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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

OMB No. 1545-0047 2012

Open to Public Inspection

benefit trust or private foundation) Department of the Treasury Internal Revenue Service ▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

<u>A</u>	For the	2012 cale	endar year, or tax year beginning July 1 , 2012, and ending	Jun	e 30	, 2 0 13
В	Check if	applicable.	C Name of organization Yuma's Education Schoalrship Fund for Kids, Inc.		D Employe	er identification number
	Address	change	Doing Business As			47-0896753
$\overline{\Box}$	Name ch	_	Number and street (or P O. box if mail is not delivered to street address) Room/suite	,	E Telephor	ne number
ī	Initial reti	-	4027 South Navel Avenue			(928) 314-0033
$\overline{\Box}$	Terminate		City, town or post office, state, and ZIP code			1000
\exists	Amended		Yuma, Arizona 85365		G Gross re	ceipts \$ 958,522
H		on pending	<u></u>	Life) in the a		for affiliates? Yes No
ب	Application	on periong	1			cluded? Yes No
_			4027 \$ Navel Avenue, Yuma, Az 85365			list. (see instructions)
<u> </u>		npt status:	✓ 501(c)(3)	-		•
_	Website:		w.yesfundforkids.org			number >
			Corporation ☐ Trust ☐ Association ☐ Other ► L Year of formation	n 2003	M State	of legal domicile: AZ
P	art I	Summ				
	1		escribe the organization's mission or most significant activities: To imple			
.	ľ		ax Credit. We are dedicated to increasing the opportunity for "School Choice	to familie	s by using	g tax dollars to fund
Ĕ		tuition by	y means of scholarships.			
Activities & Governance	_					
Š	I .		nis box ▶☐ If the organization discontinued its operations or disposed of		1 1	its net assets.
8	l .		of voting members of the governing body (Part VI, line 1a)		3	<u>6</u>
9			of independent voting members of the governing body (Part VI, line 1b)		4	0
Ξ	5	Total nur	mber of individuals employed in calendar year 2012 (Part V, line 2a) .		5	0
Ş	•		mber of volunteers (estimate if necessary)		6	0
•	7a	Total unr	related business revenue from Part VIII, column (C), line 12		7a	0
	b	Net unre	lated business taxable income from Form 990-T, line 34	<u> </u>	7b	0
	İ		<u></u>	Prior Ye	ar	Current Year
Revenue	8	Contribu	ıtions and grants (Part VIII, line 1h)		685,589	958,380
	9	Program	n service revenue (Part VIII, line 2g)		0	0
Š	10	Investme	ent income (Part VIII, column (A), lines 3, 4, and 7d)		122	142
Œ	11	Other rev	venue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0	0
	12		renue-add lines 8 through 11 (must equal Part VIII, column (A), line 12)		685,711	958,522
	13	Grants a	nd similar amounts paid (Part IX, column (A), lines 1-3)		646,891	772,482
	14		paid to or for members (Part IX, column (A), line 4)		0	0
ø	15		other compensation, employee benefits (Part IX, column (A), lines 5-10)		0	0
Expenses	16a		onal fundraising fees (Part IX, column (A), (Ine 11e)		0	0
ğ	b		ndraising expenses (Part X Column (D), line 25)			<u> </u>
Щ	17		(penses (Part IX, column (A) lines 11a-11d, 11f (24e)		22,669	45,207
	18		penses. Add lines 13-17 (must equal Part) 3 column (A), line 25)		669,560	817,689
	19		e less expenses. Subtract line 18 from line 12		16,151	140,833
- 2	+	110101100	lion Be	ginning of Cu		End of Year
sets or	20	Total ass	sets (Part X, line 16)		201,095	341,929
88.8 10.0	21		sets (Part X, line 16) OGDEN.		186,023	0
Net As	22		ets or fund balances. Subtract line 21 from line 20		15,072	341,929
	art II		ture Block		13,012	341,323
			ury, I declare that I prave exampled this return, including accompanying schedules and statem	onte and to ti	ne heet of n	ny knowledge and belief it is
tru	e, correct	t, and comp	plete. Declaration of preparer tother than officer so based on all information of which preparer h	nas any knowl	edge.	ny lalowioogo allo bollot, it is
_	<u></u>	TX			500	1 25.2m3
Sig	n	Sign	nature of officer	Da	te G	7 9 9,000
He	-		Hopela K Poels- Hunt			
•••		Typ	e or print name and title			
-			ype preparer's name Preparer's signature Date	9	Τ	PTIN
Pa	iid	' ' ' ' '	New England of States of S	-	Check [self-emp	
Pr	epare			т		,~,~
Ųs	se Onl				's EiN ▶	······································
14	4la = 1 ^{pm}		address >	Pho	ne no.	[7] Van [7] Na
_			ss this return with the preparer shown above? (see instructions)	· · · ·	· · ·	
For	Paperv	vork Redu	uction Act Notice, see the separate instructions. Cat. No	11282Y		Form 990 (2012)

