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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)

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

A	For the	2011 cale	ndar year, or tax year b	eginning	July 1	, 2011	1, and endi	ng Ju	ne 30	, 20 12	
В	Check if	applicable	C Name of organization Ar	izona PIRG E	ducation Fund,	Inc.			D Employ	er identification nu	mber
	Address	change	Doing Business As	<u> </u>						352259362	
	Name ch	ange	Number and street (or P C	box if mail is no	ot delivered to stre	et address)	Room/s	uite	E Telepho	ne number	
	Initial ret	um	130 N. Central Ave					202		6022529227	
	Terminat	ed	City or town, state or coul	ntry, and ZIP + 4							
V	Amende	d return	Phoenix, AZ 85004						G Gross re	eceipts \$ 24	0147.65
ñ			F Name and address of prin	cipal officer		•		H(a) is this		for affiliates? Yes	
_	, фроск.	po	Diane E. Brown, 130 N.	•	Ste 202. Phoen	ix AZ 85004				ncluded? Yes	_
$\overline{}$	Tay-eyer	npt status		3501(c) () ◀ (insert no)					a list. (see instruction	
<u>:</u>	Website		w.arizonapirgedfund.or) - (macre no) <u>-</u>	4547 (a)(1) U	921		p exemption		
ĸ			✓ Corporation ☐ Trust	Association	Other ▶	11.	Year of forma			of legal domicile	AZ
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	'		escribe the organization			ant activitie	es: Conu	ucts research	n and pub	iic education on	Denaii
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Governance	1	•	is box ▶☐ if the organ		•		•			ıts net assets.	
			of voting members of t	•	• •						5
_ 200			of independent voting) 			5
₹	1		nber of individuals emp	-	-				. 5		3
Z U CUIS Activities &	6	Total nun	nber of volunteers (est	mate if nece	ssary)				6		12
7	7a	Total unre	elated business revent	ue from Part \	VIII, column (C), line 12		. .	. 7a		0
	b	Net unrel	ated business taxable	income from	Form 990-T, I	ıne 34 .			7b		0
<u>}</u>								Prior Y	ear	Current Yea	ir
	8	Contribut	tions and grants (Part \	VIII, line 1h).			[78,731.35		72,648
υş	9	Program	service revenue (Part \	VIII, line 2g)			1	,			100,000
Revenue			nt income (Part VIII, co				,		392.41		
54			enue (Part VIII, column			•					
3			enue-add lines 8 throu						79,123.76		172,648
5			nd similar amounts pai						0		7000
	1		paid to or for members	-	, ,	•	The state of the s		0		
10	1		other compensation, em	•	• • •	•		1	01,076.51	Q-	1997.32
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Je n			draising expenses (Par				3557.67				<u>_</u>
Ä			penses (Part IX, colum				}		39199.10	F.	3875.55
			enses. Add lines 13-1					-	40275.61		6430.54
			less expenses. Subtra			0	1 2 K		61,151.85		6217.00
		nevenue	iess expenses. Subma				9.	Beginning of Ci		End of Yea	
ts or	20	Total aca	ata (Dart V. lina 16)	6 3	NOA c .	2013 1	<u>الإ</u>			Endorrea	
Net Assets Fund Baland	20		ets (Part X, line 16)		• • • • •		. j		66,803.93		192507
ξĘ	21		ilities (Part X, line 26)			• •- <u>-</u> •- • /i			13,480.97		32967
			s or fund balances. Su	otract line 2	i trom line 20		<u>·'·</u>		53,322.96		159540
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Us	e Only				·				n's EIN ▶		
Ma	v the IR		ddress ► s this return with the pr	enarer show	n above? (see	Instruction	9)	Pho	one no	Tyes	□ No
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Form **990** (2011)

	0 (2011) Page 2
Part	Statement of Program Service Accomplishments Check if Schedule O contains a response to any question in this Part III
1	Briefly describe the organization's mission:
•	Work to protect consumers and promote good government; we investigate problems, craft solutions, educate the public, and offer
	citizens meaningful opportunities for civic participation.
	Did the annual state and add a second state and a second state at the second state at
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
	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?
	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 and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported
	granto and anocations to entities, the total expenses, and revenue, in any, for each program control reported
4a	(Code:) (Expenses \$ 93,679 including grants of \$ 4,900) (Revenue \$)
	Researching and influencing public policy: staff engage in non-legislative activities, research, education, and legal and policy
	development on issues including health care reform, 21st century transit, and energy efficiency.
	•••••••••••••••••••••••••••••••••••••••
	•
	••••••
4b	(Code:) (Expenses \$ 40,148 including grants of \$ 2,100) (Revenue \$)
	Public education and outreach services: recruiting volunteers, distributing educational literature, and discussing issues
	related to health care reform, 21st century transit, and energy efficiency.

