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Form **990** 

# **Return of Organization Exempt From Income Tax**

OMB No 1545-0047 2013

Department of the Treasury Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter Social Security numbers on this form as it may be made public. ▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Α	For the	2013 cale	endar year, or tax year beginning , 2013, and ending			, 20	
В	Check if a	applicable	C Name of organization BRUCE T. HALLE ASSISTANCE FUND		D Employ	yer identification	number
	Address	change	Doing Business As			27-1451992	
	Name cha	ange	Number and street (or P O box if mail is not delivered to street address) Room/sur	te	E Telepho	ne number	
	Initial retu	ırn _	20225 N. SCOTTSDALE RD			480-606-6000	)
	Terminate	ed	City or town, state or province, country, and ZIP or foreign postal code				
	Amended	l return	SCOTTSDALE, AZ 85255		<b>G</b> Gross r	eceipts \$	1,065,771
	Application	on pending	F Name and address of principal officer	H(a) Is this a g	roup return for	subordinates? Y	
		_		1		es included? 🔲 <b>Y</b> e	_
ī	Tax-exem	npt status	√ 501(c)(3)	If "N	lo," attach	a list (see instruc	tions)
J	Website:	► NOI	- · · · · · · · · · · · · · · · · · · ·	H(c) Group	exemption	number 🕨	
ĸ	Form of o	rganization	✓ Corporation ☐ Trust ☐ Association ☐ Other ► L Year of formati	on <b>2009</b>	M State	of legal domicile	AZ
Р	art I	Summ	nary				
	1	Briefly de	escribe the organization's mission or most significant activities:				
ë	1 1	PROVIDE	S ASSISTANCE TO DISCOUNT TIRE EMPLOYEES AND/OR THEIR IMMEDIA	TE FAMILIE	S WHO IN	ICUR EXPENS	ES,
Activities & Governance		DAMAGE	S AND/OR LOSSES AS A RESULT OF NATURAL DISASTERS AND/OR EMER	RGENCY HA	RDSHIPS	5.	*******
Je.	2	Check th	nis box 🕨 🗌 if the organization discontinued its operations of cisposed o	more than	1,25% of	its net assets	3.
é	3	Number	of voting members of the governing body (Part VI, Ine Ta)	CU.	]   3	1	5
9	4	Number	of independent voting members of the governing body (Part VI, line 1b)		4		5
ties	5	Total nur	mber of individuals employed in calendar year 2018 (Fart V, line 2a) 0 2	014 ·  8	5		
₹	6	Total nur	nber of volunteers (estimate if necessary)	الما . الأ	6		15
AC	7a	Total unr	related business revenue from Part VIII, column (6), line OSO SAL		7a		
	b	Net unrel	lated business taxable income from Form 990-T, line 34	J.T I.	7b		0
				Prior Y	ear	Current	Year
Revenue	8	Contribu	tions and grants (Part VIII, line 1h)		937,057		1,064,687
	9	Program	service revenue (Part VIII, line 2g)		0		0
ě	10	Investme	ent income (Part VIII, column (A), lines 3, 4, and 7d)		27,855		1,084
Œ	11 (	Other rev	venue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0		0
	12	Total reve	enue-add lines 8 through 11 (must equal Part VIII, column (A), line 12)		964,912		1,065,771
	13	Grants a	nd similar amounts paid (Part IX, column (A), lines 1-3)		427,864		466,752
	14	Benefits	paid to or for members (Part IX, column (A), line 4)		0		0
S	15	Salaries,	other compensation, employee benefits (Part IX, column (A), lines 5-10)		0		0
SC	16a	Professio	onal fundraising fees (Part IX, column (A), line 11e)		0		0
Expenses	b ·	Total fun	draising expenses (Part IX, column (D), line 25) ▶				
ш	17	Other exp	penses (Part IX, column (A), lines 11a-11d, 11f-24e)		12,358		13,644
	18	Total exp	penses. Add lines 13-17 (must equal Part IX, column (A), line 25)		440,222	l	480,396
	19	Revenue	less expenses. Subtract line 18 from line 12		524,690		585,375
و و د			<u></u>	eginning of Cu	rrent Year	End of	Year
ssets or	20	Total ass	sets (Part X, line 16)		,4 <u>57</u> ,493		2,036,625
Net Ass Fund Ba	21	Total liab	ollities (Part X, line 26)		0		0
_			ts or fund balances. Subtract line 21 from line 20		,457,493		2,036,625
P	art II	Signat	ture Block				
			iry, I declare that I have examined this return, including accompanying schedules and staten			my knowledge ai	nd belief, it is
tru	ie, correct,	and compl	lete. Declaration of prevarer (other than officer) is based on all information of which preparer	nas any knowi	eage	1	
٠.	ĺ	$\rightarrow$	[ well & list ]		06/	solut	
Sig	-	Sign	eature of officer	Da	te	, ,	
Here			Transfly V. SCHAFFL ASST. TAGASUNG	<u> </u>			
			e or print name and title				
Pa	nid	Print/Ty	pe preparer's name Preparer's signature Dat	e	Check		
	eparer	r			self-em		
	se Only		name ►	Firn	n's EIN_►		
		Firm's a	address ▶	Pho	ne no		
_			s this return with the preparer shown above? (see instructions)	<u> </u>	<u> </u>		es 🗌 No
For	Paperw	ork Redu	ction Act Notice, see the separate instructions. Cat No	11282Y		Form	990 (2013)

917-19,20

Form 99	0 (2013) Page <b>2</b>
Part	
<u>.                                    </u>	Check if Schedule O contains a response or note to any line in this Part III
_ <b>1</b>	Briefly describe the organization's mission:
	PROVIDES ASSISTANCE TO DISCOUNT TIRE EMPLOYEES AND/OR THEIR IMMEDAITE FAMILIES WHO INCUR EXPENSES, DAMAGES OR LOSSES AS A RESULT OF NATURAL DISASTERS AND/OR OTHER EMERGENCY HARDSHIPS
	DAMAGES ON EGSEES AS A RESOLUTION OF THE ORDER SERVICE AND FOR CONTENE METALLICE MANAGEMENT MANAGEM
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
3	services?
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations 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 \$ 13,644 including grants of \$ 466,752) (Revenue \$ )
	······································
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 ► 466,752