om 99	(2012) Page 2
Part l	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:
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
3	If "Yes," describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conducts, any program services?
4	If "Yes," describe these changes on Schedule O. 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 are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 817,689 including grants of \$ 772,482) (Revenue \$)
	Awarding scholarships to private school student applicants based on scholarship applications received. Scholarship awards were issued to the following private schools in Arizona: Calvary Baptist (Yuma), Christ Lutheran (Phoenix), Falth Community Academy (Tucson), Gethsemane Lutheran (Tempe), Hand in Hand (Yuma), Immaculate Conception (Yuma), Joy Christian (Glendale), Northwest Christian (Phoenix), Redeemer Christian (Mesa), Saint Francis (Yuma), Saint Jerome (Phoenix), Salpointe Catholic High (Tucson), San Francisco de Asis (Flagstaff), Seventh Day Adventist (Yuma), Southwestern Christian (Yuma), The Learning
	Pad (Yuma), Tri City Christian Academy (Chandler), Veritas Christian Community (Sierra Vista), Yuma Catholic High (Yuma), and Yuma Lutheran (Yuma).
4b	(Code:) (Expenses \$including grants of \$) (Revenue \$)
4c	(Code:) (Expenses \$including grants of \$) (Revenue \$)
4d	Other program services (Describe in Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses ► £817 689

Form **990** (2012)

Form 990 (2012)

Part	V 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	✓	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		1
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? If "Yes," complete Schedule C, Part II	4		1
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,	_		<u> </u>
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		✓
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, for escrow or custodial account liability; serve as a	<u> </u>		
	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		✓
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		✓
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		11c		,
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		1
	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		, ✓
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		1
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 and XII is optional.	12b		1
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		1
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		<i>*</i>
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		√
20 a		20a		1
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		1
			n 99 0	(2012)

	0 (2012)			Page 4
Part	Checklist of Required Schedules (continued)		· -	1
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	Yes	No
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		√
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		1
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		1
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, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26	1	1
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 A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		1
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		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part 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	-	1
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, Part II, III, or IV, and Part V, line 1	34		√
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a 35b		1
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		1
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? If "Yes," complete Schedule R,			
38	Part VI	37	y	✓
			990	(2012)

Part	_ ,			
	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	$\overline{}$	103	"
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b	1	, !	
C	Did the organization comply with backup withholding rules for reportable payments to vendors and	1 1		
	reportable gaming (gambling) winnings to prize winners?	1c		1
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		,	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b		✓
0-	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	1		١.
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		√
b 4a	If "Yes," has it filed a Form 990-T for this year? <i>If "No," provide an explanation in Schedule O</i> At any time during the calendar year, did the organization have an interest in, or a signature or other authority	3b		-
74	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		1
ь	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		✓
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		√
C	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 as charitable contributions?	6a		1
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	l da		<u> </u>
	gifts were not tax deductible?	6ь		1
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?	7b		
С	required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year	'		
е	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		<u> </u>
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.	-		
а	Did the organization make any taxable distributions under section 4966?	9a		1
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		1
10	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on Part VIII, line 12			
b 11	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . [10b] Section 501(c)(12) organizations. Enter:			ĺ
''a	Gross income from members or shareholders	1		
b	Gross income from other sources (Do not net amounts due or paid to other sources	1	.	
	against amounts due or received from them.)			ĺ
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
ь	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.	10-		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	\dashv	
b	Enter the amount of reserves the organization is required to maintain by the states in which			
-	the organization is licensed to issue qualified health plans			
c	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		1
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O .	14b		✓
		Form	1 990	(2012)

