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Form 990-PF

Return of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation

OMB No 1545 0052

2011

Department of the Treasury Internal Revenue Service

Note The foundation may be able to use a copy of this return to satisfy state reporting requirements

i or cal	endar year 2011, or tax year beginning	<u>//Ul ,2011</u>	, and ending 6	/30	, 2012	
	THCARE INNOVATIONS FOUNDATION	N, INC			oyer identification nur -0674421	nber
	. BOX 1348 ON, AZ 85602			B Telepi	hone number (see the 0-586-7617	Instructions)
				C If exe	mption application is	pending, check here
G Che	eck all that apply Initial return	Initial Return of a for	mer public charity	D 1 Foreig	gn organizations, chec	the hora
	Final return	Amended return				_
	Address change	Name change	·	2 Foreig	gn organizations meet and attach computatio	ing the 85% test, check
н С	heck type of organization X Section 50 Section 4947(a)(1) nonexempt charitable	1(c)(3) exempt private f	oundation private foundation		·	
l Fa	air market value of all assets at end of year J Aco	counting method C	ash X Accrual		vate foundation status section 507(b)(1)(A)	
(/: ►\$	rom Part II, column (c), line 16)	Other (specify)	· – – ,– ,– – , – – –		foundation is in a 60	
Part I		, column (d) must be or	casn basis)	under	section 507(b)(1)(B)	, cneck nere
	Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))	(a) Revenue and expenses per books	(b) Net investme income	nt (c)	Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1 Contributions, gifts, grants, etc, received (att sch)					
	2 Ck X if the foundn is not req to att Sch B 3 Interest on savings and temporary					
i	cash investments 4 Dividends and interest from securities					
İ	5a Gross rents					
İ	b Net rental income or (loss)					
R E V	6a Net gain/(loss) from sale of assets not on line 10. b Gross sales price for all assets on line 6a					
	7 Capital gain net income (from Part IV, line 2)					
N N	8 Net short-term capital gain 9 Income modifications					
Ĕ	10 a Gross sales less returns and allowances					
	b Less Cost of goods sold					
	c Gross profit/(loss) (att sch)					
	11 Other income (attach schedule)					
	SEE STATEMENT 1	40,732.	40,73		_	
	12 Total. Add lines 1 through 11 13 Compensation of officers, directors, trustees, etc	40,732. 2,750.	40,73	2.	0.	
	14 Other employee salaries and wages	2,750.				
	15 Pension plans, employee benefits					
A	16a Legal fees (attach schedule)					
M	b Accounting fees (attach sch) SEE ST 2	4,800.	4,80			
0 1	c Other prof fees (attach sch) SEE ST 3	6,550.	6,55	0.		
OPER.	17 Interest 18 Taxes (attach schedule)(see instrs). SEE STM 4	300.	30	0.		
RRAATT	19 Depreciation (attach		30			
OPERAT-N	sch) and depletion () 20 Occupancy	9,931. 18,683.	18,68	2		
G E	21 Travel, conferences, and meetings	10,083.	18,68	٠,		
AND	22 Printing and publications					
MXT II Z WHIA	23 Ofher expenses (attach schedule) SEE STATEMENT 5	4,179.	2,07	9.		2,100.
E	24 Total operating and administrative	15 100	*			
\$	expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid PART XV	47,193.	32,41	2.		2,100.
	26 Total expenses and disbursements.	8,850.	<u> </u>			8,850.
	Add lines 24 and 25	56,043.	32,41	2.	0.	10,950.
	27 Subtract line 26 from line 12: a Excess of revenue over expenses					
	and disbursements	-15,311.				
	b Not investment income (if negative, enter 0)		8,32	0.		
	C Adjusted net income (if negative, enter -0)		l	1	0.	_
	or Paperwork Reduction Act Notice, see ins					Form 990-PF (2011)

