

# Return of Organization Exempt From Income Tax

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

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

**2015**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

**A** For the 2015 calendar year, or tax year beginning Oct 1, 2015, and ending Sep 30, 2016

<b>B</b> Check if applicable:	<b>C</b> Name of organization <u>SPEEDWAY CHILDREN'S CHARITIES</u>	<b>D</b> Employer identification number <u>56-1331429</u>
<input type="checkbox"/> Address change	Doing business as	<b>E</b> Telephone number <u>(704) 532-3306</u>
<input type="checkbox"/> Name change	Number and street (or P.O. box if mail is not delivered to street address) Room/suite	
<input type="checkbox"/> Initial return	<u>PO BOX 18747</u>	<b>G</b> Gross receipts \$ <u>5,143,197.</u>
<input type="checkbox"/> Final return/terminated	City or town, state or province, country, and ZIP or foreign postal code	
<input type="checkbox"/> Amended return	<u>CHARLOTTE NC 28218</u>	<b>H(a)</b> Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<input type="checkbox"/> Application pending	<b>F</b> Name and address of principal officer: <u>O. Bruton Smith PO Box 18747 Charlotte NC 28218</u>	<b>H(b)</b> Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If 'No,' attach a list. (see instructions)
<b>I</b> Tax-exempt status	<input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527	<b>H(c)</b> Group exemption number ▶
<b>J</b> Website: ▶ <u>speedwaycharities.org</u>		
<b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶	<b>L</b> Year of formation: <u>1982</u>	<b>M</b> State of legal domicile: <u>NC</u>

**Part I Summary**

<b>1</b>	Briefly describe the organization's mission or most significant activities: <u>Speedway Children's Charities' primary exempt purpose is to raise and provide funds to non-profit organizations that meet the direct needs of children with medical, educational or social challenges.</u>		
<b>2</b>	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
<b>3</b>	Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>	16
<b>4</b>	Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	16
<b>5</b>	Total number of individuals employed in calendar year 2015 (Part V, line 2a)	<b>5</b>	0
<b>6</b>	Total number of volunteers (estimate if necessary)	<b>6</b>	2,500
<b>7a</b>	Total unrelated business revenue from Part VIII, column (C), line 12	<b>7a</b>	0.
<b>7b</b>	Net unrelated business taxable income from Form 990-T, line 34	<b>7b</b>	0.
<b>Revenue</b>	<b>8</b> Contributions and grants (Part VIII, line 1h)	<b>Prior Year</b>	<b>Current Year</b>
	<b>9</b> Program service revenue (Part VIII, line 2g)	3,648,199.	3,867,703.
	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)	25,200.	-226.
	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 6c, 9c, 10c, and 11e)	-129,082.	-159,637.
	<b>12</b> Total revenue -- add lines 8 through 11 (must equal Part VIII, column (A), line 12)	3,544,317.	3,707,840.
<b>Expenses</b>	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3)	2,127,686.	2,766,789.
	<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)		
	<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		
	<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)		
	<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) ▶ <u>684,094.</u>		
	<b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	800,457.	804,154.
	<b>18</b> Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	2,928,143.	3,570,943.
<b>19</b> Revenue less expenses. Subtract line 18 from line 12	616,174.	136,897.	
<b>Net Assets or Fund Balances</b>	<b>20</b> Total assets (Part X, line 16)	<b>Beginning of Current Year</b>	<b>End of Year</b>
	<b>21</b> Total liabilities (Part X, line 26)	3,400,282.	3,616,062.
	<b>22</b> Net assets or fund balances. Subtract line 21 from line 20	274,405.	353,288.
		3,125,877.	3,262,774.

**Part II Signature Block**

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

<b>Sign Here</b>	Signature of officer: <u>Chuck Swannack</u>	Date: <u>1/27/17</u>
	Type or print name and title: <u>Chuck Swannack</u>	

<b>Paid Preparer Use Only</b>	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	Firm's name: <u>Self-Prepared</u>				
	Firm's address				
	Firm's EIN ▶				
	Phone no.				

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

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:

Speedway Children's Charities' primary exempt purpose is to raise and provide funds to non-profit organizations that meet the direct needs of children with medical, educational or social challenges.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

Yes No

If 'Yes,' describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?

Yes No

If 'Yes,' describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code: ) (Expenses \$ 2,781,331. including grants of \$ 2,766,789.) (Revenue \$ 0.)

Funds were raised throughout the year by holding auctions, dinners, golf outings, drawings and numerous other events. The funds raised from these events allowed Speedway Children's Charities to issue funds to 501(c)(3) nonprofit organizations that complied with our exempt purpose. In 2016 Speedway Children's Charities distributed more than \$2.7 million to 400 children's programs supporting an estimated 800,000 children. Since 1982 the organization has distributed more than \$46 million dollars ensuring that children in need are given the tools to build a better, brighter and healthier future.

4b (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )

4c (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )

4d Other program services. (Describe in Schedule O.)

(Expenses \$ including grants of \$ ) (Revenue \$ )

4e Total program service expenses 2,781,331.

**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. . . . .	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? . . . . .	X	
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. . . . .		X
4 <b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II. . . . .		X
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III. . . . .		X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which 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. . . . .		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If 'Yes,' complete Schedule D, Part II. . . . .		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III. . . . .		X
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV. . . . .		X
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V. . . . .		X
11 If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI. . . . .	X	
b Did the organization report an amount for investments -- other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII. . . . .		X
c Did the organization report an amount for investments -- program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII. . . . .		X
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX. . . . .		X
e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X. . . . .		X
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X. . . . .	X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, and XII. . . . .	X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional. . . . .		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E. . . . .		X
14a Did the organization maintain an office, employees, or agents outside of the United States? . . . . .		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV. . . . .		X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If 'Yes,' complete Schedule F, Parts II and IV. . . . .		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If 'Yes,' complete Schedule F, Parts III and IV. . . . .		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions). . . . .		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II. . . . .	X	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III. . . . .	X	

**Part IV Checklist of Required Schedules (continued)**

	Yes	No
20a Did the organization operate one or more hospital facilities? <i>If 'Yes,' complete Schedule H</i> . . . . .		X
b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return? . . . . .	N/A	
20b		
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If 'Yes,' complete Schedule I, Parts I and II</i> . . . . .	X	
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If 'Yes,' complete Schedule I, Parts I and III</i> . . . . .		X
23 Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J</i> . . . . .		X
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? <i>If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,' go to line 25a</i> . . . . .		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . . . .	N/A	
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? . . . . .	N/A	
24c		
d Did the organization act as an issuer for bonds outstanding at any time during the year? . . . . .	N/A	
24d		
25a <b>Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If 'Yes,' complete Schedule L, Part I</i> . . . . .		X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If 'Yes,' complete Schedule L, Part I</i> . . . . .		X
25b		X
26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If 'Yes,' complete Schedule L, Part II</i> . . . . .		X
26		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If 'Yes,' complete Schedule L, Part III</i> . . . . .		X
27		X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, or key employee? <i>If 'Yes,' complete Schedule L, Part IV</i> . . . . .		X
28a		X
b A family member of a current or former officer, director, trustee, or key employee? <i>If 'Yes,' complete Schedule L, Part IV</i> . . . . .		X
28b		X
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If 'Yes,' complete Schedule L, Part IV</i> . . . . .		X
28c		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If 'Yes,' complete Schedule M</i> . . . . .	X	
29	X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If 'Yes,' complete Schedule M</i> . . . . .		X
30		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If 'Yes,' complete Schedule N, Part I</i> . . . . .		X
31		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If 'Yes,' complete Schedule N, Part II</i> . . . . .		X
32		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If 'Yes,' complete Schedule R, Part I</i> . . . . .		X
33		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If 'Yes,' complete Schedule R, Part II, III, or IV, and Part V, line 1</i> . . . . .	X	
34	X	
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? . . . . .		X
35a		X
b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If 'Yes,' complete Schedule R, Part V, line 2</i> . . . . .	N/A	
35b		
36 <b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If 'Yes,' complete Schedule R, Part V, line 2</i> . . . . .		X
36		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If 'Yes,' complete Schedule R, Part VI</i> . . . . .		X
37		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O . . . . .	X	
38	X	

**Part V** Statements Regarding Other IRS Filings and Tax Compliance

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

		Yes	No
1 a	Enter the number reported in Box 3 of Form 1099. Enter -0- if not applicable . . . . . 20		
1 b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable . . . . . 3		
1 c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? . . . . .	X	
2 a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return . . . . . 0		
2 b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? . . . . . <i>Note.</i> If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)		
3 a	Did the organization have unrelated business gross income of \$1,000 or more during the year? . . . . .		X
3 b	If 'Yes' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule O . . . . . n/a		
4 a	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)? . . . . .		X
4 b	If 'Yes,' enter the name of the foreign country: See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts. (FBAR)		
5 a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . . . . .		X
5 b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? . . . . .		X
5 c	If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T? . . . . . n/a		
6 a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? . . . . .		X
6 b	If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? . . . . .		
7	<b>Organizations that may receive deductible contributions under section 170(c).</b>		
7 a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? . . . . .	X	
7 b	If 'Yes,' did the organization notify the donor of the value of the goods or services provided? . . . . .	X	
7 c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? . . . . .		X
7 d	If 'Yes,' indicate the number of Forms 8282 filed during the year . . . . . n/a		
7 e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? . . . . .		X
7 f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . . . .		X
7 g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? . . . . . n/a		
7 h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? . . . . . n/a		
8	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? . . . . . n/a		
9	<b>Sponsoring organizations maintaining donor advised funds.</b>		
9 a	Did the sponsoring organization make any taxable distributions under section 4966? . . . . . n/a		
9 b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? . . . . . n/a		
10	<b>Section 501(c)(7) organizations.</b> Enter:		
10 a	Initiation fees and capital contributions included on Part VIII, line 12 . . . . . n/a		
10 b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . . . . . n/a		
11	<b>Section 501(c)(12) organizations.</b> Enter:		
11 a	Gross income from members or shareholders . . . . . n/a		
11 b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) . . . . . n/a		
12 a	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041? . . . . . n/a		
12 b	If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year . . . . . n/a		
13	<b>Section 501(c)(29) qualified nonprofit health insurance issuers.</b>		
13 a	Is the organization licensed to issue qualified health plans in more than one state? . . . . . n/a <i>Note.</i> See the instructions for additional information the organization must report on Schedule O.		
13 b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans . . . . . n/a		
13 c	Enter the amount of reserves on hand . . . . . n/a		
14 a	Did the organization receive any payments for indoor tanning services during the tax year? . . . . .		X
14 b	If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O . . . . . n/a		

**Part VI Governance, Management, and Disclosure** For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

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

**Section A. Governing Body and Management**

		Yes	No
<b>1 a</b>	Enter the number of voting members of the governing body at the end of the tax year . . . . . If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.		
	<b>1 a</b> 16		
<b>b</b>	Enter the number of voting members included in line 1a, above, who are independent . . . . .		
	<b>1 b</b> 16		
<b>2</b>	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? . . . . .	X	
<b>3</b>	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? . . . . .		X
<b>4</b>	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? . . . . .		X
<b>5</b>	Did the organization become aware during the year of a significant diversion of the organization's assets? . . . . .		X
<b>6</b>	Did the organization have members or stockholders? . . . . .		X
<b>7 a</b>	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? . . . . .		X
<b>b</b>	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? . . . . .		X
<b>8</b>	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
<b>a</b>	The governing body? . . . . .	X	
<b>b</b>	Each committee with authority to act on behalf of the governing body? . . . . .		X
<b>9</b>	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O . . . . .		X