Part	Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and						
	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	ee ins	structi	ions.			
Secti	on A. Governing Body and Management	<u> </u>	<u> </u>	<u> </u>			
	on Al Good and Management		Yes	No			
1a	Enter the number of voting members of the governing body at the end of the tax year		1.00	1.00			
	If there are material differences in voting rights among members of the governing body, or	1					
	if the governing body delegated broad authority to an executive committee or similar		l				
	committee, explain in Schedule O.						
b	Enter the number of voting members included in line 1a, above, who are independent . 1b						
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	1]			
	any other officer, director, trustee, or key employee?	2		1			
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		✓			
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		√			
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		✓			
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		✓			
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			1			
_	stockholders, or persons other than the governing body?	7b		<u> </u>			
8	Did the organization contemporaneously document the meetings held or written actions undertaken during						
	the year by the following:	[]		ĺ			
a	The governing body?	8a	✓				
ь 9	Each committee with authority to act on behalf of the governing body?	8b		-			
J	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		,			
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reven		ode)	V			
	on Dividical (This decision B requests information about policies not required by the internal reven	uc O	Yes	No			
10a	Did the organization have local chapters, branches, or affiliates?	10a		1			
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,						
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b					
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	\				
b	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		✓			
ь	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise 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						
40		12c					
13	Did the organization have a written whistleblower policy?	13	_	✓			
14 15	Did the organization have a written document retention and destruction policy?	14	V				
10	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			ı			
а	The organization's CEO, Executive Director, or top management official	15a	1				
	Other officers or key employees of the organization	15b	-	1			
-	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			Ť			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	,					
	with a taxable entity during the year?	16a		1			
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its						
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the						
	organization's exempt status with respect to such arrangements?	16b					
	on C. Disclosure						
17	List the states with which a copy of this Form 990 is required to be filed Arizona Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section	- EN 17	-7/0/				
18	section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-1 (Section available for public inspection. Indicate how you made these available. Check all that apply.	1 501(ပ)(၁)s	only)			
	<u> </u>						
19	Own website Another's website Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict o	f into	not n	oliov			
	and financial statements available to the public during the tax year	mitel	εσι ρ	oncy,			
20	State the name, physical address, and telephone number of the person who possesses the books and records	of the					
	organization: ► Angela Hunt, 4027 S Navel Avenue, Yuma, AZ 85365 (928) 314-0033						

	(2012)	

Part VII	Compensation of Officers,	Directors, Trus	istees, Key E	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	anız	atıo	n c	ompe	nsa	ated any currer	t officer, directo	r, or trustee.
(A) Name and Title	(B) Average hours per week (list any	er officer and a director/trustee)						(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estrnated
	hours for related organizations below dotted line)	elated directions countries live live	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) Angela Poels-Hunt	30							:		
Executive Director	†	✓						28,076	o	0
(2) Todd Hirte	0									
Former President	Ţ	✓					ļ	0	0	0
(3) Rod Reed	0									
President		√	ļ]		0	0	o
(4) Rhoda Hernandez	0							1		
Vice President		✓						o	0	0
(5) Robin Laughlin	0	Ţ								
Secretary	1	_		H				0	0	0
(6) Tracy Waters	0	,			ŀ					
Board Member		/	<u> </u>		 -			0	0	0
(7)	 									
(8)	†								-	
(9)										
(10)	ļ					 			-	
(11)										
(12)										
(13)										
(14)										
	i	L								

Part	VII Section A. Officers, Directors, Trust	tees, Key E	mploy	/005	s, aı	nd F	lighe	st C	ompensated E	mployees (continu	ıed)		
	(A) Name and title	(B) Average hours per week (list any	box, ι	unles	Pos eck s pe	rson	than (is both	n an	(D) Reportable compensation from	(E) Reportable compensation from related		Estr	F) nated unt of her	
		hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizatio (W-2/1099-N	ons	compo fror organ and i		
(15)					-								_	
(16)												-		
						-		-			-			
(18)		1										_		
(19)												-		
(20)											\dashv			
(21)														•
(22)														
(23)														
(24)							<u> </u>	<u> </u>						
(25)												<u> </u>		
1b	Sub-total	<u>.</u>	<u></u>	<u> </u>		<u> </u>	<u> </u>	<u> </u>	28,076		0			0
C	Total from continuation sheets to Part							>	20.070					
d	Total (add lines 1b and 1c)	t not limited						e) w	<u>28,076</u> ho received m		<u>0</u> 00,000	of of		0
3	Did the organization list any former of employee on line 1a? If "Yes," complete												Yes	No
4	For any individual listed on line 1a, is the organization and related organizations individual	greater th	an \$1	150,	000	? /:	f "Ye	s, "	complete Sch					√
5	Did any person listed on line 1a receive of for services rendered to the organization	or accrue co	ompe	nsa	tion	fro	m any	y un	related organi:					▼
Section	on B. Independent Contractors													
1	Complete this table for your five highest compensation from the organization. Repyear.												n's ta	ìх
	(A) Name and business add	tress							(B) Description of s	ervices		(C) Compens	ation	
						·		_					•	
								L						
2	Total number of independent contractor received more than \$100,000 of compensations.							l o th		ove) who				
	note than \$100,000 or compen	Janoir Holli	IE U	. yaı	nra		_		0			Form	990	(2012)