Part	Checklist of Required Schedules		-	<u> </u>
$\overline{}$			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		1
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4		1
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		
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		<b>√</b>
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		<b>√</b>
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, 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>√</b>
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		<b>√</b>
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		<b>✓</b>
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		<u>▼</u>
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		<b>*</b>
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f		<b>√</b>
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		<b>√</b>
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		<b>√</b>
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV			
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	15		<u>√</u>
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)	16		<u>√</u>
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.			<u>√</u>
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	18		<u>√</u>
20 a	Did the organization operate one or more hospital facilities? <i>If</i> "Yes," complete Schedule H	19		<u>√</u>
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a 20b		<u>*</u>

Part	Checklist of Required Schedules (continued)			Page 4
,	Oncokiist of ricquired contenties (continued)		Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		1
22	Did the organization report more than \$5,000 of grants or 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	✓	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		1
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		1
c b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	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	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II	26		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		<b>√</b>
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	30		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
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		1
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? <i>If "Yes," complete Schedule R, Part VI </i>	0.7		1
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O	37	✓	
			000	(0013)

Part	Statemento Degarding Other IDS Filings and Tay Compliance			Page .
rart	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V			
<u> </u>	Officer if Schedule O Contains a response of note to any line in this Part V	• •	Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable   1a			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and	1		
	reportable gaming (gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a	<u> </u>		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b		
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		✓
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	ا ۔ ا		1
b	If "Yes," enter the name of the foreign country:	<u>4a</u>		-
D	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		1
ь	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		<b>▼</b>
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		_
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		1
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7_	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services proyed to the payor?			
L	and services provided to the payor?	7a		<b>✓</b>
b b	If "Yes," did the organization notify the donor of the value of the goods or services provided? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	7b		
Ū	required to file Form 8282?	7c		1
d	If "Yes," indicate the number of Forms 8282 filed during the year	10		•
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		<b>√</b>
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		<del>`</del>
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			
_	organization, have excess business holdings at any time during the year?	8	_	✓_
9	Sponsoring organizations maintaining donor advised funds.			<del>,-</del>
a b	Did the organization make any taxable distributions under section 4966?	9a		<u>√</u>
10	Section 501(c)(7) organizations. Enter:	9b		✓
а	Initiation fees and capital contributions included on Part VIII, line 12		ł	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b		ŀ	
11	Section 501(c)(12) organizations. Enter:		ı	
а	Gross income from members or shareholders		ı	
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		_
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	<u> </u>		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
b	<b>Note.</b> See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		<b>√</b>
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b		•
				_

	30 (2010)	<del> </del>			Page C
Part					
•	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in S				
Sect	Check if Schedule O contains a response or note to any line in this Part VI	<u> </u>		<u> </u>	<u>.</u>
Secti	IOTA. Governing Body and Management			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year   1a	Г		763	110
	If there are material differences in voting rights among members of the governing body, or				
	if the governing body delegated broad authority to an executive committee or similar	l	İ		
	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 relation	onship with			
	any other officer, director, trustee, or key employee?	[	2		1
3	Did the organization delegate control over management duties customarily performed by or under				
	supervision of officers, directors, or trustees, or key employees to a management company or other per	L	3_		✓
4	Did the organization make any significant changes to its governing documents since the prior Form 990 wa		4		<b>/</b>
5	Did the organization become aware during the year of a significant diversion of the organization's a	assets?	5		<b>√</b>
6 7a	Did the organization have members or stockholders?		6		✓
<i>i</i> a	one or more members of the governing body?		7-		
b	Are any governance decisions of the organization reserved to (or subject to approval by)		7a		<b>/</b>
	stockholders, or persons other than the governing body?	<b>I</b>	7b		✓
8	Did the organization contemporaneously document the meetings held or written actions underta	ken durina	7.5		
	the year by the following:				
а	The governing body?		8a	<b>√</b>	
b	Each committee with authority to act on behalf of the governing body?		8b	✓	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be				
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		9		1
Secti	on B. Policies (This Section B requests information about policies not required by the Int	ernal Revenu	<u>ie Co</u>		
100	Did the eventuation have lead charters branches as efficiency	۲		Yes	No
10a b	Did the organization have local chapters, branches, or affiliates?		10a		<b>/</b>
-	affiliates, and branches to ensure their operations are consistent with the organization's exempt pu		10b		İ
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filin	<u> </u>	11a	7	<u> </u>
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	1	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise	-	12b	<b>✓</b>	
C	Did the organization regularly and consistently monitor and enforce compliance with the policy	/? If "Yes,"			
	describe in Schedule O how this was done	<u>L</u>	12c	✓	
13	Did the organization have a written whistleblower policy?		13	✓	İ
14	Did the organization have a written document retention and destruction policy?	· · · . · .	14	✓	L
15	Did the process for determining compensation of the following persons include a review and a independent persons, comparability data, and contemporaneous substantiation of the deliberation and		ļ		
•		I	45-		<sup> </sup>
a b	The organization's CEO, Executive Director, or top management official	<b> </b>	15a 15b		<del></del>
_	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		130		<del>                                     </del>
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar ai	rangement			
	with a taxable entity during the year?	- J-	16a		1
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to e	evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safe	eguard the			ı
	organization's exempt status with respect to such arrangements?		16b		
	on C. Disclosure				
17 18	List the states with which a copy of this Form 990 is required to be filed AZ CA CO FL GA IL MI	MN NM NC OH	OK (	OR SO	C TN
10	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 99 available for public inspection. Indicate how you made these available. Check all that apply	JU-1 (Section	5U1(d	s)(3)s	only)
		(a O)			
19	Own website Another's website  Upon request Other (explain in Schedul Describe in Schedule O whether (and if so, how) the organization made its governing documents, or		rant -	olio.	, and
	financial statements available to the public during the tax year	ornice or inter	corp	лопсу	, and
20	State the name, physical address, and telephone number of the person who possesses the books	and records o	f the		
	organization: ► LORI GOVERNALE, 20225 N. SCOTTSDALE RD, SCOTTSDALE, AZ 85255, #480-606-600	0			

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

Check if Schedule O contains a response or note to any line in this Part VII . . . . . . . . . . . . . . . . .