**Section B. Policies** (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
<b>10 a</b>	Did the organization have local chapters, branches, or affiliates? . . . . .	X	
<b>b</b>	If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? . . . . .	X	
<b>11 a</b>	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? . . . . .	X	
<b>b</b>	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
<b>12 a</b>	Did the organization have a written conflict of interest policy? If 'No,' go to line 13 . . . . .	X	
<b>b</b>	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? . . . . .	X	
<b>c</b>	Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this was done . . . . .	X	
<b>13</b>	Did the organization have a written whistleblower policy? . . . . .	X	
<b>14</b>	Did the organization have a written document retention and destruction policy? . . . . .	X	
<b>15</b>	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?		
<b>a</b>	The organization's CEO, Executive Director, or top management official . . . . .		X
<b>b</b>	Other officers or key employees of the organization . . . . . If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions).		X
<b>16 a</b>	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? . . . . .		X
<b>b</b>	If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? . . . . . n/a		

**Section C. Disclosure**

- 17** List the states with which a copy of this Form 990 is required to be filed ▶ See Form 990, Page 6, Line 17 (continued)
- 18** Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  
 Own website     Another's website     Upon request     Other (explain in Schedule O)
- 19** Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records: ▶  
 Nancy Bisson                      5401 E. Independence Blvd    Charlotte    NC    28212                      (704) 532-3306

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

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

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

**1 a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

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

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 neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) O. Bruton Smith Chairman	0.20 40.00	X		X				0.	0.	0.
(2) Marcus Smith Chairman	0.20 40.00	X		X				0.	0.	0.
(3) Scott Brown Director	0.30	X						0.	0.	0.
(4) Jerry Caldwell Director	0.20 40.00	X						0.	0.	0.
(5) Ed Clark Director	0.20 40.00	X						0.	0.	0.
(6) Conrad Clement Director	0.30	X						0.	0.	0.
(7) Eddie Gossage Director	0.20 40.00	X						0.	0.	0.
(8) Jeff Hammond Director	0.20	X						0.	0.	0.
(9) Kim Hansen Director	0.20	X						0.	0.	0.
(10) Don Hawk Director	0.20 40.00	X						0.	0.	0.
(11) David McGrath Director	0.20 40.00	X						0.	0.	0.
(12) Steve Page Director	0.20 40.00	X						0.	0.	0.
(13) Chris Powell Director	0.20 40.00	X						0.	0.	0.
(14) Tyler Schropp Director	0.20	X						0.	0.	0.

**Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees** (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee			
(15) Mark Simendinger Director	0.20 40.00	X					0.	0.	0.
(16) Marcy Smothers Director	0.20	X					0.	0.	0.
(17) James Green III Secretary	1.00			X			0.	0.	0.
(18) Randall Storey Treasurer/Assistant Secretary	0.40 40.00			X			0.	0.	0.
(19) Chuck Swannack Executive Director	40.00			X			0.	60,000.	0.
(20) Sam Bass Director through 2/3/16	0.00	X					0.	0.	0.
(21) Mel Larson Director through 2/3/16	0.00	X					0.	0.	0.
(22)									
(23)									
(24)									
(25)									
<b>1 b Sub-total</b>							0.	60,000.	0.
<b>c Total from continuation sheets to Part VII, Section A</b>									
<b>d Total (add lines 1b and 1c)</b>							0.	60,000.	0.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If 'Yes,' complete Schedule J for such individual	3	X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If 'Yes,' complete Schedule J for such individual	4	X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If 'Yes,' complete Schedule J for such person	5	X

**Section B. Independent Contractors**

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
None		

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶ -0-



**Part VIII Statement of Revenue**

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

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	<b>1 a</b> Federated campaigns . . . . .	<b>1 a</b>				
	<b>b</b> Membership dues . . . . .	<b>1 b</b>				
	<b>c</b> Fundraising events . . . . .	<b>1 c</b> 2,549,076.				
	<b>d</b> Related organizations . . . . .	<b>1 d</b>				
	<b>e</b> Government grants (contributions) . . . . .	<b>1 e</b>				
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above . . . . .	<b>1 f</b> 1,318,627.				
	<b>g</b> Noncash contributions included in lines 1a-1f: \$	552,997.				
	<b>h Total.</b> Add lines 1a-1f . . . . .		3,867,703.			
<b>Program Service Revenue</b>	<b>2 a</b> Business Code					
	<b>b</b> . . . . .					
	<b>c</b> . . . . .					
	<b>d</b> . . . . .					
	<b>e</b> . . . . .					
	<b>f</b> All other program service revenue . . . . .					
	<b>g Total.</b> Add lines 2a-2f . . . . .					
<b>Other Revenue</b>	<b>3</b> Investment income (including dividends, interest and other similar amounts) . . . . .					
	<b>4</b> Income from investment of tax-exempt bond proceeds . . . . .					
	<b>5</b> Royalties . . . . .					
	<b>6 a</b> Gross rents . . . . .	(i) Real				
		(ii) Personal				
		<b>b</b> Less: rental expenses				
		<b>c</b> Rental income or (loss) . . . . .				
	<b>d</b> Net rental income or (loss) . . . . .					
	<b>7 a</b> Gross amount from sales of assets other than inventory	(i) Securities				
		(ii) Other	0.			
		<b>b</b> Less: cost or other basis and sales expenses . . . . .		226.		
		<b>c</b> Gain or (loss) . . . . .		-226.		
	<b>d</b> Net gain or (loss) . . . . .		-226.	0.	0.	-226.
	<b>8 a</b> Gross income from fundraising events (not including . . \$ 2,549,076 . . of contributions reported on line 1c). See Part IV, line 18. . . . .	<b>a</b> 1,000,661.				
		<b>b</b> Less: direct expenses . . . . .	<b>b</b> 1,219,890.			
<b>c</b> Net income or (loss) from fundraising events . . . . .			-219,229.	0.	-219,229.	
<b>9 a</b> Gross income from gaming activities. See Part IV, line 19. . . . .	<b>a</b> 274,833.					
	<b>b</b> Less: direct expenses . . . . .	<b>b</b> 215,241.				
	<b>c</b> Net income or (loss) from gaming activities . . . . .		59,592.	0.	0.	59,592.
<b>10 a</b> Gross sales of inventory, less returns and allowances . . . . .	<b>a</b>					
	<b>b</b> Less: cost of goods sold . . . . .	<b>b</b>				
	<b>c</b> Net income or (loss) from sales of inventory . . . . .					
<b>11 a</b> Miscellaneous Revenue		<b>Business Code</b>				
<b>b</b> . . . . .						
<b>c</b> . . . . .						
<b>d</b> All other revenue . . . . .						
<b>e Total.</b> Add lines 11a-11d . . . . .						
<b>12 Total revenue.</b> See instructions . . . . .		3,707,840.	0.	0.	-159,863.	

**Part IX Statement of Functional Expenses**

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

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

Do 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 domestic organizations and domestic governments. See Part IV, line 21.	2,766,789.	2,766,789.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22.				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.				
4 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 4956(f)(1)) and persons described in section 4958(c)(3)(B).				
7 Other salaries and wages.				
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions).				
9 Other employee benefits.				
10 Payroll taxes.				
11 Fees for services (non-employees):				
a Management.				
b Legal.				
c Accounting.	22,000.	0.	22,000.	0.
d Lobbying.				
e Professional fundraising services. See Part IV, line 17.				
f Investment management fees.				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)				
12 Advertising and promotion.	6,168.	0.	0.	6,168.
13 Office expenses.	31,569.	0.	0.	31,569.
14 Information technology.				
15 Royalties.				
16 Occupancy.	1,543.	0.	0.	1,543.
17 Travel.	38,180.	0.	15,265.	22,915.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials.				
19 Conferences, conventions, and meetings.				
20 Interest.				
21 Payments to affiliates.				
22 Depreciation, depletion, and amortization.	4,107.	0.	0.	4,107.
23 Insurance.	9,836.	0.	2,756.	7,080.
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a <u>Payroll Services</u>	513,541.	14,542.	65,497.	433,502.
b				
c				
d				
e All other expenses.	177,210.	0.	0.	177,210.
25 Total functional expenses. Add lines 1 through 24c.	3,570,943.	2,781,331.	105,518.	684,094.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).				

**Part X Balance Sheet**

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

		(A) Beginning of year		(B) End of year
<b>Assets</b>	<b>1</b> Cash — non-interest-bearing . . . . .	2,859,070.	<b>1</b>	2,888,265.
	<b>2</b> Savings and temporary cash investments . . . . .		<b>2</b>	
	<b>3</b> Pledges and grants receivable, net . . . . .		<b>3</b>	652,022.
	<b>4</b> Accounts receivable, net . . . . .	492,175.	<b>4</b>	16,750.
	<b>5</b> Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L . . . . .		<b>5</b>	
	<b>6</b> Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L . . . . .		<b>6</b>	
	<b>7</b> Notes and loans receivable, net . . . . .		<b>7</b>	
	<b>8</b> Inventories for sale or use . . . . .	22,648.	<b>8</b>	23,404.
	<b>9</b> Prepaid expenses and deferred charges . . . . .	12,500.	<b>9</b>	24,141.
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D . . . . .	<b>10a</b> 53,126.		
	<b>b</b> Less: accumulated depreciation . . . . .	<b>10b</b> 41,646.	13,889.	<b>10c</b> 11,480.
	<b>11</b> Investments — publicly traded securities . . . . .		<b>11</b>	
	<b>12</b> Investments — other securities. See Part IV, line 11 . . . . .		<b>12</b>	
	<b>13</b> Investments — program-related. See Part IV, line 11 . . . . .		<b>13</b>	
	<b>14</b> Intangible assets . . . . .		<b>14</b>	
	<b>15</b> Other assets. See Part IV, line 11 . . . . .		<b>15</b>	
<b>16 Total assets.</b> Add lines 1 through 15 (must equal line 34) . . . . .	3,400,282.	<b>16</b>	3,616,062.	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses . . . . .	108,594.	<b>17</b>	169,215.
	<b>18</b> Grants payable . . . . .	129,863.	<b>18</b>	78,213.
	<b>19</b> Deferred revenue . . . . .	35,948.	<b>19</b>	105,860.
	<b>20</b> Tax-exempt bond liabilities . . . . .		<b>20</b>	
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D . . . . .		<b>21</b>	
	<b>22</b> Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L . . . . .		<b>22</b>	
	<b>23</b> Secured mortgages and notes payable to unrelated third parties . . . . .		<b>23</b>	
	<b>24</b> Unsecured notes and loans payable to unrelated third parties . . . . .		<b>24</b>	
	<b>25</b> Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D . . . . .		<b>25</b>	
	<b>26 Total liabilities.</b> Add lines 17 through 25 . . . . .	274,405.	<b>26</b>	353,288.
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.</b>			
	<b>27</b> Unrestricted net assets . . . . .	3,125,877.	<b>27</b>	3,262,774.
	<b>28</b> Temporarily restricted net assets . . . . .		<b>28</b>	
	<b>29</b> Permanently restricted net assets . . . . .		<b>29</b>	
	<b>Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.</b>			
	<b>30</b> Capital stock or trust principal, or current funds . . . . .		<b>30</b>	
	<b>31</b> Paid-in or capital surplus, or land, building, or equipment fund . . . . .		<b>31</b>	
	<b>32</b> Retained earnings, endowment, accumulated income, or other funds . . . . .		<b>32</b>	
<b>33</b> Total net assets or fund balances . . . . .	3,125,877.	<b>33</b>	3,262,774.	
<b>34</b> Total liabilities and net assets/fund balances . . . . .	3,400,282.	<b>34</b>	3,616,062.	

