NOTICE

GuideStar has been informed by the IRS of processing errors on IRS Forms 990 filed electronically between January 1, 2009, and December 3, 2010, for form year 2008. These processing errors resulted in inaccurate data appearing on the scanned images of the affected returns that are posted on GuideStar and do not reflect the information filed with the IRS.

These errors include:

- Part III, line 1, organization's mission description—may not reflect what was originally submitted by the nonprofit organization.
- Part VIII, line 8a, gross income for special events—values may have been transposed.
- Part IX, line 7c, other salaries and wages, management and general expenses—may show a blank where a value was originally reported.
- Schedule D, Part V, line 3a(ii), endowment funds and possession by related organizations—checkbox values may have been transposed.

GuideStar is working with the IRS to obtain a corrected copy of its form year 2008 Form 990. GuideStar will replace this Form 990 if, and when, the accurate return is made available from the IRS.

For more information, please visit http://www2.guidestar.org/rxg/help/form-year-2008-returns.aspx



Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

► The organization may have to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0047 Open to Public Inspection

A Fo	r the	2008 c	alendar year	r, or tax year beginning 01-01-	2008	and ending 12-31-2008	3			
		applicable	Please	C Name of organization RODMAN RIDE FOR KIDS INC				D Employer ide	entification number	
☐ Ad	dress c	hange	use IRS label or	Doing Business As				04-332928 E Telephone nu		
∏ Na	me cha	ange	print or type. See	Doing Business vis				-		
Ind	ıal retu	ırn	Specific Instruc-	Number and street (or P O box if	mail is n	ot delivered to street addres	ss) Room/suite	(800) 395-		
Те	mınatı	on	tions.	10 Lincoln Road				d dioss receip	(5 \$ 7,449,370	
┌ Am	ended	return		City or town, state or country, and	d ZIP + 4	•				
Гар	olicatio	n pending		FOXBORO, MA 02035						
			F Nam	re and address of Principal Off	ficer		H(a) Ic thu	Ls a group return	for	
			donald	rodman .			affilia		⊤Yes ▼No	
				COLN ROAD RO,MA 02035						
T Ta	x-exer	npt status		(3) ◄ (insert no)	L) or	527		affiliates include		
				deforkids org	<u> </u>			o, attach a iist p Exemption Nu	See instructions) mber ▶	
, VV	CD SIG	ie. F ww	wioumamin	relocklus org			11(0)	· · · · · · · · · · · · · · · · · ·		
К Тур	e of or	ganızatıon	Corporati	on trust association other l	•		L Year of For	mation 1996 M	State of legal domicile MA	
Da	rt I	l Gum	mary							
Fa	1	•	•	e organization's mission or mo	st siani	ficant activities				
a 1	-	•		ADVANTAGED YOUTHS FRO	-		AL BACKGRO	DUNDS		
Governance		. 0 52.		TO THE THE TENE						
<u> </u>										
₹ ē	2	Check	this box 🦵	ıf the organizatıon discontinue	d its op	erations or disposed o	f more than 2	5% of its asset:	s	
ŝ	3	Numbe	r of voting n	nembers of the governing body	/ (Part \	/I, line 1a)		3 _	8	
	4	Numbe	r of ındepen	dent voting members of the go	verning	j body (Part VI, line 1b)	. 4	7	
Activities &	5	Total n	umber of em	nployees (Part V , line 2a) .				5 _	0	
\$	6	Total n	umber of vo	lunteers (estimate if necessar	y) .			6 _	0	
व	7a	Totalg	ross unrelat	ted business revenue from Par	t VIII,	line 12, column (C) .		7a _	0	
	ь	Netun	related busi	ness taxable income from Forr		7b	0			
					Prio	r Year	Current Year			
	8	Contr	ibutions and	grants (Part VIII, line 1h)			5,808,203	6,746,050		
을	9 Program service revenue (Part VIII, line 2g)								0	
Ravent	10	Inves	tment incon	ne (Part VIII, column (A), lıne	s 3, 4,	and 7d)		65,484	37,972	
Ť	11	Other	revenue (Pa	art VIII, column (A), lines 5, 6		279,625	24,525			
	12		revenue—ac	dd lines 8 through 11 (must eg	qual Par	t VIII, column (A), lıne	2	6 1 5 2 2 1 2	6,808,547	
	12	12)		ır amounts paıd (Part IX, colur	(4)	l.man 1 3)		6,153,312	· · ·	
	13			,		•		5,606,258	6,963,670	
	14			r for members (Part IX, colum Impensation, employee benefit						
\$	15	10)	es, other co	miperisation, employee benefit	.s (rait	1x, column (x), mes 5	-		0	
Expenses	16a	Profes	sional fund	raising fees (Part IX, column (A), line	11e)			0	
ੜੇ	ь	(Total 1	undraising exp	penses, Part IX, column (D), line 25 ())				
ш	17	•		Part IX, column (A), lines 11a		11f-24f)		448,495	442,985	
	18	Total	expenses—	add lines 13–17 (must equal l	Part IX,	line 25, column (A))		6,054,753	7,406,655	
	19	Rever	iue less exp	enses Subtract line 18 from l	ıne 12			98,559	-598,108	
<u>광</u>							Beginni	ng of Year	End of Year	
9 <u>4</u>	20	Total	assets (Par	t X, line 16)				5,280,675	4,686,987	
Ass Be	21	Total	lıabılıtıes (P	art X, line 26)				5,055,811	5,007,526	
Net Assets or Fund Balances	22		•	d balances Subtract line 21 fr	om line	20		224,864	-320,539	
	t III	_	nature Blo					22 .,00 .	323,553	
				rjury, I declare that I have examined	I this retu	rn, including accompanying	schedules and s	tatements, and to t	the best of my knowledge	
		and be	ief, it is true, o	correct, and complete Declaration of	preparer	(other than officer) is based	d on all informat	on of which prepar	er has any knowledge	
Plea Sign		***	*** nature of office					11-13		
Her		[]					Date			
			ald Rodman P e or print name							
		F '',P	- Fine hall			Data		Dra / DTT	I (Coo Con Turt)	
			parer s			Date 2009-11-13	Check If self-	Preparer's PIIN	l (See Gen Inst)	
Paid			nature P				empolyed •	-		
Use	pare	Firr	n's name (or y							
Onl		ıf s	elf-employed) Iress, and ZIP	, + 4				EIN Þ		
Jill	7		200, GIN EIF	O'CONNOR & DREW PC						
				25 BRAINTREE HILL OFFICE PA	ARK SUIT	E		Phone no 🕨 ((617) 471-1120	
				BRAINTREE, MA 02184				, , = ====		

Part III	Statement of	Program S	ervice Acc	complishments	(See the	instructions \

	Briefly describe the organization's mission				
	TO PROVIDE SERVICES TO DISADVANTAGED YO	JUTHS			
2	Did the organization undertake any s the prior Form 990 or 990-EZ? .		rvices during the year w	vhich were not listed on	Yes V No
	If "Yes," describe these new services	on Schedule O			
3			changes in how it cond	ucts any program 	Yes V No
	If "Yes," describe these changes on S	Schedule O			
4	Describe the exempt purpose achiev Section 501(c)(3) and (4) organization others, the total expenses, and rever	ons and 4947(a)(1) t	rusts are required to rep	port the amount of grants an	
4a	(Code) (Expenses S TO PROVIDE SERVICES TO DISADVANTAGED		ıncludıng grants of \$) (Revenue \$)
4b	(Code) (Expenses s	<u> </u>	ıncludıng grants of \$) (Revenue \$)
	, , , ,	•		, ,	,
4c	(Code) (Expenses s	\$	ıncludıng grants of \$) (Revenue \$)
4d	Other program services (Describe	•			
	(Expenses \$	including grants of) (Revenue \$)
4e	Total program service expenses \$	6,963,67) Must equal Part IX, L	ine 25, column (B).	

