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Form 990-EZ

## Short Form 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)

Sponsoring organizations of donor advised funds, organizations that operate one or more hospital facilities and certain controlling organizations as defined in section 512(b)(13) must file Form 990 (see instructions).

All other organizations with gross receipts less than \$200,000 and total assets less than \$500,000
at the end of the year may use this form

Open to Public

OMB No. 1545-1150

2012

		the Treasury nue Service	at the end of the year may use this form.  ▶ The organization may have to use a copy of this return to satisfy state reporting requi	rements.		inoposito!!	
Ā	For the 2012 calendar year, or tax year beginning , 2012, and ending					, 20	
_	Check if ap		C Name of organization	D Empl	oyer id	entification number	
	Address cl	hange		2	7-0579229		
	Name cha	nge	Number and street (or P.O. box, if mail is not delivered to street address) Room/suite	E Telep	elephone number		
~=	Initial retur		208 West 14th Street		512-413-5669		
=	Terminated Amended		City or town, state or country, and ZIP + 4	F Grou	ір Ехе	mption	
=	Amendeo		Austin, TX, 78701-1615		iber I	•	
==-		ing Method.	☑ Cash ☐ Accrual Other (specify) ► H	Check J	<b>▼</b> []	if the organization is not	
	Websit	•	TAFEC.org			ach Schedule B	
			eck only one) — ☐ 501(c)(3)			0-EZ, or 990-PF).	
K	Check ▶	· I if the	e organization is not a section 509(a)(3) supporting organization or a section 527 organizati	on and it	s aros	s receipts are normally	
			0. A Form 990-EZ or Form 990 return is not required though Form 990-N (e-postcard) ma				
			oses to file a return, be sure to file a complete return			•	
L	Add lines	5b, 6c, and 7	b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total asset	s (Part II,			
fi	ne 25, co	olumn (B) belo	w) are \$500,000 or more, file Form 990 instead of Form 990-EZ		▶ \$	40,400.00	
Р	art I	Revenu	e, Expenses, and Changes in Net Assets or Fund Balances (see the	instruc	tions	for Part I)	
			the organization used Schedule O to respond to any question in this Part I				
_	1		ons, gifts, grants, and similar amounts received		1	0.00	
	2		ervice revenue including government fees and contracts		2	0 00	
	3	•	ip dues and assessments		3	40,400.00	
	4	Investment	•		4	0.00	
	5a	Gross amo	ount from sale of assets other than inventory   5a	0.00			
	ь	Less: cost	or other basis and sales expenses	0.00			
	С		ss) from sale of assets other than inventory (Subtract line 5b from line 5a)		5c	0.00	
	6	Gaming an	nd fundraising events				
	а	Gross inc	ome from gaming (attach Schedule G if greater than				
e	1	\$15,000)	6a	0 00			
Revenue	b	Gross inco	me from fundraising events (not including \$ of contribution	าร			
æ		from fundr	raising events reported on line 1) (attach Schedule G if the				
_	1	sum of suc	ch gross income and contributions exceeds \$15,000)   6b	0.00			
	C	Less: direc	ct expenses from gaming and fundraising events 6c	0.00			
	d	Net incom	e or (loss) from gaming and fundraising events (add lines 6a and 6b and su	btract	ļ		
		line 6c) .	S. C.		6d	0 00	
	7a	Gross sale	s of inventory less returns and allowances 7a	0.00			
	b		of goods sold	0.00			
	С	Gross prof	it or (loss) from sales of the entory (Subtract line 76 from line 7a)		7c	0.00	
	8	Other reve	nue (describe in Schedule O)		8	0.00	
	9		nue (describe in Schedule 0)	. 🕨	9	40,400.00	
	10		similar amounts paid (list in Schedule O)		10	0.00	
	11		aid to or for members		11	0.00	
es	12	Salaries, o	ther compensation, and employee benefits		12	0.00	
Expenses	13	Profession	ther compensation, and employee benefits		13	45,000.00	
ğ	. 14	Occupanc	y, rent, dunities, and maintenance		14	0.00	
Щ	15	Printing, p	ublications, postage, and shipping		15	0 00	
	16	Other expe		16	0.00		
	17	Total expe	enses. Add lines 10 through 16	. ▶	17	45,000.00	
Ş	18	Excess or	(deficit) for the year (Subtract line 17 from line 9)		18_	(4,600.00)	
Set	19		s or fund balances at beginning of year (from line 27, column (A)) (must agree	e with			
As		-	ar figure reported on prior year's return)		19	4,677.08	
Net Assets	20		nges in net assets or fund balances (explain in Schedule O)		20	0 00	
_	21		or fund balances at end of year. Combine lines 18 through 20	<u>. ▶</u>	21	77.08	
Fo	r Papen	work Reduct	tion Act Notice, see the separate instructions. Cat No. 10642			Form <b>990-EZ</b> (2012)	