BAA

**Part XI Reconciliation of Net Assets**

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	3,707,840.
2	Total expenses (must equal Part IX, column (A), line 25)	2	3,570,943.
3	Revenue less expenses. Subtract line 2 from line 1	3	136,897.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	3,125,877.
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	3,262,774.

**Part XII Financial Statements and Reporting**

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

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____		
If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.			
2 a	Were the organization's financial statements compiled or reviewed by an independent accountant?		X
If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:			
<input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis			
2 b	Were the organization's financial statements audited by an independent accountant?	X	
If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:			
<input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis			
2 c	If 'Yes' to line 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?	X	
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			
3 a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		X
3 b	If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits . . . . . n/a		

BAA

**SCHEDULE A**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

**Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.  
 ▶ Attach to Form 990 or Form 990-EZ.  
 ▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No. 1545-0047

**2015**

**Open to Public Inspection**

Name of the organization: **SPEEDWAY CHILDREN'S CHARITIES** Employer identification number: **56-1331429**

**Part I Reason for Public Charity Status** (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

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

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
<b>Total</b>						

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

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

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") . . . . .	3,164,212.	3,578,251.	3,052,930.	3,648,199.	3,867,703.	17,311,295.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . . . .						
3 The value of services or facilities furnished by a governmental unit to the organization without charge. . . . .						
4 <b>Total.</b> Add lines 1 through 3 . . . . .	3,164,212.	3,578,251.	3,052,930.	3,648,199.	3,867,703.	17,311,295.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) . . . . .						1,518,964.
6 <b>Public support.</b> Subtract line 5 from line 4 . . . . .						15,792,331.

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
7 Amounts from line 4 . . . . .	3,164,212.	3,578,251.	3,052,930.	3,648,199.	3,867,703.	17,311,295.
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 from the sale of capital assets (Explain in Part VI.) . . . . .	1,013,510.	1,080,758.	1,126,512.	1,112,792.	1,275,494.	5,609,066.
11 <b>Total support.</b> Add lines 7 through 10 . . . . .						22,920,361.
12 Gross receipts from related activities, etc. (see instructions). . . . .					12	
13 <b>First five years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> . . . . . ▶ <input type="checkbox"/>						

**Section C. Computation of Public Support Percentage**

14 Public support percentage for 2015 (line 6, column (f) divided by line 11, column (f)) . . . . .	14	68.90 %
15 Public support percentage from 2014 Schedule A, Part II, line 14 . . . . .	15	68.52 %
16a <b>33-1/3% support test — 2015.</b> If the organization did not check the box on line 13, and line 14 is 33-1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization . . . . . ▶ <input checked="" type="checkbox"/>		
b <b>33-1/3% support test — 2014.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33-1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization . . . . . ▶ <input type="checkbox"/>		
17a <b>10%-facts-and-circumstances test — 2015.</b> If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and <b>stop here.</b> Explain in Part VI how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization . . . . . ▶ <input type="checkbox"/>		
b <b>10%-facts-and-circumstances test — 2014.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and <b>stop here.</b> Explain in Part VI how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization . . . . . ▶ <input type="checkbox"/>		
18 <b>Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions . . . . . ▶ <input type="checkbox"/>		

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1 Gifts, grants, contributions and membership fees received. (Do not include any 'unusual grants.') . . . . .						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose . . . . .						
3 Gross receipts from activities that are not an unrelated trade or business under section 513 . . . . .						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . . . .						
5 The value of services or facilities furnished by a governmental unit to the organization without charge . . . . .						
6 <b>Total.</b> Add lines 1 through 5 . . . . .						
7 a Amounts included on lines 1, 2, and 3 received from disqualified persons . . . . .						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year . . . . .						
c Add lines 7a and 7b . . . . .						
8 <b>Public support.</b> (Subtract line 7c from line 6.) . . . . .						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
9 Amounts from line 6 . . . . .						
10 a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources . . . . .						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 . . . . .						
c Add lines 10a and 10b . . . . .						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on . . . . .						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) . . . . .						
13 <b>Total support.</b> (Add lines 9, 10c, 11, and 12.) . . . . .						

14 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** . . . . .

**Section C. Computation of Public Support Percentage**

15 Public support percentage for 2015 (line 8, column (f) divided by line 13, column (f)) . . . . .	15	%
16 Public support percentage from 2014 Schedule A, Part III, line 15 . . . . .	16	%

**Section D. Computation of Investment Income Percentage**

17 Investment income percentage for 2015 (line 10c, column (f) divided by line 13, column (f)) . . . . .	17	%
18 Investment income percentage from 2014 Schedule A, Part III, line 17 . . . . .	18	%

19 a **33-1/3% support tests – 2015.** If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization . . . . .

b **33-1/3% support tests – 2014.** 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 . . . . .

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

**Part IV Supporting Organizations**

(Complete only if you checked a box in line 11 on Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

**Section A. All Supporting Organizations**

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If 'No,' describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain . . . . .	1	
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If 'Yes,' explain in <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2) . . . . .	2	
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (8)? If 'Yes,' answer (b) and (c) below . . . . .	3a	
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If 'Yes,' describe in <b>Part VI</b> when and how the organization made the determination . . . . .	3b	
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If 'Yes,' explain in <b>Part VI</b> what controls the organization put in place to ensure such use . . . . .	3c	
4a Was any supported organization not organized in the United States ('foreign supported organization')? If 'Yes' and if you checked 11a or 11b in Part I, answer (b) and (c) below . . . . .	4a	
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If 'Yes,' describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations . . . . .	4b	
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If 'Yes,' explain in <b>Part VI</b> what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes . . . . .	4c	
5a Did the organization add, substitute, or remove any supported organizations during the tax year? If 'Yes,' answer (b) and (c) below (if applicable). Also, provide detail in <b>Part VI</b> , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document) . . . . .	5a	
b <b>Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document? . . . . .	5b	
c <b>Substitutions only.</b> Was the substitution the result of an event beyond the organization's control? . . . . .	5c	
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If 'Yes,' provide detail in <b>Part VI</b> . . . . .	6	
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ) . . . . .	7	
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ) . . . . .	8	
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If 'Yes,' provide detail in <b>Part VI</b> . . . . .	9a	
b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If 'Yes,' provide detail in <b>Part VI</b> . . . . .	9b	
c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If 'Yes,' provide detail in <b>Part VI</b> . . . . .	9c	
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If 'Yes,' answer 10b below . . . . .	10a	
b Did the organization, have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.) . . . . .	10b	



**Part IV Supporting Organizations** (continued)

	Yes	No
<b>11</b> Has the organization accepted a gift or contribution from any of the following persons?		
<b>a</b> A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	<b>11a</b>	
<b>b</b> A family member of a person described in (a) above?	<b>11b</b>	
<b>c</b> A 35% controlled entity of a person described in (a) or (b) above? If 'Yes' to a, b, or c, provide detail in Part VI	<b>11c</b>	

**Section B. Type I Supporting Organizations**

	Yes	No
<b>1</b> Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If 'No,' describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year	<b>1</b>	
<b>2</b> Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If 'Yes,' explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization	<b>2</b>	

**Section C. Type II Supporting Organizations**

	Yes	No
<b>1</b> Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If 'No,' describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s)	<b>1</b>	

**Section D. All Type III Supporting Organizations**

	Yes	No
<b>1</b> Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	<b>1</b>	
<b>2</b> Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If 'No,' explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s)	<b>2</b>	
<b>3</b> By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If 'Yes,' describe in Part VI the role the organization's supported organizations played in this regard	<b>3</b>	

**Section E. Type III Functionally-Integrated Supporting Organizations**

- 1** Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions):
- a**  The organization satisfied the Activities Test. Complete line 2 below.
  - b**  The organization is the parent of each of its supported organizations. Complete line 3 below.
  - c**  The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).

**2** Activities Test. Answer (a) and (b) below.

- a** Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If 'Yes,' then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities
- b** Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If 'Yes,' explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in those activities but for the organization's involvement

**3** Parent of Supported Organizations. Answer (a) and (b) below.

- a** Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI
- b** Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If 'Yes,' describe in Part VI the role played by the organization in this regard

	Yes	No
<b>2a</b>		
<b>2b</b>		
<b>3a</b>		
<b>3b</b>		

**Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations**

1  Check here if the organization satisfied the Integral Part Test as a qualifying trust on November 20, 1970. See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

<b>Section A – Adjusted Net Income</b>		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain . . . . .	1	
2	Recoveries of prior-year distributions . . . . .	2	
3	Other gross income (see instructions). . . . .	3	
4	Add lines 1 through 3 . . . . .	4	
5	Depreciation and depletion . . . . .	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions) . . . . .	6	
7	Other expenses (see instructions) . . . . .	7	
8	<b>Adjusted Net Income</b> (subtract lines 5, 6 and 7 from line 4) . . . . .	8	

<b>Section B – Minimum Asset Amount</b>		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities . . . . .	1 a	
b	Average monthly cash balances . . . . .	1 b	
c	Fair market value of other non-exempt-use assets . . . . .	1 c	
d	<b>Total</b> (add lines 1a, 1b, and 1c). . . . .	1 d	
e	<b>Discount</b> claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt-use assets . . . . .	2	
3	Subtract line 2 from line 1d . . . . .	3	
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions) . . . . .	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3) . . . . .	5	
6	Multiply line 5 by .035. . . . .	6	
7	Recoveries of prior-year distributions . . . . .	7	
8	<b>Minimum Asset Amount</b> (add line 7 to line 6) . . . . .	8	

<b>Section C – Distributable Amount</b>			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A) . . . . .	1	
2	Enter 85% of line 1 . . . . .	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A) . . . . .	3	
4	Enter greater of line 2 or line 3 . . . . .	4	
5	Income tax imposed in prior year . . . . .	5	
6	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions) . . . . .	6	

7  Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions).

**Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)**

<b>Section D – Distributions</b>		<b>Current Year</b>
1	Amounts paid to supported organizations to accomplish exempt purposes . . . . .	
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity . . . . .	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations . . . . .	
4	Amounts paid to acquire exempt-use assets . . . . .	
5	Qualified set-aside amounts (prior IRS approval required). . . . .	
6	Other distributions (describe in <b>Part VI</b> ). See instructions . . . . .	
7	<b>Total annual distributions.</b> Add lines 1 through 6 . . . . .	
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in <b>Part VI</b> ). See instructions. . . . .	
9	Distributable amount for 2015 from Section C, line 6 . . . . .	
10	Line 8 amount divided by Line 9 amount . . . . .	

<b>Section E – Distribution Allocations (see instructions)</b>	<b>(i) Excess Distributions</b>	<b>(ii) Underdistributions Pre-2015</b>	<b>(iii) Distributable Amount for 2015</b>
1	Distributable amount for 2015 from Section C, line 6 . . . . .		
2	Underdistributions, if any, for years prior to 2015 (reasonable cause required – see instructions) . . . . .		
3	Excess distributions carryover, if any, to 2015:		
a			
b			
c			
d	From 2013 . . . . .		
e	From 2014 . . . . .		
f	<b>Total of lines 3a through e</b> . . . . .		
g	Applied to underdistributions of prior years . . . . .		
h	Applied to 2015 distributable amount . . . . .		
i	Carryover from 2010 not applied (see instructions) . . . . .		
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f . . . . .		
4	Distributions for 2015 from Section D, line 7: \$ . . . . .		
a	Applied to underdistributions of prior years . . . . .		
b	Applied to 2015 distributable amount . . . . .		
c	Remainder. Subtract lines 4a and 4b from 4 . . . . .		
5	Remaining underdistributions for years prior to 2015, if any. Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions) . . . . .		
6	Remaining underdistributions for 2015. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions) . . . . .		
7	<b>Excess distributions carryover to 2016.</b> Add lines 3j and 4c . . . . .		
8	Breakdown of line 7:		
a			
b			
c	Excess from 2013 . . . . .		
d	Excess from 2014 . . . . .		
e	Excess from 2015 . . . . .		

