

# Return of Organization Exempt From Income Tax

**2015**

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

- ▶ Do not enter social security numbers on this form as it may be made public.
- ▶ Information about Form 990 and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

**A** For the 2015 calendar year, or tax year beginning , 2015, and ending ,

<b>B</b> Check if applicable:	<b>C</b>	<b>D</b> Employer identification number		
<input type="checkbox"/> Address change	KENTUCKY RACE TRACK CHAPLAINCY, INC P. O. BOX 324 SIMPSONVILLE, KY 40067	31-1571797		
<input type="checkbox"/> Name change		<b>E</b> Telephone number	502-636-4476	
<input type="checkbox"/> Initial return		<b>G</b> Gross receipts \$	306,972.	
<input type="checkbox"/> Final return/terminated		<b>F</b> Name and address of principal officer:	<b>H(a)</b> Is this a group return for subordinates?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
<input type="checkbox"/> Amended return		Same As C Above	<b>H(b)</b> Are all subordinates included?	Yes <input type="checkbox"/> No <input type="checkbox"/>
<input type="checkbox"/> Application pending		If "No," attach a list. (see instructions)		
<b>I</b> Tax-exempt status	<input checked="" type="checkbox"/> 501(c)(3)	<input type="checkbox"/> 501(c) ( ) ▶ (insert no.)	<input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527	
<b>J</b> Website: ▶	KYCHAPLAINCY.ORG			
<b>K</b> Form of organization:	<input checked="" type="checkbox"/> Corporation	<input type="checkbox"/> Trust	<input type="checkbox"/> Association <input type="checkbox"/> Other ▶	
<b>L</b> Year of formation:	1998	<b>M</b> State of legal domicile:	KY	

**Part I Summary**

	1 Briefly describe the organization's mission or most significant activities: <u>THE MISSION IS TO MAINTAIN A STRONG EFFECTIVE CHAPLAIN MINISTRY POINTING ALL RACETRACK PERSONNEL TO JESUS CHRIST BY PROVIDING LEADERSHIP, ACCOUNTABILITY, FINANCES, VOLUNTEERS AND SUPERVISION TO OUR CHAPLAINS, WHO SERVE THE SPIRITUAL, PHYSICAL AND SOCIAL NEEDS OF THOSE ON</u>					
Activities & Governance	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.					
	3 Number of voting members of the governing body (Part VI, line 1a)	3		10		
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4		0		
	5 Total number of individuals employed in calendar year 2015 (Part V, line 2a)	5		4		
	6 Total number of volunteers (estimate if necessary)	6		50		
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a		0.		
	7b Net unrelated business taxable income from Form 990-T, line 34	7b		0.		
Revenue	8 Contributions and grants (Part VIII, line 1h)		Prior Year	215,353.	Current Year	140,103.
	9 Program service revenue (Part VIII, line 2g)					
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)		511.		374.	
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)				121,718.	
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		215,864.		262,195.	
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)		70,853.		7,941.	
	14 Benefits paid to or for members (Part IX, column (A), line 4)					
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		173,987.		112,689.	
	16a Professional fundraising fees (Part IX, column (A), line 11e)					
	b Total fundraising expenses (Part IX, column (D), line 25) ▶					
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		79,816.		123,197.		
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		324,656.		243,827.		
19 Revenue less expenses. Subtract line 18 from line 12		-108,792.		18,368.		
Net Assets or Fund Balances	20 Total assets (Part X, line 16)		Beginning of Current Year	344,900.	End of Year	363,268.
	21 Total liabilities (Part X, line 26)			0.		0.
	22 Net assets or fund balances. Subtract line 21 from line 20			344,900.		363,268.

**Part II Signature Block**

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

<b>Sign Here</b>	▶ Signature of officer	Date	
	▶ <u>LARRY EDWARDS</u>	Treasurer	
<b>Paid Preparer Use Only</b>	Print/Type preparer's name	Preparer's signature	Date
	Roger Bloyd, CPA		
	Firm's name ▶	Stephens & Lawson	
	Firm's address ▶	5203 Dixie Hwy Louisville, KY 40216	
	Check <input type="checkbox"/> if self-employed	PTIN	
		P00234428	
	Firm's EIN ▶	61-1242942	
	Phone no.	502-448-4376	

May the IRS discuss this return with the preparer shown above? (see instructions)  Yes  No

TO RECEIVE AN EXPANDED COPY OF FORM 990  
FOR KENTUCKY RACE TRACK CHAPLAINCY  
PLEASE CONTACT US AT 502.636.4476 OR  
INFO@KYCHAPLAINCY.ORG  
THANK YOU FOR YOUR INTEREST.