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Department of the Treasury Internal Revenue Service

SCANNED DEC 1 0 2012

Form 990

Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047

2011

প্ৰিন্তা (e স্থাসীত নিজ্ঞান্তৰীয়ে

Α	For the 2	011 calen	ar year, or tax year beginr	ning	, 2011	, and endin	ıg			
В	Check if app	licable	С				D	Employ	er Identi	fication Number
	X Address	s change	ARIZONA FREE ENTE	ERPRISE CLUB				20-	24233	383
	Name o		2415 E. CAMELBACH				E	Telepho	ne numb	er
	Initial re	-	PHOENIX, AZ 85016	5				602	-618-	-1500
	Termina									
	\vdash	ed return					ء ا	Groce v	eceipts \$	218,559.
	\vdash	tion pending	F Name and address of principal	officer			H(a) Is this a gre			
	Аррііса	won penuing	SAME AS C ABOVE	omee:			H(b) Are all affil			Yes No
	Tax-exem	nt ctatue	501(c)(3) X 501(c) (4) ◀ (insert no.)	4947(a)(1) o	r 527	If 'No,' atta	ch a list	(see inst	ructions)
<u> </u>	Website		AZFEC.ORG) (misert no.)	[]434/(a)(1) U	327				
<u>, , , , , , , , , , , , , , , , , , , </u>			X Corporation Trust	A	1	Year of Forma	H(c) Group exer			<u>77</u>
K		rganization Summar		Association Other		Year of Forma	tion 2005	INIS	tate of le	gal domicile AZ
ي. َن				on or most significant	activities T	UE MICC	TON OF T	TIP O	DC A NI	TZATTON TC TO
			e the organization's mission							1791100 12 10
Activities & Governance	Wir	AWING E	OLICIES THAT PRO	MOTE W STRONG	"WIND ATDE	ZVINT TVKT	, <u>40NA _ </u>	TMOM		
na.							· 			
δ	2 Che	ck this ho	if the organization	discontinued its one	rations or disc	nosed of mo	re than 25%	of its	net ass	ents
ŏ			ing members of the govern						3	3
න් ආ			ependent voting members						4	2
₽	5 Tot	al number	of individuals employed in	calendar year 2011 (Part V, line 2a	a)			5	1
촱	6 Tot	al number	of volunteers (estimate if r	necessary) .					6	0
ď			d business revenue from P	• •					7a	0.
	b Net	unrelated	business taxable income f	rom Form 990-T, line	34		<u></u>		7b	<u> </u>
								r Year		Current Year
•			and grants (Part VIII, line				· 2	50,1	04.	218,559.
Revenue		-	ce revenue (Part VIII, line	7.		• •	·			
ě.			ome (Part VIII, column (A				•			
Œ			(Part VIII, column (A), line			10	<u> </u>	FO 1	, 	010 550
_			- add lines 8 through 11 (ine 12).	·	50,1	04.	218,559.
			nilar amounts paid (Part I)				•			
			o or for members (Part IX							166,804.
စ္	l		compensation, employee		lumn (A), lines	s 5-10)	-			
Expenses	16a Pro	fessional	undraising fees (Part IX, co	olumn (A), line 11e)		•		3,7	50.	
Хре	b Tot	al fundrais	ng expenses (Part IX, colu	ımn (D) <u>, line 25) ▶</u>				· ·		·
ú	17 Oth	er expens	s (Part IX, column (A), lin	es 11a-11d, 11 4246)	EIVED		.	65,8	26.	34,123.
			s. Add lines 13-17 (must e			ပ္တ	2	07,5	45.	200,927.
			expenses. Subtract line 18			اقا		42,5		17,632.
88				o NOV	1 9 2012	2	Beginning of			End of Year
ş ğ	20 Tot	al assets	Part X, line 16)			≝		53,2		72,904.
4 B	21 Tot	al liabilitie	(Part X, line 26)	. I QGDI	EN, UT			6	69.	2,695.
\$2	22 Net	assets or	fund balances. Subtract Iir	e 21 from line 20		 .		52,5	77.	70,209.
Pe	ot O	Signatur	Block	-						
Und	er penalties	of perjury, I d	clare that I have examined this retu er (other than officer) is based on a	rg, including accompanying	schedules and stat	ements, and to	the best of my ki	nowledge	and beli	ef, it is true, correct, and
com	plete Declar	ation of prep	er (other than officer) is based on a	all information of which prepared	arer has any knowl	ledge ———————				
		X	tax Valle				11.	- 15-	12	
Siç	jn 💮	Signatu	of officer				Date			
He	re	<u> </u>	E VOELLER	<u>. </u>			PRESIDE	ENT_		
		Type or	rint name and title				·			
		Print/Type p	eparer's name	Premier and the	MAR	Date		eck] _{ff} F	PTIN
Pa	id	PAUL 1	. RAMBEAU		110-11	1///	1///	omploye	edI	200156861
Pre	eparer	Firm's name	► PAUL N. RAMBÉ	AU, CPA P.C.		/ '	, , ,			
Us	e Only	Firm's addre	s > 300 WEST CLAR	ENDON, SUITE	340		Fire	n's EIN	▶ 86-	0548915
			PHOENIX, AZ 8	5013				ne no	(602	
May	the IRS	discuss th	return with the preparer	shown above? (see in	nstructions)					X Yes No
_			duction Act Notice, see th			TEE	EA0113L 08/18/1	11		Form 990 (2011)