BAA

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

Pt II Ln 10 Other Income Part II, Line 10 Description: Event Revenue 2011: 1013510.  
2012: 1080758. 2013: 1126512. 2014: 1112792. 2015: 1275494.

**SCHEDULE D  
(Form 990)**

**Supplemental Financial Statements**

OMB No. 1545-0047

**2015**

Department of the Treasury  
Internal Revenue Service

▶ Complete if the organization answered 'Yes' on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.  
▶ Attach to Form 990.  
▶ Information about Schedule D (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

**Open to Public Inspection**

Name of the organization

Employer identification number

SPEEDWAY CHILDREN'S CHARITIES

56-1331429

**Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.**

Complete if the organization answered 'Yes' on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year . . . . .		
2 Aggregate value of contributions to (during year) . . . . .		
3 Aggregate value of grants from (during year) . . . . .		
4 Aggregate value at end of year . . . . .		

- 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?  Yes  No
- 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?  Yes  No

**Part II Conservation Easements.**

Complete if the organization answered 'Yes' on Form 990, Part IV, line 7.

- 1 Purpose(s) of conservation easements held by the organization (check all that apply).
- Preservation of land for public use (e.g., recreation or education)  Preservation of a historically important land area
- Protection of natural habitat  Preservation of a certified historic structure
- Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements . . . . .	2 a
b Total acreage restricted by conservation easements . . . . .	2 b
c Number of conservation easements on a certified historic structure included in (a) . . . . .	2 c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register . . . . .	2 d

- 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ \_\_\_\_\_
- 4 Number of states where property subject to conservation easement is located ▶ \_\_\_\_\_
- 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?  Yes  No
- 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \_\_\_\_\_
- 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$ \_\_\_\_\_
- 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?  Yes  No
- 9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.**

Complete if the organization answered 'Yes' on Form 990, Part IV, line 8.

- 1 a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.
- b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:
- (I) Revenue included on Form 990, Part VIII, line 1 . . . . . ▶ \$ \_\_\_\_\_
- (II) Assets included in Form 990, Part X . . . . . ▶ \$ \_\_\_\_\_
- 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:
- a Revenue included on Form 990, Part VIII, line 1 . . . . . ▶ \$ \_\_\_\_\_
- b Assets included in Form 990, Part X . . . . . ▶ \$ \_\_\_\_\_

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)**

- 3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
- a  Public exhibition
  - b  Scholarly research
  - c  Preservation for future generations
  - d  Loan or exchange programs
  - e  Other \_\_\_\_\_
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Yes  No

**Part IV Escrow and Custodial Arrangements.** Complete if the organization answered 'Yes' on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1 a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  Yes  No
- b If 'Yes,' explain the arrangement in Part XIII and complete the following table:
- |                                 | Amount |
|---------------------------------|--------|
| c Beginning balance             | 1 c    |
| d Additions during the year     | 1 d    |
| e Distributions during the year | 1 e    |
| f Ending balance                | 1 f    |
- 2 a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?  Yes  No
- b If 'Yes,' explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

**Part V Endowment Funds.** Complete if the organization answered 'Yes' on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1 a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
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 current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment  \_\_\_\_\_ %
  - b Permanent endowment  \_\_\_\_\_ %
  - c Temporarily restricted endowment  \_\_\_\_\_ %
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3 a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- |                             | Yes     | No |
|-----------------------------|---------|----|
| (i) unrelated organizations | 3 a(i)  |    |
| (ii) related organizations  | 3 a(ii) |    |
- b If 'Yes' on line 3a(ii), are the related organizations listed as required on Schedule R?  **3b**
- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

**Part VI Land, Buildings, and Equipment.**

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (Investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1 a Land				
b Buildings				
c Leasehold improvements				
d Equipment		44,347.	33,325.	11,022.
e Other		8,779.	8,321.	458.
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				11,480.

**Part VII Investments – Other Securities.**

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives . . . . .		
(2) Closely-held equity interests . . . . .		
(3) Other . . . . .		
(A) . . . . .		
(B) . . . . .		
(C) . . . . .		
(D) . . . . .		
(E) . . . . .		
(F) . . . . .		
(G) . . . . .		
(H) . . . . .		
(I) . . . . .		
<b>Total.</b> (Column (b) must equal Form 990, Part X, column (B) line 12.) . . . ▶		

**Part VIII Investments – Program Related.**

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) . . . . .		
(2) . . . . .		
(3) . . . . .		
(4) . . . . .		
(5) . . . . .		
(6) . . . . .		
(7) . . . . .		
(8) . . . . .		
(9) . . . . .		
(10) . . . . .		
<b>Total.</b> (Column (b) must equal Form 990, Part X, column (B) line 13.) . . . ▶		

**Part IX Other Assets.**

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1) . . . . .	
(2) . . . . .	
(3) . . . . .	
(4) . . . . .	
(5) . . . . .	
(6) . . . . .	
(7) . . . . .	
(8) . . . . .	
(9) . . . . .	
(10) . . . . .	
<b>Total.</b> (Column (b) must equal Form 990, Part X, column (B) line 15.) . . . ▶	

**Part X Other Liabilities.**

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25

(a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) . . . . .	
(3) . . . . .	
(4) . . . . .	
(5) . . . . .	
(6) . . . . .	
(7) . . . . .	
(8) . . . . .	
(9) . . . . .	
(10) . . . . .	
(11) . . . . .	
<b>Total.</b> (Column (b) must equal Form 990, Part X, column (B) line 25.) . . . ▶	

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII.

**Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.**

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements		1	4,231,874.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
	a Net unrealized gains (losses) on investments	2 a		
	b Donated services and use of facilities	2 b	524,034.	
	c Recoveries of prior year grants	2 c		
	d Other (Describe in Part XIII.)	2 d		
	e Add lines 2a through 2d	2 e	524,034.	
3	Subtract line 2e from line 1		3	3,707,840.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
	a Investment expenses not included on Form 990, Part VIII, line 7b	4 a		
	b Other (Describe in Part XIII.)	4 b		
	c Add lines 4a and 4b	4 c		
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	3,707,840.

**Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.**

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements		1	4,094,977.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
	a Donated services and use of facilities	2 a	524,034.	
	b Prior year adjustments	2 b		
	c Other losses	2 c		
	d Other (Describe in Part XIII.)	2 d		
	e Add lines 2a through 2d	2 e	524,034.	
3	Subtract line 2e from line 1		3	3,570,943.
4	Amounts 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	4 a		
	b Other (Describe in Part XIII.)	4 b		
	c Add lines 4a and 4b	4 c		
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	3,570,943.

**Part XIII Supplemental Information.**

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

Pt X, Line 2 The Organization has implemented the provisions of FASB ASC 740-10 relating to the accounting for uncertainty in income tax positions. FASB ASC 740-10 prescribes a comprehensive model for the financial statement recognition, measurement, presentation and disclosure of income tax uncertainties with respect to positions, including tax-exempt status, taken or expected to be taken in income tax returns. The Organization's income tax returns for its reporting periods ended during the years 2013 through 2015 are still subject to examination by the IRS.



**SCHEDULE G**  
**(Form 990 or 990-EZ)**

**Supplemental Information Regarding Fundraising or Gaming Activities**

OMB No. 1545-0047

**2015**

Department of the Treasury  
Internal Revenue Service

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

▶ Attach to Form 990 or Form 990-EZ.

▶ Information about Schedule G (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

**Open to Public Inspection**

Name of the organization

Employer identification number

**SPEEDWAY CHILDREN'S CHARITIES**

**56-1331429**

**Part I Fundraising Activities.** Complete if the organization answered 'Yes' on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

**1** Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a**  Mail solicitations
- b**  Internet and email solicitations
- c**  Phone solicitations
- d**  In-person solicitations
- e**  Solicitation of non-government grants
- f**  Solicitation of government grants
- g**  Special fundraising events

**2 a** Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?  Yes  No

**b** If 'Yes,' list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in column (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
<b>Total</b>						

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

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 -----  
 -----

**Part II Fundraising Events.** Complete if the organization answered 'Yes' on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

REVENUE		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events	
		NC Dinner (event type)	CA Dinner (event type)	71 (total number)	(add column (a) through column (c))	
REVENUE	1	Gross receipts . . . . .	853,279.	173,593.	2,522,865.	3,549,737.
	2	Less: Contributions . . . . .	720,550.	107,263.	1,721,263.	2,549,076.
	3	Gross income (line 1 minus line 2) . . . . .	132,729.	66,330.	801,602.	1,000,661.
DIRECT EXPENSES	4	Cash prizes . . . . .				
	5	Noncash prizes . . . . .			86,564.	86,564.
	6	Rent/facility costs . . . . .	1,740.	7,926.	18,354.	28,020.
	7	Food and beverages . . . . .	67,860.	39,600.	144,165.	251,625.
	8	Entertainment . . . . .			46,050.	46,050.
	9	Other direct expenses . . . . .	12,805.	36,787.	758,039.	807,631.
	10	Direct expense summary. Add lines 4 through 9 in column (d) . . . . .				1,219,890.
	11	Net income summary. Subtract line 10 from line 3, column (d) . . . . .				-219,229.

**Part III Gaming.** Complete if the organization answered 'Yes' on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

REVENUE		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add column (a) through column (c))	
		1	Gross revenue . . . . .			274,833.
DIRECT EXPENSES	2	Cash prizes . . . . .			98,701.	98,701.
	3	Noncash prizes . . . . .			53,561.	53,561.
	4	Rent/facility costs . . . . .				
	5	Other direct expenses . . . . .			62,979.	62,979.
	6	Volunteer labor . . . . .	Yes _____ % No _____ %	Yes _____ % No _____ %	X Yes 96.00 % No _____ %	
7	Direct expense summary. Add lines 2 through 5 in column (d) . . . . .				215,241.	
8	Net gaming income summary. Subtract line 7 from line 1, column (d) . . . . .				59,592.	

9 Enter the state(s) in which the organization conducts gaming activities: See Part III, Line 9 (continued)

a Is the organization licensed to conduct gaming activities in each of these states?  Yes  No

b If 'No,' explain: \_\_\_\_\_  
\_\_\_\_\_

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?  Yes  No

b If 'Yes,' explain: \_\_\_\_\_  
\_\_\_\_\_

- 11 Does the organization conduct gaming activities with nonmembers?  Yes  No
- 12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?  Yes  No

13 Indicate the percentage of gaming activity conducted in:

a The organization's facility	13 a	0.00 %
b An outside facility	13 b	100.00 %

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ Nancy Bisson

Address ▶ 5401 E. Independence Blvd Charlotte, NC 28212

- 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?  Yes  No
- b 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 of the third party:

Name ▶ \_\_\_\_\_

Address ▶ \_\_\_\_\_

16 Gaming manager information:

Name ▶ See Part IV

Gaming manager compensation ▶ \$ 0

Description of services provided ▶ Oversight of gaming operations

- Director/officer  Employee  Independent contractor

17 Mandatory distributions

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?  Yes  No

b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ 167,414

**Part IV Supplemental Information.** Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).

Scott Filmore, BJ Mathis, Claudia Byrd, Lisa Starnos, Cheri Plattner, Paulette Anderson, and Cheryl LaPrade, Speedway Children's Charities employees, oversaw local gaming events as part of their position with SCC. No salary was allocated to gaming manager, which represents a minor part of their responsibilities.

