization conduct gaming activities with nonmembers?	····· Yes	No
12	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming?	Yes	No
13	Indicate the percentage of gaming activity conducted in:		
	a The organization's facility.	13a	%
ŀ	b An outside facility	13 b	ૄ
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records		
	Name ►		
	Address ►		
ŀ	a Does the organization have a contract with a third party from whom the organization receives gaming revenue by If 'Yes,' enter the amount of gaming revenue received by the organization squared		No
	Name •		
	Address •		
16	Gaming manager information:		
	Name •		
	Gaming manager compensation ► \$		
	Description of services provided ►	. – – – – – – –	
	□ Director/officer □ Employee □ Independent contractor		
17	Mandatory distributions:		
	a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year \$		No
Pai	Supplemental Information. Provide the explanations required by Part I, line 2b, col and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any information. See instructions.	umns (iii) and (y additional	v);

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered 'Yes' on Form 990, Part IV, line 21 or 22. ► Attach to Form 990.

► Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

OZARKS, INC.	LD HOUSE CHARI		1			Employer identification 43-137114	
Part I General Information on G	rants and Assista	nce					
 Does the organization maintain records the selection criteria used to award the Describe in Part IV the organization's presented. 	ne grants or assistanc	e?		' eligibility for the grants o	or assistance, and		X Yes No
Part II Grants and Other Assistant Form 990, Part IV, line 21,							
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) The Tooth Truck Inc 949 E Primrose Springfield, MO 65807	41-2028871		168,563.	0.			Operating cost of mobile dental care
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
2 Enter total number of section 501(c)()3 Enter total number of other organizat	•	-					$\begin{array}{c c} & & 1 \\ \hline & & 0 \end{array}$

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
1					
2					
3					
4					
5					
5					
7					

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

BAA Schedule I (Form 990) 2020

SCHEDULE L (Form 990 or 990-EZ)

Transactions With Interested Persons

► Complete if the organization answered 'Yes' on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b. ► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047 2020

Open To Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

RONALD McDONALD HOUSE CHARITIES OF THE OZARKS, INC.

Employer identification number 43-1371143

Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and section 501(c)(29) organizations only). Complete if the organization answered 'Yes' on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b. (b) Relationship between disqualified person and (d) Corrected? 1 (c) Description of transaction (a) Name of disqualified person organization Yes No (1) (2) (3)(4) (5) (6) 2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958.

Part II Loans to and/or From Interested Persons.

Complete if the organization answered 'Yes' on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22.

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	fror	an to or n the ization?	(e) Original principal amount	(f) Balance due	(g) In (lefault?	(h) Ap by bo comm	proved ard or nittee?	(i) Wi agreei	ritten ment?
			То	From			Yes	No	Yes	No	Yes	No
(1)												
(2)												
(3)												
(4)												
(5)												
(6)												
(7)												
(8)												
(9)												
(10)												
Total												

Grants or Assistance Benefiting Interested Persons.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 27.

	(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					

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

Schedule L (Form 990 or 990-EZ) 2020

Part IV Business Transactions Involving Interested Persons. Complete if the organization answered 'Yes' on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) SAVANNAH KELLER	DAUGHTER OF PR	19,401.	EMPLOYMENT		X
(2) KENNEDY KELLER	DAUGHTER OF PR	5,944.	EMPLOYMENT		X
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					

Part V Supplemental Information.

Provide additional information for responses to questions on Schedule L (see instructions).

SCHEDULE M (Form 990)

Noncash Contributions

► Complete if the organizations answered 'Yes' on Form 990, Part IV, lines 29 or 30.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

► Attach to Form 990.

Open to Public Inspection

Name of the organization RONALD McDONALD HOUSE CHARITIES OF THE OZARKS, INC.

| Part I | Types of Property | Types of Property | Employer identification number | 43-1371143