Form	990 (2011)	ARIZONA FREE ENTERPRISE CLUB	20-2423383	Page 2
िंदा	(III Stat	ement of Program Service Accomplishments		
	Chec	k if Schedule O contains a response to any question in this Part III	<u></u>	X
1	THE MIS	ribe the organization's mission SION OF THE ORGANIZATION IS TO ADVANCE POLICIES THAT PROMOT ARIZONA ECONOMY	TE A STRONG AND	
2	Form 990 or	anization undertake any significant program services during the year which were not listed on 990-EZ?	the prior	No
3		inization cease conducting, or make significant changes in how it conducts, any program servi cribe these changes on Schedule O.	ices? Yes X	No
4	Describe the Section 501	e organization's program service accomplishments for each of its three largest program service (c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of the content of the	es, as measured by expe ount of grants and alloca	enses tions to
42	(Code:SEE_SCHE) (Expenses \$ 105,630. including grants of \$) (Rec	venue \$	
			-	
4 t	(Code:EDUCATII) (Expenses \$ 67,219. including grants of \$) (Rev. NG_POLICYMAKERS_AND_MEMBERS_OF_THE_BUSINESS_COMMUNITY:	venue \$)
	THE WEB	PRESS RELEASES, ROUNDTABLE DISCUSSIONS, POSITION PAPERS, A SITE, THE CLUB EDUCATED ARIZONANS ABOUT TAX POLICY, INCLUI OF TARGETED TAX INCENTIVES. THE CLUB HOSTED A ROUNDTABLE EDITOR OF THE WALL STREET JOURNAL.	DING THE NEGATIV	E
			- 	
				- -
40	Code LAWSUIT) (Expenses \$ 19,206. including grants of \$) (Real AGAINST "MATCHING FUNDS" PROVISION IN CLEAN ELECTIONS ACT:	venue \$)
	CAMPAIGI STATES : FREE EN	B HAS SUCCESSFULLY CHALLENGED AN UNCONSTITUTIONAL PROVISION FINANCE LAW. AS A PETITIONER, THE CLUB'S CASE WAS HEARD SUPREME COURT IN MARCH 2011. IN JUNE 2011, THE COURT RULEI TERPRISE CLUB'S FAVOR. THE CASE CAN BE FOUND HERE: WWW.SUPREMECOURT.GOV/OPINIONS/10PDF/10-238.PDF	IN THE UNITED	
40	Other progra	am services. (Describe in Schedule O.)		
71	(Expenses	\$ including grants of \$) (Revenue \$)	
46		am service expenses ► 192,055.		

i

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1		Х
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3_		_X_
4	Section 501(c)(3) organizations 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	4		
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.	5_	Х	
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	6		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	7_		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III.	8		<u>X</u>
9	Did the organization report an amount in Part X, line 21; 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	9		Х
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	10		X
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, 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	11 a	Х	
ı	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	11 b		х
•	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	11 c		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.	11 d		X
	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X .	11 e	Х	<u> </u>
	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	11 f		х
	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	12a		<u>x</u>
	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, XII, and XIII is optional	12b		X
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		X
	a Did the organization maintain an office, employees, or agents outside of the United States?	14a	 	_^
	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	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Parts II and IV	15		X_
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Parts III and IV	16		Х
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)	17	_	Х
	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	18		X
	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	19		X
	a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H .	20		X
- 1	b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 b	<u> </u>	

Par IV Checklist of Required Schedules (continued) Yes No 21 Х 22 Х 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? If 'Yes,' complete 23 Х 24a **b** Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease 24c d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?. 24d 25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a 25a Х 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? If 'Yes,' complete Schedule L, Part I 25b X Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II . . . Х 26 27 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? If 'Yes,' complete Schedule L. Part IV 28a **b** A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete 28b 28c Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M...... 30 Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I X 31 32 32 Х Х 33 Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, 34 35 a Did the organization have a controlled entity within the meaning of section 512(b)(13)?. 35a Х b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2 35b Х Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2 36 . . 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? If 'Yes,' complete Schedule R, Part VI 37 Х

Note. All Form 990 filers are required to complete Schedule O

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Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?

Form 990 (2011) ARIZONA FREE ENTERPRISE CLUB Particle Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response to any question in this Part V		<u></u> .	·- L
		Yes	No
1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	2	2	
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	0		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c		X
2a 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 2a	1		
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	. 2b	X	
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)	T [] []	4.1	Mar :
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х
b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O	3b		
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	. 4a	L 1	X
b If 'Yes,' enter the name of the foreign country: ►		A (V)'	
See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	, ,,	£ '%'	3 1
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	. <u>5a</u>		X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	. <u>5b</u>		X
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5 c		
6a 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?	6a	Х	
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	. 6ь	x	
7 Organizations that may receive deductible contributions under section 170(c).	1. 1	1	1.5
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?	7a		1 -
b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7b	-	\vdash
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		
d If 'Yes,' indicate the number of Forms 8282 filed during the year			
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899	<u> </u>	<u> </u>	
as required?	. 7g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	. 7h		
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	3 [©]		_
9 Sponsoring organizations maintaining donor advised funds.	7		
a Did the organization make any taxable distributions under section 4966?	. 9a		
b Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10 Section 501(c)(7) organizations. Enter			
a Initiation fees and capital contributions included on Part VIII, line 12			
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b	┥ '		
11 Section 501(c)(12) organizations. Enter	7		
a Gross income from members or shareholders			
b Gross income from other sources (Do not net amounts due or paid to other sources	┪		
against amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?			
	. 12a		-
	- '		ĺ
13 Section 501(c)(29) qualified nonprofit health insurance issuers.	13-	-	-
a is the organization licensed to issue qualified health plans in more than one state?	. 13a		
Note. See the instructions for additional information the organization must report on Schedule O.			1
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	_		
c Enter the amount of reserves on hand	 	<u> </u>	
14a Did the organization receive any payments for indoor tanning services during the tax year?	14a	<u> </u>	X
b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O	14b	نــــا	Ц