Check if Schedule O contains a response to any question in this Part VIII. Total revenue Regin or guestion Regin or gue	Part	VIII	Statement of Reve				-	- .	
Barbon			Check if Schedule O	contains a respo	onse to any ques				<u> </u>
1	i					(A) Total revenue	exempt function	business	excluded from tax under sections
Business Code Business Code Business Cod	nts nts	1a	Federated campaigns	s 1a	0				
Business Code Business Code Business Cod	ara our	b	Membership dues .	1b	0				
Business Code Business Code Business Cod	S, C	С	Fundraising events .	1c	0				ı
Business Code Business Code Business Cod	Giff	d			0				
Business Code Business Code Business Cod	ns,	_			0			1	-
Business Code Business Code Business Cod	ıtio er §	f							
Business Code Business Code Business Cod	를 들								
Business Code Business Code Business Cod	no n				0				
3 Investment income (including dividends, interest, and other similar amounts) 142 142 142 142 142 142 143 144 145 142 144 145 144 145 144 145 144 145 1		n	Total. Add lines 1a-1	<u> </u>	Business Code	959,380	 	 	
3 Investment income (including dividends, interest, and other similar amounts) 142 142 142 142 142 142 143 144 145 142 144 145 144 145 144 145 144 145 1	and a	20			Dasiness code	-			<u> </u>
3 Investment income (including dividends, interest, and other similar amounts) 142 142 142 142 142 142 143 144 145 142 144 145 144 145 144 145 144 145 1	Rev						· · · · · · · · · · · · · · · · · · ·		
3 Investment income (including dividends, interest, and other similar amounts) 142 142 142 142 142 142 143 144 145 142 144 145 144 145 144 145 144 145 1	8	_							
3 Investment income (including dividends, interest, and other similar amounts) 142 142 142 142 142 142 143 144 145 142 144 145 144 145 144 145 144 145 1	ez.	_							
3 Investment income (including dividends, interest, and other similar amounts) 142 142 142 142 142 142 143 144 145 142 144 145 144 145 144 145 144 145 1	E	е							
3 Investment income (including dividends, interest, and other similar amounts) 142 142 142 142 142 142 143 144 145 142 144 145 144 145 144 145 144 145 1	gra	f							
and other similar amounts) 4 Income from investment of tax-exempt bond proceeds ▶ 0 5 Royaltiles	£	9				0			
4 Income from investment of tax-exempt bond proceeds ▶ 0 5 Royalties		3							
Second Parameter Second Para				•					
Ga Gross rents b Less: rental expenses c Rental income or (loss)		Ī					- · · · · · · · · · · · · · · · · · · ·	1	
Ga Gross rents Less: rental expenses C Rental income or (loss) D Net gain or (loss) D Net income or (loss) D Net income or (loss) D Net income or (loss) Net gain or (loss) D Net income or (loss)		5	Royalties	M Real	/ii) Personal	0			70
B Less: rental expenses c Rental income or (loss)		80		(1) 1 (02)	(1) 1 0 00 1 12				
The state of the									
d Net rental income or (loss)					<u> </u>				
Basic cost or other basis and sales expenses . c Gain or (loss) . d Net gain or (loss) . d Net gain or (loss) . c of contributions reported on line 1c). See Part IV, line 18		T.			•	0			
b Less: cost or other basis and sales expenses. c Gain or (loss)		7a	Gross amount from sales of	(i) Securities	(ii) Other				
and sales expenses . c Gain or (loss) . d Net gain or (loss) . 8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18			assets other than inventory						
Total revenue. See instructions. C Gain or (loss)		b							
d Net gain or (loss) ▶ 0 8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18									ı
8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18			, ,				-		
of contributions reported on line 1c). See Part IV, line 18		d	Net gain or (loss) .			0	· · · · · · · · · · · · · · · · · · ·	ļ	
C Net income or (loss) from fundraising events . ▶ 0 9a Gross income from gaming activities. See Part IV, line 19 a b Less: direct expenses b c Net income or (loss) from gaming activities . ▶ 0 10a Gross sales of inventory, less returns and allowances a b Less: cost of goods sold b c Net income or (loss) from sales of inventory . ▶ 0 Miscellaneous Revenue Business Code 11a b		8a	events (not including \$ of contributions reported)	ed on line 1c).					'
C Net income or (loss) from fundraising events . ▶ 0 9a Gross income from gaming activities. See Part IV, line 19 a b Less: direct expenses b c Net income or (loss) from gaming activities . ▶ 0 10a Gross sales of inventory, less returns and allowances a b Less: cost of goods sold b c Net income or (loss) from sales of inventory . ▶ 0 Miscellaneous Revenue Business Code 11a b	ě		See Part IV, line 18 .	\cdots a	1.				
9a Gross income from gaming activities. See Part IV, line 19	₹								
See Part IV, line 19 a b Less: direct expenses b c Net income or (loss) from gaming activities ▶ 0 10a Gross sales of inventory, less returns and allowances a b Less: cost of goods sold b c Net income or (loss) from sales of inventory . ▶ 0 Miscellaneous Revenue Business Code 11a b					events .	0			<u></u>
b Less: direct expenses b		9a							Į į
c Net income or (loss) from gaming activities . ▶ 0 10a Gross sales of inventory, less returns and allowances a b Less: cost of goods sold b c Net income or (loss) from sales of inventory . ▶ 0 Miscellaneous Revenue Business Code 11a b c d All other revenue		_							
10a Gross sales of inventory, less returns and allowances a b Less: cost of goods sold b c Net income or (loss) from sales of inventory . ▶ 0 Miscellaneous Revenue Business Code 11a b c d All other revenue						-		-	
returns and allowances a b Less: cost of goods sold b c Net income or (loss) from sales of inventory . > 0 Miscellaneous Revenue Business Code 11a b						<u>'</u>	<u>_</u>	 	
b Less: cost of goods sold . b c Net income or (loss) from sales of inventory . Miscellaneous Revenue Business Code 11a b c All other revenue			returns and allowance	es a	1				
C Net income or (loss) from sales of inventory . Miscellaneous Revenue Business Code 11a b c d All other revenue		ь	Less: cost of goods s	sold b					
11a		С			entory >	o			
b			Miscellaneous F	Revenue	Business Code				
b		11a							
d All other revenue		b					- ,	ļ	
e Total. Add lines 11a–11d ▶ 0 12 Total revenue. See instructions ▶ 958,380		l -						ļ	
12 Total revenue. See instructions 958,380		_						 	
								 	<u> </u>
			, 5101 15751145, 566 1			330,360			Form 990 (2012)

