990 Form

Return of Organization Exempt From Income Tax

2013

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

▶ Do not enter Social Security numbers on this form as it may be made public.

Information about Form 990 and its instructions is at www.irs.gov/form990.

Open to Public Inspection

A	For th	he 2	2013 calend	ar year, or tax year beginning , 2013, and ending									, 2	0		
В	Check if applicable:			C Name of organization THE 31HEROES PROJECT									D Employer identification no.			
	Addres			Doing Business As									45-3581265			
	Name		•	-							Room/suite			E Telephone number		
Ħ			•	440 CORNERSTONE COURT						1100m/suite			(757)705-6679			
H	Initial re			City or town, state or province, country, and ZIP or foreign postal code												
H	Termin													1,093,439 G Gross receipts \$		
H		Amended return FALLON, NV 89406 Application pending F Name and address of principal officer: MACKENZIE S. TOBIN-PADELL											G Gross re	ceipts \$		
Ш	Applica	ation	pending	F Name and address of principal officer: MACKENZIE S. TOBIN-PADELL							this a g	roup re	eturn for			
			7.7	SAME AS C ABOVE							ubordina			∐ Yes ⊠ No		
				501(c)(3)	501(c) () (insert no.)	4947(a)(1) or	<u></u> 527		` Í If	"No," att	ach a l	ates included? list. (see instr	P L Yes L No uctions)		
J	Websit			IEROES.COM						H(c) G	iroup exe	emption	n number 🕨			
													al domicile:	NV		
Pa	art I		Summary Right to the street of the control of the													
	1	E	Briefly describe the organization's mission or most significant activities: THE 31 HEROES PROJECT EXISTS TO HONOR OUR													
ړو		<u> </u>	FALLEN HEROES KILLED IN ACTION AUGUST 6, 2011 THROUGH FITNESS AND RAISE FUNDS FOR PROGRAMS													
Governance		2	THAT PROVIDE SUPPORT TO FAMILIES OF ALL FALLEN MILIRATY HEROES- PAST, PRESENT, AND FUTURE.													
Ĭ.		_	Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets.													
ĕ	2		Check this bo	ox 🕨 📙 if tl	he organizatior	its ne	et asse	ts.		1						
Activities & G	3	١	Number of vo					3		5						
	4	١.	Number of in	dependent v	oting members	of the governing b	ody (Part VI, line 1b					4		5		
	5	Т	Total number	r of individua	als employed in	calendar year 2013	(Part V, line 2a)					5		3		
	6	Т	Total number	r of voluntee	rs (estimate if r	necessary)						6		75		
⋖	7	a T	Total unrelate	ed business	revenue from F	Part VIII, column (C)	, line 12					7a	ı	0		
		b N	Net unrelated	d business ta	axable income	from Form 990-T, lir	ne 34					7b	,	0		
						•				Pric	r Year		Cı	ırrent Year		
	8		Contributions	and grants	(Part VIII. line	Ih)					67	7,39		1,067,556		
e	9		Contributions and grants (Part VIII, line 1h)											0		
ē	10	, , , , , , , , , , , , , , , , , , ,										7,95	18	25,883		
Revenue	11			`	,, , , , , , , , , , , , , , , , , , , ,				29		25,005					
_	12			er revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)										1,093,439		
	13								685,64 518,21							
	14			310,21			0,21	.3	684,851							
						, column (A), line 4)	olumn (A), lines 5-1	0,						122 071		
es	15		•	•							123,871					
Expenses	10			_	•	olumn (A), line 11e)										
ğ	_ ا					umn (D), line 25)		0			_	5,01	_			
ш	1			her expenses (Part IX, column (A), lines 11a-11d, 11f-24e)										336,701		
	18		otal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)									3,23		1,145,423		
	19) H	Revenue less	92,41					(51,984)							
Net Assets or								-	Begi	inning c	f Curren			nd of Year		
ėssį	i 20		Total assets	•	,						9:	2,93	9	49,015		
et	21		Total liabilitie							4,236						
_													9	44,779		
	art II		Signature Block es 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													
							ying schedules and state rmation of which prepare		/ know	/ledge ai	nd belief,	ıt ıs				
0:-			MACKENZIE S. TOBIN-PADELL													
Sig			Signature of officer										te			
He	re		MACKENZIE S. TOBIN-PADELL, DIRECTOR													
			Type or													
			Print/Type pre	eparer's name		Preparer's signature		Date		Ch	eck	if	PTIN			
Paid		Wayne Bo	ostain		Wayne Bostain	L	06-03-2014		se	f-employ	nployed P00040195		0195			
Preparer			Firm's name	Firm's name E WAYNE BOSTAIN CPA							Firm's EIN					
Use Only			Firm's addres	Firm's address 120 S LYNNHAVEN ROAD SUITE 203							Phone no.					
		_	Virginia Beach VA 23452								757-486-6767					
May the IRS discuss this return with the preparer shown above? (see instructions)											X	Yes No				