	1) pes of Froperty				
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1	Art — Works of art				
	Art — Historical treasures				
3	Art — Fractional interests				
4	Books and publications				
5	Clothing and household goods			152,249.	
6	Cars and other vehicles			/	
7	Boats and planes				
8	Intellectual property				
9	Securities – Publicly traded				
10	Securities – Closely held stock				
11	Securities - Partnership, LLC, or trust interests .				
12	Securities - Miscellaneous				
13	Qualified conservation contribution — Historic structures				
14	Qualified conservation contribution — Other				
15	Real estate – Residential				
16	Real estate — Commercial				
17	Real estate – Other.				
18	Collectibles				
19	Food inventory.		450	50,290.	Purchase Price
20	Drugs and medical supplies			,	
21	Taxidermy				
22	Historical artifacts.				
23	Scientific specimens				
24	Archeological artifacts				
25	Other ► ()		5	5,602.	Market Vaule
	Other ► ()				
	Other ► ()				
28	Other ► ()				<u> </u>
29	Number of Forms 8283 received by the organization d				
	organization completed Form 8283, Part V, Dones	e Acknowled	gement		29
					Yes No
30a	During the year, did the organization receive by contri	bution any pr	roperty reported in Part I	, lines 1 through 28, that	
	it must hold for at least three years from the date			•	
	for exempt purposes for the entire holding period?	<i>?</i>			30 a X
	If 'Yes,' describe the arrangement in Part II.				2
	Does the organization have a gift acceptance police		-		ns? 31 X
	Does the organization hire or use third parties or noncash contributions?	•	· •		32a X
b	If 'Yes,' describe in Part II.				
33	If the organization didn't report an amount in colu	mn (c) for a	type of property for wh	nich column (a) is chec	ked,

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

Schedule M (Form 990) 2020

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

BAA TEEA4602L 08/18/20 Schedule M (Form 990) 2020

SCHEDULE 0 (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ. ► Go to www.irs.gov/Form990 for the latest information.

2020 Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

RONALD McDONALD HOUSE CHARITIES OF THE OZARKS, INC

Employer identification number

OMB No. 1545-0047

43-1371143

Form 990, Part III, Line 4a - Program Service Accomplishments

The mission of Ronald McDonald House Charities® of the Ozarks, Inc. Helping Parents Cope, Inc.) is to create, find and support programs that directly improve the health and well being of children and families in the Ozarks. core program is the Ronald McDonald House®, where we provide a "home away from home", hope and comfort for families of seriously ill and injured children receiving medical treatment in Springfield. Our two Ronald McDonald Houses have embraced 14,319 families during a time of unspeakable hardship, welcoming 357 families in 2020. The first Ronald McDonald House opened near Cox South Hospital on March 20, 1988. second House opened on the 6th floor of Mercy Kids on November 30, 2012. our Ronald McDonald House mission, staff and volunteers have proudly worked in partnership with Mercy Kids since 2010 to provide individually-packaged snacks and food items for families with children in the Pediatric Intensive Care Unit and Pediatric Unit. Each week, the Ronald McDonald House delivers items to each kitchen and nourishment cart to help alleviate the additional financial burden on families. In 2013 we expanded these services to include a nourishment basket in the Labor and Delivery Bereavement Room. In 2014, the Mercy Sleep Lab and NICU were added to the areas we supply with snack items. The Happy Wheels Program was launched in January 2014 for the primary purpose of ensuring that all families needing the Houses are learning about our services. In 2020, more than 2,000 care bags and snack items were provided to families and children within Cox South and Mercy departments that refer to the Ronald McDonald Houses.

Our second core program is the Ronald McDonald Care Mobile®, a mobile dental clinic fondly known as the "Tooth Truck". We provide dental treatment and prevention

Name of the organization RONALD McDONALD HOUSE CHARITIES OF THE OZARKS, INC.

Employer identification number 43-1371143

Form 990, Part III, Line 4a - Program Service Accomplishments

child is never turned away due to lack of Medicaid coverage. Throughout the process, our goal is to complete every child's treatment plan and do everything possible to increase each child's self esteem. The Tooth Truck is a joint project between RMHC of the Ozarks Inc and the Tooth Truck, Inc. and has provided 59,917 dental appointments for 27,403 children since July 8, 2002. This dental treatment is valued at \$18,577,198. In 2020, the Tooth Truck provided \$1.23 million in dental treatment for 1,250 children through 1,869 dental appointments. The Tooth Truck launched a daily onsite Tooth-brushing Program for early childhood education students at one school in 2011. By the end of 2020, 5,146 children were participating in the program at 31 schools and 27 nonprofit organizations. The program was formally named the Healthy Smiles Academy in 2015 and will continue to be expanded over 3 years, thanks to a grant from the Missouri Foundation for Health in late 2014.

Form 990, Part VI, Line 11b - Form 990 Review Process

The organization provided an electronic "Draft" copy of Form 990 to all Board members for review prior to its Board approval and filing.

Form 990, Part VI, Line 18 - Explanation of Other Means Forms Available For Public Inspection

Form 990 is substantially available for review at Guidestar.com.

Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available

The Organization makes its governing documents, conflicts of interest policy and financial statements available to the public upon request.

Conflict of Interest Policy Monitoring

The board members are required to disclose conflicts of interest according to this policy.

Section 8. Director's Conflict of Interest. A conflict of interest will be presumed in any transaction involving the corporation and a director in which the director

Name of the organization RONALD McDONALD HOUSE CHARITIES OF THE OZARKS, INC.