	IX Statement of Functional Expenses on 501(c)(3) and 501(c)(4) organizations must con	nplete all columns.	All other organization	ns must complete co	olumn (A)
	Check if Schedule O contains a respon				
	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			<u> </u>	
_	organizations in the United States. See Part IV, line 21	0	0		
2	Grants and other assistance to individuals in the United States. See Part IV, line 22				
•	·	772,482	772,482		
3	Grants and other assistance to governments, organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16				
4	Benefits paid to or for members	0	0		
5	Compensation of current officers, directors,	<u>U</u>			
•	trustees, and key employees	o	o		
6	Compensation not included above, to disqualified	<u> </u>			
•	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	o	ا		
7	Other salaries and wages	0	0		
8	Pension plan accruals and contributions (include		<u>`</u>		<u> </u>
	section 401(k) and 403(b) employer contributions)	o	o		
9	Other employee benefits	0	0		
10	Payroll taxes	0	0		
11	Fees for services (non-employees):				
а	Management	28,076	28,076		
b	Legal	0	0		
C	Accounting	4,121	4,121		
d	Lobbying	0	0		
0	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	0	0		
9	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	0	0		
12	Advertising and promotion	641	641		
13	Office expenses	1,838	1,838		
14	Information technology	625	625		
15	Royalties	0	0		
16	Occupancy		0		
17 18	Travel	144	144	· · · · · · · · · · · · · · · · · · ·	
10	for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings .	400	0		
20	Interest	400	400		
21	Payments to affiliates	0	0		· · · · · · · · · · · · · · · · · · ·
22	Depreciation, depletion, and amortization .	0	0		······································
23	Insurance	0	0		
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.)				
а	Bad Debt	1,014	1,014		
b	Credit Card Merchant fees/discounts	8,347	8,347		
C				·	
d	All albanian				
θ 25	All other expenses Total functional expenses. Add lines 1 through 24e		0.7.05		
<u>25</u> 26	Joint costs. Complete this line only if the	817,689	817,689		
20	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)				

Part X **Balance Sheet** Check if Schedule O contains a response to any question in this Part X (B) End of year Beginning of year 1 193,811 49.583 2 Savings and temporary cash investments 2 7,284 292,346 3 3 4 Loans and other receivables from current and former officers, directors. trustees, key employees, and highest compensated employees. 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary 6 7 7 8 Prepaid expenses and deferred charges . . . 9 10a Land, buildings, and equipment; cost or other basis Complete Part VI of Schedule D 10a Less accumulated depreciation 10b b 10c Investments—publicly traded securities 11 11 Investments - other securities. See Part IV, line 11 . 12 12 Investments—program-related. See Part IV, line 11 13 13 14 14 15 Other assets. See Part IV, line 11 15 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 201.095 341.929 Accounts payable and accrued expenses 17 17 18 18 19 19 20 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D. 21 Loans and other payables to current and former officers, directors, 22 trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties . . . 23 Unsecured notes and loans payable to unrelated third parties . . 24 24 Other liabilities (including federal income tax, payables to related third 25 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 0 26 Organizations that follow SFAS 117 (ASC 958), check here ▶ ☐ and Fund Balances complete lines 27 through 29, and lines 33 and 34. 27 201,095 27 201,095 Temporarily restricted net assets 28 28 29 29 Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 30 through 34. ŏ Net Assets 30 Capital stock or trust principal, or current funds 30 31 Paid-in or capital surplus, or land, building, or equipment fund . . . 31 32 Retained earnings, endowment, accumulated income, or other funds 32 140,833 33 33 140,833 Total liabilities and net assets/fund balances . . . 34

201,095

341,929 Form **990** (2012)