Part IV	Checklist of	Required	Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		Νο
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		Νο
5	Section $501(c)(4)$, $501(c)(5)$, and $501(c)(6)$ organizations. Is the organization subject to the section $6033(e)$ notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
8	the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	7		N o
9	complete Schedule D, Part III	8		N o
9	provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		Νο
10	Did the organization hold assets in term, permanent,or quasi-endowments? If "Yes," complete Schedule D, Part V	10		No
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D,		Yes	
	Parts VI , VII , VIII , IX , or X as applicable	11	165	
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII.	12	Yes	
13	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the US?	14a		Νο
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U S ? If "Yes," complete Schedule F, Part I	14b		N o
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If</i> "Yes," complete Schedule F, Part II	15		N o
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If</i> "Yes," complete Schedule F, Part III	16		No
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17		No
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		Νo
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		Νο
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J	23		No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to question 25	24a		No
ь	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in an excess benefit transaction with	25a		N o
b	a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a 25b		No No
26	from a prior year? If "Yes," complete Schedule L, Part I	230		140
20	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No

Part VI . . .

Part IV Checklist of Required Schedules (Continued)

			res	NO
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part			
	IV	28a		Νo
b	Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV	28b		Νο
С	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? <i>If "Yes," complete Schedule L, Part IV</i> .	28c		Νo
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 🕏	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		Νο
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Νo
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		Νo
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations section 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		Νo
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35		Νο
36	501(c)(3) organizations Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		Νο
37	Did the organization conduct more than 5 percent of its activities through an entity that is not a related	37		Νο

Form	990 (2008)			Page 5
Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal			
	of U.S. Information Returns. Enter -0- if not applicable			
	1a 0			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax</i> Statements filed for the calendar year ending with or within the year covered by this			
	return			
b	If at least one is reported in 2a, did the organization file all required federal employment tax returns?			
-	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return.	2b		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		No
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		N o
Ь				110
_	If "Yes," enter the name of the foreign country See the instructions for exceptions and filing requirements for Form TD F 90-22.1, <i>Report of Foreign Bank and</i>			
	Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
c	If "Yes," to 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited			
	Tax Shelter Transaction?	5с		
6a	Did the organization solicit any contributions that were not tax deductible?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization provide goods or services in exchange for any quid pro quo contribution of \$75 or	7a		No
	more?			<u> </u>
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year	70		110
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal	.		N
f	benefit contract?	7e 7f		No No
g		71 7g		No
_	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as	79		110
•	required?	7h		No
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3)			
	supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the	8		
	year ²	_ • _		<u> </u>
9	Section $501(c)(3)$ and other sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		No
Ь	, , , , , , , , , , , , , , , , , , , ,	9b		No
10	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11				
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the			
	year 12b			

10

11

Yes

Νo

Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Se	ection A. Governing Body and Management			
			Yes	No
	For each "Yes" response to lines 2-7 below, and for a "No" response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O. See instructions.			
.a	Enter the number of voting members of the governing body 1a 8			
b	Enter the number of voting members that are independent 1b 7			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
ļ	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		No
;	Did the organization become aware during the year of a material diversion of the organization's assets?	5		Νo
,	Does the organization have members or stockholders?	6		Νo
'a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		No
Ь	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		Νo
3	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	the governing body?	8a	Yes	
b	each committee with authority to act on behalf of the governing body?	8b	Yes	
a	Does the organization have local chapters, branches, or affiliates?	9a		Νo
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	9Ь		
.0	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations			

Section B. Policies

			Yes	No
12a	Does the organization have a written conflict of interest policy? If "No", go to line 13 \cdot .	12a		Νo
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c		
13	Does the organization have a written whistleblower policy?	13		Νo
14	Does the organization have a written document retention and destruction policy?	14		Νo
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision			
а	The organization's CEO, Executive Director, or top management official?	15a		Νo
b	Other officers or key employees of the organization?	15b		No
	Describe the process in Schedule O			
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?	16a		Νο
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable Federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

- 17 List the States with which a copy of this Form 990 is required to be filed MA
- 18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available. Check all that apply own website. I another's website.
- 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table.
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization

TRACEY GOULET 10 LINCOLN ROAD FOXBORO, MA 02035 (508) 543-7892

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

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

1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed

- * List all of the organization's **current** officers, directors, trustees (whether individuals or organizations) and key employees regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid
- * 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, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- * List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

Check this box if the organization did r	ot compens	ate any	offic	er, c	lirec	tor, tru	uste	e or key employee		
		(C) Position (check all that apply)								(F)
(A) Name and Title	(B) Average hours per week	Individual Trustee or Director	Institutional Trustee		Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	Estimated amount of other compensation from the organization and related organizations
DONALD E RODMAN , PRESIDENT	1 00	Х						0	99,680	0
DONALD E RODMAN , TREASURER		Х						0	0	0
DONALD E RODMAN , CLERK		Х						0	0	0
Christopher small, director		X						0	0	0
haRVEY LOWELL, DIRECTOR		Х						0	0	0
BILL LYTTLE, DIRECTOR		X						0	0	0
JACK CONNORS, DIRECTOR		Х						0	0	0
TRACEY GOULET, DIRECTOR	40 00	Х						0	77,799	0
bob scannell, director		X						0	0	0
ED KELLEY , DIRECTOR		X						0	0	0
						<u> </u>				
						<u> </u>				
						<u> </u>				
						<u> </u>				
			1			1				

Continued

(A) Name and Title	(B) Average hours per week	Individual Trustee or Prector		Office	y)	Highest compansated	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
							\vdash			
							\vdash			
1b Total			•			1	>	0	177,479	0

2 Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization ►0

			Yes	NO_
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If</i> " <i>Yes,"</i> complete <i>Schedule J for such individual</i>	3		No
4	For any individual listed online 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		No
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person	5		No

Section B. Independent Contractors

from the organization .

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization

(A) Name and business address	(B) Description of services	(C) Compensation
Total number of independent contractors (including those in 1) who received more than \$:	100,000 in compensation	

Part Statement of Revenue VIII

						1		
					(A) Total Revenue	(B) Related or Exempt Function Revenue	(C) Unrelated Business Revenue	(D) Revenue Excluded from Tax under IRC 512, 513, or 514
22	1a	Federated camp	paigns 1a					
THE THE	ь		es 1b					
80 등								
च हु	С		nts 1c					
동분	d		ations 1d					
કું,≣	e	Government grants	(contributions) 1e					
ē."∣	f	All other contributio	ns, gifts, grants, and 1f	6,746,050				
골축	g	similar amounts no	butions included in					
itri doi	9		ditions included in					
Contributions, gifts, grants and other similar amounts	h		s 1a-1f)		6,746,050			
•				Business Code				
еш	22			Busiliess Code				
ven	2a							
22	b							
921	С							
erv	d							
S =	e							
Program Serwce Revenue	f	All other progra	m service revenue					
ي ّ								
	g	Total. Add lines	2a-2f	▶ \$				
	3		ome (including dividen					
			nounts)		40,771	40,771		
	4	Income from invest	tment of tax-exempt bond	proceeds -				
	5	Royalties						
			(ı) Real	(11) Personal				
	6a	Gross Rents						
	Ь	Less rental expenses						
	С	Rental income						
	d	or (loss) Net rental incor	ne or (loss)					
			(ı) Securities	(II) O ther				
	7a	Gross amount	44,896	(ii) ciiici				
		from sales of assets other						
		than inventory						
	b	Less cost or other basis and	47,695					
		sales expenses	-2,799					
	C	Gain or (loss)		b -	-2,799	-2,799		
	d		s)	· · · · · · · · · · · · · · · · · · ·	-2,133	-2,733		
	8a	Gross income fr events (not incl						
		\$617,						
ine			reported on line 1c)					
<u>a</u>		See Part IV, lin Attach Schedule	e 18 <i>G ıf total exceeds</i>					
ė.			a					
_ _	Ь	Less direct exp	penses b	593,328				
Other Revenue	С	Net income or (loss) from fundraising	events 🕨	24,525	24,525		
0	9a		om gaming activities					
		See part IV, line	e 19 Ile G If total exceeds					
		\$15,000	ne G II total exceeds					
			а					
	b	Less direct exp	penses b					
	U	Net income or (loss) from gamıng actı	vities				
	10a	Gross sales of i						
		returns and allo						
			a					
	Ь		oods sold b	entory ►				
	С	Miscellaneous	loss) from sales of inve					
	11-	miscenaneous	Reveilue	Business Code				
	11a							
	b							
	С							
	d	All other revenu	ıe					
	e	Total. Add lines	11a-11d					
	12	Total Revenue.	Add lines 1h, 2g, 3, 4,	5,6d,7d,8c,	6,808,547	62,497	0	0
		9c 10c and 11		I .				