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Check this box if pathor the arganization par any related arganization componented any current officer, director, or tructor

Check this box if neither the organization no	r any relate	d org	anız	atic	n c	ompe	nsa	ted any currer	it officer, directo	r, or trustee.
		(C)								
(A)	(B)	Position (D)						(E)	(F)	
Name and Title	Average					tnan e Is both		Reportable	Reportable	Estimated
	hours per	office	er and			or/trus		compensation	compensation from	amount of
	week (list any hours for	Inc or	sul	Q	Σe	em Hig	Ε̈	from the	related organizations	other compensation
	related	lıvıd	tt	Officer	y eq	p bes	Former	organization	(W-2/1099-MISC)	from the
	organizations below dotted	of Land	one	l	Key employee	8 6		(W-2/1099-MISC)		organization and related
	line)	Individual trustee or director	ון tru		yee	l me		1		organizations
		ee	Institutional trustee	ł		Highest compensated employee				
			Ľ		-	8				
(1) GEORGE GUILFORD	AS NEED			Ì						
PRESIDENT/DIRECTOR		✓		✓				0	0	0
(2) DOUGLAS WILSON	AS NEED									
DIRECTOR		✓						0	0	0
(3) DEAN MUGLIA	AS NEED									
DIRECTOR		✓						0	0	0
(4) DEBBIE SMITH	AS NEED									
VICE PRESIDENT/DIRECTOR		✓		✓			ļ	0	0	0
(5) LORI GOVERNALE	AS NEED									
TREASURER				✓			_	0		0
(6) TIMOTHY J SCHAFER	AS NEED			١.						
ASST. TREASURER				✓	<u> </u>			0	0	0
(7) IRENE MAYBERRY	AS NEED				İ					
SECRETARY	<u> </u>			<b>✓</b>			_	0	0	0
(8)	<del> </del>									
(9)						·				
(10)										
(11)										
(12)										
(13)							<del> </del>			
(14)										<del></del>
			l I	1	ı	I	1	I	l	

Part	Section A. Officers, Directors, Trus	lees, Rey E		yees		C)	ngne	St C	ompensated E	inployees (	CONTINU	iea)		
	(A)	(B)			•	ition			(D)	(E)			(F)	
	Name and title	Average					e than o		Reportable	Reportab	le	Est	mated	
		hours per					or/trus		compensation	compensation	n from	am	ount of	
		week (list any hours for	익호	ij	Q	Š	9 ∓	77	from the	related organization			other sensatio	n.
		related	Individual trustee or director	Institutional trustee	Officer	Key employee	nple:	Former	organization	(W-2/1099-N			m the	<i>n</i> 1
		organizations	ctal	tior	1	픮	st c	"	(W-2/1099-MISC)	1	1		nızatıor	
		below dotted line)	٦ <sub>٤</sub>	nal t		oye	mg				ł		related nization:	
		"""	stee	rust		Φ.	) ens				ĺ	Orgai	IIZALIOII	5
		1	"	ee			Highest compensated employee	1	1	ļ	}			
/4E\					<u> </u>	<del>                                     </del>				<del> </del>			_	
(15)		<del></del>	1		١.,						- 1			
(4C)							<del> </del> -	-		<u></u> -	<del></del>			
(16)		<b>}</b> -					ļ							
4470		-			_	$\vdash$	<del>  -</del>	<del> </del>			<del></del>			
!!!						ļ					Ì			
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(18)		<b></b>									1			
110	·					-	<del> </del>	┝						
(19)	·	ļ					ĺ							
<del></del>			-			}—	<del> </del>	}_		<del> </del>	$-\!$			
(20)		ļ												
(04)							<del> </del>	┝		<u> </u>				
(21)			-											
(00)		<b>_</b>		<u> </u>				-	<u> </u>		<del> -</del>			
(22)			ł						}		1			
(00)						_	<del> </del> -		<del> </del> -					
(23)		<u> </u>												
(0.4)										ļ	-+			
(24)		<del> </del>				•		İ			ŀ			
(05)								├			-+	_		
(25)		<del></del>	1											
	Sub-total	<u></u>	l .				!	<u> </u>			<del>_</del>			
C	Total from continuation sheets to Part	 VII Sectio	n A	•	•	•	•		0		0			
d				•	•	•			0		0			9
_ <u>u</u>	Total (add lines 1b and 1c)							<u></u>	<del></del>			\		(
2	Total number of individuals (including but reportable compensation from the organi		ı to tn	ose	IISt	ea a	apove	e) W	no receivea m	ore than \$1	00,000	OT		
	reportable compensation from the organi	Zation							<del> </del>				Yes	No
3	Did the organization list any former of	ficer direc	tor o	r tr	uste	20	kev s	mn	lovee or high	est compe	nsated	. —	163	110
•	employee on line 1a? If "Yes," complete s						-	,,,,,,	noyee, or mgm		nsated	3		1
4	For any individual listed on line 1a, is the								nd other comm	onestion fr	om the		-	_
7	organization and related organizations													
	individual		ω., φ.					., 	complete cen			4		1
5	Did any person listed on line 1a receive of	r accrue co	mner	nsat	ıon.	fror	n anv	ıını	related organiz	ation or inc	lividual		$\vdash$	<u> </u>
	for services rendered to the organization											5		1
Section	on B. Independent Contractors	<u> </u>					_						LI	
1	Complete this table for your five highest	compensate	ed inc	lene	end	ent	contr	acto	ors that receive	ed more tha	n \$100	nnn of		
•	compensation from the organization. Rep													ax
	year.							,	og			,	J,, C 12	~ `
	(A)								(B)			(C)		
	Name and business add	ress							Description of s	ervices	ſ	Compens	ation	
								_						
					_									
												_		
2	Total number of independent contractor	rs (includir	ng bu	t ne	ot i	imit	ed to	th	ose listed abo	ove) who				
	received more than \$100,000 of compens								0	•				