Part	XI Reconciliation of Net Assets						
	Check if Schedule O contains a response to any question in this Part XI				. 🗸		
1	Total revenue (must equal Part VIII, column (A), line 12)	1		95	58,522		
2	Total expenses (must equal Part IX, column (A), line 25)						
3	Revenue less expenses. Subtract line 2 from line 1						
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 4				0		
5	Net unrealized gains (losses) on investments				0		
6	Donated services and use of facilities				0		
7	Investment expenses						
8	Prior period adjustments				0		
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0		
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line						
	33, column (B))	10		14	0,833		
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			ŀ			
	If the organization changed its method of accounting from a prior year or checked "Other," ex Schedule O.	plain in	1		;		
_			2a	ا ہے ا			
2a	2a Were the organization's financial statements compiled or reviewed by an independent accountant?			1			
	If "Yes," check a box below to indicate whether the financial statements for the year were com- reviewed on a separate basis, consolidated basis, or both:	pilea or	İ		١.		
					:		
	Separate basis Consolidated basis Both consolidated and separate basis				ا- ہے -ا		
b	Were the organization's financial statements audited by an independent accountant?		2b		<u> </u>		
	If "Yes," check a box below to indicate whether the financial statements for the year were audit separate basis, consolidated basis, or both:	ed on a			1		
			- 1		. 1		
_	Separate basis Consolidated basis Both consolidated and separate basis	فحاد احدد،					
c 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?				1			
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.	фіані ін	-		,		
3а	As a result of a federal award, was the organization required to undergo an audit or audits as set	forth in	ļ		i		
Ja	the Single Audit Act and OMB Circular A-133?	Orun III	3a		,		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not under	ran tha		\vdash	✓		
U	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a		3b				
	The second secon			, ggn	(2012)		
			1 0/1	550	(2012)		

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury

Public Charity Status and Public Support

20**12**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

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

Open to Public

OMB No 1545-0047

Inspection Internal Revenue Service Name of the organization Employer identification number Yuma's Education Scholarship Fund for Kids, Inc. 47-0896675 Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) ☑ An organization that normally receives: (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2), (Complete Part III.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. c Type III-Functionally integrated d ☐ Type III–Non-functionally integrated a 🔲 Type I **b** Type II e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1). If the organization received a written determination from the IRS that it is a Type II, or Type III supporting Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and Yes No 11g(i) 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? . . . 11g(iii) Provide the following information about the supported organization(s). (i) Name of supported (ii) ÉIN (iii) Type of organization (iv) Is the organization (v) Did you notify (vi) Is the (vii) Amount of monetary the organization in (described on lines 1-9 organization in col organization support col (i) of your support? (i) organized in the US.? governing document? above or IRC section (see instructions)) Yes Yes No Yes No (A) (B) (C) (D) (E)

Total

Part II

_							
Part	Support Schedule for Organiza	tions Descr	ibed in Secti	ons 170(b)(1)(A)(iv) and 1	70(b)(1)(A)(vi	i)
	(Complete only if you checked th						alify under
	Part III. If the organization fails to	qualify unde	er the tests lis	ted below, p	lease comple	te Part III.)	
	on A. Public Support						
	dar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not include any "unusual grants.")						
2						-	
2	Tax revenues levied for the organization's benefit and either paid						
	to or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by						
•	each person (other than a						
	governmental unit or publicly						
	supported organization) included on						
	line 1 that exceeds 2% of the amount						
_	shown on line 11, column (f)						
6 Saati	Public support. Subtract line 5 from line 4 on B. Total Support				L		
	dar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7	Amounts from line 4	(a) 2000	(6) 2009	(6) 2010	(a) 2011	(6) 2012	(i) Total
8	Gross income from interest, dividends,						
•	payments received on secunties loans,						
	rents, royalties and income from similar						
	sources						li .
9	Net income from unrelated business						
	activities, whether or not the business						
	is regularly carried on						
10	Other income. Do not include gain or				1		
	loss from the sale of capital assets			ļ	<u> </u> 		
	(Explain in Part IV.)	ļ			ļ		
11	Total support. Add lines 7 through 10 Gross receipts from related activities, etc.	(see instructi		<u> </u>	<u>. </u>	10	
13	12 Gross receipts from related activities, etc. (see instructions)						
10	organization, check this box and stop he						
Secti	on C. Computation of Public Support						
14	Public support percentage for 2012 (line			1, column (f))		14	%
15	Public support percentage from 2011 Scl	hedule A, Part	II, line 14 .			15	%
16a	331/3% support test-2012. If the organi						
	box and stop here. The organization qua						_
b	331/3% support test-2011. If the organ					15 is 33 ¹ /3%	
	check this box and stop here. The organ						. •
17a	10%-facts-and-circumstances test – 2	012. If the orga	anization did n	ot check a box	on line 13, 16	a, or 16b, and	line 14 is
	10% or more, and if the organization me Part IV how the organization meets the "i	ets the "facts-	and-circumsta	inces" test, ch	eck this box ar	na stop nere. I	=xpiain in
	organization	iacis-and-circi	umstances te	st. The Organiz	auon quames	as a publicly s	
1_	•	 044 lf+ha			 42 21 ap line 12		and line
b	10%-facts-and-circumstances test—2 15 is 10% or more, and if the organiza	tion meets the	anization did n • "facts-and-c	ot check a bo: ircumstances"	test check th	na, 100,011/a	on here
	Explain in Part IV how the organization in	neets the "fact	s-and-circums	tances" test. 1	The organization	n qualifies as	a publicly
	supported organization						. ▶ ┌
18	Private foundation. If the organization d	id not check a	box on line 13	, 16a, 16b, 17a	a, or 17b, chec	k this box and	see
	instructions						