Employer identification number 43-1371143

has a material interest. A material interest will be presumed in any transaction from which the director would receive a fee, commission, bonus, or other financial renumeration, whether direct or indirect, except for his or her salary or wage as an employee. In advance of any such transaction, the Board of Directors or the Executive Committee may approve the proposed transaction upon a full disclosure of the material facts, and upon a belief that the transaction is in good faith and is not unfair to the corporation. If such a transaction comes to light after it has already taken place, the Board shall obtain the approval of the transaction by the Missouri Attorney General, or by the Circuit Court of Greene County in an action in which the Attorney General is joined as a party. Any meeting of the Board of Directors or the Executive Committee which is to consider such a transaction must include in its notice a description of the matter which must be approved.

2020

Federal Worksheets RONALD McDONALD HOUSE CHARITIES OF THE OZARKS, INC.

Page 1

43-1371143

Special Events Workshe

		Less		Less	Net
	Gross	Contri-	Gross	Direct	Income
Special Event	Receipts	butions	Revenue	Expenses	or Loss
RED SHOE GALA	\$ 158,682.	\$ 150,296.	\$ 8,386.		-28,306.
HOUSE ANNUAL	135,502.	135,502.	0.	0.	, O.
Subtotal	\$ 294,184.	\$ 285,798.	\$ 8,386.	\$ 36,692.	-28,306.
True Sense	120,711.	120,711.	0.	0.	0.
SHARE A HEART, BASS,	109,203.	109,203.	0.	0.	0.
RED FRIDAY	73,200.	73,200.	0.	10,200.	-10,200.
Penny Per Pound	60,819.	60,819.	0.	0.	0.
GRIN IRON CLASSIC	38,230.	38,230.	0.	0.	0.
PRICE CUTTER CHARITY	35,366.	35,366.	0.	0.	0.
CUP O CHEER HOMES TOUR	30,168.	30,168.	0.	0.	0.
TRUCK ANNUAL	8,195.	8,195.	0.	0.	0.
*Subtotal	\$ 475,892.	\$ 475,892.	\$ 0.	\$ 10,200.	-10,200.
Total	\$ 770,076.	\$ 761,690.	\$ 8,386.	\$ 46,892.	-38,506.

^{*}Events combined on the return as the third event.

Form 990, Part III, Line 4e Program Services Totals

	Program Services Total	Form 990	Source
Total Expenses	1,234,264.	168,563.	Part IX, Line 25, Col. B
Grants	168,563.		Part IX, Lines 1-3, Col. B
Revenue	0.		Part VIII, Line 2, Col. A

Form 990, Part IX, Line 24e Other Expenses

_	(A) Total	(B) Program Services	(C) Management & General	(D) <u>Fundraising</u>
Contract Services Donor recognition Education Family fund Grounds Loss on retirement Membership Miscellaneous Office Postage and Shipping Printing Printing Printing and Publications Telephone Van Expense Vending	6,573. 1,151. 427. 1,468. 900. 3,095. 2,282. 5,894. 13,883. 2,744. 5,505. 4,772. 8,155. 2,683. 2,579.	6,354. 249. 348. 1,468. 900. 3,095. 1,944. 3,613. 11,321. 915. 1,252. 4,772. 4,112. 2,683. 2,579.	2,014. 2,115. 216. 2,424. 2,870.	219. 902. 79. 338. 267. 447. 1,613. 1,829.

2	n	7	n
Z	u	Z	u

Federal Worksheets RONALD McDONALD HOUSE CHARITIES OF THE OZARKS, INC.

Page 2

43-1371143

Form 990, Part IX, Line 24e (continued) Other Expenses

		(A)	(B)	(C)	(D)
	_	Total	Program Services	Management <u>& General</u>	Fundraising
Volunteer	Total \$	4,185. 66,296.	4,185. \$ 49,790.	\$ 9,639.	\$ 6,867.

Excess Contributions Schedule A, Part II, Line 5

2016	2017	2018	2019	2020	<u>Total</u>	2% Amt	Excess
JOHN Q HAMMONS 44,559	FOUND 41,681	41,793	43,250	0	171,283	153,732	17,551
Greater Spfld 15,000	Dental 15,000	15,000	15,000	15,000	75,000	0	0
MCDONALDS OZAL 57,936	RK CO-OP 53,148	61,000	61,000	11,155	244,239	153,732	90,507
RMHC GLOBAL 30,000	57,083	26,371	129,600	252,191	495,245	153,732	341,513
147,495	166,912	144,164	248,850	278,346	985,767	461,196	449,571