Cat. No. 10642I

For Paperwork Reduction Act Notice, see the separate instructions.

Pa	rt II Balance Sheets (see the instruction		- <del> </del>			-
	Check if the organization used Schedu	ule O to respond to a	ny question in this	Part II	<u> </u>	<u></u>
				(A) Beginning of year		(B) End of year
22	Cash, savings, and investments		[	4,677 08		77.08
23	Land and buildings		[	0 00		0.00
24	Other assets (describe in Schedule O)		[	0.00	24	0.00
25	Total assets		[	4,677 08	25	77.08
26	Total liabilities (describe in Schedule O) .		[	0.00	26	0.00
27	Net assets or fund balances (line 27 of colur	nn (B) <b>must</b> agree wit	h line 21)	4,677 08	27	77.08
Par	t III Statement of Program Service Acco	mplishments (see the	ne instructions for l	Part III)		Expenses
	Check if the organization used Schedu				(Rea	uired for section
Wha	t is the organization's primary exempt purpose?	Support,conduct edu	cational activities & ad	vocacy for industry.	501(	c)(3) and 501(c)(4)
as n	cribe the organization's program service accompleasured by expenses. In a clear and concise ons benefited, and other relevant information for	manner, describe th			4947	nizations and section (a)(1) trusts; optional thers.)
28						
	(Grants \$ ) If this amou	int includes foreign gr	ants, check here .	▶ 🗆	28a	0.00
29						
		·				
	(Grants \$ ) If this amou	int includes foreign gr	ants, check here .	<u> ▶ 🛛 </u>	29a	0 00
30						
		int includes foreign gr	ants, check here .	▶ 🛛	30a	0.00
31	Other program services (describe in Schedule C	· =				i
	(Grants \$ ) If this amou	int includes foreign gra	ants, check here .	▶ 🗆	31a	<del></del>
_	Total program service expenses (add lines 28				32	0.00
Par	List of Officers, Directors, Trustees, and N				struct	tions for Part IV)
	Check if the organization used Schedu	ule O to respond to a			<del></del>	<u> </u>
	(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC (if not paid, enter -0-)	(d) Health benefits, contributions to employe ) benefit plans, and deferred compensation	0	Estimated amount of their compensation
	da S Sandel, RN, 13611 Skinner Rd., #280	Director			1	
	ess, TX, 77429		(	)	0	0
Micha	ael R. Cantu, MD, 13611 Skinner Rd , #280	Director	}		1	
	ess, TX, 77429			)	0	0
Shan	non M. Orsak, MD, 13611 Skinner Rd., #280	Director			ł	
Cypro	ess, TX, 77429		(	P	<u> </u>	0
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Part				
	instructions for Part V) Check if the organization used Schedule O to respond to any question in this	Part	٧.	. 🗆
			Yes	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O	33		1
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed			
	copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the			١.
35a	change on Schedule O (see instructions)	34	ļ	<b>✓</b>
33a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a		1
b	If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O	35b		
С	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35c	<	
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36		1
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 37a 0 00			_
b	Did the organization file Form 1120-POL for this year?	37b		1
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were			
	any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	38a		✓
b	If "Yes," complete Schedule L, Part II and enter the total amount involved 38b			
39	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on line 9			
b	Gross receipts, included on line 9, for public use of club facilities			
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ ; section 4912 ▶ ; section 4955 ▶			
b	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit	Ì		
	transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		
С	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on			
	organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			
đ	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization			
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e		1
41	List the states with which a copy of this return is filed ▶ none		L	•
42a	The organization's books are in care of ▶ Bradford T. Shields, II Telephone no. ▶ 5	512-41	3-5669	9
		78701	-1615	
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over		Yes	No
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b		✓
	If "Yes," enter the name of the foreign country: ► See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank			
	and Financial Accounts.			
С	At any time during the calendar year, did the organization maintain an office outside the U.S.?	42c		<u>√</u>
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here		. >	<b></b>
	and enter the amount of tax-exempt interest received or accrued during the tax year		Vas	No
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be	$\overline{}$	Yes	No
	completed instead of Form 990-EZ	44a		✓
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44b		✓
C	Did the organization receive any payments for indoor tanning services during the year?	44c		1
d	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schodule O.			
45-	explanation in Schedule O	44d		
45a 45b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a		<u>√</u>
40D	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," Form 990 and Schedule R may need to be completed instead of			
	Form 990-EZ (see instructions)	45b	ł	✓