Form 990 (2011)

BAA

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 to any question in this Part VI Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year 1a 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** Enter the number of voting members included in line 1a, above, who are independent ... Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other 2 X officer, director, trustee or key employee?.... Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 of officers, directors or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents 5 Did the organization become aware during the year of a significant diversion of the organization's assets? X Did the organization have members or stockholders? 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more Х 7 a members of the governing body?.. **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, 7b stockholders, or other persons other than the governing body?.... Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following Х 8a a The governing body?. 8b b Each committee with authority to act on behalf of the governing body? Is there any officer, director or 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. 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code. No 10a 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? 10b 11 a Х 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? b Describe in Schedule O the process, if any, used by the organization to review this Form 990. SEE SCHEDULE O Х 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13 . 12a b Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise 12b to conflicts? c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in SEE SCHEDULE O 12c Schedule O how this is done 13 13 Did the organization have a written whistleblower policy? 14 Did the organization have a written document retention and destruction policy? 14 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official 15 a Х 15b **b** Other officers of key employees of the organization If 'Yes' to line 15a or 15b, describe the process in Schedule O. (See instructions.) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a 16a taxable entity during the year?... 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 taken steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ► AZ Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply. X Upon request Another's website Own website Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to SEE SCHEDULE O the public during the tax year. State the name, physical address, and telephone number of the person who possesses the books and records of the organization ► PAUL N. RAMBEAU, P.C. 300 W. CLARENDON AVE, STE 340 PHOENIX AZ 85013 602-265-9688

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Form 990 (2011)	ARTZONA	FREE	ENTERPRISE	CLUB
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20-2423383

Page 7

িনার খাঁনি Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response to any question in this Part VII ...

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

- 1a 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	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					box, cer	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from	(F) Estimated amount of other compensation
	(describe hours for related organiza- tions in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(ii Ziissainioo)	related organizations (W-2/1099-MISC)	from the organization and related organizations
(1) DEAN_RIESEN	_								_	_
DIRECTOR	5	X	_					0.	0.	<u>0.</u>
(2) RANDY KENDRICK DIRECTOR	5	х						0.	0.	0.
_(3)_STEVE_VOELLERPRESIDENT	40			Х				146,250.	0.	0.
_(4)		-								
_(5)									_	
_(8)										
<u>(9)</u>										
(10)										
<u>(11)</u>										
(12)										
(13)										
(14)										-
					_					

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1.81	Section A. Officers, Directors, Trust	ees, ł	(ey	Em			es,	and	d Highest Com	pensated Emp	oloyees (cont)
					•	C) ition					_
	(A) Name and title	(B) Average hours	box offic	not cl unles cer an	ss pe	rson	ıs bot	h an	(D) Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of other
		per week (describ e hours for related organi- zations in Sch O)	individual trustee or director	Insututional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(15)											
(16)											
<u>(77)</u>					-					-	
(18)											
(19)_											
(20)											
<u>(21)</u>											
(22)					-						
(23)_		-									
(24)											
(25)_											
								•	146,250.	0	
	Total from continuation sheets to Part VII, Section . Total (add lines 1b and 1c)							▶	0. 146,250.	0.	0.
2	Total number of individuals (including but not limited										
3	Did the organization 1 1 1 1 1 1 1 1 1	or trus	tee, al	key					ghest compensate	ed employee	Yes No
	For any individual listed on line 1a, is the sum of re the organization and related organizations greater the such individual.	portabl nan \$1	50,0	00?	If 'Y	'es'	com	oth plet	er compensation for	from 	4 X
	Did any person listed on line 1a receive or accrue co for services rendered to the organization? If 'Yes,' c	ompen comple	satio	n fro	om : lule	any <i>J fo</i>	unre r <i>su</i> c	late	d organization or erson	ındıvıdual	5 X
	ion B. Independent Contractors Complete this table for your five highest compensate	od unde	2000	dont		atrac	torc	tha	t recoved more th	222 \$100 000 of	
	compensation from the organization. Report compensation	nsation	for	the	cale	nda	r yea	ar ei	nding with or withi	n the organization	
	Name and business address	s 							Description o	f services	(C) Compensation
							_				
						-					
	Total number of independent contractors (including \$100,000 in compensation from the organization >		t lım	ited	to tl	nose	list	ed a	above) who receive	ed more than	

Pa	t VIII Statement of Revenue				
		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
, GIFTS, GRANTS IILAR AMOUNTS	1 a Federated campaigns 1 a b Membership dues 1b 218,500 c Fundraising events 1c d Related organizations 1d e Government grants (contributions) 1e				
CONTRIBUTIONS AND OTHER SIN	f All other contributions, gifts, grants, and similar amounts not included above 1f 59. g Noncash contributions included in lns 1a-1f: \$ h Total. Add lines 1a-1f	218,559.			
		210, 339.			
Ž	Business Code				 i
PROGRAM SERVICE REVENUE CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	2a				
RA.					
õ	f All other program service revenue				
<u> </u>	g Total. Add lines 2a-2f				
	(i) Real (ii) Personal 6 a Gross rents b Less rental expenses c Rental income or (loss)				
	d Net rental income or (loss)				
	7 a Gross amount from sales of assets other than inventory. (i) Securities (ii) Other				!
	b Less. cost or other basis and sales expenses . c Gain or (loss)				
	d Net gain or (loss) ▶				
OTHER REVENUE	8a Gross income from fundraising events (not including. \$ of contributions reported on line 1c).				
8	See Part IV, line 18 a		İ		
Ŧ	b Less: direct expenses b				
0	c Net income or (loss) from fundraising events				
	9a Gross income from gaming activities. See Part IV, line 19				
	b Less direct expenses b				\
	c Net income or (loss) from gaming activities				
	10 a Gross sales of inventory, less returns and allowances				
					·-
	c Net income or (loss) from sales of inventory.				
	Miscellaneous Revenue Business Code		 		}
	11a				
	b				
	c		<u> </u>		
	d All other revenue				
	e Total. Add lines 11a-11d				
	12 Total revenue. See instructions	218,559.	0.	0.	0.