Day	-	Balance Sheets	Attached schedules and amounts in the description column should be for end-of year amounts only	Beginning of year		of year
Par	. 11 1	Darance Sneets	(See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest	-bearing	22,237.	27,035.	27,035.
	2	Savings and tempor	ary cash investments			
	3	Accounts receivable	▶ 1,281.			
		Less allowance for	doubtful accounts	1,156	1,281.	1,281.
	4	Pledges receivable	>			
		Less allowance for	doubtful accounts			
	5	Grants receivable				
	6	Receivables due from offi disqualified persons (atta	cers, directors, trustees, and other ch schedule) (see instructions)			
	7	Other notes and loans red	eivable (attach sch) > 494, 352.			
Ą		Less allowance for	doubtful accounts -	518,499.	494,352.	
š	8	Inventories for sale	or use			
A S E T	9	Prepaid expenses a	nd deferred charges	1,043.	78.	78.
Ġ	10	a Investments — U.S. obligations (attach s	and state government schedule)			
		b Investments — corporate c Investments — corporate				
	l	Investments – land equipment basis				
		Less: accumulated depred (attach schedule)	eration •			
	12	Investments - mort	gage loans.			
	13	Investments - other	r (attach schedule)			
	14	Land, buildings, and	equipment basis 🛌			
			SEE STMT 6 ▶3 <u>4,</u> 975.]	30,192.	37,220	37,220.
	15	Other assets (descri	be ► SEE STATEMENT 7)	103,127.	101,009	101,009.
	16	Total assets (to be	completed by all filers – Also, see page 1, item l)	676,254.	660,975.	166,623.
L	17		nd accrued expenses	250.	2,400	100,023.
ı	18	Grants payable	nd accided expenses	230.	2,400.	+
A B	19	Deferred revenue				-
i	20		tors, trustees, & other disqualified persons			1
L	21		s payable (attach schedule)			
T	22		ribe ► SEE STATEMENT 8	103,128.	101,010.	1
I E S						7
<u> </u>	23	Total liabilities (add		103,378.	103,410.	4
		Foundations that fo and complete lines	llow SFAS 117, check here X 24 through 26 and lines 30 and 31. □			
NF	24	Unrestricted		572,876.	557,565.	
N F E U T N	25	Temporarily restricted	ed			
D	26	Permanently restrict				
A B A L A N		Foundations that do and complete lines	o not follow SFAS 117, check here P 27 through 31.			
E L T A	27	Capital stock, trust i	orincipal, or current funds			
	28	Paid-in or capital surplus	, or land, building, and equipment fund			1
O E	29	Retained earnings, accum	ulated income, endowment, or other funds			
RS	30		fund balances (see instructions)	572,876.	557,565	
	31	Total liabilities and (see instructions)	net assets/fund balances	676,254.	660,975	,
Par	H	Analysis of Chan	iges in Net Assets or Fund Balance	es		
1	Tota end-	I net assets or fund b	alances at beginning of year — Part II, colu d on prior year's return)	ımn (a), line 30 (must aç	gree with	572,876.
2		er amount from Part I,			2	-15,311.
		increases not included in li			3	
		lines 1, 2, and 3			4	557,565.
		ases not included in line 2	(itemize).		5	
			alances at end of year (line 4 minus line 5)	- Part II, column (b), li	ne 30 6	557,565.

Par	(a) List and describe	Losses for Tax on Investmen e the kınd(s) of property sold (e g , r se, or common stock, 200 shares ML	eal estate,	(b) How acque P — Purcha D — Donati-	se (month, day, year)	(d) Date sold (month day, year)
1 a	N/A					
t						
c						
€		y 				L
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other ba plus expense of sa		(h) Gain or (e) plus (f) m	
a						
b						
				-		
c						
		Ing gain in column (h) and owned by	the foundation on 12/31/69	- +	(I) On an (Onl)	(h)
	(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column over column (j), if a	1 (1)	(I) Gains (Col gain minus column (than 0-) or Lösses (fi	k), but not less
a						
<u>b</u>						
						
e						
	Capital gain net income or (ne	t capital loss) If gain, also	enter in Part I, line 7 ter -0- in Part I, line 7	_		
3	, ,	[loss], en [loss] as defined in sections 1222(5)	_	ļ -	2	
3	, -	e 8, column (c) (see instructions) If	··· —			
	in Part I, line 8	e 8, column (c) (see instructions) in	(loss), eriter -u-		3	
Par	t V Qualification Unde	r Section 4940(e) for Reduce	d Tax on Net Investm	<u>ent Incon</u>	ne N/A	
Was	s,' the foundation does not qua	ction 4942 tax on the distributable an lify under section 4940(e) Do not co	mplete this part		Yes	No
		n each column for each year, see th		ig any entrie		
	(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use as	sets	(d) Distribution (column (b) divided	
	2010					
	2009					
	2008					
	2007					
	2006	<u> </u>				
2	Total of line 1, column (d)				2	
3	Average distribution ratio for the	ne 5-year base period – divide the to	otal on line 2 by 5, or by the	,		
	number of years the foundation	n has been in existence if less than !	years	-	3	
4	Enter the net value of nonchar	itable-use assets for 2011 from Part	X, line 5		4	
5	Multiply line 4 by line 3			-	5	
6	Enter 1% of net investment inc	come (1% of Part I, line 27b)		-	6	
7	Add lines 5 and 6			-	7	
8	Enter qualifying distributions fr	om Part XII, line 4			8	
	If line 8 is equal to or greater t					

<u>and addresses</u> | 10 | X

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Χ

for calendar year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If 'Yes,' complete Part XIV

Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names

Pai	rt VII-A	Statements Regarding Activities (continued)					
11	At any t within th	ime during the year, did the foundation, directly or indirectly, own a controlled entity ne meaning of section 512(b)(13)? If 'Yes', attach schedule (see instructions)			11		Х
12	Did the advisory	foundation make a distribution to a donor advised fund over which the foundation or a disqualife privileges? If 'Yes,' attach statement (see instructions)	ed pers	on had	12		X
13		foundation comply with the public inspection requirements for its annual returns and exemption	applica	ation?	13	X	
14	Website The boo	address N/A ks are in care of HEALTHCARE INNOVATIONS FOUNDAT Telephone	no >	520-58	36-7	617	
15		at ► P. O. BOX 1348, BENSON, AZ ZIP + 4 ► 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here	856	02	 N/A	<u>-</u>	
		er the amount of tax-exempt interest received or accrued during the year	- [15			N/A
16	At any ti bank, se	ime during calendar year 2011, did the foundation have an interest in or a signature or other accountines, or other financial account in a foreign country?	ithority	over a	16	Yes	No X
		instructions for exceptions and filing requirements for Form TD F 90-22 1. If 'Yes,' enter the national structure is the second of the second	me of t	he			
Par	t VII-B	Statements Regarding Activities for Which Form 4720 May Be Required		-			
	File For	m 4720 if any item is checked in the 'Yes' column, unless an exception applies.				Yes	No
1 a	During tl	he year did the foundation (either directly or indirectly)		_			
		age in the sale or exchange, or leasing of property with a disqualified person?	Yes	X No			
		ow money from, lend money to, or otherwise extend credit to (or accept it from) a ualified person?	Yes	X No			
	(3) Furn	ish goods, services, or facilities to (or accept them from) a disqualified person?	Yes	X No			
	(4) Pay	compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes	X No			
	(5) Tran for the	sfer any income or assets to a disqualified person (or make any of either available he benefit or use of a disqualified person)?	Yes	X No			
	foun	te to pay money or property to a government official? (Exception. Check 'No' if the dation agreed to make a grant to or to employ the official for a period after termination overnment service, if terminating within 90 days.)	Yes	XNo			
t		nswer is 'Yes' to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in ons section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions).	,		1 b	N	/A
	Organiza	ations relying on a current notice regarding disaster assistance check here	•				
C	Did the f that were	oundation engage in a prior year in any of the acts described in 1a, other than excepted acts, e not corrected before the first day of the tax year beginning in 2011?			1c	_	Х
2	Taxes or private o	n failure to distribute income (section 4942) (does not apply for years the foundation was a sperating foundation defined in section 4942(j)(3) or 4942(j)(5))					
а	and 6e,	nd of tax year 2011, did the foundation have any undistributed income (lines 6d Part XIII) for tax year(s) beginning before 2011?	Yes	XNo			
		list the years • 20 , 20 , 20					
t	(relating	e any years listed in 2a for which the foundation is not applying the provisions of section 4942(a to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a listed, answer 'No' and attach statement — see instructions.)			2b	N	/A
c		ovisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years h	ere				
		_ , 20 , 20 , 20					
3 <i>a</i>	Did the f enterpris	oundation hold more than a 2% direct or indirect interest in any business e at any time during the year?	Yes	X No			
b	or disqua by the Co (3) the la	did it have excess business holdings in 2011 as a result of (1) any purchase by the foundation alified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved ommissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or ipse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to be if the foundation had excess business holdings in 2011)	l		3b	N	/A
4 a	Did the f charitabl	oundation invest during the year any amount in a manner that would jeopardize its e purposes?			4a		Х
	jeopardiz the tax y	oundation make any investment in a prior year (but after December 31, 1969) that could see its charitable purpose that had not been removed from jeopardy before the first day of lear beginning in 2011?			4b		<u>x</u>
BAA				Fo	rm 99 0)-PF ((2011)

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Part VII-B Statements Regarding Activiti	es for Which Form	1 4720 May Be Requ	uired (continued)		
5a During the year did the foundation pay or incu					
(1) Carry on propaganda, or otherwise attempt	it to influence legislatio	n (section 4945(e))?	∐ Yes X	No	
(2) Influence the outcome of any specific pub on, directly or indirectly, any voter registra	ition drive?				
(3) Provide a grant to an individual for travel,	study, or other similar	purposes?	Yes X	No	
(4) Provide a grant to an organization other the in section 509(a)(1), (2), or (3), or section	nan a charitable, etc, or 4940(d)(2)? (see instru	rganization described uctions)	Yes X	No	
(5) Provide for any purpose other than religio educational purposes, or for the preventio	us, charitable, scientific n of cruelty to children	;, literary, or or animals?	Yes X	No	
b If any answer is 'Yes' to 5a(1)-(5), did any of described in Regulations section 53 4945 or in (see instructions)?	the transactions fail to a a current notice regard	qualify under the except ding disaster assistance	tions	51	b N/A
Organizations relying on a current notice rega	rding disaster assistand	ce check here	▶ [
c If the answer is 'Yes' to question 5a(4), does tax because it maintained expenditure respon	the foundation claim ex sibility for the grant?	emption from the	N/A Yes] No	
If 'Yes,' attach the statement required by Reg	ulations section 53 4945	5-5(d)			
6a Did the foundation, during the year, receive ar on a personal benefit contract?	ny funds, directly or ind	rectly, to pay premiums	Yes X	No	
b Did the foundation, during the year, pay prem	iums, directly or indirec	tly, on a personal bene	fit contract?	61	<u>b</u> Х
If 'Yes' to 6b, file Form 8870		.h.dad tau ahaltar transa	iction? Tes X	No	
7a At any time during the tax year, was the found b If 'Yes,' did the foundation receive any proceed				N/A 7	h
Part VIII Information About Officers, D	irectors. Trustees.	Foundation Manag	ers, Highly Paid E		
and Contractors	,		, , <u>, , , , , , , , , , , , , , , , , </u>	. ,	<u>, </u>
1 List all officers, directors, trustees, foundation	n managers and their	compensation (see inst	ructions).		
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Exper other a	nse account, allowances
SEE STATEMENT 9					
		0.	0.		2,750.
				<u> </u>	
			<u> </u>		
2 Compensation of five highest-paid employed	es (other than those inc	cluded on line 1- see ir	nstructions). If none, e	nter 'NONE	Ξ.'
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred		nse account, allowances
NONE			compensation		
	0	0.	0.		0.
	1	<u> </u>	<u> </u>		
				1	
Total number of other employees and over \$50.00	<u> </u>		<u> </u>	-	n
Total number of other employees paid over \$50,00	U TEE 403061	10/05/11			0 190-PF (2011)

Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) 1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes a Average monthly fair market value of securities. 1 a 1 b 24,636. b Average of monthly cash balances 495,711. c Fair market value of all other assets (see instructions) 10 520,347. 1 d d Total (add lines 1a, b, and c) e Reduction claimed for blockage or other factors reported on lines 1a and 1c 1 e (attach detailed explanation) 0. 2 Acquisition indebtedness applicable to line 1 assets 2 0. 520,347. 3 Subtract line 2 from line 1d 3 Cash deemed held for charitable activities. Enter 1-1/2% of line 3 7,805. (for greater amount, see instructions) 5 512,542. Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4. Minimum investment return. Enter 5% of line 5 6 25,627. Part XI. Distributable Amount (see-instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here and do not complete this part.) 25,627. 1 Minimum investment return from Part X, line 6 1 2a 2a Tax on investment income for 2011 from Part VI, line 5 166 b Income tax for 2011 (This does not include the tax from Part VI) 2b 20 c Add lines 2a and 2b 166. 25,461. 3 Distributable amount before adjustments Subtract line 2c from line 1 3 4 Recoveries of amounts treated as qualifying distributions 4 25,461. 5 Add lines 3 and 4 5 6 Deduction from distributable amount (see instructions) 6 7 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1 7 25,461 Part XII | Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes a Expenses, contributions, gifts, etc - total from Part I, column (d), line 26 1 a 10,950. b Program-related investments - total from Part IX-B 1 b 2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes. 2 Amounts set aside for specific charitable projects that satisfy the a Suitability test (prior IRS approval required) 3 a **b** Cash distribution test (attach the required schedule) 3 b 4 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 4 10,950. Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income 5 Enter 1% of Part I, line 27b (see instructions) 10,950. Adjusted qualifying distributions. Subtract line 5 from line 4 6

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

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Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2010	(c) 2010	(d) 2011
1 Distributable amount for 2011 from Part XI,				25,461.
2 Undistributed income, if any, as of the end of 2011				23,401.
a Enter amount for 2010 only			0.	
b Total for prior years 20 , 20 , 20		0.		
3 Excess distributions carryover, if any, to 2011		<u> </u>		
a From 2006 25,870.				
b From 2007 6, 405.				
c From 2008 15,500.				
d From 2009				
e From 2010 3, 335.				
f Total of lines 3a through e	51,110.			
4 Qualifying distributions for 2011 from Part	01,220.			
XII, line 4 ► \$ 10,950.				
a Applied to 2010, but not more than line 2a			0.	
b Applied to undistributed income of prior years		_		
(Election required – see instructions)		0.		
c Treated as distributions out of corpus (Election required – see instructions)	0.			·
d Applied to 2011 distributable amount				10,950.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2011	14,511.			14,511.
(If an amount appears in column (d), the same amount must be shown in column (a))				
,,,				
6 Enter the net total of each column as				
indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	36,599.			
b Prior years' undistributed income Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistribut-				
ed income for which a notice of deficiency has been issued, or on which the section				
4942(a) tax has been previously assessed		0.[
d Subtract line 6c from line 6b Taxable				
amount — see instructions		0.		
e Undistributed income for 2010 Subtract line 4a from			0.	
line 2a Taxable amount — see instructions				<u></u>
f Undistributed income for 2011 Subtract lines				
4d and 5 from line 1. This amount must be distributed in 2012.				0.
7 Amounts treated as distributions out of				<u> </u>
corpus to satisfy requirements imposed				
by section 170(b)(1)(F) or 4942(g)(3) (see instructions)	0.			
, ,				
8 Excess distributions carryover from 2006 not applied on line 5 or line 7 (see instructions)	11,359.			
9 Excess distributions carryover to 2012.	25 240			
Subtract lines 7 and 8 from line 6a 10 Analysis of line 9	25,240.			
a Excess from 2007 6, 405.				
b Excess from 2008 15,500.				
c Excess from 2009				
d Excess from 2010 3, 335.				
e Excess from 2011				
C LACESS HOLLI ZOTT		L		F 000 PF (0011)