Part	VIII	Statement of Revenue	-		-	
•		Check if Schedule O contains a response or note t			<u></u>	
			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ıts ıts	1a	Federated campaigns 1a				
ara Our	b	Membership dues 1b	]			
s, C Am	С	Fundraising events   1c				
Contributions, Gifts, Grants and Other Similar Amounts	d	Related organizations 1d	]			
JS,	е	Government grants (contributions) 1e				
tior er S	f	All other contributions, gifts, grants,				
真美		and similar amounts not included above 1f 1,064,687	1			
g g	g	Noncash contributions included in lines 1a-1f \$				
	h	Total. Add lines 1a-1f	1,064,687			ļ
Ę	_	Business Code				<u> </u>
eve	2a					
e E	b		<del> </del>		<del></del>	<del> </del>
Ξġ	C				<del></del>	<del> </del>
နို	d					<del> </del>
Program Service Revenue	e f	All other program service revenue .			<del></del>	
õ	g	Total. Add lines 2a–2f	0			<u> </u>
	3	Investment income (including dividends, interest,				
		and other similar amounts)	1,084	1,084		ľ
	4	Income from investment of tax-exempt bond proceeds ▶	,,,,,,,			
	5	Royalties ▶				
		(i) Real (ii) Personal				
	6a	Gross rents	}			
	b	Less: rental expenses	]			
	С	Rental income or (loss)				
	d	Net rental income or (loss) ▶				
	7a	Gross amount from sales of (i) Securities (ii) Other				
		assets other than inventory	1			
	b	Less: cost or other basis				
		and sales expenses .	-			
	C	Gain or (loss)				
	d	Net gain or (loss)				<del></del>
venue	8a	Gross income from fundraising events (not including \$				
Other Reve		of contributions reported on line 1c). See Part IV, line 18				
ᅙ		Less: direct expenses b	<u> </u>			ļ
		Net income or (loss) from fundraising events .   Gross income from gaming activities.  See Part IV, line 19				
	h	Less: direct expenses b	1			
		Net income or (loss) from gaming activities		·		
		Gross sales of inventory, less			· · · · · · · · · · · · · · · · · · ·	
		returns and allowances a				
	b	Less: cost of goods sold b	1			
	С	Net income or (loss) from sales of inventory				
		Miscellaneous Revenue Business Code				
	11a					
	b					
	С					
	d	All other revenue	ļ			ļ
	ļ.	Total revenue See instructions			_	
		LOTAL FRANCISCO NO INCITICATIONS	1 005 774	4 00 4		

Form 9	90 (2013)				Page 10
Part	Statement of Functional Expenses on 501(c)(3) and 501(c)(4) organizations must com-	poloto all columno. A	II athar areas ration		- (A)
Secur	Check if Schedule O contains a respons				
	ot include amounts reported on lines 6b, 7b, b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21	466,752	466,752		
2	Grants and other assistance to individuals in the United States. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16.				
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees				
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 8	Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 10	Other employee benefits				
11 a	Fees for services (non-employees)  Management			-	
b	Legal	10,491		10,491	
ď	Lobbying	10,431		10,431	
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)				
12	Advertising and promotion				
13	Office expenses				
14	Information technology				<del></del>
15 16	Royalties				
16 17	Occupancy	· ·			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 20	Conferences, conventions, and meetings .		-		

1,253

1,684

480,396

216

466,752

21

22

23

24

С

d

25

26

Payments to affiliates . . . . .

**REGISTRATION FEES** 

BANK/PROCESSING FEES

All other expenses

Depreciation, depletion, and amortization .

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)

Total functional expenses. Add lines 1 through 24e

Joint costs. Complete this line only if the organization reported in column (B) joint costs

from a combined educational campaign and fundraising solicitation. Check here 

if following SOP 98-2 (ASC 958-720) 

if

1,253

1,684

13,644

216

	artA				
<u>`</u> _		Check if Schedule O contains a response or note to any line in this Pa		<del></del>	
			(A) Beginning of year		<b>(B)</b> End of year
	1	Cash—non-interest-bearing	986,176	1	1,615,110
	2	Savings and temporary cash investments	418,342	2	412,099
	3	Pledges and grants receivable, net	52,975	3	9,416
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees.			
		Complete Part II of Schedule L		5	
	6	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			
ŝ		organizations (see instructions). Complete Part II of Schedule L		6	
Assets	7	Notes and loans receivable, net		7	
Ą	8	Inventories for sale or use	· <b>_</b>	8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or			
		other basis. Complete Part VI of Schedule D 10a			
	b	Less. accumulated depreciation 10b		10c	
	11	Investments—publicly traded securities		11	
	12	Investments—other securities. See Part IV, line 11		12	
	13	Investments—program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	1,457,493	16	2,036,625
	17	Accounts payable and accrued expenses		17	
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D .		21	
S	22	Loans and other payables to current and former officers, directors,			
薑		trustees, key employees, highest compensated employees, and			
Liabilities		disqualified persons. Complete Part II of Schedule L		22	
ت	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	0	26	0
s		Organizations that follow SFAS 117 (ASC 958), check here ▶ □ and			
õ		complete lines 27 through 29, and lines 33 and 34.	<del></del>		
lar	27	Unrestricted net assets	<del></del>	27	
89	28	Temporarily restricted net assets	_ <del></del> -	28	<del></del>
ā	29	Permanently restricted net assets		29	
or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and			
ō		complete lines 30 through 34.			
ets	30	Capital stock or trust principal, or current funds		30	
Net Assets	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
μÄ	32	Retained earnings, endowment, accumulated income, or other funds .	1,457,493		2,036,625
Ž	33	Total net assets or fund balances	1,457,493		2,036,625
	34	Total liabilities and net assets/fund balances	1,457,493	34	2,036,625