rani 🔉 Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D)

	Check if Schedule O contains a re	sponse to any question	ı ın this Part IX .		<u> </u>
Do i 6b,	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21				
2	Grants and other assistance to individuals in the United States. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16.				
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees.	146,250.	146,250.	0.	0.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages.				
8	Pension plan accruals and contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits	11,099.	11,099.		
10	Payroll taxes	9,455.	9,455.		
	Fees for services (non-employees):	37 155.			
	· · · · · · · · · · · · · · · · · · ·				
	Management	300.		200	
	Legal			300.	
	: Accounting	5,125.		5,125.	
	Lobbying	25.		25.	
€	Professional fundraising services. See Part IV, line 17		· · · · · · · · · · · · · · · · · · ·		
f	Investment management fees				
Ć) Other	10.		10.	
12	Advertising and promotion	1,380.	1,380.		· · · · · · · · · · · · · · · · · · ·
13	Office expenses	826.	826.		
14	Information technology	68.	68.		
15	Royalties				
16	Occupancy	2,777.		2,777.	
17	Travel	584.	584.		
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
	Conferences, conventions, and meetings .				
20	Interest .				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	357.	357.		
23 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.).	:			·
	CONSULTING FEES	12,250.	12,250.		
	DUES & SUBSCRIPTIONS	6,147.	6,147.		·
	SUPPLIES	1,282.	1,282.		
	MEALS	1,181.	1,181.		
	All other expenses	1,811.	1,176.	635.	
	Total functional expenses. Add lines 1 through 24e	200, 927.	192,055.	8,872.	0.
	·	200,321.	132,033.	0,012.	<u>U.</u>
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				
	SOP 98-2 (ASC 958-720)				

BAA

Form **990** (2011)

1 8	11:1%	Balance Sheet			
			(A) Beginning of year		(B) End of year
	1	Cash — non-interest-bearing	53,246.	1	71,475.
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6	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)		6	
Ą	7	Notes and loans receivable, net		7	
ASSETS	8	Inventories for sale or use		8	
Ť	9	Prepaid expenses and deferred charges		9	
	10 a	Land, buildings, and equipment cost or other basis. Complete Part VI of Schedule D 10a 1,786.			
		Less accumulated depreciation		10 c	1,429.
	11	Investments – publicly traded securities.		11	1,367.
	12	Investments – other securities. See Part IV, line 11		12	
	13	Investments – program-related, See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	·-· - ·-	15	
	16	Total assets. Add lines 1 through 15 (must equal line 34).	53,246.	16	72,904.
	17	Accounts payable and accrued expenses.		17	
	18	Grants payable		18	
	19	Deferred revenue		19	
Ļ	20	Tax-exempt bond liabilities		20	
Ä	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
A B L L	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
Ţ	23	Secured mortgages and notes payable to unrelated third parties .		23	
E	24	Unsecured notes and loans payable to unrelated third parties		24	
	25			24	
		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.	669.	25	2,695.
	26	Total liabilities. Add lines 17 through 25	669.	26	2,695.
Ĕ		Organizations that follow SFAS 117, check here ► and complete lines		i	
- 1		27 through 29 and lines 33 and 34.		0	
ASSET-S	27	Unrestricted net assets		27	
Ę	28	Temporarily restricted net assets		28	
O R	29	Permanently restricted net assets		29	·····
		Organizations that do not follow SFAS 117, check here ► X and complete			
POZD	20	lines 30 through 34.		30	
	30	Capital stock or trust principal, or current funds		31	
Ķ	31	Paid-in or capital surplus, or land, building, or equipment fund	52,577.	32	70 200
B41420E の	32	Retained earnings, endowment, accumulated income, or other funds	52,577.	33	70,209.
Ę	33	Total net assets or fund balances		34	70,209.
	34	Total liabilities and net assets/fund balances.	53,246.	34	72,904.

	<u> 20-2423383</u>	F	Page 12		
Reconciliation of Net Assets					
Check if Schedule O contains a response to any question in this Part XI	<u> </u>				
	1 1				
1 Total revenue (must equal Part VIII, column (A), line 12)	1		559. 927.		
2 Total expenses (must equal Part IX, column (A), line 25)					
3 Revenue less expenses. Subtract line 2 from line 1			632. 577.		
4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))					
5 Other changes in net assets or fund balances (explain in Schedule O)	5		<u>0.</u>		
6 Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	70,	209.		
িলেই স্থা Financial Statements and Reporting					
Check if Schedule O contains a response to any question in this Part XII					
		Yes	No No		
1 Accounting method used to prepare the Form 990. X Cash Accrual Other					
If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.			_ 1.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant?.		2a	X		
b Were the organization's financial statements audited by an independent accountant?		2b	X		
c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigh review, or compilation of its financial statements and selection of an independent accountant?	t of the audit,	2c			
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.					
d If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year were separate basis, consolidated basis, or both	issued on a				
Separate basis Consolidated basis Both consolidated and separate basis		•1	-		
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in Audit Act and OMB Circular A-133?	the Single	3a	X		
b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the or audits, explain why in Schedule O and describe any steps taken to undergo such audits	required audit	3b			
BAA		Form 990	(2011)		

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

Complete if the organization is described below.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No 1545-0047

2011

Operation Potalic ोल्डागम्बर्धाताः

-						
f 1	the organization ans	wered 'Yes.' to F	orm 990. Part IV. lin	ne 3. or Form 990-F7	Part V. line 46 (Politica	Campaign Activities), then
	o organization and		o 556, . a ,	,	y rain ty mio no (i omaca	oumpaign Activities), then
	A C			100 1 11	D 110	

Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.

Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below. Do not complete Part I-B.

Section 527 organizations. Complete Part I-A only.

If the organization answered 'Yes,' to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)). Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete

		rganizations Complete Part III.			
	of organization			Employer identification	
	<u>IZONA FREE ENTERPRI</u>			20-242338	
		rganization is exempt under secti			zation.
		organization's direct and indirect political of			
	· ·			•	
3	Volunteer hours			<u></u>	
		rganization is exempt under secti			
		ise tax incurred by the organization under			
		ise tax incurred by organization managers			
	-	a section 4955 tax, did it file Form 4720 for	•		Yes No
					Yes No
	b If 'Yes,' describe in Part IV.				
િંદા		rganization is exempt under secti			
1	Enter the amount directly ex	pended by the filing organization for section	n 527 exempt function	on activities 🏲 \$	
2	Enter the amount of the filin function activities.	g organization's funds contributed to other	organizations for sec	etion 527 exempt	
3	line 17b	ditures. Add lines 1 and 2 Enter here and			
4	Did the filing organization file	e Form 1120-POL for this year? .			Yes X No
5	Enter the names, addresses	and employer identification number (EIN) s. For each organization listed, enter the a ons received that were promptly and direcal action committee (PAC). If additional spa	of all section 527 pol	itical organizations to w	thich the filing
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter-0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule C (Form 990 or 990-EZ) 2011

Schedule C (Form 990 or 990-EZ) 201	11 ARIZONA FRE	E ENTERPRISE CLU	В	20-2423	3383 Page 2
Part II-A Complete if section 501(is exempt under se	ction 501(c)(3) and	d filed Form 5768 (el	ection under
A Check ► ☐ If the film address,	ng organization belo EIN, expenses, and	ngs to an affiliated group I share of excess lobbying cked box A and 'limited co	expenditures).		r's name,
	Limits on Lobby	ina Expenditures		(a) Filing organization's totals	(b) Affiliated
	`	ns amounts paid or incur	<u></u>	organization's totals	group totals
1 a Total lobbying expendit	•	blic opinion (grass roots k egislative body (direct lobl	, ,,		
c Total lobbying expendit					
d Other exempt purpose	expenditures	· · · · · · · · · · · · · · · · · · ·			
e Total exempt purpose e	expenditures (add lin	es 1c and 1d)			
f Lobbying nontaxable ar both columns.	mount. Enter the am	ount from the following ta	ble ın		
If the amount on line 1e, col	umn (a) or (b) is:	he lobbying nontaxable a	mount is		
Not over \$500,000		20% of the amount on line 1e.			
Over \$500,000 but not over \$1	·	\$100,000 plus 15% of the excess			
Over \$1,000,000 but not over \$ Over \$1,500,000 but not over \$		\$175,000 plus 10% of the excess \$225,000 plus 5% of the excess	· · · · · · · · · · · · · · · · · · ·	:	
Over \$17,000,000	· · · · · · · · · · · · · · · · · · ·	\$1,000,000.	Ψ1,000,000.		
g Grassroots nontaxable	amount (enter 25%	of line 1f)			
h Subtract line 1g from lin					
i Subtract line 1f from lin	ne 1c. If zero or less	, enter -0			
j If there is an amount ot section 4911 tax for this	ther than zero on eits year?	her line 1h or line 1i, did t	he organization file Fo	rm 4720 reporting	Yes No
(Som	e organizations that column	4-Year Averaging Period l t made a section 501(h) el s below. See the instructi	Jnder Section 501(h) ection do not have to ons for lines 2a throug	complete all of the five jh 2f.)	
	Lobb	ying Expenditures During	4-Year Averaging Per	iod	
Calendar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) Total
2a Lobbying non-taxable amount					
b Lobbying ceiling amount (150% of line 2a, column (e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					990 or 990 EZ) 2011