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Part XIV						N/A
1 a If the is eff	e foundation has received a ruling or of ective for 2011, enter the date of the	letermination letter ruling	that it is a private of	operating foundation	n, and the ruling	
b Chec	k box to indicate whether the foundat	ion is a private ope	rating foundation d	escribed in section	4942(j)(3) or	4942(j)(5)
2a Enter	r the lesser of the adjusted net	Tax year		Prior 3 years		
inves	ne from Part I or the minimum stment return from Part X for year listed	(a) 2011	(b) 2010	(c) 2009	(d) 2008	(e) Total
	of line 2a					
line 4	ifying distributions from Part XII, 1 for each year listed					
for act	nts included in line 2c not used directly live conduct of exempt activities					
for a Subtr	fying distributions made directly clive conduct of exempt activities ract line 2d from line 2c					
3 Comp alterr	plete 3a, b, or c for the native test relied upon					
a -'Asse	ets'-alternative test — enter - — ——		. — -—			
٠,	/alue of all assets					
S	/alue of assets qualifying under ection 4942(j)(3)(B)(i)					
minim	vment' alternative test — enter 2/3 of um investment return shown in Part X, for each year listed					
c 'Supp	port' alternative test — enter:					
ir d o	otal support other than gross hestment income (interest, lividends, rents, payments in securities loans (section 12(a)(5)), or royalties)					
n	upport from general public and 5 or nore exempt organizations as provided n section 4942(j)(3)(B)(III)					
(3) L	argest amount of support from n exempt organization					
	cross investment income	(0)				
Part XV	Supplementary Information assets at any time during the	(Complete this e vear — see in	part only if the (organization ha	id \$5,000 or mor	e in
1 Infor	mation Regarding Foundation Manag		30.00.01.5.7			
a List a	iny managers of the foundation who hor of any tax year (but only if they have	ave contributed mo	ore than 2% of the than \$5,000) (See	otal contributions re section 507(d)(2))	eceived by the found	dation before the
b List a a par NON	ny managers of the foundation who c tnership or other entity) of which the E	own 10% or more o foundation has a 10	f the stock of a corp 0% or greater intere	poration (or an equalist	ally large portion of	the ownership of
Checi reque	mation Regarding Contribution, Gran k here if the foundation only mests for funds. If the foundation makes lete items 2a, b, c, and d	nakes contributions	to preselected char	ritable organizations	s and does not acce	pt unsolicited er conditions,
a The r	name, address, and telephone numbe	r of the person to v	vhom applications s	hould be addressed	d	
	STATEMENT 10					
b The f	orm in which applications should be s	submitted and infori	mation and material	ls they should inclu	de	
SEE	STATEMENT FOR LINE 2A					
	submission deadlines			- n. M.L.	,,,,,,	
SEE	STATEMENT FOR LINE 2A					
	estrictions or limitations on awards, s	uch as by geograph	nical areas, charitat	ole fields, kinds of i	nstitutions, or other	factors
SEE	STATEMENT FOR LINE 2A					
D. 4.4					·	

Part XV Supplementary Information (co				
3 Grants and Contributions Paid During the Ye	ar or Approved for Fut	ure Paymer	ıt	
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	substantial contributor	recipient	Contribution	
a Paid during the year SEE STATEMENT 11				
Total		1	► 3a	8,850.
b Approved for future payment				
Total			► 3b	

Part XVI-A Analysis of Income-Producing Activities

r gross amounts unless otherwise indicated		business income	- 	section 512, 513, or 514	(e)
_	(a) Business code	(b) Amount	(c) Exclu- sion	(d) Amount	Related or exemple function income (See instructions
Program service revenue			code		
			 		