	<u> </u>				.g		
Par	t XI Reconciliation of Net Assets						
•	Check if Schedule O contains a response or note to any line in this Part XI				. 🗆		
1	Total revenue (must equal Part VIII, column (A), line 12)	1			55,771		
2	Total expenses (must equal Part IX, column (A), line 25)	2			30,396		
3	Revenue less expenses. Subtract line 2 from line 1	3		<u>585,</u> 375			
4	5 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1						
5	Net unrealized gains (losses) on investments	5		(	6,243)		
6	Donated services and use of facilities	6			0		
7	Investment expenses	7			0		
8	Prior period adjustments	8			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		2,03	36,625		
Part	, u						
	Check if Schedule O contains a response or note to any line in this Part XII		<u>.</u>		<b>✓</b>		
	/ _			Yes	No		
1	Accounting method used to prepare the Form 990:  Cash  Accrual  Other		_				
	If the organization changed its method of accounting from a prior year or checked "Other," ex	plaın	ın				
	Schedule O.						
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			L	<u> </u>		
	If "Yes," check a box below to indicate whether the financial statements for the year were com	oiled (	or		1		
	reviewed on a separate basis, consolidated basis, or both:				ľ		
	Separate basis Consolidated basis Both consolidated and separate basis			ļ. <u>.</u>			
D	Were the organization's financial statements audited by an independent accountant?	. •	. 2b	<b>-</b>			
	If "Yes," check a box below to indicate whether the financial statements for the year were audite separate basis, consolidated basis, or both:	ed on	а				
	·						
_	Separate basis Consolidated basis Both consolidated and separate basis  If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for or						
С	of the audit, review, or compilation of its financial statements and selection of an independent account		. i	,			
	If the organization changed either its oversight process or selection process during the tax year, ex			<b>✓</b>			
	Schedule O.	piain	in				
20	As a result of a federal award, was the organization required to undergo an audit or audits as set	forth :	,				
Ja	the Single Audit Act and OMB Circular A-133?	וטונוו ו			,		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not under	ran th	. 3a				
U	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a		3b				
	The state of the s	<i></i> 10.		m <b>990</b>	(2012)		
			ror	111 フラリ	(2013)		

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

# **Public Charity Status and Public Support**

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

OMB No 1545-0047 2013

Department of the Treasury Internal Revenue Service ► Attach to Form 990 or Form 990-EZ.
► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name	of the organization							Employer i	dentificatio	on number	
	CE T. HALLE ASSIS		** ** ***							451992	
Par			rity Status (All orga						nstructi	ons.	
The c			ation because it is: (Fo		_			•			
1			hes, or association of			ed in <b>se</b> d	ction 170	(b)(1)(A)(	i).		
2			170(b)(1)(A)(ii). (Attac								
3			spital service organiza								
4		-	on operated in conjun	ction with	h a hospi	tal descri	bed in se	ection 17	0(b)(1)(A	)(iii). Enter tl	пе
5	☐ An organization		the benefit of a colle	ge or un	iversity o	wned or	operated	by a go	vernmer	ntal unit des	cribed in
		)(1)(A)(iv). (Com									
6 7	✓ An organization	on that normally	nment or government receives a substantia ( <b>(A)(vi).</b> (Complete Pai	al part of					nit or fro	m the gener	al public
8	8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)										
9	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)								% of its		
10	An organization	n organized and	l operated exclusively	to test fo	or public :	safety. S	ee <b>sectio</b>	n 509(a)(	(4).		
11											
	a 🗌 Type I	<b>b</b> 🗌 Type	II c ☐ Type II	I-Functio	nally inte	grated	d 🗀	Type III-1	Non-func	tionally integ	rated
е		indation manage	that the organization ers and other than one								
f	If the organiz	ation received a	a written determination	on from	the IRS	that it is	а Туре	I, Type	II, or Ty <sub>l</sub>	pe III suppo	rting
	organization, o	check this box		•							· 🗀
g	_		he organization acce	pted any	gift or co	ontributio	on from a	any of the	•		
	following pers										
	• •	<del>-</del>	ndirectly controls, eitlody of the supported		_	her with	persons	describe	d ın (ıı) a 	ind Y	es No
	(ii) A family m	ember of a perso	on described in (i) abo	ove?		•				11g(iı)	
		-	a person described in							. 11g(iii)	
h	Provide the fo	llowing informati	on about the support	ed organ	ızatıon(s).			,		<u> </u>	
(i)	Name of supported organization	(II) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	in col (i) li	organization sted in your document?	our the organization in				(vii) Amount of monets support	
				Yes	No	Yes	No	Yes	No		
(A)		-									
(B)											
(C)											
(D)									-		
(E)	<del></del>										
										<del>                                     </del>	

Total

supported organization

18

Page 2 Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning in) ▶ (a) 2009 **(b)** 2010 (c) 2011 (d) 2012 (e) 2013 (f) Total Gifts, grants, contributions, membership fees received (Do not include any "unusual grants") . . . 512,966 619,543 937,057 1,064,687 3,134,253 revenues levied organization's benefit and either paid to or expended on its behalf 0 0 0 The value of services or facilities furnished by a governmental unit to the organization without charge . O 0 0 Total. Add lines 1 through 3. . . . 0 512,966 619,543 937,057 1,064,687 3,134,253 The portion of total contributions by each person (other than governmental unıt or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5 from line 4. 3,134,253 Section B. Total Support Calendar year (or fiscal year beginning in) ▶ (a) 2009 **(b)** 2010 (c) 2011 (d) 2012 (e) 2013 (f) Total Amounts from line 4 7 512,966 619,543 937,057 1,064,687 3,134,253 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources . . . . . . . . . . . 0 0 Net income from unrelated business activities, whether or not the business is regularly carried on . . . . . 0 0 0 0 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) . . . . . . O **Total support.** Add lines 7 through 10 11 3,134,253 Gross receipts from related activities, etc. (see instructions) 12 0 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) Section C. Computation of Public Support Percentage 14 Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f)) . . . . . 14 % 15 Public support percentage from 2012 Schedule A, Part II, line 14 . . . . . . . . . . . . . . . . . <u>%</u> 16a 331/3% support test - 2013. If the organization did not check the box on line 13, and line 14 is 331/3% or more, check this b 331/3% support test-2012. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . 17a 10%-facts-and-circumstances test - 2013. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported b 10%-facts-and-circumstances test - 2012. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