Schedule C (Form 990 or 990-EZ) 2011 ARIZONA FREE ENTERPRISE CLUB

Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

	and North manners to the control of the country of		(a) ((b)	
	'Yes' response to lines 1a through 1i below, provide in Part IV a detailed description bying activity.	Yes	No	An	ount	
1 Dui	ing the year, did the filing organization attempt to influence foreign, national, state or local slation, including any attempt to influence public opinion on a legislative matter or referendum,	i	,			
leg thre	slation, including any attempt to influence public opinion on a legislative matter or referendum, bugh the use of					
a Vol	unteers?					
	d staff or management (include compensation in expenses reported on lines 1c through 1i)?					
c Me	dia advertisements?					
d Ma	lings to members, legislators, or the public?.					
e Pul	olications, or published or broadcast statements?					
f Gra	nts to other organizations for lobbying purposes?					
g Dire	ect contact with legislators, their staffs, government officials, or a legislative body?					
h Ral	lies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i Oth	er activities?					
j Tot	al. Add lines 1c through 1i					
2a Did	the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b If '	'es,' enter the amount of any tax incurred under section 4912.					
c If "	'es,' enter the amount of any tax incurred by organization managers under section 4912					
d If the	ne filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
િલાર્ગ 📗	Complete if the organization is exempt under section 501(c)(4), section 501(section 501(c)(6).	c)(5)	, or			
_					Yes	No
1 We	re substantially all (90% or more) dues received nondeductible by members?			. 1	X	
2 Did	the organization make only in-house lobbying expenditures of \$2,000 or less?			2		<u>X</u>
	the organization agree to carry over lobbying and political expenditures from the prior year?			3		X
Fat III	Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No' O answered 'Yes.'	c)(5) २ (b)	or so Part	ection III-A, lin	e 3, is	5
1 Du	es, assessments and similar amounts from members		1			
2 Sec exp	ction 162(e) nondeductible lobbying and political expenditures (do not include amounts of political enses for which the section 527(f) tax was paid).					
a Cui	rent year		2a			
b Car	ryover from last year		2b			
c Tot	al		2 c			
3 Ag	pregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3			
			j			
doe	otices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exces is the organization agree to carryover to the reasonable estimate of nondeductible lobbying and politive next year?	cal	4			0.
	able amount of lobbying and political expenditures (see instructions)		5			0.
	Supplemental Information	• • • •	<u> </u>			
Complete	this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4, Part I-C, line 5; Part I-B and I and I and I are the spart for any additional information.	rt II-A	, and F	Part II-B,	line 1.	

Schedule C (Form 990 or 990-EZ) 2011 ARIZONA FREE ENTERPRISE CLUB	20-2423383	Page 4
Schedule C (Form 990 of 990-EZ) 2011 ARTZONA FREE ENTERPRISE CLUB Supplemental Information (continued)		
		
		.
	- 	
		·
		·
	-	
		
		- -
		- -
	·	
		
		-
	·	
		
		- -

SCHEDULE D (Form 990)

Supplemental Financial Statements

Complete if the organization answered 'Yes,' to Form 990,
Part IV, lines 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

्रीश्चन १० व्यक्तीर गिन्ध्युगमधीरक Employer identification number

ΔP.	IZONA FREE ENTERPRISE CLUB				20-2423383	
اع ا		Advised Funds or	Other Similar Fur	nds or Acco		e if
	the organization answered 'Yes' to	Form 990, Part IV,	line 6.			
		(a) Donor adv	sed funds	(b) F	unds and other acc	ounts
1	Total number at end of year					
2	Aggregate contributions to (during year)					
3	Aggregate grants from (during year)				· 	
4	Aggregate value at end of year					
5	Did the organization inform all donors and don funds are the organization's property, subject t	or advisors in writing that to the organization's excl	t the assets held in dusive legal control? .	lonor advised	Yes	☐ No
6	Did the organization inform all grantees, donor used only for charitable purposes and not for t purpose conferring impermissible private bene	s, and donor advisors in he benefit of the donor o fit?	writing that grant fun r donor advisor, or fo	ids can be or any other	… ∏Yes	□No
 • _{75- ¥}	Conservation Easements. Complete					
	Purpose(s) of conservation easements held by			to Fulli 9	o, Fait IV, line	
'	Preservation of land for public use (e.g., re	- ,	_ `` ``	of an historics	ally important land	aroa
	Protection of natural habitat	screation or education,			nistoric structure	area
	Preservation of open space			or a certifica i	iistorie structure	
2	Complete lines 2a through 2d if the organization last day of the tax year.	on held a qualified consei	vation contribution in	the form of a	conservation ease	ement on the
				Н	eld at the End of th	ne Tax Year
á	Total number of conservation easements.			. 2a		
ł	Total acreage restricted by conservation easen	nents		2 b		
(Number of conservation easements on a certif	ied historic structure incli	ıded ın (a)	2c		
(Number of conservation easements included in structure listed in the National Register	n (c) acquired after 8/17/0	06, and not on a histo	oric 2d		
3	Number of conservation easements modified, tax year ▶	transferred, released, ext	inguished, or termina	nted by the orq	ganization during th	ne
4	Number of states where property subject to co	nservation easement is l	ocated >	_		
5	Does the organization have a written policy regard enforcement of the conservation easement	garding the periodic moni ts it holds?	toring, inspection, ha	indling of viola	ations, Yes	☐ No
6	Staff and volunteer hours devoted to monitorin	g, inspecting, and enforc	ing conservation eas	ements during	the year	
7	Amount of expenses incurred in monitoring, in \$	specting, and enforcing o	onservation easemei	nts during the	year	
8	Does each conservation easement reported on 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?	line 2(d) above satisfy the	ne requirements of se		Yes	No No
9	In Part XIV, describe how the organization reports include, if applicable, the text of the footnote to conservation easements.					
ିଆ	Organizations Maintaining Collection Complete if the organization answ	ctions of Art, Histori vered 'Yes' to Form	cal Treasures, o 1990, Part IV, line	r Other Si m 8.	ilar Assets.	
1 a	a If the organization elected, as permitted under art, historical treasures, or other similar assets in Part XIV, the text of the footnote to its finan	held for public exhibition	i, education, or resea	enue statemer arch in furthera	at and balance shee ance of public servi	et works of ce, provide,
ł	If the organization elected, as permitted under historical treasures, or other similar assets hel following amounts relating to these items:	SFAS 116 (ASC 958), to d for public exhibition, ec	report in its revenue lucation, or research	statement an in furtherance	nd balance sheet we of public service,	orks of art, provide the
	(i) Revenues included in Form 990, Part VIII,	line 1 .	,		. > \$	
	(ii) Assets included in Form 990, Part X				· · · · · · · · · · · · · · · · · · ·	
	If the organization received or held works of ar amounts required to be reported under SFAS 1	I16 (ASC 958) relating to	other similar assets these items:	for financial g		lowing
	Revenues included in Form 990, Part VIII, line				> \$	
t	Assets included in Form 990, Part X				≻ \$	