			+		
					
Fees and contracts from government agencies					
-	 				
Membership dues and assessments Interest on savings and temporary cash investments			+ +	-	
Dividends and interest from securities	-		 		
Net rental income or (loss) from real estate	<u> </u>		1,		
Debt-financed property					<u> </u>
Not debt-financed property	 		+		
Net rental income or (loss) from personal property		,			
Other investment income			14	40,732.	
Gain or (loss) from sales of assets other than inventory	-		+ +	30,132.	
Net income or (loss) from special events.			+ + +		
Gross profit or (loss) from sales of inventory			+		
Other revenue			 	,	
			+		
			1		
			1		
			+ -		
			1 1		
				40.732.	
Subtotal Add columns (b), (d), and (e)	٠			40,732.	40.7
	itions)			40,732.	40,7
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcula		hment of Evon		13 _	40,7
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcula XVI-B Relationship of Activities to the	ne Accomplis		pt Purpose	13 __	
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcula XVI-B Relationship of Activities to the	ne Accomplis		pt Purpose	13 __	
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcula XVI-B Relationship of Activities to the complex of the foundation's exempton accomplishment of the foundation's exempton in the complex of the foundation's exempton in the complex of the foundation's exempton in the complex of the foundation's exempton in the complex of the foundation's exempton in the complex of the foundation's exempton in the complex of th	ne Accomplis		pt Purpose	13 __	
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcula XVI-B Relationship of Activities to the No. Explain below how each activity for which accomplishment of the foundation's exemption.	ne Accomplis		pt Purpose	13 __	40,7
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcula XVI-B Relationship of Activities to the complex of the foundation's exempton accomplishment of the foundation's exempton in the complex of the foundation's exempton in the complex of the foundation's exempton in the complex of the foundation's exempton in the complex of the foundation's exempton in the complex of the foundation's exempton in the complex of th	ne Accomplis		pt Purpose	13 __	
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcula XVI-B Relationship of Activities to the second complete means the second columns.	ne Accomplis		pt Purpose	13 __	
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcula XVI-B Relationship of Activities to the second complete means the second columns.	ne Accomplis		pt Purpose	13 __	
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcula XVI-B Relationship of Activities to the second complete means the second columns.	ne Accomplis		pt Purpose	13 __	
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcula XVI-B Relationship of Activities to the second complete means the second columns.	ne Accomplis		pt Purpose	13 __	
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcula XVI-B Relationship of Activities to the second complete means the second columns.	ne Accomplis		pt Purpose	13 __	
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcula XVI-B Relationship of Activities to the second complete means the second columns.	ne Accomplis		pt Purpose	13 __	
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcula XVI-B Relationship of Activities to the second complete means the second columns.	ne Accomplis		pt Purpose	13 __	
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcula XVI-B Relationship of Activities to the second complete means the second columns.	ne Accomplis		pt Purpose	13 __	
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Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcula XVI-B Relationship of Activities to the second complete means the second columns.	ne Accomplis		pt Purpose	13 __	
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcula XVI-B Relationship of Activities to the second complete means the second columns.	ne Accomplis		pt Purpose	13 __	
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcula XVI-B Relationship of Activities to the second complete means the second columns.	ne Accomplis		pt Purpose	13 __	
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcula XVI-B Relationship of Activities to the second complete means the second columns.	ne Accomplis		pt Purpose	13 __	
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcula XVI-B Relationship of Activities to the complex of the foundation's exempton accomplishment of the foundation's exempton in the complex of the foundation's exempton in the complex of the foundation's exempton in the complex of the foundation's exempton in the complex of the foundation's exempton in the complex of the foundation's exempton in the complex of th	ne Accomplis		pt Purpose	13 __	
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Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcula XVI-B Relationship of Activities to the No. Explain below how each activity for which accomplishment of the foundation's exemption.	ne Accomplis		pt Purpose	13 __	
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcula XVI-B Relationship of Activities to the	ne Accomplis		pt Purpose	13 __	
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calcula XVI-B Relationship of Activities to the No. Explain below how each activity for which accomplishment of the foundation's exemption.	ne Accomplis		pt Purpose	13 __	

Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

							1	Yes	No
1 Did	the organization directly	or indirectly engag	e in any of the following wi	th any oth	ner organization	1		163	110
desc rela	cribed in section 501(c) ting to political organiza	of the Code (other t itions?	han section 501(c)(3) orga	nizations)	or in section 5	2/,			
a Trar	sfers from the reporting	g foundation to a no	ncharitable exempt organiz	ation of					
(1)	Cash						1 a (1)		X
(2)	Other assets						1 a (2)		X
b Othe	er transactions								
(1)	Sales of assets to a nor	ncharitable exempt o	organization				1 b (1)		X
(2)	Purchases of assets fro	m a noncharitable e	xempt organization				1 b (2)	$\sqcup \sqcup$	X
(3)	Rental of facilities, equi	pment, or other ass	ets				1 b (3)		X
	Reimbursement arrange						1 b (4)		X
• •	Loans or loan guarantee						1 b (5)		X
• •		•	fundraising solicitations	•			1 b (6)	ļ	X
c Sha	ring of facilities, equipm	ient, mailing lists, of	ther assets, or paid employ	ees -			1c	-	<u>X -</u>
the	goods, other assets, or	services given by th	olete the following schedule e reporting foundation. If the n column (d) the value of t	he founda	tion received le	ess than fair marke	et value in	ue of	
(a) Line no	T		haritable exempt organization		•	fers, transactions, and		ngement	is .
A/N		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		1	·				
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		<u> </u>		-L					
2a ls th	ne foundation directly or cribed in section 501(c)	indirectly affiliated of the Code (other t	with, or related to, one or r han section 501(c)(3)) or ir	nore tax-e	exempt organız 527?	ations	∏Yes	X	No
	es, complete the follow		555(16) (5) (5) (5)						
	(a) Name of organizat		(b) Type of organization	1	(c)	Description of rel	ationship		
N/A					······································				
			·····		·				
Ur	nder penalties of perjury, I decla	ire that I have examined the of preparer (other than to	is return, including accompanying so xpayer) is based on all information	chedules and	statements, and to	the best of my knowledg	e and belief, i	t is true,	
Sign (*	1		oo p. o.	_	-	May the I	IRS disci	uss
lere	X Vine of V	Meno -	- 13-6-201	3 1	uscil to		this return preparer	shown b	pelow
	Signature of difficer or trustee		Date	- Fitt	le Stant		- (see instr	ructions)	No No
	Point Type preparer's na	ime	Preparer's signature		Date	Check if	PTIN		
Paid	MAMES R VAR	GA CPA	JAMES R VARGA C	PA	2/27/13	self-employed	P00045	5991	
repare		JAMES R. VARG			·		180953		
Jse On	" -		COX DRIVE						
, 30 Oil			AZ 85635-2533	***		Phone no 520-	459-100	00	
BAA	·					· · · · · ·	Form 99		(2011)

