

Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047

2013
Open to Public Inspection

A For the 2013 calendar year, or tax year beginning _____, **and ending** _____

<p>B Check if applicable:</p> <p><input type="checkbox"/> Address change</p> <p><input type="checkbox"/> Name change</p> <p><input type="checkbox"/> Initial return</p> <p><input type="checkbox"/> Terminated</p> <p><input type="checkbox"/> Amended return</p> <p><input type="checkbox"/> Application pending</p>	<p>C Name of organization COVER 3 FOOTBALL, INC. DBA COVER 3 FOUNDATION, INC.</p> <p>Doing Business As</p> <p>Number and street (or P.O. box if mail is not delivered to street address) Room/suite</p> <p>125 S. COLLEGE DRIVE</p> <p>City or town, state or province, country, and ZIP or foreign postal code</p> <p>FRANKLIN VA 23851</p>	<p>D Employer identification number</p> <p>27-1957755</p> <p>E Telephone number</p> <p>G Gross receipts \$ 843,224</p>
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H(a) Is this a group return for subordinates? Yes No
 H(b) Are all subordinates included? Yes No
 If "No," attach a list. (see instructions)

I Tax-exempt status: 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 527

J Website: ▶ **WWW.COVER3FOUNDATION.ORG**

K Form of organization: Corporation Trust Association Other ▶

H(c) Group exemption number ▶ _____

L Year of formation: **2009** **M** State of legal domicile: **VA**

Part I Summary

Activities & Governance	<p>1 Briefly describe the organization's mission or most significant activities: COVER 3 INSPIRES AND MOTIVATES YOUNG MEN THROUGH FOOTBALL CAMPS, PERSONAL TRAINING AND MENTORING SESSIONS TO TEACH THEM FOOTBALL SKILLS AND TO ENCOURAGE GOOD DECISION MAKING AND HEALTHY CHOICES.</p> <p>2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.</p> <p>3 Number of voting members of the governing body (Part VI, line 1a) 3 5</p> <p>4 Number of independent voting members of the governing body (Part VI, line 1b) 4 5</p> <p>5 Total number of individuals employed in calendar year 2013 (Part V, line 2a) 5 3</p> <p>6 Total number of volunteers (estimate if necessary) 6 100</p> <p>7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 0</p> <p>b Net unrelated business taxable income from Form 990-T, line 34 7b 0</p>															
Revenue	<p>8 Contributions and grants (Part VIII, line 1h)</p> <p>9 Program service revenue (Part VIII, line 2g)</p> <p>10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)</p> <p>11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)</p> <p>12 Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)</p>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 50%;">Prior Year</th> <th style="width: 50%;">Current Year</th> </tr> <tr> <td style="text-align: right;">629,053</td> <td style="text-align: right;">832,853</td> </tr> <tr> <td style="text-align: right;">23,031</td> <td style="text-align: right;">6,245</td> </tr> <tr> <td style="text-align: right;">36</td> <td style="text-align: right;">131</td> </tr> <tr> <td style="text-align: right;">300</td> <td style="text-align: right;">3,995</td> </tr> <tr> <td style="text-align: right;">652,420</td> <td style="text-align: right;">843,224</td> </tr> </table>	Prior Year	Current Year	629,053	832,853	23,031	6,245	36	131	300	3,995	652,420	843,224		
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23,031	6,245															
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Expenses	<p>13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)</p> <p>14 Benefits paid to or for members (Part IX, column (A), line 4)</p> <p>15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)</p> <p>16a Professional fundraising fees (Part IX, column (A), line 11e)</p> <p>b Total fundraising expenses (Part IX, column (D), line 25) ▶ 1,897</p> <p>17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)</p> <p>18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)</p> <p>19 Revenue less expenses. Subtract line 18 from line 12</p>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 50%;">Prior Year</th> <th style="width: 50%;">Current Year</th> </tr> <tr> <td style="text-align: right;">163,405</td> <td style="text-align: right;">143,756</td> </tr> <tr> <td style="text-align: right;">0</td> <td style="text-align: right;">0</td> </tr> <tr> <td style="text-align: right;">0</td> <td style="text-align: right;">0</td> </tr> <tr> <td style="text-align: right;">427,775</td> <td style="text-align: right;">730,018</td> </tr> <tr> <td style="text-align: right;">591,180</td> <td style="text-align: right;">873,774</td> </tr> <tr> <td style="text-align: right;">61,240</td> <td style="text-align: right;">-30,550</td> </tr> </table>	Prior Year	Current Year	163,405	143,756	0	0	0	0	427,775	730,018	591,180	873,774	61,240	-30,550
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Net Assets or Fund Balances	<p>20 Total assets (Part X, line 16)</p> <p>21 Total liabilities (Part X, line 26)</p> <p>22 Net assets or fund balances. Subtract line 21 from line 20</p>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 50%;">Beginning of Current Year</th> <th style="width: 50%;">End of Year</th> </tr> <tr> <td style="text-align: right;">102,304</td> <td style="text-align: right;">92,297</td> </tr> <tr> <td style="text-align: right;">16,779</td> <td style="text-align: right;">88,121</td> </tr> <tr> <td style="text-align: right;">85,525</td> <td style="text-align: right;">4,176</td> </tr> </table>	Beginning of Current Year	End of Year	102,304	92,297	16,779	88,121	85,525	4,176						
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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.

Sign Here	<p>Signature of officer</p> <p>GREG SCOTT</p> <p>Type or print name and title</p>	<p>Date</p> <p>PRESIDENT</p>
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Paid Preparer Use Only	<p>Print/Type preparer's name</p> <p>WENDY C. GOLDBERG, CPA</p>	<p>Preparer's signature</p> <p>WENDY C. GOLDBERG, CPA</p>	<p>Date</p> <p>11/17/14</p>	<p>Check <input type="checkbox"/> if self-employed <input type="checkbox"/> if PTIN</p> <p>P00461835</p>
	<p>Firm's name ▶ W.C. Goldberg & Company, PC</p> <p>484 Viking Dr Ste 160</p> <p>Firm's address ▶ Virginia Beach, VA 23452-7393</p>	<p>Firm's EIN ▶ 20-3094898</p> <p>Phone no. 757-420-3986</p>		

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