4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
•	•
	Other program services (Describe in Schedule O.)
- •u	(Expenses \$ including grants of \$) (Revenue \$)

133,827

4e Total program service expenses ▶

Part	Chapter of Dequired Schodules			
Part	Checklist of Required Schedules		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	✓	<u> </u>
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	✓	<u> </u>
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		✓
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? <i>If "Yes," complete Schedule C, Part II</i>	4		1
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		1
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		1
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		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		1
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		1
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		1
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.			·
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		1
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	11b		1
С	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	11c		1
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	11d		1
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		✓_
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.	11f		1
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII</i>	12a		✓
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		✓
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		✓
14 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		1
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		1
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		1
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		1
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	18		1
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	19		1
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		1
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .	20b		

Part	V Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	✓	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		1
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? If "Yes," complete Schedule J	23		1
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a		1
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	24d 25a		
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		1
26	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.	26		√
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? If "Yes," complete Schedule L, Part III	27		1
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 b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		√
С	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? If "Yes," complete Schedule L, Part IV	28c		1
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	29 30		√
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		▼
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		√
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? If "Yes," complete Schedule R, Part I	33		1
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	1	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		1
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		✓
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If</i> "Yes," <i>complete Schedule R, Part V, line 2</i>	36		✓
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</i> ,			
	Part VI	37		✓
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	✓	
		-	000	(2011)

Part	V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response to any question in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 0			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
_	reportable gaming (gambling) winnings to prize winners?	1c	✓	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 3			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	✓	
3a	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
b	Did the organization have unrelated business gross income of \$1,000 or more during the year? If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3a		✓
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority	3ь		
74	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		1
b	If "Yes," enter the name of the foreign country: ▶			
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		1
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		✓
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
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		✓
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
_	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?			
_		7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	7b		
·	required to file Form 8282?	7c		
ď	If "Yes," indicate the number of Forms 8282 filed during the year	70	100	
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 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?	8		
9	Sponsoring organizations maintaining donor advised funds.			
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 b	Initiation fees and capital contributions included on Part VIII, line 12			
11	Section 501(c)(12) organizations. Enter:			
''a	Gross income from members or shareholders			
ь	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	~ ~~ ~	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	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.			
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			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		✓
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O .	14b		

Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S. Check if Schedule O contains a response to any question in this Part VI	See in:	for a	ions.
Secti	on 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 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.			
ь 2	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 officer, director, trustee, or key employee?	2		_
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? .	3		1
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		1
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		1
6	Did the organization have members or stockholders?	6		1
7a	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?	7a		1
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		✓
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a_	✓	
р	Each committee with authority to act on behalf of the governing body?	8b	✓_	
9	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	9		1
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reven	ue C	<u> </u>	
10-	Did the every vertex have lead charters because a efficience?	40-	Yes	No
10a b	Did the organization have local chapters, branches, or affiliates?	10a 10b		✓
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form?	11a	1	
þ	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
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 use to conflicts?	12b	✓	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	1	
13	Did the organization have a written whistleblower policy?	13	✓	
14 15	Did the organization have a written document retention and destruction policy?	14	✓	
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		
b	Other officers or key employees of the organization	15b	√	L
16a	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a tayable patity during the year?			
h	with a taxable entity during the year?	16a		✓
Б	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?	16b		
Secti	on C. Disclosure	וטט		L
17	List the states with which a copy of this Form 990 is required to be filed ▶ Arizona			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public inspection. Indicate how you made these available. Check all that apply.	501(c)(3)s	only)
19	Own website Another's website Upon request Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of and financial statements available to the public during the tax year.			olicy,
20	State the name, physical address, and telephone number of the person who possesses the books and records organization: ► Lisa Chavez 1543 Wazee St. Suite 400 Denver CO 80202 303-573-5995	of the		

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

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

1a Complete this table for all persons required to be listed. 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 no	r any relate	d org	aniz			ompe	nsa	ated any currer	t officer, director	r, or trustee.
				•	C)					
(A)	(B)	(do n	ot ch		ntion	e than o	200	(D)	(E)	(F)
Name and Title	Average					is both		Reportable	Reportable	Estimated
	hours per week	office	er and	dad	irect	or/trus		compensation from	compensation from related	amount of other
	(describe	우콩	Ins	皇	6	₽.F	Former	the	organizations	compensation
	hours for	dire	Ē	Officer	er	ples]	organization	(W-2/1099-MISC)	from the
	related organizations	다	ğ		로	8 6	¬	(W-2/1099-MISC)		organization and related
	in Schedule	Individual trustee or director	<u>a</u>		Key employee	₿				organizations
	O)	tee	Institutional trustee		"	Highest compensated employee				J
			ě			ited				
(4) Ohimaaa Bayandalli Visa Brasidana										
(1) Phineas Baxandall, Vice President	.5	/				ļ		7/0		
(2) Erin Eccleston, Treasurer	.5	-			\vdash	 -		n/a		
127 E. II. 200 00 00 00 00 00 00 00 00 00 00 00 00	.5	1						n/a		
(3) Robyn Nebrich, Director							<u> </u>			
	.5	1						n/a		
(4) Carl Perry, President										
	.5	✓						n/a		
(5) Tina Beattie, Director										
	.5	✓						n/a		
(6) Diane Brown										
	30		j		✓			39,224.12	0	2,614.82
(7)								}	i	
		ļ					_			
(8)	-									
(0)	<u> </u>									
(9)	1								:	
(10)		 -					\vdash			
>	1									
(11)										
			Ш				_			
(12)		ĺ						İ		
(10)			-	H	_	<u> </u>				
(13)										
(14)	 			 -				 		
(17)	1	}					1	1		