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II.)

If the organization fails to qualify under the tests listed below, please complete Part II.)

Cast	and Dublic Comment	under the tes	isted pelo	w, please co	ripiete Fait	11.)	
	on A. Public Support	T				···-	
_	dar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and membership fees					a a	2 11.12 1 3/
2	received. (Do not include any "unusual grants.") Gross receipts from admissions, merchandise	487,390	606,758	705,509	685,589	958,3801	3,443,626
~	sold or services performed, or facilities					·	
	furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid						
	to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the	1					
	organization without charge		l	1			
6	Total. Add lines 1 through 5	487,390	606,758	705,509	685 589	958.380	<u>-</u> 3,443,626
7a	Amounts included on lines 1, 2, and 3	100,000		,	000,000	1201-7-80	21-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-
	received from disqualified persons .		İ				
b	Amounts included on lines 2 and 3		1				
	received from other than disqualified		1	Į.		ļ	
	persons that exceed the greater of \$5,000				,		
	or 1% of the amount on line 13 for the year						
c	Add lines 7a and 7b						
8	Public support (Subtract line 7c from						
•	line 6.)						
Secti	on B. Total Support	L	····	L			
	dar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9	Amounts from line 6	487,390	606,758	705,509			3,443,624
10a	Gross income from interest, dividends,	407,000	000,700	100,000	000,000	1501550	2,777,600
	payments received on securities loans, rents,						
	royalties and income from similar sources .	131	223	160	122	142	778
h	Unrelated business taxable income (less	131	225	100	122	172	110
	section 511 taxes) from businesses						
	acquired after June 30, 1975		ì				
С	Add lines 10a and 10b	131	223	260	122	142	770
11	Net income from unrelated business	131	223	200	122	142	778
• •	activities not included in line 10b, whether		ĺ				
	or not the business is regularly carried on		1	ĺ		ĺ	
12	Other income. Do not include gain or		· ·				
12	loss from the sale of capital assets		i	į			
	(Explain in Part IV.)			[•		
13	Total support. (Add lines 9, 10c, 11,				- · - · · - · - · - · - · · · - · · · ·		
	and 12.)	487,521	606,987	705,669	COE 711	958,522	3444.404
14	First five years. If the Form 990 is for th						
• •	organization, check this box and stop her						··· 50 1(0)(5)
Secti	on C. Computation of Public Suppor				 		
15	Public support percentage for 2012 (line 8			3 column (fl)		15	99.977 %
16	Public support percentage from 2011 Sch	• • • • • • • • • • • • • • • • • • • •	•			16	99.97 %
	on D. Computation of Investment Inc			<u> </u>		1 10 1	33.31 /0
<u> 17</u>	Investment income percentage for 2012 (I			line 13 colum	n (fl)	17	.0226 %
18	Investment income percentage from 2011					18	.0226 %
19a	331/3% support tests—2012. If the organi						
1 34	17 is not more than 331/3%, check this box						
b	331/3% support tests—2011. If the organiz		-			_	
D	line 18 is not more than 331/3%, check this b						
20	Private foundation. If the organization die						
~·	a.a .aa.aaaaan n n no organizadon di	uncon a L	IT,		und DOX		<u>-</u>

Schedule A (F	orm 990 or 990-EZ) 2012	Page 4
Part IV	Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).	
		
		

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service Name of the organizati General Information on Grants and Assistance

fuma's Education Scholarship Fund for Kids, Inc.

Partl

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. ▶ Attach to Form 990.