#### 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.)

Secti	on A. Public Support		<u> </u>		<u> </u>		-
	dar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	<b>(e)</b> 2013	(f) Total
1	Gifts, grants, contributions, and membership fees	(2) 2000	(5) 2010	(0) 2011	(4) 2012	(6) 2013	(i) iotai
•	received. (Do not include any "unusual grants ")						
2	Gross receipts from admissions, merchandise			·			
-	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						
	organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3			-			
	received from disqualified persons .						
<b>L</b>	Amounts included on lines 2 and 3						
b	received from other than disqualified						
	persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
_	•						
	Add lines 7a and 7b						<del></del>
8	Public support (Subtract line 7c from						
	line 6.)						
	on B. Total Support						
	dar year (or fiscal year beginning in) ▶	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	<b>(e)</b> 2013	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends,						
	payments received on secunties loans, rents,		i				
	royalties and income from similar sources						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b, whether						
	or not the business is regularly carried on						
12	Other income. Do not include gain or						
_	loss from the sale of capital assets						
	(Explain in Part IV.)						
13	Total support. (Add lines 9, 10c, 11,						
-	and 12.)			i			
14	First five years. If the Form 990 is for the	e organization	's first second	d third fourth	Or fifth tay us	ear as a section	501/0)/2)
	organization, check this box and stop her						
Section	on C. Computation of Public Suppor			<del></del>		<del>· · · · ·</del>	<u> </u>
15	Public support percentage for 2013 (line 8			3 nolumn (4)	·	145	
						15	%
16 Section	Public support percentage from 2012 Sch	edule A, Part	ni, line 15 .	<u> </u>	<del> </del>	16	<u>%</u>
	on D. Computation of Investment Inc			1 : 46 :	(0)	1 -= 1	
17	Investment income percentage for 2013 (I					17	%
18	Investment income percentage from 2012					18	<u>%</u>
19a	331/3% support tests—2013. If the organi	zation did not	check the box	on line 14, ar	id line 15 is m	ore than 331/39	6, and line
	17 is not more than 331/3%, check this box a						
b	331/3% support tests—2012. If the organiz						
	line 18 is not more than 331/3%, check this b						
20	Private foundation. If the organization did						

Schedule A (F	orm 990 or 990-EZ) 2013 Page 4
Part IV	<b>Supplemental Information.</b> 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).
••••••	
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# SCHEDULEI (Form 990)

Department of the Treasury Internal Revenue Service

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

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

20

OMB No 1545-0047

► Attach to Form 990,

Open to Public Inspection

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 **Employer identification number** ✓ Yes 27-1451992 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. ▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. (f) Method of valuation (book, FMV, appraisal, other) 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 (d) Amount of cash grant (c) IRC section if applicable the selection criteria used to award the grants or assistance? General Information on Grants and Assistance (p) EIN **BRUCE T. HALLE ASSISTANCE FUND** 1 (a) Name and address of organization (1) or government Name of the organization Part II

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(2)

Schedule I (Form 990) (2013)

Cat. No 50055P

.

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

Enter total number of other organizations listed in the line 1 table

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. Schedule I (Form 990) (2013)

Part III Grants ar

י מין כי למקוים ווי ממויסה איני מין מין מין מין מין מין מין מין מין מי					,
(a) Type of grant or assistance	(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
1 MEDICAL/EMERGENCY ASSISTANCE	VAR.	184,613	0	0 NA	NA
2 FUNERAL/BURIAL ASSISTANCE	VAR.	48,036	0	0 NA	NA
3 EMERGENCY AIRFARE ASSISTANCE	VAR.	13,195	0	0 NA	NA
4 AUTO RELATED ASSISTANCE	VAR.	39,485	0	0 NA	NA
5 HOUSING FINANCE/RENT ASSISTANCE	VAR.	90,786	0	0 NA	NA
6 CREDIT CARD DEBT ASSISTANCE	VAR.	14,010	0	N O	NA
7 OTHER MISC. ASSISTANCE	VAR.	76,627	0	O NA	NA
Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information	the information r	equired in Part I, line	e 2, Part III, columr	ι (b), and any other addit	ional information.

THE ORGANIZATION'S RELIEF COMMITTEE REVIEWS ALL APPLICATIONS FOR ASSISTANCE AND MAKES DETERMINATIONS OF GRANTS, OBJECTIVELY BASED ON SPECIFIC CRITERIA. PRIOR TO MAILING ANY GRANTS OUT, THE COMMITTEE REVIEWS WHETHER THE APPLICANT WILL HAVE ANY INSURANCE COVERAGE OR REIMBUREMENT SERVICES.

Schedule I (Form 990) (2013)

#### 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.

OMB No 1545-0047

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization ► 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.

**BRUCE T. HALLE ASSISTANCE FUND** 27-1451992 PART VI-A, LINE 7a - THE ORGANIZATION'S DIRECTORS APPOINT VOLUNTEERS AND NON-COMPENSATED EMPLOYEES TO THE ADVISORY RELIEF REVIEW AND CONTRIBUTION COMMITTEES AS NEEDED AND OVER TIME. PART VI-B, LINE 11b - THE FORM 990 IS REVIEWED BY THE DIRECTORS AND THE ORGANIZATION'S OUTSIDE CPA FIRM BEFORE IT IS FILED WITH THE IRS AND/OR A STATE JURISDICTION. PART VI-B, LINE 12c - EACH DIRECTOR AND/OR MEMBER OF ALL COMMITTEES ARE REQUIREDTO SIGN A STATEMENT THAT AFFIRMS HE/SHE HAS RECEIVED A COPY OF THE CONFLICTS OF INTEREST POLICY AND COMPLIES WITH ITS POLICIES ON AN ANNUAL BASIS. PART VI-C, LINE 18 - PER IRS SEC. 6104, PROCEDURES TO INSPECT THE ORGANIZATION'S PUBLIC DOCUMENTS CAN BE DONE BY THE GENERAL PUBLIC BY CONTACTING A DIRECTOR BY TELEPHONE AND/OR EMAIL. PART VI-C, LINE 19 - REQUESTS TO INSPECT THE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICTS OF INTEREST POLICY AND/OR FINANCIAL STATEMENTS WILL BE REVIEWED ON A CASE BY CASE BASIS.