Part IX Statement of Functional Expenses

	Section 501(c)(3) and 501(c)(4) orga Ill other organizations must complete column (A) but are not re)
Oo	not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21	6,963,670	6,963,670	·	·
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3	Grants and other assistance to governments, organizations and individuals outside the U.S. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees				
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages				
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits				
.0	Payroll taxes				
1	Fees for services (non-employees)				
а	Management	166,424		166,424	
ь	Legal				
c	Accounting				
d	Lobbying				
e	Professional fundraising See Part IV, line 17				
f	Investment management fees				
g	Other	6,167		6,167	
2	Advertising and promotion				
3	Office expenses	223,698		223,698	
4	Information technology				
5	Royalties				
6	Occupancy				
7	Travel				
8	Payments of travel or entertainment expenses for any Federal, state or local public officials				
9	Conferences, conventions and meetings				
0	Interest				
1	Payments to affiliates				
2	Depreciation, depletion, and amortization				
3	Insurance	2,301		2,301	
24	Other expenses—Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
а	PRINTING	23,783		23,783	
b	BANK FEES	8,864		8,864	
c	MISCELLANEOUS EXPENSES	5,252		5,252	
d	POSTAGE	4,161		4,161	
е	TELEPHONE	2,335		2,335	
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	7,406,655	6,963,670	442,985	
26	Joint Costs. Check If following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation			, -	

Part X	Balance	Sheet

					(A) Beginning of year		(E End o	3) fyear
	1	Cash—non-interest-bearing			4,905,675	1		4,150,225
	2	Savings and temporary cash investments			375,000	2		531,752
	3	Pledges and grants receivable, net				3		
	4	Accounts receivable, net				4		
	5	Receivables from current and former officers, directors, trustees, other related parties Complete Part II of Schedule L		5				
	6	Receivables from other disqualified persons (as defined under sec persons described in section 4958(c)(3)(B) Complete Part II of So				6		
	7	Notes and loans receivable, net				7		
	8	Inventories for sale or use				8		
92	9	Prepaid expenses and deferred charges				9		
Assets	10a	Land, buildings, and equipment cost basis		ı				
₹			10a	11,570				
	b	Less accumulated depreciation <i>Complete Part VI of Schedule D</i>	10b	11,570	0	10c		0
	11	Investments—publicly traded securities				11		5,010
	12	Investments—other securities See Part IV, line 11 $\it Complete Part Schedule D$		12				
	13	Investments—program-related See Part IV, line 11 $\it Complete Part Of Schedule D$.	t VIII			13		
	14	Intangible assets				14		
	15	Other assets See Part IV, line 11 Complete Part IX of Schedule D				15		
	16	Total assets. Add lines 1 through 15 (must equal line 34)			5,280,675	16		4,686,987
	17	Accounts payable and accrued expenses .			181,901	17		239,152
	18	Grants payable			4,873,910	18		4,768,374
	19	Deferred revenue				19		
	20	Tax-exempt bond liabilities				20		
es S	21	Escrow account liability Complete Part IV of Schedule D				21		
Liabilities	22	Payable to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified						
<u>.e</u>		persons Complete Part II of Schedule L				22		
_	23	Secured mortgages and notes payable to unrelated third parties				23		
	24	Unsecured notes and loans payable				24		
	25	Other liabilities Complete Part X of Schedule D				25		
	26	Total liabilities. Add lines 17 through 25		5,055,811	26		5,007,526	
		Organizations that follow SFAS 117, check here ► 🔽 and comple	te line	es 27				
<u>9</u>		through 29, and lines 33 and 34.				L		
Balance	27	Unrestricted net assets			224,864	27		-320,539
	28	Temporarily restricted net assets				28		
Fund	29	Permanently restricted net assets				29		
丑		Organizations that do not follow SFAS 117, check here ► and	compl	ete				
2		lines 30 through 34.						
	30	Capital stock or trust principal, or current funds				30		
Assets	31	Paid-in or capital surplus, or land, building or equipment fund				31		
	32	Retained earnings, endowment, accumulated income, or other fun-	as			32		000 ====
Ŋet	33	Total net assets or fund balances			224,864	33		-320,539
	34	Total liabilities and net assets/fund balances			5,280,675	34		4,686,987
Pa	rt XI	Financial Statements and Reporting						
		- -					Yes	No

Dart YT	Financial	Statements	and Reporting

1	Accounting method used to prepare the Form 990			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a	Yes	
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
С	If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c		No
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		Νo
b	If "Yes," did the organization undergo the required audit or audits?	3b		

Employer identification number

SCHEDULE A (Form 990 or 990EZ)

Department of the Treasury Internal Revenue

> 1 2

3

10 11

h

Public Charity Status and Public Support

To be completed by all section 501(c)(3) organizations and section 4947(a)(1)nonexempt charitable trusts. Attach to Form 990 or Form 990-EZ. See separate instructions.

OMB No 1545-0047

Open to Public Inspection

Service Name of the organization RODMAN RIDE FOR KIDS INC

04-3329283 Reason for Public Charity Status (to be completed by all organizations) (See Instructions) The organization is not a private foundation because it is (Please check only one organization) A church, convention of churches, or association of churches described in Section 170(b)(1)(A)(i). A school described in Section 170(b)(1)(A)(ii). (Attach Schedule E) A hospital or a cooperative hospital service organization described in Section 170(b)(1)(A)(iii). (Attach Schedule H) 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 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) A federal, state, or local government or governmental unit described in Section 170(b)(1)(A)(v). 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) A community trust described in Section 170(b)(1)(A)(vi) (Complete Part II) An organization that normally receives (1) more than 331/3% 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 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See Section 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety. See Section 509(a)(4). (See instructions.) 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 that describes the type of supporting organization and complete lines 11e through 11h **b** Type II c Type III - Functionally Integrated By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) a person who directly or indirectly controls, either alone or together with persons described in (ii) Yes No and (III) below, the governing body of the the supported organization? 11q(i) (ii) a family member of a person described in (i) above? 11g(ii)

(i) Name of Supported Organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (See Instructions))	organız col (i) your go	s the ation in listed in verning ment?	the orga	ou notify inization i) of your port?	organiz	s the ation in rganized US?	(vii) A mount of support?				
			Yes	No	Yes	No	Yes	No					
Total													

(iii) a 35% controlled entity of a person described in (i) or (ii) above?

Provide the following information about the organizations the organization supports

11g(iii)

Part II	Support Schedule for Organizations Described in IRC 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.)