	(A) Name and tritle	(B) Average hours per week (describe hours for related organizations in Schedule O)	box, office Individua	unles	Pos eck s pe	rson	ha oth is Highest compensated to be so of employee	n an	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation fro related organizations (W-2/1099-MISC	other compensat	of sion on ed
(15)				8			ēd					
(16)												
(17)												
(18)												
(19)												
(20)												
(21)												
(22)												
		1					·	<u> </u>				
(24)												
(25)												
	0.1.4.4.1							Ĺ				
1b c	Sub-total	VII, Sectio	n A					>	39,224.12			614.82
<u>d</u>	Total number of individuals (including but	not limited						<u>▶</u>	39,224.12 ho received me			614.82
	reportable compensation from the organi	zation ► 0									Yes	No
3	Did the organization list any former of employee on line 1a? If "Yes," complete 8							emp	loyee, or high	est compensa		√
4	For any individual listed on line 1a, is the organization and related organizations individual	sum of rep	oortab	ole d	com	per	satio				the	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
5	Did any person listed on line 1a receive of for services rendered to the organization?									ation or individ	lual	1
Section	on B. Independent Contractors		•				_					
1	Complete this table for your five highest of compensation from the organization. Repyear.											tax
	(A) Name and business add	ress							(B) Description of se	ervices	(C) Compensation	
n/a												
									<u> </u>			
												•
2	Total number of independent contractor received more than \$100,000 of compens							th	ose listed abo	ove) who		

Par	Will	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
ts ts	1a	Federated campaigns 1a					
ran	ь	Membership dues 1b			:		
Ē,	c	Fundraising events 1c					
Contributions, Gifts, Grants and Other Similar Amounts	ď	Related organizations 1d				,	
i, G nila	e	Government grants (contributions) 1e					
ons Sir	f	All other contributions, gifts, grants,					
uti	•	and similar amounts not included above	72,648				
Q	_	Noncash contributions included in lines 1a-1f: \$	72,040				
ou pu	9	Total. Add lines 1a–1f	•	72,648			
	!!		ness Code	72,046			
Program Service Revenue	2		13319	100000			
leve	2a	health care research & education 8	13319	100000			
9	b						
Ž	C						
Se	d						
ran	e	A.U					
rog	†	All other program service revenue .					
	g	Total. Add lines 2a–2f	▶				
	3	Investment income (including dividends, and other similar amounts)					
		•					
	4	Income from investment of tax-exempt bond pro					
	5	Royalties					
	_		Personal		ا المؤسلان ا	20 1 A B	. (
	6a	Gross rents		* '/ .			3. 1
	b	Less: rental expenses		*	,	*	
	С	Rental income or (loss)		***************************************	***************************************		
	d	Net rental income or (loss)					
	7a) Other				
		assets other than inventory		4 . 3 .			
	b	Less: cost or other basis		· *			·\$
		and sales expenses				£. x.	18.
	С	Gain or (loss)					
	d	Net gain or (loss)	<u> Þ</u>				
a				<i><</i>		~	
evenue	8a	Gross income from fundraising			, ,		
ķ		events (not including \$					
æ		of contributions reported on line 1c).					
Other R		See Part IV, line 18 a					
₹		Less direct expenses b					
		Net income or (loss) from fundraising events	3 . ▶			<u>.</u>	
	9a	Gross income from gaming activities.					•
		See Part IV, line 19 a					
		Less: direct expenses b					
		Net income or (loss) from gaming activities	▶				
	10a	Gross sales of inventory, less					
		returns and allowances a					
	b	Less: cost of goods sold b					
l	C	Net income or (loss) from sales of inventory	>				
		Miscellaneous Revenue Busii	ness Code				
Ì	11a						
	b						
	С						
	d	All other revenue	-				, - ,
	е	Total. Add lines 11a–11d	▶			-	•
	12	Total revenue. See instructions		172,648			

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) but are not required to complete columns (B), (C), and (D).