2011	FEDERAL STATEMENTS	PAGE 1
CLIENT 58960 HEA	LTHCARE INNOVATIONS FOUNDATION, INC	86-067442
2/27/13		03 46P
STATEMENT 1 FORM 990-PF, PART I, LINE 11 OTHER INCOME		
		(C) JUSTED INCOME
OTHER INVESTMENT INCOME	TOTAL \$ 40,732.\$ 40,732.\$ \$ 40,732.\$ 40,732.\$	0.
STATEMENT 2 FORM 990-PF, PART I, LINE 16B ACCOUNTING FEES		
		(D) HARITABLE PURPOSES
	TOTAL $\frac{\$}{\$}$ $\frac{4,800}{\$,800}$ $\frac{\$}{\$}$ $\frac{4,800}{\$,800}$ $\frac{\$}{\$}$ 0.	0.
STATEMENT 3 FORM 990-PF, PART I, LINE 16C OTHER PROFESSIONAL FEES		
		(D) HARITABLE PURPOSES
MANAGEMENT FEES OTHER PROFESSIONAL FEES	$\begin{array}{cccccccccccccccccccccccccccccccccccc$	0.
STATEMENT 4 FORM 990-PF, PART I, LINE 18 TAXES		
		(D) HARITABLE PURPOSES
EXCISE TAX	TOTAL \$ 300. \$ 300. \$ 0. \$	0.

		**	-	
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-,			-	

FEDERAL STATEMENTS

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CLIENT 58960

HEALTHCARE INNOVATIONS FOUNDATION, INC

86-0674421

03 46PM

2/27/13

STATEMENT 5 FORM 990-PF, PART I, LINE 23 OTHER EXPENSES

	 (A) XPENSES ER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ADVERTISING & PROMOTION GENERAL & ADMINISTRATIVE TRAINING & EDUCATION PROGRAMS	\$ 1,750. 329. 2,100.	\$ 1,750. 329.		\$ 2,100.
TOTAL	\$ 4,179.	\$ 2,079.	\$ 0.	\$ 2,100.

STATEMENT 6 FORM 990-PF, PART II, LINE 14 LAND, BUILDINGS, AND EQUIPMENT

CATEGORY	 BASIS		ACCUM. DEPREC.		BOOK VALUE	F	AIR MARKET VALUE
MACHINERY AND EQUIPMENT TOTAL	\$ 72,195. 72,195.	\$ \$	34,975. 34,975.	\$ \$	37,220. 37,220.	\$ \$	37,220. 37,220.

STATEMENT 7 FORM 990-PF, PART II, LINE 15 OTHER ASSETS

		BOOK VALUE	FAIR MARKETVALUE
DEFERRED COMP PLAN ASSET	TOTAL	\$ 101,009. \$ 101,009.	\$ 101,009. \$ 101,009.

STATEMENT 8 FORM 990-PF, PART II, LINE 22 OTHER LIABILITIES

DEFERRED COMP PLAN LIABILITY ROUNDING

\$ 101,009. 1.

TOTAL \$ 101,010.

2011

FEDERAL STATEMENTS

CLIENT 58960

HEALTHCARE INNOVATIONS FOUNDATION, INC

86-0674421

2/27/13

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STATEMENT 9 FORM 990-PF, PART VIII, LINE 1 LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED		CONTRI- BUTION TO _EBP & DC	ACCOUNT/
MICHAEL R GRAY P. O. BOX 2050 BENSON, AZ 85602	DIRECTOR 5.00	\$ 0	0. \$ 0.	\$ 550.
JAMES W. BROOME 7900 S. AVENIDA DE PINA TUCSON, AZ 85747	EXECUTIVE DIREC 5.00	0	0.	550.
FRED SHAHEEN 735 SI TENGO DRIVE BENSON, AZ 85602	CHAIRMAN 5.00	0	0.	550.
JERRY FINK P. O. BOX 969 BENSON, AZ 85602	SECRETARY 5.00	0	. 0.	550.
MICHAEL MONTROY P. O. BOX 393 BENSON, AZ 85602	TREASURER 5.00	0	. 0.	550.
	TOTAL	\$ 0	. \$ 0.	\$ 2,750.