Pι	ıblic Support		, ,	,				
Cale	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e)	2008	(f) Total
1	Gifts, grants, contributions, and							
	membership fees received (Do not							
	include any "unusual grants ")							
2	Tax revenues levied for the organization's							
	benefit and either paid to or expended on							
_	its behalf The value of services or facilities					 		
3	furnished by a governmental unit to the							
	organization without charge							
4	Total. Add line 1-3					1		
5	The portion of total contribution by each							
5	person (other than a government unit or							
	publicly supported organization) included							
	on line 1 that exceed 2% of the amount							
	shown on line 11, column							
	· (f)							
6	Public Support subtract line 5 from line							
	4							
	otal Support		1		T			
	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) :	2008	(f) Total
7	A mounts from line 4							
8	Gross income from interest, dividends,							
	payments received on securities loans,							
	rents, royalties and income from similar							
_	sources							
9	Net income from unrelated business							
	activities, whether or not the business is regularly carried on							
10	Other income Do not include gain or loss							
10	from the sale of capital assets (Explain in							
	Part IV)							
11	Total Support (Add lines 7 through 10)							
12	Gross receipts from related activities, etc	(See instructio	ns)		•	12		
13	First Five Years. If the Form 990 is for the	organization's f	irst second thu	d fourth or fifth	ntay vearas a F		3)	
	organization, check this box and stop here		mat, second, tim	u, rouren, or mer	rtax year as a s	/O1(C)(C	• •	▶ □
								•
Co	omputation of Public Support Perc	entage						
14	Public Support Percentage for 2008 (line 6	5 column (f) dıvı	ded by line 11 c	olumn (f))		14		
15	Public Support Percentage for 2007 School	dule A , Part IV -	A, line 26f			15		
16a	33 1/3% Test - 2008. If the organization di	d not check the	box on line 13.	and line 14 is 3	3 1/3% or more.		this box	
	and stop here. The organization qualifies a				,			▶ □
b	33 1/3% Test - 2007. If the organization d				15 is 33 1/3% d	r more,	check th	
	box and stop here. The organization qualifi	es as a publicly	supported orga	nızatıon				▶ □
17a	10% Facts and Circumstances Test - 2008.							
	more, and if the organization meets the "fa		•					· —
	organization meets the "facts and circums							► □
Ь	10% Facts and Circumstances Test - 2007.							
	more, and if the organization meets the "fa		•					_
4.0	the organization meets the "facts and circu							n ▶
18	Private Foundation. If the organization did	not check the b	oux on line 13, 1	oa, 100, 1/a or	1/D, check this	oox an	u see	▶ □
	ınstructions							F-1

Support Schedule for Organizations Described in IRC 509(a)(2)

	(Complete only if you check							
	ction A. Public Support							
Cale	ndar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) :	2008	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	3,276,427	3,995,434	4,660,456	5,808,203		6,746,050	24,486,570
2	Gross receipts from admissions,							
	merchandise sold or services performed,							
	or facilities furnished in any activity that							
	ıs related to the organızatıon'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							
6	Total Add lines 1-5	3,276,427	3,995,434	4,660,456	5,808,203		6,746,050	24,486,570
	A mounts included on lines 1, 2, and 3	3,2,0,12,	3,333,131	1,000,130	3,000,203		0,7 10,030	21,100,370
/a	received from disqualified persons							
h	Amounts included on lines 2 and 3							
U	received from other than disqualified							
	persons that exceed the greater of 1% of							
	the total of lines 9, 10c, 11, and 12 for							
	the year or \$5,000							
С	Total of lines 7a and 7b							
8	Public Support (Substract line 7c from							24 406 570
_	line 6)							24,486,570
To	tal Support							
Cale	ndar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e):	2008	(f) Total
Calc								
9	A mounts from line 6	3,276,427	3,995,434	4,660,456	5,808,203	•	6,746,050	24,486,570
9	· _ · _ · _ · · _ · _ · _ · _			4,660,456	5,808,203		6,746,050	
	A mounts from line 6	3,276,427	3,995,434					24,486,570
9	A mounts from line 6 Gross income from interest, dividends,			4,660,456 51,104	5,808,203 65,484		6,746,050 40,771	
9	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	3,276,427	3,995,434					24,486,570
9	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less	3,276,427	3,995,434					24,486,570
9 10a	A mounts from line 6 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	3,276,427	3,995,434					24,486,570
9 10a	A mounts from line 6 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 30 June, 1975	3,276,427 9,104	3,995,434 21,564	51,104	65,484		40,771	24,486,570 188,027
9 10a	A mounts from line 6 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 30 June, 1975 Add lines 10a and 10b	3,276,427	3,995,434					24,486,570
9 10a b	A mounts from line 6 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 30 June, 1975 Add lines 10a and 10b Net income from unrelated business	3,276,427 9,104	3,995,434 21,564	51,104	65,484		40,771	24,486,570 188,027
9 10a b	A mounts from line 6 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 30 June, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b,	3,276,427 9,104	3,995,434 21,564	51,104	65,484		40,771	24,486,570 188,027
9 10a b	A mounts from line 6 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 30 June, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly	3,276,427 9,104	3,995,434 21,564	51,104	65,484		40,771	24,486,570 188,027
9 10a b c 11	A mounts from line 6 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 30 June, 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	3,276,427 9,104	3,995,434 21,564	51,104	65,484		40,771	24,486,570 188,027
9 10a b	A mounts from line 6 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 30 June, 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 Other income Do not include gain or loss	3,276,427 9,104	3,995,434 21,564	51,104	65,484		40,771	24,486,570 188,027
9 10a b c 11	A mounts from line 6 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 30 June, 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 Other income Do not include gain or loss from the sale of capital assets	3,276,427 9,104	3,995,434 21,564	51,104	65,484		40,771	24,486,570 188,027
9 10a b c 11	A mounts from line 6 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 30 June, 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 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	3,276,427 9,104	3,995,434 21,564	51,104	65,484		40,771	24,486,570 188,027 188,027
9 10a b c 11	A mounts from line 6 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 30 June, 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 Other income Do not include gain or loss from the sale of capital assets	3,276,427 9,104	3,995,434 21,564	51,104	65,484		40,771	24,486,570 188,027
9 10a b c 11	A mounts from line 6 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 30 June, 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 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total Support (Add lines 9, 10c, 11 and	9,104 9,104	3,995,434 21,564 21,564	51,104	65,484 65,484		40,771	24,486,570 188,027 188,027 24,674,597
9 10a b c 11 12 13 14	A mounts from line 6 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 30 June, 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 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total Support (Add lines 9, 10c, 11 and 12) First Five Years If the Form 990 is for the ocheck this box and stop here	3,276,427 9,104 9,104 erganization's fire	3,995,434 21,564 21,564	51,104	65,484 65,484		40,771	24,486,570 188,027 188,027 24,674,597
9 10a b c 11 12 13 14	A mounts from line 6 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 30 June, 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 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total Support (Add lines 9, 10c, 11 and 12) First Five Years If the Form 990 is for the or	3,276,427 9,104 9,104 erganization's first	3,995,434 21,564 21,564 st, second, third	51,104 51,104 , fourth, or fifth t	65,484 65,484		40,771	24,486,570 188,027 188,027 24,674,597
9 10a b c 11 12 13 14	A mounts from line 6 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 30 June, 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 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total Support (Add lines 9, 10c, 11 and 12) First Five Years If the Form 990 is for the ocheck this box and stop here	9,104 9,104 9,104 erganization's first	3,995,434 21,564 21,564 st, second, third	51,104 51,104 , fourth, or fifth t	65,484 65,484	01(c)(3	40,771	24,486,570 188,027 188,027 24,674,597 ation,
9 10a b c 11 12 13 14	A mounts from line 6 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 30 June, 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 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total Support (Add lines 9, 10c, 11 and 12) First Five Years If the Form 990 is for the ocheck this box and stop here mputation of Public Support Percetage Public Support Percentage for 2008 (line 8)	9,104 9,104 9,104 erganization's first	3,995,434 21,564 21,564 st, second, third	51,104 51,104 , fourth, or fifth t	65,484 65,484	01(c)(3	40,771	24,486,570 188,027 188,027 24,674,597
9 10a b c 11 12 13 14 Co 15 16	A mounts from line 6 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 30 June, 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 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total Support (Add lines 9, 10c, 11 and 12) First Five Years If the Form 990 is for the ocheck this box and stop here mputation of Public Support Percetage Public Support Percentage for 2008 (line 8)	9,104 9,104 9,104 entage column (f) dividule A , Part IV - A	3,995,434 21,564 21,564 st, second, third	51,104 51,104 , fourth, or fifth t	65,484 65,484	01(c)(3	40,771	24,486,570 188,027 188,027 24,674,597 ation,
9 10a b c 11 12 13 14 Co 15 16	A mounts from line 6 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 30 June, 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 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total Support (Add lines 9, 10c, 11 and 12) First Five Years If the Form 990 is for the ocheck this box and stop here mputation of Public Support Percet Public Support Percentage for 2008 (line 8)	9,104 9,104 9,104 entage column (f) dividule A , Part IV - A	3,995,434 21,564 21,564 st, second, third ed by line 13 co	51,104 51,104 , fourth, or fifth t	65,484 65,484	01(c)(3	40,771	24,486,570 188,027 188,027 24,674,597 ation,
9 10a b c 11 12 13 14 Co 15 16	A mounts from line 6 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 30 June, 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 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total Support (Add lines 9, 10c, 11 and 12) First Five Years If the Form 990 is for the ocheck this box and stop here mputation of Public Support Percet Public Support Percentage for 2008 (line 8) Public Support Percentage for 2007 Sched	9,104 9,104 9,104 9,104 Percentage ne 10c column (f)	3,995,434 21,564 21,564 21,564 st, second, third ed by line 13 co , line 27g	51,104 51,104 , fourth, or fifth t	65,484 65,484	01(c)(3 15 16	40,771	24,486,570 188,027 188,027 24,674,597 ation,