Financial Statements Years Ended December 31, 2013 and 2012



Financial Statements Years Ended December 31, 2013 and 2012

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www.bdo.com

2201 E. Camelback Road Suite 360 Phoenix, AZ 85016

#### **Independent Auditor's Report**

Board of Directors Bruce T. Halle Assistance Fund Scottsdale, Arizona

We have audited the accompanying financial statements of Bruce T. Halle Assistance Fund (the "Organization") which comprise the statements of financial position as of December 31, 2013 and 2012, and the related statements of activities, functional expenses and cash flows for the years then ended, and the related notes to the financial statements.

#### Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

#### Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on our audits. We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

#### Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of Bruce T. Halle Assistance Fund as of December 31, 2013 and 2012, and the changes in its net assets and its cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America.

BDO USA, LLP
Phoenix, Arizona
June 13, 2014

# Financial Statements

Bruce T. Halle Assistance Fund

# **Statements of Financial Position**

December 31,		2012		
Assets Cash and cash equivalents Contributions receivable Investments, at fair value	\$	1,615,110 9,416 412,099	\$	986,176 52,975 418,342
Total Assets	\$	2,036,625	\$	1,457,493
Net assets Unrestricted	\$	2,036,625	\$	1,457,493
Total Net Assets	\$	2,036,625	\$	1,457,493

See accompanying auditor's report and notes to financial statements.

# Statements of Activities Unrestricted

Year ended December 31,	2013		2012
Support and Revenues			
Contributions Unrealized investment (loss) income Interest income	\$ 1,064,687 (6,243) 1,084	\$	937,057 27,855
Total Support and Revenues	1,059,528		964,912
Expenses			
Program Services Grants	466,752		427,864
Management and General Administrative and office	13,644		12,358
Total Expenses	480,396		440,222
Change in Net Assets	579,132	•	524,690
Net Assets, Beginning of Year	1,457,493		932,803
Net Assets, End of Year	\$ 2,036,625	\$	1,457,493

See accompanying auditor's report and notes to financial statements.

Bruce T. Halle Assistance Fund

# **Statement of Functional Expenses**

Year ended December 31, 2013

	<u>. –</u> .	Program Services		Management and General		Total
Grants:						
Medical/emergency daycare						
assistance, not covered by insurance	\$	184,613	\$	-	\$	184,613
Housing finance/rent assistance	•	90,786	•	-	•	90,786
Funeral and burial assistance		48,036		-		48,036
Credit card debt assistance		14,010		_		14,010
Emergency airfare assistance		13,195		-		13,195
Auto related assistance, not		·				.,
covered by insurance		39,485		-		39,485
Assistance with basic necessities		76,627		-		76,627
Printing and postage		•		216		216
Bank fees		-		1,684		1,684
Registration fees		-		1,253		1,253
Professional fees		-		10,491		10,491
Total Functional Expenses	\$	466,752	\$	13,644	\$	480,396

See accompanying auditor's report and notes to financial statements

Bruce T. Halle Assistance Fund

# **Statement of Functional Expenses**

Year ended December 31, 2012

		Program Services		Management and General		Fundraising	Total
Grants:							
Medical/emergency daycare							
assistance, not covered by insurance	Ś	210,342	\$	-	\$	- \$	210,342
Funeral and burial assistance	•	51,049	·	-	•	-	51,049
Emergency airfare assistance		22,762		-		-	22,762
Auto related assistance, not		,					,,
covered by insurance		22,883		-		-	22,883
Assistance with basic necessities		120,828		-		-	120,828
Printing and postage		· -		43		•	43
Bank fees		-		161		•	161
Registration fees		-		2,084		-	2,084
Professional fees		<u>-</u>		10,070		•	10,070
Total Functional Expenses	\$	427,864	\$	12,358	\$	- \$	440,222

See accompanying auditor's report and notes to financial statements.

# **Statements of Cash Flows**

Year ended December 31,	2013	 2012
Cash Flows from Operating Activities		
Increase in net assets	\$ 579,132	\$ 524,690
Adjustments to reconcile net increase in net assets to net		
cash provided by operating activities:  Net change in unrealized depreciation/(appreciation) of		
investments	6,243	(27,855)
Changes in operating assets:	<b>-,</b>	(=,,000)
Contributions receivable	43,559	(50,240)
Net Cash Provided by Operating Activities	 628,934	 446,595
Net Increase in Cash and Cash Equivalents	628,934	446,595
Cash and Cash Equivalents, beginning of year	 986,176	 539,581
Cash and Cash Equivalents, end of year	\$ 1,615,110	\$ 986,176

See accompanying auditor's report and notes to financial statements.

### Notes to Financial Statements December 31, 2013 and 2012

#### 1. Description of Organization

Bruce T. Halle Assistance Fund (the "Organization") is a not-for-profit Arizona organization, which was incorporated in December 2009. The Organization was established to provide basic assistance to employees of Discount Tire, America's Tire and Discount Tire Direct ("DT") who incur extraordinary expenses, damages or losses as a result of disasters or other emergency hardship situations. The Organization's primary purpose of business is to care for and provide employees of DT with confidential relief during unforeseen hardships, by raising awareness and promoting contributions to the Organization.

#### 2. Summary of Significant Accounting Policies

#### Basis of Presentation

The accompanying financial statements have been prepared in accordance with accounting principles generally accepted in the United States of America.

#### Financial Statement Presentation

The classification of a not-for-profit organization's net assets and its support, revenue and expenses is based on the existence or absence of donor-imposed restrictions. It requires that the amounts for each of three classes of net assets, permanently restricted, temporarily restricted, and unrestricted, be displayed in a statement of financial position and that the amounts of change in each of those classes of net assets be displayed in a statement of activities.