Line 16

**SCHEDULE I**  
 (Form 990)

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

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

Information about Schedule I (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

Department of the Treasury Internal Revenue Service  
 Name of the organization: **SPEEDWAY CHILDREN'S CHARITIES**  
 Employer identification number: **56-1331429**

**Part I General Information on Grants and Assistance**

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  Yes  No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered 'Yes' on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.**

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) Foundation for Caliber Co 1966 Inwood Road Dallas TX 75235	75-6035865	501(c)(3)	146,830.				Sensory gym
(2) Children Exceeding Expect 151 Speedway Blvd Bristol TN 37620	62-0634742	501(c)(3)	62,000.				School
(3) Mary Crowley Career Respa 12222 Merit Drive, Ste 15 Dallas TX 75251	75-2727375	501(c)(3)	46,438.				Research
(4) Mary Hitchcock Memorial H One Medical Center Drive Lebanon NH 03756	02-0222140	501(c)(3)	31,592.				Child Programs
(5) Boys & Girls Club of Sono 100 W. Verano Ave Sonoma CA 95476	94-1579901	501(c)(3)	30,000.				After school
(6) Charity League PO Box 471332 Charlotte NC 28210	56-0560327	501(c)(3)	30,000.				Food Clothing
(7) Dream Builders Foundation 2020 Willowmet Lane Brentwood TN 37027	26-1507549	501(c)(3)	28,351.				Financial Aid
(8) Denton Kivaris Children's 1001 N. Elm Denton TX 76201	75-6036230	501(c)(3)	25,000.				Medical Aid

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **0**

3 Enter total number of other organizations listed in the line 1 table **0**

**Part III** Grants and Other Assistance to Domestic Individuals. Complete if the organization answered 'Yes' on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1					
2					
3					
4					
5					
6					
7					

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

Pt - Line 2 Speedway Children's Charities monitors the use of grant funds through various site visits and grant evaluation forms, which are completed by the grant recipient.

990 - Sch I - Part II, Continuation of Grants and Other Assistance to Governments and Organizations in the United States

56-1331429

For the calendar year 2015, or the tax year period beginning 10-01 and ending 9-30-16

Speedway Children's Charities

(a) Name of Organization	Address	(b) EIN	(c) IRC Section	(d) Amount of Cash	(e) Amount of Non-Cash	(f) Method of valuation	(g) Description	(h) Purpose of Grant or Assistance
Ped Palace	500 S. Old Orchard Lane Suite 126 Levensville, TX 75067	75-232752	501(c)(13)	\$25,000			Provide prescriptions and necessary lab tests to uninsured children	
Discovery Home Care	818 Peachtree Glen Road Charlotte, NC 28273	02-076232	501(c)(13)	\$20,000			Care for non-HIV associated children while waiting for HIV tests or community services	
The Junior Charity League of Concord, Inc.	P.O. Box 1308 Concord, NC 28025	56-608156	501(c)(13)	\$20,000			Provide new clothing for disabled aged children in Cabarrus and Kannapolis schools	
Mable Leadership Academy of Charlotte	5901 Nations Ford Road Charlotte, NC 28273	46-072802	501(c)(13)	\$17,300			Fund a language academy teaching Spanish and Chinese to grades 1-4	
Freedom School Partners	P.O. Box 37363 Charlotte, NC 28227	56-218956	501(c)(13)	\$16,000			Librarcy instruction and books for students at The Grove Freedom School	
Cook Children's Medical Center	801 7th Avenue Fort Worth, TX 76104	75-205164	501(c)(13)	\$15,479			Pediatric cancer initiatives	
A Better World	4527 Freedom Drive Charlotte, NC 28208	56-228007	501(c)(13)	\$15,000			Financial resources for after school program	
Bee Mighty	P.O. Box 23549 Charlotte, NC 28233	58-2403074	501(c)(13)	\$15,000			Support the critical needs of premature babies	
Camp CARE, Inc.	8625 Greenwald Lane Charlotte, NC 28213	56-2462774	501(c)(13)	\$15,000			Summer camp for girls who have or had cancer and their sibling	
Children's Attention Home, Inc.	P.O. Box 2912 Rock Hill, SC 29732	57-6527092	501(c)(13)	\$15,000			Provide food to child victims of abuse, abandonment, and neglect	
Fields of Honor	5820 North Patriot Dr Ovasso, OK 74055	75-3740648	501(c)(13)	\$15,000			Provider scholarships to children of fallen and injured soldiers	
Pat's Place Child advocacy Center	901 East Blvd Charlotte, NC 28203	20-1870595	501(c)(13)	\$15,000			Child abuse education & prevention programs free of charge	
McDowell Drug Task Force	1712 Orinda Court Petaluma, CA 94954	68-0051187	501(c)(13)	\$14,900			Every 15 Minutes high school drinking and driving program	
Dana-Farber Cancer Institute	10 Brookline Plaza West, 6th Floor Brookline, MA 02445	04-2763094	501(c)(13)	\$13,500			Pediatric Resource Program	
Assistance League of Charlotte	P.O. Box 47112 Charlotte, NC 28247	56-1781086	501(c)(13)	\$12,000			Provide clothes, shoes, grooming kits and books to at-risk youth	
Boys and Girls Club of Elizabethton/Carter Co.	104 Hudson Dr. Elizabethton, TN 37643	62-0502737	501(c)(13)	\$12,000			Increase the effectiveness and the children served through the After School Program	
Boys and Girls Club of Greater Kingsport	P.O. Box 784 Kingsport, TN 37662	62-0481172	501(c)(13)	\$12,000			Race 4 Success	
Boys and Girls Club of the Mountain Empire	P.O. Box 1074 Bristol, VA 24203	54-6633483	501(c)(13)	\$12,000			POWER Hour after school program	
Bristol Family YMCA Teen Leadership Club	400 MLK Jr. Blvd Bristol, TN 37620	62-6521204	501(c)(13)	\$12,000			Provide a positive environment after school for kids	
CASA for Kids	310 Shelby Street Kingsport, TN 37660	62-1464823	501(c)(13)	\$12,000			Training for court advocates for children in judicial system	
CASA of Northeast Tennessee	P.O. Box 1021 Johnson City, TN 37605	45-6515207	501(c)(13)	\$12,000			Recruit, train, and monitor court advocates for children	
Children's Advocacy Center of Bristol/Washington Co., VA	P.O. Box 16231 Bristol, VA 24209	54-1860857	501(c)(13)	\$12,000			Child abuse prevention curriculum for children of all ages	
Children's Advocacy Center of Sullivan Co.	P.O. Box 867 Bourbonville, TN 37617	62-1232172	501(c)(13)	\$12,000			Therapy for the abused child and the non-offending family member	

990 - Sch I - Part II, Continuation of Grants and Organizations in the United States

56-1331429

For the calendar year 2015, or the tax year period beginning 10-01 and ending 9-30-16

SpeeWay Children's Charities

(a) Name of Organization	Address	(b) EIN	(c) IRC Section	(d) Amount of Cash	(e) Amount of Non-Cash	(f) Method of valuation	(g) Description	(h) Purpose of Grant or Assistance
Children's Healthcare of Atlanta's	1510 Hudson Bridge Rd. Stockbridge GA 30251	58-6572422	501(c)(3)	\$12,000			Assist with programs to enhance experience of children under their care	
Coalition for Kids	2308 Watauga Road Jenkinson City TN 37601	62-1765467	501(c)(3)	\$12,000			Awesome Kids Club tutoring and mentoring	
Feeding America SouthWest Virginia	P.O. Box 2579 Abingdon VA 24211	54-1399556	501(c)(3)	\$12,000			Fight hunger and change lives among needy children	
Girls Incorporated of Bristol	613 Highland Ave. Bristol VA 24201	62-6514164	501(c)(3)	\$12,000			Friendly PFFRoast: on drug prevention program	
Girls Incorporated of Johnson City, Washington County	P.O. Box 1435 Johnson City TN 37603	62-6453392	501(c)(3)	\$12,000			ASTAD- Achieving Success Through Resources and Independent Dev.	
Give Up!	P.O. Box 4426 Johnson City TN 37602	62-1601099	501(c)(3)	\$12,000			SKA (Saving Kids into Action) Nutrition and enrichment Field Trip Programs	
Secoms Harvest Food Bank of Northeast TN	3020 Jenche Drive Kingsport TN 37663	62-1303422	501(c)(3)	\$12,000			Kids backpack program	
YWCA Bristol	106 State St. Bristol TN 37620	62-648944	501(c)(3)	\$12,000			Moms & Us: teen pregnancy program	
UNT Health Science Center	3500 Camp Bowie Blvd Fort Worth TX 76107	75-6064933	501(c)(3)	\$12,000			Support funding for the Pediatric Mobile Clinic (PMCL) in concert to combine operation.	
Abuse Alternatives	124 Memorial Dr. Bristol TN 37620	54-1101180	501(c)(3)	\$12,000			Providing emergency shelter for abused children and mothers	
American Red Cross	14286 Lee Highway Bristol VA 24202	53-6166605	501(c)(3)	\$12,000			Help children with their recovery following disasters	
Big Brothers/Big Sisters of East Tennessee	301 Louis St, Suite 302 Kingsport TN 37660	62-4842531	501(c)(3)	\$12,000			Community and School based mentoring	
Boys and Girls Club of Greeneville & Greene County	P.O. Box 1577 Greenville TN 37744	62-1766248	501(c)(3)	\$12,000			Homework, Tutoring, & Positive rewards	
Boys and Girls Club of Morristown	P.O. Box 1461 Morristown TN 37816	62-6610667	501(c)(3)	\$12,000			Head of the Class- homework and tutoring	
Greater Kingsport Family YMCA	1840 Meadowview Parkway Kingsport TN 37660	58-1564232	501(c)(3)	\$12,000			Child care for special needs children	
Johnson Co. Safe Haven	P.O. Box 167 Mountain City TN 37683	62-1719857	501(c)(3)	\$12,000			Emergency food, clothing, shelter for children of domestic violence	
Mountain Region Speech and Hearing Center	367 Louis St, Suite 301 Kingsport TN 37660	51-6141236	501(c)(3)	\$12,000			Provide speech, language, swallowing and hearing treatments for infants and children	
National Camps for Blind Children	301 Messenger Rd Greeneville TN 37743	47-6485419	501(c)(3)	\$12,000			Provide camping experience for blind children	
Santa Pal	P.O. Box 212 Bristol VA 24203	31-1784923	501(c)(3)	\$12,000			Christmas for underprivileged children	
Girls Incorporated of Kingsport	P.O. Box 981 Kingsport TN 37662	62-6064442	501(c)(3)	\$10,850			Project: Helping Hands so that girls get a hand up and not a hand out	
Sonoma Valley Education Foundation	17878 Railroad Avenue Sonoma CA 95476	68-6279152	501(c)(3)	\$10,733			Sonoma Valley School Garden Project	
A Child's Place	601 East 5th Street, Suite 25D Charlottesville NC 28902	58-1911741	501(c)(3)	\$10,000			STAR Initiative for homeless students at David Hillis	
Assistance League	6486 W. Charleston Las Vegas NV 89146	88-0177891	501(c)(3)	\$10,000			To purchase clothing and essentials for CCSD	

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For the calendar year 2015, or the tax year period beginning 10-01 and ending 9-30-16