17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

33 1/3% Tests - 2007. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

▶▼

Supplemental Information. Complete this part to provide the information required by Part II, line 10; Part II, line 17a or 17b, or Part III, line 12. Provide and any other additional information. (see instructions)

DLN: 93493320028409

OMB No 1545-0047

Open to Public Inspection

SCHEDULE D

(Form 990)

Department of the Treasurv Internal Revenue Service

Supplemental Financial Statements

► Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Name of the organization **Employer identification number** RODMAN RIDE FOR KIDS INC 04-3329283 Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate Contributions to (during year) Aggregate Grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised ┌ No funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" to 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 (e.g., recreation or pleasure) Preservation of an historically importantly land area Preservation of certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a-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 Year 2a Total number of conservation easements 2b Total acreage restricted by conservation easements 2c Number of conservation easements on a certified historic structure included in (a) Number of conservation easements included in (c) acquired after 8/17/06 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during 3 the taxable year 🕨 Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easements it holds? Staff or volunteer hours devoted to monitoring, inspecting and enforcing easements during the year 7 A mount of expenses incurred in monitoring, inspecting, and enforcing easements during the year ▶\$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ı) and 170(h)(4)(B)(ıı)? In Part XIV, 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" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116, 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 XIV, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116, 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) Revenues included in Form 990, Part VIII, line 1

following amounts required to be reported under SFAS 116 relating to these items

(ii) Assets included in Form 990, Part X

Assets included in Form 990, Part X

Revenues included in Form 990, Part VIII, line 1

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the

-\$

Part	Organizations Maintaining Col	llections of Art, His	tori	cal Treasur	es, or Other	Similar Asset	ts (co	ntınued)
3	Using the organization's accession and other items (check all that apply)	records, check any of th	ne fol	lowing that are	a sıgnıfıcant us	e of its collection		
а	Public exhibition	d	Γ	Loan or excha	inge programs			
b	Scholarly research	e	Γ	Other				
с	Preservation for future generations							
4	Provide a description of the organization's co Part XIV	llections and explain hov	w the	y further the org	ganızatıon's exe	empt purpose in		
5	During the year, did the organization solicit o assets to be sold to raise funds rather than to					lar 🗆 🗀	es es	┌ No
Par	Trust, Escrow and Custodial A Part IV, line 9, or reported an am				ızatıon answe	ered "Yes" to Fo	rm 9	90,
1a	Is the organization an agent, trustee, custodi included on Form 990, Part X?	an or other intermediary	for c	ontributions or	other assets n	ot $ abla_{\mathbf{v}}$	es	┌ No
b	If "Yes," explain why in Part XIV and complet	te the following table						
						A mour	nt	
с	Beginning balance				1c			
d	Additions during the year				1d			
e	Distributions during the year				1e			
f	Ending balance				1f			
2a	Did the organization include an amount on Fo	rm 990, Part X, line 21?				Г	es es	☐ No
	If "Yes," explain the arrangement in Part XIV							
Pa	rt V Endowment Funds. Complete if						F V -	Dl.
1_	Paginning of woor holongs	(a)Current Year (b	Prior	rear (c) Iwo	Years Back (d)T	hree Years Back (e)	Four Ye	ears Back
1a h	Beginning of year balance							
b	Investment earnings or losses							
c d	Grants or scholarships							
e	Other expenditures for facilities							
-	and programs							
f	Administrative expenses							
g	End of year balance							
2	Provide the estimated percentage of the year	end balance held as						
а	Board designated or quasi-endowment 🕨							
Ь	Permanent endowment 🕨							
c	Term endowment ▶							
3a	Are there endowment funds not in the posses	sion of the organization	thata	are held and ad	mınıstered for t	he		
	organization by						Yes	No
	(i) unrelated organizations		•			3a(i)		
	(ii) related organizations					3a(ii)		
	If "Yes" to 3a(II), are the related organization Describe in Part XIV the intended uses of the	·				Зь		
4	t VI Investments—Land, Buildings				+ V line 10			
Pal	Tilvestillents—Land, Buildings	, and Equipment. 5		•			Г	
	Description of investment			a) Cost or other asis (investment)	(b)Cost or other basis (other)	(c) Depreciation	(d) B	ook value
	Land					1		
1a			- 1		Ī	l		
b	Buildings		-					
b	Buildings							
b c d	Leasehold improvements				11,570	11,570		0
b c d	Leasehold improvements	· · · · · · · · · · · · · · · · · · ·			·	11,570		0

Part VII	Investments-Other Securities. See	Form 990, Part X, line 1	2.	
	(a) Description of security or cateory (including name of security)	(b)Book value		d of valuation ·year market value
Financial d	erivatives and other financial products			
	eld equity interests			
Other				
Total. (Colu	mn (b) should equal Form 990, Part X, col (B) line 12) 🕨			
Down VIII	Investments Duesus Polated Co	a Farm OOO Dart V June	12	
Part VIII	Investments—Program Related. Se			d of valuation
	(a) Description of investment type	(b) Book value		year market value
Total (Colu	mn (b) should equal Form 990, Part X, col (B) line 13)			
Part IX		ne 15.		
	(a) Descri			(b) Book value
Total. (Colu	ımn (b) should equal Form 990, Part X, col.(B) line .	15.)		
	Other Liabilities. See Form 990, Part 3			
	(a) Description of Liability	(b) A mount		
Federal Inc	come Taxes			
]	
]	
]	
			1	
			1	
			1	
·			1	
			1	
Total. (Colum	mn (b) should equal Form 990, Part X, col (B) line 25) 🕨		1	
,,	· · · · · · · · · · · · · · · · · · ·	1		

Chedate B (1 01111 330) 2000		raye ¬ı
Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statem	ents	
1 Total revenue (Form 990, Part VIII, column (A), line 12)	1	6,808,547
2 Total expenses (Form 990, Part IX, column (A), line 25)	2	7,406,655
3 Excess or (deficit) for the year Subtract line 2 from line 1	3	-598,108
4 Net unrealized gains (losses) on investments	4	77
5 Donated services and use of facilities	5	52,628
6 Investment expenses	6	
7 Prior period adjustments	7	
8 Other (Describe in Part XIV)	8	
9 Total adjustments (net) Add lines 4 - 8	9	52,705
Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10	-545,403
Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue		· · · · · · · · · · · · · · · · · · ·
1 Total revenue, gains, and other support per audited financial statements	. 1	7,576,976
A mounts included on line 1 but not on Form 990, Part VIII, line 12		
a Net unrealized gains on investments	7	
b Donated services and use of facilities	4	
c Recoveries of prior year grants	7	
d Other (Describe in Part XIV)	8	
e Add lines 2a through 2d	2e	768,429
3 Subtract line 2e from line 1	3	6,808,547
A mounts 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 . 4a		
b Other (Describe in Part XIV)		
c Add lines 4a and 4b	4c	0
Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	6,808,547
Part XIII Reconciliation of Expenses per Audited Financial Statements With Expens	s per Re	
1 Total expenses and losses per audited financial statements	1	8,122,379
A mounts included on line 1 but not on Form 990, Part IX, line 25		
a Donated services and use of facilities	6	
b Prior year adjustments	_	
c Losses reported on Form 990, Part IX, line 25	_	
d Other (Describe in Part XIV)	-	
e Add lines 2a through 2d	2e	715,724
3 Subtract line 2e from line 1	3	7,406,655
4 A mounts included on Form 990, Part IX, line 25, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b 4a	-	
b Other (Describe in Part XIV)	\dashv \downarrow \downarrow	
c Add lines 4a and 4b	4c	7.406.655
Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	7,406,655
13:11 TANK SUPPLEMENTAL INIVINIATION		