STATEMENT 10 FORM 990-PF, PART XV, LINE 2A-D **APPLICATION SUBMISSION INFORMATION**

NAME OF GRANT PROGRAM:

NONE

NAME:

HEALTHCARE INNOVATION FOUNDATION, INC.

CARE OF:

BOARD OF DIRECTORS

STREET ADDRESS:

P. O. BOX 1348

CITY, STATE, ZIP CODE:

BENSON, AZ 85602

TELEPHONE:

FORM AND CONTENT:

THERE IS NO SET APPLICATION FORM. WE ASK THEY SUBMIT A WRITTEN REQUEST STATING WHAT THEY ARE SEEKING, THE USE

AND THE FINANCIAL NEED.

SUBMISSION DEADLINES:

NO SUBMISSION DEADLINE EXCEPT FOR SCHOLARSHIPS, APRIL 30TH

THE AWARDS ARE NORMALLY GEOGRAPHICALLY RESTRICTED TO RESTRICTIONS ON AWARDS:

SOUTHEASTERN ARIZONA.

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FEDERAL STATEMENTS

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CLIENT 58960

HEALTHCARE INNOVATIONS FOUNDATION, INC

86-0674421

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STATEMENT 11 FORM 990-PF, PART XV, LINE 3A RECIPIENT PAID DURING THE YEAR

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	AMOUNT
GATEWAY COMMUNITY COLLEGE 108 N 40TH ST PHOENIX, AZ 85034	NONE		SCHOLARSHIP	\$ 500.
NEW MEXICO STATE UNIVERSITY 2850 WEDDELL ST LAS CRUCES, NM 88003	NONE	-	SCHOLARSHIP	500.
NORTHERN ARIZONA UNIVERSITY 601 S KNOLES DR FLAGSTAFF, AZ 86011	NONE		SCHOLARSHIP	500.
PIMA COMMUNITY COLLEGE 4905 E BROADWAY BLVD TUCSON, AZ 85709	NONE		SCHOLARSHIP	500.
CITY OF WILLCOX 101 SOUTH RAILROAD AVE, STE B WILLCOX, AZ 85643	NONE		ANNUAL FIREWORKS	50.
SOUTH MOUNTAIN COMMUNITY COLLEGE 7050 S 24TH ST PHOENIX, AZ 85042	NONE		SCHOLARSHIP	1,000.
SAN PEDRO FAMILY RESOURCE COUNCIL 500 E 4TH ST BENSON, AZ 85602	NONE		SCHOOL FAIR	250.
WILLCOX POLICE DEPARTMENT 320 W REX ALLEN DR WILLCOX, AZ 85643	NONE		BIKE RODEO	250.
AZ BENSON'S JUNIORS PO BOX 245 BENSON, AZ 85602	NONE		FOOD BASKET	2,500.
BENSON FIREMATES PO BOX 2485 BENSON, AZ 85602	NONE		COMMUNITY EASTER EGG HUNT	100.
BENSON GRADUATION PARTY 428 POMERENE RD BENSON, AZ 85602	NONE		AFTER GRADUATION PARTY FOR LOCAL CHILDREN	500.
GIRL SCOUT TROOP 1224 BENSON, AZ	NONE		COOKIES FOR TROOPS	500.

2011

FEDERAL STATEMENTS

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CLIENT 58960

HEALTHCARE INNOVATIONS FOUNDATION, INC

86-0674421

2/27/13

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STATEMENT 11 (CONTINUED) FORM 990-PF, PART XV, LINE 3A RECIPIENT PAID DURING THE YEAR

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	AMOU	NT
HARVEST CHRISTIAN ACADEMY 3107 ARIZONA 83 SONOITA, AZ 85637	NONE		TUITION ASSISTANCE	\$	500.
LOREE MCCLUER	NONE		-FORMER EMPLOYEE MEMORIAL		500.
PEYTON NIKOLAUS #11487842 3051 S WHITE MOUNTAIN RD #A SHOW LOW , AZ 85901	NONE		BENEFIT FOR CHILD WITH SEVERE MEDICAL PROBLEMS		500.
SALBAR SHRINE CIRCUS 450 S TUCSON BLVD TUCSON, AZ 85716	NONE		CHILDREN TICKETS		100.
THE HEARTH FOUNDATION 219 W KING RD TUCSON, AZ 85705	NONE		BACK TO SCHOOL CAMPAIGN		100.
			TOTAL	\$ 8	,850.