Speedway Children's Charities

56-1331428

(a) Name of Organization	Address	(b) EIN	(c) IRC Section	(d) Amount of Cash	(e) Amount of Non-Cash	(f) Method of valuation	(g) Description	(h) Purpose of Grant or Assistance
Baby's Bouquet	2285 Renaissance Dr., Ste. D Las Vegas NV 89119	26-2678979	501(c)(3)	\$10,000				To provide essentials for babies born into impoverished families
Bedham Christian Services	100 Dyer Street Johnson City TN 37601	38-2842493	501(c)(3)	\$10,000				Goal is to serve children
Boys & Girls Club of Cabarrus County, Inc.	P.O. Box 1405 Concord NC 28026	56-0577616	501(c)(3)	\$10,000				Provide supplies for after-school programs
Boys and Girls Clubs of Central Appalachia	P.O. Box 1305 Grundy VA 24634	20-5517073	501(c)(3)	\$10,000				Power-hour afterschool programming
Boys and Girls Clubs of Johnson City/Washington County	2210 West Market St Johnson City TN 37604	62-0820738	501(c)(3)	\$10,000				Science, Technology, engineering, art and math programming
Bruce Irons Camp Fund	728 Providence Road, Suite 212 Charlotte NC 28207	95-0825218	501(c)(3)	\$10,000				fund camper enrichment activities for a 5 yr. camping program for low-income youth
Children's Hope Alliance	P.O. Box 1 Barlow Springs NC 28010	56-0579993	501(c)(3)	\$10,000				Life Safety Video Camera System in Statesville group homes
Children's Institute for Pediatric Trauma	575 N. Patterson Avenue, Suite 148 Winston-Salem NC 27104	46-3874891	501(c)(3)	\$10,000				Training course in pediatric airway management for EMTs providers
Committee on the Shelterless - COIS	PO Box 2704, 950 Hopper Street Pecklama CA 95453	68-0176655	501(c)(3)	\$10,000				Children's Programs at COIS
Common Heart, LLC	P.O. Box 2761 Indian Trail NC 28079	46-1161476	501(c)(3)	\$10,000				Purchase food for distribution to hungry children and families.
Crumley House Brain Injury Rehabilitation Center	900 Urbana Rd. Limestone TN 37581	58-1898911	501(c)(3)	\$10,000				Care and training for concussions and prevention
East TN Christian Home and Academy	P.O. Box 1147 Elizabethton TN 37644	62-0517458	501(c)(3)	\$10,000				Prepare girls at home with an independent living program for future
Girls on the Run of N.E. Tennessee	P.O. Box 5422 Johnson City TN 37602	20-8559320	501(c)(3)	\$10,000				Jr. high confidence through accomplishment while establishing a lifetime appreciation of health and fitness
Goobie Two Shoes	10620 Southern Highlands Pkwy #110-474 Las Vegas NV 89141	20-8962386	501(c)(3)	\$10,000				Purchase 2,500 packages of socks, which will outfit approx. 2,500 job-seekers of our anticipated 11 Spring shoe distribution events
Hands On Regional Museum	315 E. Main Street Johnson City TN 37602	62-1282542	501(c)(3)	\$10,000				Providing educational programs for at-risk children
Hanna Boys Center	17000 Arnold Dr   PO Box 200 Senoma CA 95476	94-1156078	501(c)(3)	\$10,000				Preventing, Assessing and Treating Child Abuse & Trauma
Honey Creek Youth Ranch	1145 Budlers Bridge Rd. McDonough GA 31722	27-0557561	501(c)(3)	\$10,000				Equine therapy for special needs kids.
InReach	4425 Randolph Road, Suite 400 Charlotte NC 28211	52-1064075	501(c)(3)	\$10,000				Emergency assistance for families/children with disability.
KinnerMazur	1130 Harding Place Charlotte NC 28104	56-1721194	501(c)(3)	\$10,000				Expand supportive grief services to 60 schools and sites in Mecklenburg County
McCune River Valley Community Center	124 Ritter Circle Maclure VA 24265	54-3507619	501(c)(3)	\$10,000				Meeting Christmas needs of 600 underserved children in the region
Misty Meadows Mission Riders	455 Providence Road Waxhaw NC 28179	56-2045189	501(c)(3)	\$10,000				Therapeutic riding program for special needs children free of charge
Pattison's DREAM Academy	2383 Highway 41, Suite 101 Mount Pleasant SC 29465	20-3419362	501(c)(3)	\$10,000				Provide educational and rehabilitation programs for children



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56-1331429

For the calendar year 2015, or the tax year period beginning 10-01 and ending 9-30-16

Speedway Children's Charities

(a) Name of Organization	Address	(b) EIN	(c) IRC Section	(d) Amount of Cash	(e) Amount of Non-Cash	(f) Method of valuation	(g) Description	(h) Purpose of Grant or Assistance
Race to Read	PO Box 553 (9 Stowe Street) Waterbury VT 05676	46-3939471	501(c)(3)	\$10,000				Race to Read Program
Redwood Family Food Bank	3996 Birdway Blvd Santa Rosa CA 95403	69-0121855	501(c)(3)	\$10,000				Program for Family Schools Pandemic
Shining Hope Farms	P O Box 1036 Mt Holly NC 28120	30-0667482	501(c)(3)	\$10,000				Hippotherapy equine program for children with disabilities
Small Miracles Therapeutic Equestrian Center	1826 Rock Springs Drive Kingsport TN 37664	62-1609341	501(c)(3)	\$10,000				Student sponsorship program for special needs students
Society of St. Vincent de Paul	2055 Crescent Springs Road Covington KY 40017	31-0350542	501(c)(3)	\$10,000				Beds for children and privileged children
Southern Appalachian Bond McDonald House	418 N State of Franklin Road Johnson City TN 37601	62-1578123	501(c)(3)	\$10,000				Underwriting the actual cost of family rooms
Sullivan Co. Sheriff's Office Auxiliary	P.O. Box 589 Blountville TN 37617	27-0652413	501(c)(3)	\$10,000				Serving needy children in county for Christmas
The Police Athletic League, Inc. of Southern Nevada (PAL)	3905 S. Jones Blvd., Ste. 300 Las Vegas NV 89146	86-0687333	501(c)(3)	\$10,000				Sponsor PAL sports teams; purchase equipment and uniforms, and pay entry fees, to allow at-risk PAL youth in Clark County
Yokelbellow Ministry of Greater Statesville	P.O. Box 5134 Statesville NC 28687	56-1018615	501(c)(3)	\$10,000				Provide formula and diapers to infants in need
Young Life Upper East Tennessee	P.O. Box 6736 Johnson City TN 37602	84-0385954	501(c)(3)	\$10,000				Summer Camp Experience
Young Women's Christian Association of Sonoma County	PO Box 3536 Santa Rosa CA 95402	94-2344728	501(c)(3)	\$10,000				Sonoma House Children's Program
Peveada Blind Children's Foundation	9330 W. Martin Ave., 1st Floor Las Vegas NV 89148	70-4388242	501(c)(3)	\$9,880				To support after-school classes and tutoring for visually impaired children
Camp Hope	3100 Independence Parkway, Suite 311-342 Plano TX 75075	46-3935764	501(c)(3)	\$9,500				Serve children with pediatric cancer to properly equipped camp
Lee St. Community Child Care Center "All God's Children"	1614 Goodson St. Bristol VA 24203	54-1707693	501(c)(3)	\$9,000				Affordable quality childcare for the less fortunate
Marrison School	230 R P. Westcrest Lane Bristol VA 24201	54-1053325	501(c)(3)	\$9,000				Specialized equipment for fine school
River's Way Outdoor Adventure Center	889 Stonewy Hollow Rd. Burff City TN 37618	62-1542726	501(c)(3)	\$9,000				Adventure incentive for children with disabilities
Young Life Bristol	P.O. Box 546 Bristol TN 37621	84-0385934	501(c)(3)	\$9,000				Summer camp experience
Capital Region Food Program	470 M. Susan Leahy, 11 South Main Street, Suite 500 Censored NH 03401	21-2490655	501(c)(3)	\$8,300				Holiday Food Basket Program
Pinky Angels	P O Box 716 Belmont NC 28012	51-0230406	501(c)(3)	\$8,375				Meet the ongoing medical needs of our children.
Tony Stewart Foundation	3644 West 74th Street Indianapolis IN 46278	24-0160286	501(c)(3)	\$8,300				To raise and donate funds to help care for children diagnosed with critical or chronic illness
Big Brothers Big Sisters of the North Bay	1618 Second Street San Rafael CA 94901	94-2502278	501(c)(3)	\$8,000				Sonoma 75: Race to the Future
Boys & Girls Clubs of Central Sonoma County	1400 N. Cotton Ave Suite 14 Santa Rosa CA 95402	66-0389534	501(c)(3)	\$8,000				The Club at Jivers Family REACH

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56-1331429

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Speedway Children's Charities

(a) Name of Organization	Address	(b) EIN	(c) IRC Section	(d) Amount of Cash	(e) Amount of Non-Cash	(f) Method of valuation	(g) Description	(h) Purpose of Grant or Assistance
Bristol Faith in Action	1534 Euclid Ave Bristol VA 24201	54-2058035	501(c)(3)	\$8,000			Housing assistance for families with children	
California Parenting Institute	3650 Standish Avenue Santa Rosa CA 95407	94-1542640	501(c)(3)	\$8,000			Parent Support Services, Children's Counseling Services, New Directions School	
Child Advocacy Center of the 3rd Judicial District	P.O. Box 743 Moshier TN 37618	62-1827505	501(c)(3)	\$8,000			Therapeutic services for sexually abused children	
Children's Advocacy Center of the 1st Judicial District	P.O. Box 827 Johnson City TN 37605	62-1765785	501(c)(3)	\$8,000			Proactive services to child victims of physical and sexual abuse	
Children's In Schools - Mecklenburg County	501 East 5th Street #506 Charlotte NC 28202	53-1692795	501(c)(3)	\$8,000			Increase student services to students not reaching grade level	
Conservation Corps North Bay, Inc.	227 Larkspur Street San Rafael CA 94901	94-2842562	501(c)(3)	\$8,000			Leadership & Life Skills Development for teens	
Court Appointed Special Advocates of Sonoma County	P.O. Box 1418 Kenwood CA 95452	68-0404770	501(c)(3)	\$8,000			Delinquency and Gang Prevention Services	
Focus at the Top, Inc.	P.O. Box 1399 Robinson Park CA 94927	20-8960987	501(c)(3)	\$8,000			Finance at the Top Tutoring and Mentoring Program	
Florence Critterson Services	P.O. Box 38392 Charlotte NC 28236	56-0577626	501(c)(3)	\$8,000			Programs and services for at-risk pregnant adolescents	
Friends in Sonoma (Helping F.I.S.H.)	P.O. Box 507 Sonoma CA 95476	23-7441789	501(c)(3)	\$8,000			Food Baskets for low income children	
Good Samaritan Ministries	P.O. Box 2441 Johnson City TN 37605	62-1231520	501(c)(3)	\$8,000			Food programs for children and Back to School Education program	
Holston United Methodist Home for Children	P.O. Box 186 Greenville TN 37744	62-0515531	501(c)(3)	\$8,000			LEAD Program, emphasizes leadership, life skills, and healthy living	
Hope House of Scott Co.	P.O. Box 1992 Gate City VA 24251	54-1893016	501(c)(3)	\$8,000			Provide needs for youth residing in their shelter	
Jenco-Sitters	P.O. Box 5548 Kingsport TN 37663	36-2193628	501(c)(3)	\$8,000			Children treated at the hospital at no charge to their parents	
La Luz Center	17563 Greger Street Sonoma CA 95476	68-0228235	501(c)(3)	\$8,000			Community Care: working towards healthy families and children	
LandPais	618 4th Street Santa Rosa CA 95404	68-0378530	501(c)(3)	\$8,000			Bayer Farm - Varnes Abuser (Let's go outside) parenting program for kids	
Martin & Parent Network and Resource Center	54 Galil Drive, Suite C Novato CA 94945	94-2742307	501(c)(3)	\$8,000			Parent to Parent Support for Sonoma Families of Children with Special Needs	
On the Move	780 Lincoln Avenue Napa CA 94558	75-1191995	501(c)(3)	\$8,000			VOICES Leadership and Employment Project for teens	
Pediatric Central Institute of the North Coast	1390 18th Hole Drive Windsor CA 95992	34-2012430	501(c)(3)	\$8,000			Project Lifetime Smiles (PLS)	
Petaluma People's Services Center	1500 Petaluma Blvd. South Petaluma CA 94952	94-2271299	501(c)(3)	\$8,000			Youth Prevention & Intervention - Mental Health	
Rose and Charles School	1934 Biwata Drive Santa Rosa CA 95407	43-029144	501(c)(3)	\$8,000			Through College Monitor Program	
Santa Rosa Memorial Hospital - Sr. Joseph Meale Dental	751 Lombard Court, Suite A Santa Rosa CA 95407	94-1231005	501(c)(3)	\$8,000			Wright Mouth Dental Disease Prevention Program for youth	
Shepard's Inn	P.O. Box 2214 Elizabethton TN 37644	62-1690364	501(c)(3)	\$8,000			Emergency shelter, women and children	