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part XIV, lines 1b and 2b Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b

Ident if ier	Return Reference	Explanation
		THE RECONCILING AMOUNTS LISTED ABOVE RELATE TO DIRECT EXPENSES RELATED TO FUNDRAISING EVENTS PART XII & PART XIII LINE 2D EXPENSES ALLOCATED TO FUNDRAISING EVENTS THEATER FUNDRAISING EVENT 195,639 CELEBRATION FUNDRAISING EVENT 262,298 OTHER FUNDRAISING EVENTS 135,391

Part XIV Supplemental Information(continued)										
Ident if ier	Return Reference	Explanation								
		THE RECONCILING AMOUNTS LISTED ABOVE RELATE TO DIRECT EXPENSES RELATED TO FUNDRAISING EVENTS PART XII & PART XIII LINE 2D EXPENSES ALLOCATED TO FUNDRAISING EVENTS THEATER FUNDRAISING EVENT 195,639 CELEBRATION FUNDRAISING EVENT 262,298 OTHER FUNDRAISING EVENTS 135,391								
	1									
	<u> </u>									
	-									

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SCHEDULE G

Department of the

Internal Revenue

Treasury

(Form 990 or 990-EZ)

As Filed Data -

DLN: 93493320028409

Supplemental Information Regarding Fundraising or Gaming Activities

Attach to Form 990 or Form 990-EZ. Must be completed by organizations that answer "Yes" to Form 990, Part IV, lines 17, 18, or 19, and by organizations that enter more than \$15,000 on Form 990-EZ, line 6a.

2008

Open to Public Inspection

Ser	vice						
	ne of the organization DMAN RIDE FOR KID	SINC				Employer iden 04-3329283	tification number
Pa	rt I Fundraisin	ng Activities. Complete	e if the org	ganızatı	on answered "Yes"		
1 a b c	Mail solicitation Email solicitation Phone solicitation	ns ons	through any	of the t	e Solicitation of r	non-government grants government grants	
2a b	or key employees list if "Yes," list the ten	n have a written or oral agrested in Form 990, Part VII) highest paid individuals or at least \$5,000 by the orga	or entity in entities (fui	n connec ndraisei	tion with professional f	undraising activities? ents under which the fur	
	(i) Name of Individu or entity (fundraisei	I (III) A CTIVITY	(iii) D fundraise custod contro contribut	rhave y or I of	(iv) Gross receipts from activity	(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid to (or retained by) organization
			Yes	No			
_							
Tot:	al			•	1	1	

List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing

Pai	Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.									
	(a) Event #1 (b) Event #2 (c) Other Events					(d) Tot				
			THEATER	CELEBRATION	2	(Add col co	(a) the	rough		
			(event type)	(event type)	(total number)					
Revenue	1	Gross receipts	203,892	271,855	142,106		617	7,853		
₩ •	2	Less Charitable								
œ	3	contributions	203,892	271,855	142,106		61	7,853		
	4	Cash Prizes								
ses	5	Non-cash Prizes								
ben	6	Rent/Facility costs								
Direct Expenses	7	Other direct expenses	195,639	262,298	135,391		59:	3,328		
ĕ	8	Direct expense summary Add line	es 4 through 7 in column	(d)			59:	3,328		
	9	Net income summary Combine lin	ies 3 and 8 in column (d)				24	4,525		
Par	t II	Gaming. Complete if the org \$15,000 on Form 990-EZ, lin		'Yes" to Form 990, Pa	rt IV, line 19, or repo	ted mor	e than			
		\$15,000 ON FORM 990-EZ, IIII		(b) Bull tabe (Instant	(a) Other gaming	(d) Total	namınn			
Revenue							ough co			
	1	Gross revenue								
မှ	2	Cash prizes								
pens:	3	Non-cash prizes								
Direct Expenses	4	Rent/facility costs								
₽ B	5	Other direct expenses								
	6	Volunteer labor	┌ Yes	┌ Yes	┌ Yes					
	7	Direct expense summary Add lines	2 through 5 in column (d)						
	8	Net gaming income summary Comb	oine lines 1 and 7 in colu	mn (d)						
		,		. ,			Yes	No		
9		er the state(s) in which the organization								
a b		the organization licensed to operate (No," Explain	ganning activities in eact	Torthese states?		• 9a				
_										
10				1.1						
10a b		re any of the organization's gaming li Yes," Explain	censes revoked, suspen	ded or terminated during	the tax year?	10a				
						_				
11		as the organization energte soming	ctivities with nonmarks	rc ?		\dashv				
11 12		es the organization operate gaming a the organization a grantor, beneficiar				11				
		med to administer charitable gaming?	•	•	•	42				

			
13	Indicate the percentage of gaming activity operated in		
а	The organization's facility		
b	An outside facility		
14	Provide the name and address of the person who prepares the organization's gaming/special events books and records		
	Name •		
	Address •		
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	15a	
Ь	If "Yes," enter the amount of gaming revenue received by the organization > \$ and the amount of gaming revenue retained by the third party > \$		
c	If "Yes," enter name and address		
	Name •		
	Address 🟲		
16	Gaming manager information		
	Name 🟲		
	Gaming manager compensation 🕨 \$		
	Description of services provided 🟲		
	Director/officer Employee Independent contractor		
17	Mandatory distributions		
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?	17a	
b	Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year 📂 💲		

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DLN: 93493320028409

2008

OMB No 1545-0047

Open to Public

Grants and Other Assistance to Organizations, Governments and Individuals in the U.S.

Department of the Treasury Internal Revenue Service Name of the organization

RODMAN RIDE FOR KIDS INC

Schedule I

(Form 990)

Complete if the organization answered "Yes," on Form 990, Part IV, lines 21 or 22. Attach to Form 990.

Inspection Employer identification number

04-3329283

Part I General Inform	nation on Gra	nts and Assistance	e				
Does the organization ma the selection criteria used	d to award the gra	nts or assistance?					┌ Yes ┌ N
2 Describe in Part IV the or	rganızatıon's proc	edures for monitoring th	ne use of grant funds in t	he United States			
Form 990, Part I Part IV and Scho	IV, line 21 for a edule I-1 if add	ny recipient that recontional space is	eived more than \$5,0	000. Check this box	t es. Complete if the case of no one recipient rec	eived more than \$5,0	
1(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)		(h) Purpose of grant or assistance
See Additional Data Table							
2 Enter total number of sec organizations	tion 501(c)(3) an	d government					36
3 Enter total number of other				Cat No. 500551			0

		ce to Individua ıf addıtıonal spac		tates. Complete if the	organization answered "Ye	s" on Form 990, Part IV, line 22.
(a)Type of grant or as	ssistance	(b) Number of recipients	(c) A mount of cash grant	(d) A mount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
rt IV Suppleme	ntal Informati	on. Complete thi	s part to provide the	e information required i	n Part I, line 2, and any ot	her additional information.
t if ier	Return Reference	E	Explanation			
+						

Software ID: Software Version:

EIN: 04-3329283

Name: RODMAN RIDE FOR KIDS INC

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(h) Purpose of grant or assistance
AMERICA SCORES NEW ENGLAND INC150 MT VERNON STREET STE 2 DORCHESTER, MA 02125	04-3482756	501C3	59,257			TO BENEFIT DISADVANTAGED YOUTHS IN MASSACHUSETTS
BIG BROTHER BIG SISTER OF MASS BAY161 MASSACHUSETTS AVENUE BOSTON,MA 02115	04-3323872	501C3	68,000			TO BENEFIT DISADVANTAGED YOUTHS IN MASSACHUSETTS
THE BOSTON BALLET19 CLARENDON STREET BOSTON, MA 02116	04-2312734	501C3	90,000			TO BENEFIT DISADVANTAGED YOUTHS IN MASSACHUSETTS
BOSTON POLICE ATHLETIC LEAGUE INC1010 MASSACHUSETTS AVE BOSTON,MA 02118	22-2672818	501C3	206,414			TO BENEFIT DISADVANTAGED YOUTHS IN MASSACHUSETTS
BOSTONIAN GROUP CHARITABLE FOUNDATION 4 COPLEY PLACE 6TH FLOOR BOSTON, MA 02116	76-0788130	501C3	10,000			TO BENEFIT DISADVANTAGED YOUTHS IN MASSACHUSETTS
BOYS AND GIRLS CLUBS OF DORCHESTER1135 DORCHESTER AVE DORCHESTER, MA 02125	23-7076465	501C3	359,498			TO BENEFIT DISADVANTAGED YOUTHS IN MASSACHUSETTS
CATHOLIC CHARITIES51 SLEEPER STREET BOSTON, MA 02210	04-2534041	501C3	127,733			TO BENEFIT DISADVANTAGED YOUTHS IN MASSACHUSETTS
COMMUNITY RESOURCES FOR JUSTICE INC355 BOYLSTON STREET BOSTON, MA 02116	04-3461434	501C3	97,986			TO BENEFIT DISADVANTAGED YOUTHS IN MASSACHUSETTS
COMPASS290-294 BOWDOIN STREET DORCHESTER, MA 02122	04-2539383	501C3	336,749			TO BENEFIT DISADVANTAGED YOUTHS IN MASSACHUSETTS
CROSSROADS FOR KIDS INC119 MYRTLE STREET DUXBURY,MA 02332	04-2103837	501C3	95,018			TO BENEFIT DISADVANTAGED YOUTHS IN MASSACHUSETTS

Form 990,Schedule I,	Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
DCF KIDS FUND INC24 FARNSWORTH STREET BOSTON,MA 02210	04-3443890	501C3	298,320				TO BENEFIT DISADVANTAGED YOUTHS IN MASSACHUSETTS			
EPIPHANY SCHOOL209 ASHMOND STREET DORCHESTER, MA 02124	04-3391788	501C3	552,091				TO BENEFIT DISADVANTAGED YOUTHS IN MASSACHUSETTS			
FAMILY NURTURING CENTER OF MA INC200 BOWDOIN STREET DORCHESTER, MA 02122	31-1626186	501C3	123,670				TO BENEFIT DISADVANTAGED YOUTHS IN MASSACHUSETTS			
FOXBORO DISCRETIONARY FUND INC25A EDWARDS ROAD FOXBORO,MA 02035	04-2817427	501C3	10,000				TO BENEFIT DISADVANTAGED YOUTHS IN MASSACHUSETTS			
GERMANTOWN NEIGHBORHOOD CENTER333 PALMER STREET QUINCY,MA 02169	22-2505948	501C3	7,500				TO BENEFIT DISADVANTAGED YOUTHS IN MASSACHUSETTS			
GIRLS WITH A CAUSE17 WHITON COURT HANOVER, MA 02339	26-1224102	501C3	6,000				TO BENEFIT DISADVANTAGED YOUTHS IN MASSACHUSETTS			
GROW CLINIC OF BOSTON MEDICAL CENTER660 HARRISON AVE 3RD FLOOR BOSTON, MA 02118	04-3314093	501C3	941,729				TO BENEFIT DISADVANTAGED YOUTHS IN MASSACHUSETTS			
HOUSE OF POSSIBILITIES INC 350 WASHINGTON STREET NORTH EASTON, MA 02356	13-4246859	501C3	92,864				TO BENEFIT DISADVANTAGED YOUTHS IN MASSACHUSETTS			
JEWISH BIG BROTHERS BIG SISTERS333 NAHANTON STREET NEWTON,MA 02459	04-2104354	501C3	716,221				TO BENEFIT DISADVANTAGED YOUTHS IN MASSACHUSETTS			
JUDGE BAKER CHILDRENS CENTER53 PARK HILL AVENUE BOSTON, MA 02120	04-2103860	501C3	86,904				TO BENEFIT DISADVANTAGED YOUTHS IN MASSACHUSETTS			

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States (a) Name and address of **(b)** EIN (c) IRC Code (d) A mount of (e) A mount of non-(f) Method of (q) Description of (h) Purpose of grant valuation (book, organization section cash grant cash non-cash or assistance if applicable FMV, appraisal, or government assistance assistance other) 04-2519028 501C3 TO BENEFIT KENNEDY-DONOVAN 139,032 DISADVANTAGED **CENTER INC1** COMMERCIAL STREET YOUTHS IN FOXBORO, MA 02035 MASSACHUSETTS 04-2755382 501C3 10,000 TO BENEFIT LAZARUS HOUSE MINISTRIES410 DISADVANTAGED HAMPSHIRE ST 2ND YOUTHS IN FLOOR MASSACHUSETTS LAWRENCE, MA 01841 22-3207958 501C3 MASS MENTORING 270,687 TO BENEFIT PARTNERSHIP INC2 DISADVANTAGED LIBERTY SQUARE YOUTHS IN BOSTON, MA 02109 MASSACHUSETTS MATTAPAN COMMUNITY 04-3316881 501C3 7,500 TO BENEFIT DEVELOPMENT221 DISADVANTAGED RIVER STREET SUITE YOUTHS IN 201 MASSACHUSETTS MATTAPAN, MA 02126 METROLACROSSE INC 04-3508315 501C3 231,495 TO BENEFIT 150 MOUNT VERNON DISADVANTAGED STREET SUITE 2 YOUTHS IN DORCHESTER, MA MASSACHUSETTS 02125 20-0407083 501C3 RAISING A READER-625,598 TO BENEFIT GREENLIGHT FUND2 DISADVANTAGED CANAL PARK YOUTHS IN CAMBRIDGE, MA 02141 MASSACHUSETTS 80-0297898 RAISING A READER-501C3 10,000 TO BENEFIT STEVE DIFILLIPPO'S DISADVANTAGED SISTER9B HAMILTON YOUTHS IN PLACE 3RD FLOOR MASSACHUSETTS BOSTON, MA 02108 04-2457298 501C3 194,800 TO BENEFIT ROBERT F KENNEDY CHILDREN'S ACTION11 DISADVANTAGED BEACON STREET SUITE YOUTHS IN 200 MASSACHUSETTS BOSTON, MA 02108 SCHOOL ON WHEELS OF 20-1020880 501C3 61,778 TO BENEFIT DISADVANTAGED MASSACHUSETTS831 YOUTHS IN PLEASANT STREET BROCKTON, MA 02301 MASSACHUSETTS SOUTH BOSTON 04-2104807 501C3 24,005 TO BENEFIT NEIGHBORHOOD HOUSE DISADVANTAGED INC521 EAST 7TH YOUTHS IN STREET MASSACHUSETTS SOUTH BOSTON, MA 02127