romi 98	00-EZ (2012)						age 4
46	Did the organization engage, directly or it to candidates for public office? If "Yes,"					Yes	No
Part		s only				or line	es
	Check if the organization used So	hedule O to respond	I to any question in t	his Part VI		· ·	. 🗆
47	Did the organization engage in lobbying year? If "Yes," complete Schedule C, Pai		section 501(h) electio	n in effect during t		Yes	No
48	Is the organization a school as described i	n section 170(b)(1)(A)(i					
49a b	Did the organization make any transfers to if "Yes," was the related organization a si			zation?	49a	+	
50	Complete this table for the organization's	s five highest comper	sated employees (oth		ectors, truste	es an	
	employees) who each received more that  (a) Name and title of each employee paid more than \$100,000	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	(d) Health benefits, contributions to employ benefit plans, and defer compensation	/ee (e) Estimate	ed amoi	unt of
f 51	Total number of other employees paid of Complete this table for the organization \$100,000 of compensation from the organization	's five highest compo		contractors who e	ach received	more	than
(a)	Name and address of each independent contractor pa	aid more than \$100,000	(b) Type of serv	ice	(c) Compensat	ion	
	··						
d 52	Total number of other independent contribution of the organization complete Schedule nonexempt charitable trusts must attach	A? <b>Note</b> : All section 5	01(c)(3) organizations	and 4947(a)(1)	. ▶ ∏ Yes		No
	enalties of penus, t declare that her examined this rect, and complete Declaration of preserve (other than	return, including accompan	ying schedules and stateme				
Sign	Significant of officer Chief	<u> </u>	itic Directiv	Date 2	-10-1	1	
Here	Type or print name and title	ا الم	THE DIFFER				
Paid Prep	. In . / Protectional Account	Preparer's signature	Da /.	2/9/2014 Check self-en	nployed P0	169520	)5
Use	Firm's address ► Austin, TX, 78715-129	93		Firm's EIN ▶ Phone no.	87-073 512-358		
May th	ne IRS discuss this return with the prepare	r shown above? See	nstructions		► □ Yes	: 🗆 1	No

## SCHEDULE C (Form 990 or 990-EZ)

## **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

Open to Public Inspection

Department of the Treasury Internal Revenue Service

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- 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 Part II-A.

	=	," to Form 990, Part IV, line 5 (Proxy	Tax) or Form 990-E	Z, Part V, line 35c (Proxy T	ax), then
	ection 501(c)(4), (5), or (6) orga of organization	inizations: Complete Part III.		Employer ider	ntification number
	Association of Freestanding E	-mergency Centers		1	27-0579229
Part		e organization is exempt und	er section 501/		
1		the organization's direct and indire			Jiganization.
2	•		•	•	
3	Volunteer hours				
•	Volumedi modio i				
Part	-B Complete if the	e organization is exempt und	er section 501(c	c)(3).	<del></del>
1		excise tax incurred by the organiza			<u> </u>
2	<u>-</u>	excise tax incurred by organization			<del></del>
3		ed a section 4955 tax, did it file For			Yes No
4a	_		•		Yes No
b	If "Yes," describe in Part				
Part		e organization is exempt und			(c)(3).
1	Enter the amount direct	ly expended by the filing organiz	ation for section	527 exempt function	
				•	
2		filing organization's funds contrib	_		
	•	vities		•	
3	•	expenditures. Add lines 1 and 2.			
	line 17b			•	· <del></del>
4	- ·	n file Form 1120-POL for this year			Yes No
5		ses and employer identification nur			
		ents. For each organization listed,			
		ontributions received that were pro-			
	as a separate segregated	fund or a political action committe	e (PAC). If additio	nai space is needed, prov	ide information in Part IV.
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
				filing organization's funds. If none, enter -0	contributions received and promptly and directly
					delivered to a separate
					political organization. If none, enter -0
(1)					
(2)		}			
				<del></del>	
(3)		<b></b>			
(4)		}			
<i>(</i> 5)	<del></del>				
(5)					ĺ
(6)					
10)		r	1	1	I .