Schedule D (Form 990) 2011 ARIZONA FREI				20-242			Page 2
Partill Organizations Maintaining Col	lections of A	rt, Historica	al Treasures, or	Other Similar Ass	ets (cc	ntınu	ed)
3 Using the organization's acquisition, access items (check all that apply):	ion, and other re	cords, check	any of the following	that are a significant (use of its	collec	tion
a Public exhibition	d	Loan or ex	change programs				
b Scholarly research	е	Other					
c Preservation for future generations							
4 Provide a description of the organization's of Part XIV.					se in		
5 During the year, did the organization solicit assets to be sold to raise funds rather than	or receive donate	ions of art, his	storical treasures, or	other similar	Yes	Г	No
Escrow and Custodial Arrange line 9, or reported an amount of	ements. Comi	olete if the	organization ans			, Part	
1 a Is the organization an agent, trustee, custoo included on Form 990, Part X?	dian, or other inte	ermediary for	contributions or othe	er assets not	Yes		No
b If 'Yes,' explain the arrangement in Part XIV	✓ and complete t	he following to	able				
					Amount		
c Beginning balance							
d Additions during the year			• • • • • • • • • • • • • • • • • • • •				
e Distributions during the year		• • • • • •		. 1e			
f Ending balance				1f]			
2a Did the organization include an amount on f		k, line 217			∐ Yes	L	No
b If 'Yes,' explain the arrangement in Part XI\ Part V. Endowment Funds. Complete if		tion answer	rad 'Vas' to Form	2000 Port IV June	- 10		
(a) Curry	- 1	b) Prior year	(c) Two years back	(d) Three years back			
1 a Beginning of year balance	ent year (1	b) i iloi yeai	(c) I wo years back	(u) Tillee years back	(e) F	our years	3 Dack
b Contributions					-		
c Net investment earnings, gains, and losses				_			
d Grants or scholarships			-	-			
e Other expenditures for facilities and programs					-7 20.00	erin yan	
f Administrative expenses						=	.
g End of year balance							
2 Provide the estimated percentage of the cur	rent year end ba	alance (line 1g	, column (a)) held a	s:			
a Board designated or quasi-endowment ▶_		8					
b Permanent endowment ►	_%						
c Temporarily restricted endowment							
The percentages in lines 2a, 2b, and 2c sho	uld equal 100%.						
3a Are there endowment funds not in the posse	ession of the org	anization that	are held and admin	stered for the	_		
organization by						Yes	No
(i) unrelated organizations (ii) related organizations	•				3a(i)		-
b If 'Yes' to 3a(ii), are the related organization	ne lietad se raniji	 Irad on Schadi		• • • • • • • • • • • • • • • • • • • •	3a(ii) 3b		
4 Describe in Part XIV the intended uses of the				•• • • • • • • • • • • • • • • • • • • •	_3b		
Park W. Land, Buildings, and Equipme							
Description of property	(a) Cost or oth	ner basis (t	Cost or other basis (other)	(c) Accumulated depreciation	(d) B	look va	lue
1 a Land							
b Buildings							
c Leasehold improvements							
d Equipment			1,786.	357.		1,	429.
e Other							
Total. Add lines 1a through 1e. (Column (d) must	equal Form 990	, Part X, colur	nn (B), line 10(c))			_ 1,	429.

BAA

1,429. Schedule **D** (Form 990) 2011

(5)
(6)
(7)
(8)
(9)
(10)
(11)

Total. (Column (b) must equal Form 990, Part X, column (B) line 25.)

2, 695.

2 FIN 48 (ASC 740) Footnote. In Part XIV, 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)

Sch	edule D (Form 990) 2011 ARIZONA FREE ENTERPRISE CLUB 2	0-2423383	Page 4
1-21	Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements	N/A	
1	Total revenue (Form 990, Part VIII, column (A), line 12)		
2	Total expenses (Form 990, Part IX, column (A), line 25)		
3	Excess or (deficit) for the year. Subtract line 2 from line 1		
4	Net unrealized gains (losses) on investments		
5	Donated services and use of facilities		
6	Investment expenses		
7	Prior period adjustments		
8	Other (Describe in Part XIV.)		
9	Total adjustments (net). Add lines 4 through 8		
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9		
િંહો	Reconciliation of Revenue per Audited Financial Statements With Revenue per R		
1	Total revenue, gains, and other support per audited financial statements		
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
	a Net unrealized gains on investments		
1	b Donated services and use of facilities		
(Recoveries of prior year grants		
(d Other (Describe in Part XIV.)		
	e Add lines 2a through 2d	2e	
3		3	
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 4a		
1	b Other (Describe in Part XIV.) 4b		
	c Add lines 4a and 4b	4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	
Pa	Reconciliation of Expenses per Audited Financial Statements With Expenses per	r Return N/A	
1	Total expenses and losses per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
	a Donated services and use of facilities		
ı	b Prior year adjustments		
•	C Other losses		
•	d Other (Describe in Part XIV.)		
•	e Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	_ 3	
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	_	
	Other (Describe in Part XIV.)		
	C Add lines 4a and 4b	4c	_
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	
Com	uplete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, line 4, Part X, line 2; Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complet additional information.	/, lines 1b and 2b, le this part to provid	
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		. .	

Schedule D (Form 990) 2011 ARIZON	A FREE ENTERPRISE CLUB	20-2423383	Page 5
Schedule D (Form 990) 2011 ARIZON Supplemental Informa	tion (continued)		
			
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SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

2011

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

► Attach to Form 990 or 990-EZ.