OMB No. 1545-0047

2012

Open to Public Inspection

Employer identification number

47-0896753

Schedule I (Form 990) (2012) Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, **%** □ (h) Purpose of grant or assistance ∑ Yes Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and (g) Description of non-cash assistance Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (f) Method of valuation (book, FMV, appraisal, other) Cat. No. 50055P Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. (e) Amount of non-cash assistance . Enter total number of section 501(c)(3) and government organizations listed in the line 1 table (d) Amount of cash grant Enter total number of other organizations listed in the line 1 table (c) IRC section if applicable For Paperwork Reduction Act Notice, see the Instructions for Form 990. the selection criteria used to award the grants or assistance? (e) 1 (a) Name and address of organization Part II E ල 0 9 E 9 2 0 9 9 Ξ Ŧ

Schedule I (Form 990) (2012)

(f) Description of non-cash assistance Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22 (e) Method of valuation (book, FMV, appraisal, other) (d) Amount of non-cash assistance 43,249 13,233 480 963 1,302 5,215 (c) Amount of cash grant Part III can be duplicated if additional space is needed. (b) Number of recipients Ξ 35 S 3 Scholarships to Faith Community Academy 6 scholarships to Immaculate Conception 2 Tultion scholarships to Christ Lutheran 1 Tuition Scholarships to Calvary Baptist 4 scholarships to Gethsemane Lutheran (a) Type of grant or assistance 5 scholarships to Hand in Hand Part III

parent must re-apply each school year. The Yuma's Education scholarship Fund Board reviews the application and awards scholarships based on financial need. Upon Board approval the dependents on the application. The student enrollment is then verified with the administration of the school by our organization. An application is only valid for one school year, and the scholarships are issued to the qualified private schools in Arizona. The school is informed by letter that they may not receive an amount per student (from all tuition organizations) in excess of the total tuition due for each school year. In the event an excess amount is received by the school, then they must return the funds to the school tuition organization. The Student scholarship applications are submitted by parents for tuition assistance at private schools in the state of Arizona. The parent supplies their income level and number of application is available on our website.

Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional

1.220

7 scholarships to Joy Christian

Part IV

information.

Schedule I (Form 990) (2012)

SCHEDULE 1-1 (Form 990)

Department of the Treasury Internal Revenue Service

Continuation Sheet for Schedule I (Form 990)

► Attach to Form 990 to list additional information for Schedule I (Form 990), Part II or Part III.

OMB No 1545-0047

Open to Public Inspection

Schedule I-1 (Form 990) 2009 (h) Purpose of grant or assistance Employer identification number 0896753 Part I Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) (g) Description of non-cash assistance (f) Method of valuation (book, FMV, appraisal, other) Cat. No. 51026W (c) IRC section if (d) Amount of cash grant (e) Amount of non-cash applicable For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. Yuma's Education Scholarship Fund for Kids, Inc. (b) EIN (a) Name and address of organization or government Name of the organization

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	Φ
	g

Schedule I-1 (Form 990) 2009

Part III Continuation of Grants and Other Assistance to Individuals in the United States (Schedule I (Form 990), Part III.)	Assistance to li	ndividuals in the U	nited States (Sche	dule I (Form 990). Part	
	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
Tuition scholarships to Northwest Christian1		2,400			
Scholarships to Saint Francis of Assissi	54	69,915			
Scholarships to Saint Jerome	2	2,940			
Scholarships to Salpoint Catholic High	1	1,932			
Scholarships to San Francisco de Asis		795			
Scholarships to Southwestern Christlan	119	197,088			
Scholarships to The Learning Pad	5	4,880			
Scholarships to Tri-City Christian Academy	1	1,929			
Scholarships to Veritas Christian Community	1	1,080			
Scholarships to Yuma Catholic High	126	273,977			
Scholarships to Yuma Lutheran	102	147,170			

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

20**13**

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Department of the Treasury Internal Revenue Service

➤ Attach to Form 990 or 990-EZ.
➤ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Name of the organization	Employer identification number			
Yuma's Education Scholarship Fund For Kids, Inc.	47-0896753			
	· ·			
Part VI Section A Line 8, & Section B Line 11a				
Form 990 and all supporting schedules were completed by the Executive Director and then provided to	the President of the organization			
for review. All financial information used to complete the Form 990 are reviewed each month by the bo	pard members.			
Part VI Section B Line 15a				
The Board established a compensation plan for the Executive Director during the monthly board meeti	ng held in August 2008. Each			
month a percentage of the total donations for the month is calculated and then paid to the Executive D	irector, who is considered an			
independent contractor. At the end of the year a form 1099 is then issued for all money paid.				
Part VI Section C Line 19				
The organization keeps all governing documents, policies, and financial statements at the Navel Avenu	ue address in Viima. Arizona			
The organization recept an governing accommonly policino, and manifest examines at the master Asset	o address in rama, Arizona.			
Any request by the public to see any of these would first be taken by the Executive Director to the boar	rd for advisement, and then made			
available in paper form.				
available in pages form.				
Part XI Line 5				
Amount represents scholarships returned by schools from a prior period.				
Part XII Line 2c				
Due to a recent legislative changes, we are now required to have our financial statements reviewed by	an independent Certified Public			
	2			
Accountant. The process is overseen by the Executive Director and President of our organization.				