	rt II-A Complete if the organization section 501(h)).	•			·			
A Check ▶ ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member)								
	name, address, EIN, expenses, and share of excess lobbying expenditures).							
В	Check ► ☐ if the filing organization check			rol" provisions	7 7			
	Limits on Lobby (The term "expenditures" mea	(a) Filing organization's totals	(b) Affiliated group totals					
1	a Total lobbying expenditures to influence p	ublic opinio	n (grass roots lobby	ıng)				
	<ul> <li>Total lobbying expenditures to influence a</li> </ul>	legislative b	ody (direct lobbying	9)				
	c Total lobbying expenditures (add lines 1a	and 1b) .						
	d Other exempt purpose expenditures							
	<ul> <li>Total exempt purpose expenditures (add I</li> </ul>							
	f Lobbying nontaxable amount. Enter the columns.	e amount	from the following	table in both				
	If the amount on line 1e, column (a) or (b) is:	The lobbying	g nontaxable amoun	t is:				
	Not over \$500,000	20% of the a	mount on line 1e.					
	Over \$500,000 but not over \$1,000,000	\$100,000 plu	is 15% of the excess	over \$500,000.				
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plu	is 10% of the excess	over \$1,000,000.				
	Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000.							
	Over \$17,000,000	\$1,000,000.						
	g Grassroots nontaxable amount (enter 25%)	of line 1f)						
	h Subtract line 1g from line 1a. If zero or les	s, enter -0-						
	i Subtract line 1f from line 1c. If zero or less							
	j If there is an amount other than zero or reporting section 4911 tax for this year?					Yes No		
	4-Yea (Some organizations that mad columns below. So	e a section		not have to com		•		
	Lobbying I	xpenditure	s During 4-Year Av	eraging Period				
	Calendar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	( <b>c</b> ) 2011	(d) 2012	(e) Total		
2	a Lobbying nontaxable 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							

	(election under section 501(h)).	1 (	۵۱	(b)		
	each "Yes," response to lines 1a through 1i below, provide in Part IV a detaile ription of the lobbying activity.	Yes	a) No	Aı	moun	t
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter referendum, through the use of:					
а	Volunteers?	.		]		
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
C	Media advertisements?					
ď	Mailings to members, legislators, or the public?	<del>}</del>	1			
е	Publications, or published or broadcast statements?	<del></del>	<u> </u>			
f	Grants to other organizations for lobbying purposes?		ļ			
g h	Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		<del></del>	<del> </del> -		
i	Other activities?			<del>                                     </del>		
i	Total. Add lines 1c through 1i			<b> </b>		
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?	.	ĺ			
b	If "Yes," enter the amount of any tax incurred under section 4912					
c d	If "Yes," enter the amount of any tax incurred by organization managers under section 4912 If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Part	III-A Complete if the organization is exempt under section 501(c)(4), section 50	1(c)(5),	or se	ction		•
	501(c)(6).					_
_					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1	<b>✓</b>	1
2 3	Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year'			3		1
	III-B Complete if the organization is exempt under section 501(c)(4), section 50					
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No, answered "Yes."				line	3, is
1	Dues, assessments and similar amounts from members		1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amou political expenses for which the section 527(f) tax was paid).					
а	Current year		2a			
b	Carryover from last year		2b			
C	Total		2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) due		3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion excess does the organization agree to carryover to the reasonable estimate of nondeductible to		,	:		
	and political expenditure next year?		4			
5	Taxable amount of lobbying and political expenditures (see instructions)		5			
Par						
	plete 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	I-A (af	filiated	grou	р
list); F	Part II-A, line 2; and Part II-B, line 1. Also, complete this part for any additional information.					
<b></b>						
<b></b>						

Schedule C (For	m 990 or 990-EZ) 2012	Page 4
Part IV	Supplemental Information (continued)	
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