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OMB No. 1545-0047

<u>AR</u> :	RIZONA FREE ENTERPRISE CLUB 2	0-2423383
	FORM 990, PART III, LINE 4A - PROGRAM SERVICE ACCOMPLISHMENTS	
	LOBBYING POLICYMAKERS:	
	THE CLUB HELPED PASS KEY LEGISLATION IN AN ARIZONA "JOBS" PACKAG	E. TWO PRIORITY
	ARIZONA FREE ENTERPRISE CLUB BILLS WERE INCLUDED IN THE JOBS BIL	L SIGNED BY GOVERNOR
	BREWER.	
	·	
	ARIZONA'S CORPORATE INCOME TAX RATE WILL DROP FROM 6.968 PERCENT	TO 4.9 PERCENT
	BETWEEN 2014 AND 2017. REDUCING THE CORPORATE INCOME TAX HAS BE	EN_A CLUB PRIORITY
	FOR THE PAST THREE LEGISLATIVE SESSIONS.	
	·	
	ARIZONA'S TAX ON BUSINESS PERSONAL PROPERTY WILL DECLINE. THE T	AX_EXEMPTION
	BUSINESSES CAN TAKE ON EQUIPMENT, DESKS, ETC. WILL INCREASE FROM	\$65,000 TO \$79,000.
	THE CLUB HAS ARGUED FOR THIS CHANGE OVER THE PAST TWO LEGISLATIVE	E_SESSIONS
 -	A THIRD COMPONENT OF THE "JOBS" BILL INCLUDED A REDUCTION IN ARI	ZONA'S HIGH
	COMMERCIAL PROPERTY TAX RATES.	
	FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS	
	THE RETURN PREPARER PROVIDES THE ORIGINAL AND A COPY OF THE FINA	L VERSION OF FORM
	990 TO THE PRESIDENT OF THE ORGANIZATION, FOR HIS REVIEW AND FIL	ING.
	FORM 990, PART VI, LINE 12C - EXPLANATION OF MONITORING AND ENFORCEMENT	NT OF CONFLICTS
	BECAUSE THE ORGANIZATION IS SMALL, THE PRESIDENT IS ABLE TO MONI	TOR AND ENFORCE
	COMPLIANCE WITH THE POLICY ON A REGULAR BASIS	
	FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AVA	ILABLE
	THE GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIA	AL STATEMENTS ARE
	AVAILABLE TO THE PUBLIC UPON REQUEST	

Form 8868	3 (Rev 1-2012)				Page 2
• If you	are filing for an Additional (Not Automatic) 3-N	onth Extension	n, complete only Part Land check th	nis box	<u>► X</u>
Note. Only	complete Part II if you have already been gra	inted an automa	itic 3-month extension on a previou	usly filed Form 8868.	_
• If you	are filing for an Automatic 3-Month Extension,	, complete only	Part (on page 1).		
	Additional (Not Automatic) 3-Month I			(no copies needed)	
		· · · · · ·	Enter filer	's identifying number, se	e instructions
-	Name of exempt organization or other filer, see instructions			Employer identification number	(EIN) or
T					
Type or print	ARIZONA FREE ENTERPRISE CLUE	3		X 20-2423383	
•	Number, street, and room or suite number if a P.O box, se			Social security number (SSN)	
File by the extended					
due date for filing the	2415 E. CAMELBACK RD, STE 75	58			
return See	City, town or post office, state, and ZIP code For a foreign		ions	- 	
	PHOENIX, AZ 85016				
Enter the	Return code for the return that this application	is for (file a se	parate application for each return)		01
Application	on	Return Code	Application Is For		Return Code
Form 990		01			
Form 990-	.BI	02	Form 1041-A		08
Form 990-	·	01	Form 4720	· · · · · · · · · · · · · · · · · · ·	09
Form 990-		04	Form 5227		10
	T (section 401(a) or 408(a) trust)	05	Form 6069		11
	-T (trust other than above)	06	Form 8870		12
If theIf thiswhole grown	none No. ► 602-265-9688 organization does not have an office or place or is for a Group Return, enter the organization's up, check this box. If it is for part of the extension is for.	of business in th four digit Group	e United States, check this box Exemption Number (GEN)	If thi	► ☐ s is for the of all
5 For 6 If the 7 State	quest an additional 3-month extension of time to calendar year 2011, or other tax year beg e tax year entered in line 5 is for less than 12 in Change in accounting period e in detail why you need the extension December 10 FORMATION NECESSARY TO FILE A	inning months, check r UE_TO_CIRC	, 20 , and ending eason: Initial return	TAXPAYERS CONTRO	L_THE
nonr	is application is for Form 990-BL, 990-PF, 990- refundable credits. See instructions	· · · · · · · · · · · · · · · · · · ·		. 8a \$	
~~J.	is application is for Form 990-PF, 990-T, 4720, ments made. Include any prior year overpayme Form 8868		any refundable credits and estimate credit and any amount paid previous.	ted tax busly . 8b\$	
c Bala EFT	ince due. Subtract line 8b from line 8a. Include PS (Electronic Federal Tax Payment System).	your payment See instruction:	with this form, if required, by using s	3 8c \$	
	Signature and Ver	ification mu	st be completed for Part II o	only.	
Under penalt	ies of perjury, I declare that I have examined this form, includii complete, and that I am authorized to prepare this form	ng accompanying sch	nedules and statements, and to the best of my	knowledge and belief, it is true,	
Junious and C	R A. D.	.		n /	
Signature >	Hand N Kouhn Titl	e ► CPA		Date ► 8//	3//2
BAA	•	FIFZ0502L	07/29/11	Form 8868	(Rev 1-2012)

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