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56-1331429

For the calendar year 2015, or the tax year period beginning 10-01 and ending 9-30-16

Speedway Children's Charities

(a) Name of Organization	Address	(b) EIN	(c) IRC Section	(d) Amount of Cash	(e) Amount of Non-Cash	(f) Method of valuation	(g) Description	(h) Purpose of Grant or Assistance
Social Advocates for Youth (SAF)	3440 Airway Drive, Suite E Santa Rosa, CA 95403	94-1711490	501(c)(13)	\$8,000				Dr. James E. Coffee Emergency Teen Shelter
Sonoma Valley Mentoring Alliance	916 First Street West Sonoma, CA 95476	68-0429126	501(c)(13)	\$8,000				Mentoring Program "Send by Me"
Sullivan Co. Imagination Library	P.O. Box 3045 Kingsport, TN 37664	95-0680873	501(c)(13)	\$8,000				Free books for children birth until 5 at no cost to family
Teen Services (formerly Sonoma Valley Teen Services)	27440 Sonoma Highway Sonoma, CA 95476	68-0300038	501(c)(13)	\$8,000				Ready to Work (RTW) for teens
The Living Room Center, Inc.	636 Cherry Street Santa Rosa, CA 95404	98-2675876	501(c)(13)	\$8,000				Mother and Child (M/C) Program
Valley of the Moon Children's Home Foundation	PO Box 13671 Santa Rosa, CA 95406	68-0343720	501(c)(13)	\$8,000				Dental Program
Flint River Council	P. O. Box 173 Griffin, GA 30224	98-0574922	501(c)(13)	\$7,750				Financial assistance for those who need it to participate in the Scouting program
Appalachia's Service Project	4523 Bristol Highway Johnson City, TN 37601	67-0593183	501(c)(13)	\$7,500				Making children's homes safer and drier
Boys & Girls Club of Greater Concord	55 Bradley Street Concord, NH 33301	02-4259874	501(c)(13)	\$7,500				After school program
Boys Town Nevada, Inc.	821 N. Mojave Rd. Las Vegas, NV 89101	47-4376606	501(c)(13)	\$7,500				Create a memorable holiday season for those being served
Community Action Partnership of Sonoma County	2300 North Dutton Avenue Santa Rosa, CA 95401	94-1648949	501(c)(13)	\$7,500				Save Du-Sen's dental program for kids
Dragonfly Foundation, The	9225 Governors Way Cincinnati, OH 45249	27-3189929	501(c)(13)	\$7,500				C.A.R.E. Packages for children with cancer
Educational Excellence Foundation of Gallatin County	50 Fawcett Path Weavver, KY 41095	45-7396650	501(c)(13)	\$7,500				Emergency assistance for underprivileged youth
Fenny County Parks & Recreation	20 Cleveland Street Louis Grove, GA 30248	23-7201676	501(c)(13)	\$7,500				Event of Special Olympics
Hope House	P.O. Box 5821 Kingsport, TN 37663	96-2277775	501(c)(13)	\$7,500				Provide physical, emotional and basic health needs of babies and children
Hope & Palliative Care-Charlotte Region	2420 East Seventh Street Charlotte, NC 28204	96-1219017	501(c)(13)	\$7,500				Fund home-based quality of life care for critically ill children
Hospice of Fredrick County	2347 Simonton Road Statenville, NC 28625	96-1376577	501(c)(13)	\$7,500				Fund program for children coping with life-threatening illness and loss
Muscular Dystrophy Association	9850 W. Sahara Ave., Ste. 113 Las Vegas, NV 89117	13-1665552	501(c)(13)	\$7,500				Fund critical screening and to charter appropriate, safe, ADA-compliant, wheelchair accessible transportation to our kid's campsite
North Bay Children's Center, Inc.	312 C Street Novato, CA 94949	94-3242456	501(c)(13)	\$7,500				Parents of Latin Health and Nutrition Program for preschool children
The Shade Tree, Inc.	P.O. Box 695 Las Vegas, NV 89125	88-0253375	501(c)(13)	\$7,500				Support homeless and abused children
Youth Villages	2815 Coliseum Center Drive, Suite 230 Charlotte, NC 28217	98-1768973	501(c)(13)	\$7,500				Emergency assistance to youth exiting juvenile justice/criminal Health/Foster Care
Spread the Word Nevada	1055 American Pacific Dr., Ste. 160 Henderson, NV 89074	22-2979941	501(c)(13)	\$7,250				Provide new books and book bags to children attending at-risk schools

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For the calendar year 2015, or the tax year period beginning 10-01 and ending 9-30-16

Speedway Children's Charities

56-1331428

(a) Name of Organization	Address	(b) EIN	(c) IRC Section	(d) Amount of Cash	(e) Amount of Non-Cash	(f) Method of valuation	(g) Description	(h) Purpose of Grant or Assistance
Arc of Washington Co.	110 East Mountcastle Dr Johnson City TN 37601	62-6684557	501(c)(3)	\$7,000			Provide respite services to children with disabilities	
Assistance and Resource Ministry (ARM)	215 W. C Street Elizabethton TN 37643	62-1533942	501(c)(3)	\$7,000			Shoes and shoe supplies for needy children	
Bristle Emergency Food Pantry	201 Overbrook Dr. Bristol TN 37620	62-6984364	501(c)(3)	\$7,000			Meeting emergency food needs of families with children	
Carter Co. Imagination Library	2207 Eagle Dr. Elizabethton TN 37643	43-2082197	501(c)(3)	\$7,000			Provide free books for children birth to 5 years	
Crisis Pregnancy Center of Gaston County, Inc.	800 Robinson Road Gastonia NC 28056	55-1489343	501(c)(3)	\$7,000			Provide car seats and pack and plays for indigent children of Gaston County	
Crossroads Medical Mission	P.O. Box 16852 Bristol VA 24209	54-2038877	501(c)(3)	\$7,000			Free healthcare and medications and school/sports physicals	
Hospice of Hamblen County	400 W. Main Street Suite B-11C Morristown TN 37816	59-1761448	501(c)(3)	\$7,000			Camp for children	
"Grown Squares Inc. Food Ministries	P.O. Box 329 Glaize Spring VA 24840	54-1897853	501(c)(3)	\$7,000			Prepares food for boxes for children	
Autism Society of North Carolina, Inc.	505 Keeleln Road, Suite 230 Raleigh NC 27605	23-7097987	501(c)(3)	\$6,810			Program for high school students with autism and their parents	
Miswonger Children's Hospital	302 Meed Tech Parkway Suite 330 Johnson City TN 37604	62-5476282	501(c)(3)	\$6,750			Specialized adjustable swings	
Revea Child Seekers Meeting Corporation	3238 E. Charleston Blvd., Ste. 128 Las Vegas NV 89104	94-3740768	501(c)(3)	\$6,650			Expand the youth empowerment program. Dedicated to giving underprivileged individuals with a focus on youth, the resources to improve their confidence and education, and the opportunity to achieve extraordinary goals	
Dale Jr. Foundation	PO Box 338 Morensville NC 28115	30-933637	501(c)(3)	\$6,625			Provide after school and summer enrichment funding for homeless children	
Cooperative Christian Ministry	P.O. Box 1717 Concord NC 28025	56-1320818	501(c)(3)	\$6,600			Ensures that families can travel when recommended by their child's oncologist	
Candlelighters for Childhood Cancer of Nevada	8959 Spanish Ridge Ave., Ste. 200 Las Vegas NV 89148	94-2539116	501(c)(3)	\$6,500			Breakfast, hot lunch and a nutritious snack each school day to 64 low income children	
The Learning Collaborative	5045 N. Davidson Street Charlotte NC 28205	56-1668333	501(c)(3)	\$6,500			Equine assisted therapy for teenage victims of human sex trafficking	
Wings of Eagles Ranch	4901 Faith Trail Concord NC 28025	55-2106572	501(c)(3)	\$6,445			Beds for children suffering from PTSD	
Bushhorn Children and Family Services	116 Bushhorn Lane Buchhorn WV 41721	61-0524092	501(c)(3)	\$6,400			Coping Skills Tool Box to be used during treatment and after discharge	
Alexander Youth Network	5620 Thermal Road Charlotte NC 28211	56-0544413	501(c)(3)	\$6,000			Program connecting college students seeking practical experience in autism charities	
Autism Foundation of the Carolinas - Autism Charlotte	P.O. Box 12671 Charlotte NC 28270	06-1801759	501(c)(3)	\$6,000			Backpack Food Program and Christmas project	
Bread of Life Children's Ministry	39427 Old Sailworks Rd. Meadowick VA 24451	54-0057171	501(c)(3)	\$6,000			Christmas for underprivileged children	
Buchanan County Coal Miners Christmas 7 Southern Youth in Action	3174 State Creek Road Glenady VA 21614	20-3699851	501(c)(3)	\$6,000			Camp Sunshine Family Sponsorship Program	
Camp Sunshine at Seago Lake, Inc.	35 Acatia Road Cason ME 04015	22-2582877	501(c)(3)	\$6,000				

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58-1331429

For the calendar year 2015, or the tax year period beginning 10-01 and ending 9-30-16