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
THE ITALIAN HOME FOR CHILDREN INC1125 CENTRE STREET JAMAICA PLAIN, MA 02130	04-2103799	501C3	352,572				TO BENEFIT DISADVANTAGED YOUTHS IN MASSACHUSETTS		
THE KEY PROGRAM INC 670 OLD CONNECTICUT PATH FRAMINGHAM, MA 01701	04-2539878	501C3	283,230				TO BENEFIT DISADVANTAGED YOUTHS IN MASSACHUSETTS		
NATIVITY-BOSTON INC 39-41 LAMARTINE STREET JAMAICA PLAIN, MA 02120	04-3063140	501C3	8,000				TO BENEFIT DISADVANTAGED YOUTHS IN MASSACHUSETTS		
NATIVITY PREPARATORY SCHOOL 67 LINCOLN STREET WORCESTER, MA 01605	03-0385377	501C3	58,277				TO BENEFIT DISADVANTAGED YOUTHS IN MASSACHUSETTS		
THE MAY INSTITUTE INC41 PACELLA PARK DRIVE RANDOLPH, MA 02368	04-2197449	501C3	146,134				TO BENEFIT DISADVANTAGED YOUTHS IN MASSACHUSETTS		
THE ARTS (A REASON TO SURVIVE INC)2820 ROOSEVELT ROAD SUITE 106 SAN DIEGO, CA 92106	33-0963135	501C3	12,000				TO BENEFIT DISADVANTAGED YOUTHS IN MASSACHUSETTS		
,		'			1	'	'		

SCHEDULE M (Form 990)

Non-Cash Contributions

To be completed by organizations that answered "Yes" on Form 990, Part IV, lines 29 or 30. Attach to Form 990

OMB No 1545-0047 Open to Public **Inspection**

Department of the Treasury Internal Revenue Service

Name of the organization **Employer identification number** RODMAN RIDE FOR KIDS INC 04-3329283 Part I Types of Property (b) (d) (a) (c) Check Number of Contributions Revenues reported on Method of determining Form 990, Part VIII, line ıf revenues applicable 1 g 1 Art—Works of art . . . Art—Historical treasures 3 Art-Fractional interests 4 Books and publications Clothing and household goods Cars and other vehicles . . Boats and planes 8 Intellectual property . . . 9 Securities—Publicly traded . Χ 52,628 fair market value 10 Securities—Closely held stock 11 Securities—Partnership, LLC, or trust interests . . . Securities-Miscellaneous . . 13 Qualified conservation contribution (historic structures) 14 Qualified conservation contribution (other) . . . Real estate—Residential . 16 Real estate—Commercial . . 17 Real estate—Other . . . Collectibles 19 Food inventory . . . 20 Drugs and medical supplies . Taxidermy 22 Historical artifacts . . . 23 Scientific specimens . . 24 Archeological artifacts . . . 25 Other (describe _____ 26 Other (describe _____ **27** Other (describe _____) 28 Other (describe Number of Forms 8283 received by the organization during the tax year for contributions for 29 0 which the organization completed Form 8283, Part IV, Donee Acknowledgement Yes No **30a** During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? No 30a **b** If "Yes", describe the arrangement in Part II 31 31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? Νo 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell non-cash 32a Νo **b** If "Yes", describe in Part II

checked, describe in Part II

33 If the organization did not report revenues in Column (c) for a type of property for which Column (a) is

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.								
Identifier	ReturnReference	Explanation						
240111111	Notal III Colored	Explanation						
	1	1						

SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

► Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

2008
Open to Public Inspection

Name of the organization RODMAN RIDE FOR KIDS INC Employer identification number

04-3329283

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 10		IT IS THE EXPRESS POLICY OF RODMAN RIDE FOR KIDS, INC THAT THE ORGANIZATION'S FORM 990 IS REVIEWED BY ITS GOVERNING BODY BEFORE BEING FILED

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 15		ALL SALARIES FOR EMPLOYEES OF RODMAN RIDE FOR KIDS, INC. ARE PAID BY RODMAN FORD SALES, INC.

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section C, line 19		THE ORGANIZATION MAKES GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC ON DEMAND AT ITS OFFICES

ldentifier	Return Reference	Explanation
FORM 990, PART XI, LINE 2C		THE ORGANIZATION HAS AN AUDIT COMMITTEE WHOSE PURPOSE IS THE OVERSIGHT AND REVIEW OF THE AUDITED STATEMENTS AND SELECTION OF AN INDEPENDENT ACCOUNTANT THIS PURPOSE HAS NOT CHANGED FROM PRIOR YEAR

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

OMB No 1545-0047

2008

Open to Public

Department of the Treasury Internal Revenue Service ► Attach to Form 990. To be completed by organizations that answerd "Yes" to Form 990, Part IV, lines 33, 34, 35, 36, or 37.
 ► See separate instructions.

nternal Revenue Service					Inspection
Name of the organization RODMAN RIDE FOR KIDS INC				Employer ident	tification number
NODE FOR KIDS INC				04-3329283	
Part I Identification of Disregarded Entities					
(A) Name, address, and EIN of disregarded entity	(B) Primary activity L	(C) egal domicile (state or foreign country)	(D) Total income	(E) End-of-year assets	(F) Direct controlling entity
Part II Identification of Related Tax-Exempt Organiza	ations				
(A) Name, address, and EIN of related organization	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Exempt Code section	(E) Public charity sta	atus Direct controlling entity
RODMAN CHARITABLE TRUST ROUTE ONE FOXBORO, MA02035 22-2780804	DONATES TO OTHER 501(C)3 ORGANIZATIONS	МА	501(c)3	9	N/A

Part III Identification of I	-	a2a (10115		. as a rartifership	, I							
(A) Name, address, and EIN of related organization	(B) Primary act	civity	(C) Legal domicile (state or foreign country)	(D) Direct controlling entity	(E) Predominant income(related, investment, unrelated)	(F) Share of total income	(G) Share of end-of- year assets	(H Dispro alloca	i) prtionate tions?	(I) Code V—UBI amount on Box 20 of K-1	Gene mana parti	ral o agıng ner?
								Yes	No		Yes	No
Part IV Identification of I	Related Org	anizations	Taxable	as a Corporation	ı or Trust							
(A) Name, address, and EIN of related o	organization	(B) Primary acti	ivity	(C) Legal domicile (state or foreign country)	(D) Direct controlling entity	(E) Type of entity (C corp, S corp, or trust)	(F) Share of total inco	ome	Sh end-	are of Perce	H) entage ership	
rodman ford sales inc route one foxboro, MA02035 04-2270956		sales and serv	ice	МА	N/A	S						

(5)

(6)

Part V Transactions with Related Organizations
--

Note. Complete line 1 if any entity is listed in Parts II, III or IV			Y	es	No				
f 1 During the tax year, did the orgranization engage in any of the following transactions $f v$	with one or more related organizations listed in Parts II-IV?								
a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity									
Gift, grant, or capital contribution to other organization(s)									
c Gift, grant, or capital contribution from other organization(s)		1	lc Y	es					
Loans or loan guarantees to or for other organization(s)									
e Loans or loan guarantees by other organization(s)									
f Sale of assets to other organization(s)		1	lf		No				
g Purchase of assets from other organization(s)		1	Lg		No				
h Exchange of assets		1	Lh .		No				
i Lease of facilities, equipment, or other assets to other organization(s)		1	Li		No				
		ļ.	Lj		No				
k Performance of services or membership or fundraising solicitations for other organ		_	lk Li		No No				
I Performance of services or membership or fundraising solicitations by other organi	zation(s)	<u> </u>	Lm		No				
m Sharing of facilities, equipment, mailing lists, or other assets									
n Sharing of paid employees		 	Ln		No				
• Reimbursement paid to other organization for expenses		1	Lo		No				
p Reimbursement paid by other organization for expenses		1	l p		No				
q O ther transfer of cash or property to other organization(s)		1	lq .		No				
r Other transfer of cash or property from other organization(s)		<u> </u>	Lr L		No				
				I					
2 If the answer to any of the above is "Yes," see the instructions for information on w	who must complete this line, including covered relationships (B)								
(A) Name of other organization(s)	Transaction type(a-r)	(C) Amount Involved							
(1) rodman chantable trust	С		10	0,853					
(2)									
(3)									
· ·									
(4)									

Part VI Unrelated Organizations Taxable as a Partnership

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

									_	
(A) Name, address, and EIN of entity	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Are all partners section 501(c)(3) organizations?		(E) Share of end-of-year assets			(G) Code V—UBI amount on Box 20 of K-1		r J
			Yes	No		Yes	No		Yes	No
			•	•		•		Cabadul	D / Form	