	Check if Schedule O contains a respon	se to any question i		<u> </u>	<u> </u>
	ot include amounts reported on lines 6b, 7b, o, 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	7000	7000		
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	39224.12	32973.19	2203.90	4047.04
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	32792.21	27566.29	1842.51	3383.41
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	2614.82	2198.11	146.92	269.79
9	Other employee benefits	9124.38	7670.28	512.67	941.43
10	Payroll taxes	8360.92	7028.49	469.78	862.66
11	Fees for services (non-employees):				
а	Management				
b	Legal				····
С	Accounting	367.73		367.73	<u> </u>
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				-
f	Investment management fees				
g	Other	44146.04	28185.37	12820.57	3140
12	Advertising and promotion				
13	Office expenses	5554.08	5524.17	14.95	14.95
14	Information technology				
15	Royalties	5040.75	4400.45		**************************************
16 17	Occupancy	5343.75 3135.16	4492.15	300.25	551.35 323.48
18	Payments of travel or entertainment expenses	3135.10	2635.53	176.16	323.48
10	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .	740.50	740.50		
20	Interest	740.30	740.30		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization .	237.08	199.30	13.32	24.46
23	Insurance	142.50		142.50	, ,
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	Books/subscriptions	110.45	92.85	6.21	11.40
b	Filing fees	35		35	
C	Bank charges	.30		.30	 -
d	Coalition and movement dues	7620.63	7620.63		
e	All other expenses	400400 - 1	42222	40040 4=	4477
25	Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the	166430.54	133826.70	19046.17	13557.67
26	organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here If following SOP 98-2 (ASC 958-720)				

P	art X	Balance Sheet	<u> </u>		
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	131,036.94	1	172,803
	2	Savings and temporary cash investments		2	10667
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	35,766.99	4	8108
	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			
ets	_	employees' beneficiary organizations (see instructions)		6	
Assets	7	Notes and loans receivable, net		7	
⋖	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 982.49			
	b	Less: accumulated depreciation 10b 0	<u> </u>	10c	929
	11	Investments—publicly traded securities		11	
	12 13	Investments—other securities. See Part IV, line 11	=	12 ·	
	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)	166,803.93	16	192507
	17	Accounts payable and accrued expenses	13,480.97	17	32,967
	18	Grants payable	10,100.07	18	02,007
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D .		21	
တ္ဆ	22	Payables to current and former officers, directors, trustees, key			<u> </u>
<u>ii</u>		employees, highest compensated employees, and disqualified persons.	> (*		
Liabilities		Complete Part II of Schedule L	nagamanan an amandadahan katala ah a a a a a a a a a a a a a a a a a	22	
Ë	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties [24	
	25	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		25	
	26	Total liabilities. Add lines 17 through 25	13,480.97	26	32,967
ces		Organizations that follow SFAS 117, check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34.			
an	27	Unrestricted net assets	153,322.96	27	119540
Ba	28	Temporarily restricted net assets		28	40,000
nd	29	Permanently restricted net assets		29	
Net Assets or Fund Balances		Organizations that do not follow SFAS 117, check here ▶ □ and complete lines 30 through 34.			
	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
ΙÀ	32	Retained earnings, endowment, accumulated income, or other funds .		32	
Ž	33	Total net assets or fund balances	153,322.96	33	159540
	34	Total liabilities and net assets/fund balances	166,803.93	34	192507

Form 9	90 (2011)			Pa	ge 12	
Par	XI Reconciliation of Net Assets				_	
	Check if Schedule O contains a response to any question in this Part XI	<u> </u>	<u></u>			
1	Total revenue (must equal Part VIII, column (A), line 12)					
2	Total expenses (must equal Part IX, column (A), line 25)			166431		
3	Revenue less expenses. Subtract line 2 from line 1		6217			
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))		153,322		3,322	
5	Other changes in net assets or fund balances (explain in Schedule O)					
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		15	9540	
Part	XII Financial Statements and Reporting					
	Check if Schedule O contains a response to any question in this Part XII	<u></u>				
				Yes	No	
1	Accounting method used to prepare the Form 990: Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," ex	plain in				
	Schedule O.			Ì		
2a					✓_	
b	, and any and any and any and any and any				✓_	
С	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?					
	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 issued on a separate basis, consolidated basis, or both:				***	
	Separate basis Consolidated basis Both consolidated and separate basis		\ \ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\		, !	
32	As a result of a federal award, was the organization required to undergo an audit or audits as set	forth in		X6-X	i	
Vu	the Single Audit Act and OMB Circular A-133?	,	За		1	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not under	erao the	 			
_	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a	-	3b			
			Fort	m 990	(2011)	

Form 990 (2011)