Speedway Children's Charities

(a) Name of Organization	Address	(b) EIN	(c) IRC Section	(d) Amount of Cash	(e) Amount of Non-Cash	(f) Method of valuation	(g) Description	(h) Purpose of Grant or Assistance
Communities In Schools - Cabarrus County	P.O. Box 634 Concord	56-1771394	501(c)(13)	\$5,000				Increase student services to students not reading at grade level
Communities In Schools of Virginia	223 Lee Street Bristol	46-1775708	501(c)(13)	\$5,000				Clothing and food for needy children
Courts Appointed Special Advocates of New Hampshire	138 Cullidge Ave., Unit 1, PO Box 1327 Manchester	92-0432442	501(c)(13)	\$5,000				Support for program for abused and neglected children
Lifeworks of Sonoma County	1200 College Avenue Santa Rosa	68-0375462	501(c)(13)	\$5,000				Educational assistance and food to those living in poverty
Right High Therapeutic Horse Program	1491 Springvale Rd Morristown	62-1752021	501(c)(13)	\$5,000				Sponsorship for a child to have lessons for 6 months
Walking to Hear	112 Knobing Hill Lane Fall Branch	47-1332019	501(c)(13)	\$5,000				Heating aid loaner bank for oil burner
Young Life Kingsport	P.O. Box 3274 Kingsport	84-0365934	501(c)(13)	\$5,000				Summer Camp Experience
Southern Nevada Children First	3755 West Lake Mead Blvd. North Las Vegas	65-1312502	501(c)(13)	\$5,000				Support youth & their children currently living on the streets
Make-A-Wish Foundation of Southern Nevada	5105 South Durango St., Ste. 100 Las Vegas	88-0371098	501(c)(13)	\$5,750				Underwrite the cost of a shopping spree for 2 local teens
Easter Seals Nevada	6200 W. Oakley Blvd. Las Vegas	94-2015686	501(c)(13)	\$5,565				Children aged 1 1/2 to 3 years with disabilities will attend playgroup with peers
Children's Fear Foundation	3005 S. Maryland Pkwy, Ste. 690 Las Vegas	88-0405596	501(c)(13)	\$5,500				Provide a cost-free camp for children who have heart conditions
Clark County Public Education Foundation, Inc.	4350 S. Maryland Pkwy. Las Vegas	88-0275767	501(c)(13)	\$5,500				Support the Operation Respect Welcoming Schools partnership
Nevada Childhood Cancer Foundation	6070 S. Eastern Ave., Ste. 200 Las Vegas	88-0302673	501(c)(13)	\$5,500				Improve the quality of life for children diagnosed with critical illnesses
Philips Ganesmy	3115 Providence Road Charlotte	20-3125525	501(c)(13)	\$5,500				Transition to Independence Summer Program for At-Risk children One day event to provide shoes, winter clothing, lunch, mentorship and sports balls to underprivileged children in the LV Valley during the holidays
Rotary Club of Las Vegas	PO Box 15152 Las Vegas	88-0403571	501(c)(13)	\$5,500				Mentor Resource Library Addition and Rebuilding of a Terrence Elementary Mentor Center and Mentor Resource Library
Mentor Me	426 9th Street Petaluma	20-8525698	501(c)(13)	\$5,414				After school program with snacks, mentoring and school supplies
Maurits'n Kids Inc.	P.O. Box 1298 North Tazewell	56-2509257	501(c)(13)	\$5,400				Provide essential tools for less fortunate children throughout the country
Kyle Bush Foundation	355 Viajeppa Road Kingsport	20-5396643	501(c)(13)	\$5,175				Weekend backpacks filled with food
Dare to Care Food Bank	15803 Fern Valley Road Louisville	23-7345952	501(c)(13)	\$5,150				

\$737,851

Grants \$5,000 or less

\$2,766,783

Total Grants

**SCHEDULE M  
(Form 990)**

**Noncash Contributions**

OMB No. 1545-0047

**2015**

Department of the Treasury  
Internal Revenue Service

- ▶ Complete if the organizations answered 'Yes' on Form 990, Part IV, lines 29 or 30.
- ▶ Attach to Form 990.
- ▶ Information about Schedule M (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

**Open To Public  
Inspection**

Name of the organization

Employer identification number

SPEEDWAY CHILDREN'S CHARITIES

56-1331429

**Part I Types of Property**

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art — Works of art . . . . .				
2 Art — Historical treasures . . . . .				
3 Art — Fractional interests . . . . .				
4 Books and publications . . . . .				
5 Clothing and household goods . . . . .				
6 Cars and other vehicles . . . . .				
7 Boats and planes . . . . .				
8 Intellectual property . . . . .				
9 Securities — Publicly traded . . . . .				
10 Securities — Closely held stock . . . . .				
11 Securities — Partnership, LLC, or trust interests . . . . .				
12 Securities — Miscellaneous . . . . .				
13 Qualified conservation contribution — Historic structures . . . . .				
14 Qualified conservation contribution — Other . . . . .				
15 Real estate — Residential . . . . .				
16 Real estate — Commercial . . . . .				
17 Real estate — Other . . . . .				
18 Collectibles . . . . .				
19 Food inventory . . . . .				
20 Drugs and medical supplies . . . . .				
21 Taxidermy . . . . .				
22 Historical artifacts . . . . .				
23 Scientific specimens . . . . .				
24 Archeological artifacts . . . . .				
25 Other ▶ (Auction items . . . . .)	X	946	294,113.	Cost.
26 Other ▶ (Food & Beverages . . . . .)	X	63	87,948.	Cost.
27 Other ▶ (Prizes . . . . .)	X	147	140,125.	Cost.
28 Other ▶ (Supplies . . . . .)	X	23	30,811.	Cost.

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement . . . . . **29** 0.

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 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? . . . . .		X
b If 'Yes,' describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? . . . . .	X	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? . . . . .		X
b If 'Yes,' describe in Part II.		
33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

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

Pt I col(b)                      Number represents the number of contributions, not the number of items contributed.

**SCHEDULE O**  
**(Form 990 or 990-EZ)**

**Supplemental Information to Form 990 or 990-EZ**

OMB No. 1545-0047

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

**2015**

▶ Attach to Form 990 or 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is  
at [www.irs.gov/form990](http://www.irs.gov/form990).

**Open to Public  
Inspection**

Department of the Treasury  
Internal Revenue Service

Name of the organization

Employer identification number

SPEEDWAY CHILDREN'S CHARITIES

56-1331429

Pt VI, Line 2 Board Members O. Bruton Smith and Marcus Smith have a father-son relationship

Pt VI, Line 8b Committee meetings are not documented in minutes. Committees submit recommendations to the Board for approval. Board meetings are documented.

Pt VI, Line 11b The 990 is reviewed by the National Board of Directors, Finance Committee and Audit Committee prior to filing.

Pt VI, Line 12c The Conflict of Interest Policy is distributed annually to Board Members, Key Employees and Officers to sign. If a conflict of interest is disclosed, it is reviewed by the Board and voted on to determine if a conflict of interest exists. The individual has the opportunity to explain the alleged failure. If the Board determines a conflict of interest exists, corrective action is taken.

Pt VII, Col (F) Governing documents, conflict of interest policy and audited financial statements are made available to the public upon request. Documents may be mailed or emailed to person requesting document. Documents are also available online at [speedwaycharities.org](http://speedwaycharities.org).



**SCHEDULE R**  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Name of the organization

SPEEDWAY CHILDREN'S CHARITIES

Employer identification number

56-1331429

**Related Organizations and Unrelated Partnerships**

- ▶ Complete if the organization answered 'Yes' on Form 990, Part IV, line 33, 34, 35b, 36, or 37.  
▶ Attach to Form 990.
- ▶ Information about Schedule R (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No. 1545-0047

**2015**

**Open to Public Inspection**

**Part I Identification of Disregarded Entities** Complete if the organization answered 'Yes' on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) -----					
-----					
-----					
(2) -----					
-----					
-----					
(3) -----					
-----					
-----					

**Part II Identification of Related Tax-Exempt Organizations** Complete if the organization answered 'Yes' on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(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 status (if section 501(c)(3))	(f) Direct controlling entity	(g) Sec 512(b)(13) controlled entity?	
						Yes	No
(1) -----							
-----							
-----							
(2) -----							
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-----							
(3) -----							
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-----							
(4) -----							
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**Part III Identification of Related Organizations Taxable as a Partnership** Complete if the organization answered 'Yes' on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) -----												
(2) -----												
(3) -----												

**Part IV Identification of Related Organizations Taxable as a Corporation or Trust** Complete if the organization answered 'Yes' on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(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 income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Sec 512(b)(13) controlled entity?	
								Yes	No
(1) Speedway Motorsports, Inc. 51-0363307 5555 Concord Parkway South Concord, NC 28027	Motorsports Promoter	DE	N/A	C	n/a	n/a	n/a		X
(2) -----									
(3) -----									

**Part V Transactions With Related Organizations Complete if the organization answered 'Yes' on Form 990, Part IV, line 34, 35b, or 36.**

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Yes	No
1	During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?		
a	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a	X
b	Gift, grant, or capital contribution to related organization(s)	1b	X
c	Gift, grant, or capital contribution from related organization(s)	1c	X
d	Loans or loan guarantees to or for related organization(s)	1d	X
e	Loans or loan guarantees by related organization(s)	1e	X
f	Dividends from related organization(s)	1f	X
g	Sale of assets to related organization(s)	1g	X
h	Purchase of assets from related organization(s)	1h	X
i	Exchange of assets with related organization(s)	1i	X
j	Lease of facilities, equipment, or other assets to related organization(s)	1j	X
k	Lease of facilities, equipment, or other assets from related organization(s)	1k	X
l	Performance of services or membership or fundraising solicitations for related organization(s)	1l	X
m	Performance of services or membership or fundraising solicitations by related organization(s)	1m	X
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	X
o	Sharing of paid employees with related organization(s)	1o	X
p	Reimbursement paid to related organization(s) for expenses	1p	X
q	Reimbursement paid by related organization(s) for expenses	1q	X
r	Other transfer of cash or property to related organization(s)	1r	X
s	Other transfer of cash or property from related organization(s)	1s	X

	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

**Part VI** **Unrelated Organizations Taxable as a Partnership** Complete if the organization answered 'Yes' on Form 990, Part IV, line 37.

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) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	
(1) -----													
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(2) -----													
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(3) -----													
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(4) -----													
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(5) -----													
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(7) -----													
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(8) -----													
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**Part VII** Supplemental Information

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

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Schedule O (Form 990), Supplemental Information to Form 990  
Form 990, Page 6, Line 17 (continued)

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Alaska \_\_\_\_\_  
Alabama \_\_\_\_\_  
Arkansas \_\_\_\_\_  
Arizona \_\_\_\_\_  
California \_\_\_\_\_  
Colorado \_\_\_\_\_  
Connecticut \_\_\_\_\_  
Florida \_\_\_\_\_  
Georgia \_\_\_\_\_  
Illinois \_\_\_\_\_  
Kansas \_\_\_\_\_  
Kentucky \_\_\_\_\_  
Massachusetts \_\_\_\_\_  
Maryland \_\_\_\_\_  
Maine \_\_\_\_\_  
Michigan \_\_\_\_\_  
Minnesota \_\_\_\_\_  
Mississippi \_\_\_\_\_  
North Carolina \_\_\_\_\_  
North Dakota \_\_\_\_\_  
New Hampshire \_\_\_\_\_  
New Jersey \_\_\_\_\_  
New Mexico \_\_\_\_\_  
Nevada \_\_\_\_\_  
New York \_\_\_\_\_  
Ohio \_\_\_\_\_  
Oklahoma \_\_\_\_\_  
Oregon \_\_\_\_\_  
Pennsylvania \_\_\_\_\_  
Rhode Island \_\_\_\_\_  
South Carolina \_\_\_\_\_  
Tennessee \_\_\_\_\_  
Utah \_\_\_\_\_  
Virginia \_\_\_\_\_  
Washington \_\_\_\_\_  
Wisconsin \_\_\_\_\_  
West Virginia \_\_\_\_\_  
District of Columbia \_\_\_\_\_

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Schedule G (Form 990 or 990EZ), Part IV Supplemental Information  
Part III, Line 9 (continued)

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Enter the state(s) in which the organization conducts gaming activities:

Georgia \_\_\_\_\_  
North Carolina \_\_\_\_\_  
Tennessee \_\_\_\_\_  
California \_\_\_\_\_  
Nevada \_\_\_\_\_  
New Hampshire \_\_\_\_\_

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Schedule G (Form 990 or 990EZ), Part IV Supplemental Information  
Part III, Line 17a (continued)

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<u>State Name</u>	<u>Amount</u>
Georgia	10,676.
North Carolina	16,601.
Tennessee	116,589.
California	8,748.
Nevada	8,665.
New Hampshire	6,135.