These classes are defined as follows:

#### Permanently Restricted

Net assets resulting from contributions and other inflows of assets whose use by the Organization is limited by donor-imposed stipulations that neither expire by passage of time nor can be fulfilled or otherwise removed by actions of the Organization. There were no permanently restricted net assets as of December 31, 2013 and 2012.

#### Temporarily Restricted

Net assets resulting from contributions and other inflows of assets whose use by the Organization is limited by donor-imposed stipulations that either expire by passage of time or can be fulfilled and removed by actions of the Organization pursuant to those stipulations. There were no temporarily restricted net assets as of December 31, 2013 and 2012.

#### Unrestricted

The part of net assets that is neither permanently nor temporarily restricted by donor-imposed stipulations. Net assets were all unrestricted as of December 31, 2013 and 2012.

#### Notes to Financial Statements December 31, 2013 and 2012

#### Cash and Cash Equivalents

The Organization considers all highly liquid instruments available for current use, with an original maturity of three months or less, to be cash equivalents.

#### Contributions Receivable

The Organization records contributions receivable for those funds that have been collected by DT but not yet remitted to the Organization as of year-end. Total contributions receivable were \$9,416 and \$52,975 as of December 31, 2013 and 2012, respectively.

#### Investments

Investments in equity securities with readily determinable fair values and all investments in debt securities are reported at their fair values in the statements of financial position. Unrealized gains and losses are included in the change in net assets. Investment income and gains restricted by a donor are reported as increases in unrestricted net assets if the restrictions are met (either by passage of time or by use) in the reporting period in which the income and gains are recognized. Investment income is recognized when received and consists of interest, dividends, realized and unrealized gains and losses.

#### Fair Value Measurements

Current accounting standards have established a fair value hierarchy that prioritizes the inputs used in valuation techniques. The hierarchy only prioritizes the inputs, not the valuation techniques themselves. The inputs used in a given valuation may fall in different levels of the fair value hierarchy. Observable inputs are inputs that market participants operating within the same marketplace as the Organization would use in pricing the Organization's asset or liability based on independently derived and observable market data. Unobservable inputs are inputs that cannot be sourced from a broad active market in which assets or liabilities identical or similar to those of the Organization are traded. The Organization estimates the price of any assets for which there are only unobservable inputs by using assumptions that market participants that have investments in the same or similar assets would use as determined by the money managers for each investment based on best information available in the circumstances. The input hierarchy is broken down into three levels based on the degree to which the exit price is independently observable or determinable as follows:

#### Level 1

Valuation based on quoted market prices in active markets for identical assets or liabilities. Since valuations are based on quoted prices that are readily and regularly available in an active market, valuation of these products does not entail a significant degree of judgment.

#### Level 2

Valuation based on quoted market prices of investments that are not actively traded or for which certain significant inputs are not observable, either directly or indirectly.

#### Level 3

Valuation based on inputs that are unobservable and reflect management's best estimate of what market participants would use as fair value.

#### Notes to Financial Statements December 31, 2013 and 2012

#### **Contributions**

The Organization records contributions as revenue when the promise to give is made. Contributions are classified as either unrestricted, temporarily restricted, or permanently restricted support. All contributions are considered to be available for unrestricted use unless specifically restricted by the donor. Restricted gifts and grants, received and utilized in the current year, are reflected in the statement of activities in the unrestricted class of net assets. In general, almost all contributions are designated as unrestricted, however, some donations have been raised by outside parties to be donated to specific employees and their families, which the Organization honors. These funds are classified as temporarily restricted until donated to the designated individuals.

#### **Contributed Services**

There were no services contributed to the Organization during the year ended December 31, 2013. An immaterial amount is reflected in the financial statements for donated services to the Organization from an outside party during the year ended December 31, 2012. The Organization receives donated services requiring general and specific expertise from DT to administer and manage the Organization. Many other individuals also volunteer their time and perform a variety of tasks that assist the Organization and to raise funds.

#### Income Taxes

The Organization is a not-for-profit organization that is exempt from Federal, state and local income taxes under Section 501(c)(3) of the Internal Revenue Code, and therefore, has made no provision for income taxes in the accompanying financial statements. In addition, the Organization has been determined by the Internal Revenue Service to be a "public charity" within the meaning of Section 170(b)(1)(A)(vi) of the Internal Revenue Code. There was no unrelated business income for the years ended December 31, 2013 and 2012. The Organization's Form 990, Return of Organization Exempt from Income Tax, for the years ending 2013 and 2012 are subject to examination by the Internal Revenue Service, generally for three years after the return is filed.

#### Accounting for Uncertainty in Income Taxes

The accounting standard on accounting for uncertainty in income taxes addresses the determination of whether tax benefits claimed or expected to be claimed on a tax return should be recorded in the financial statements. Under that guidance, the Organization may recognize the tax benefit from an uncertain tax position only if it is more likely than not that the tax position will be sustained on examination by taxing authorities based on the technical merits of the position. The Organization does not believe there are any material uncertain tax positions and, accordingly, it will not recognize any liability for unrecognized tax benefits. The Organization has filed for and received income tax exemptions in the jurisdictions where it is required to do so. Additionally, the Organization has filed Internal Revenue Service Form 990 tax returns, as required, and all other applicable returns in jurisdictions when it is required. For the years ended December 31, 2013 and 2012, there were no interest or penalties recorded or included in the statements of activities. With few exceptions, the Fund is no longer subject to tax exemptions by tax authorities for the years before 2011.

#### Notes to Financial Statements December 31, 2013 and 2012

#### Concentration of Credit Risk

Financial instruments which potentially subject the Organization to concentration of credit risk consist primarily of cash and cash equivalents and investments. All of the Company's non-interest bearing cash balances were fully insured at December 31, 2012 due to a temporary federal program in effect from December 31, 2010 through December 31, 2012. Under the program, there was no limit to the amount of insurance for eligible accounts. Beginning in 2013, insurance coverage reverted to \$250,000 per depositor at each financial institution. At December 31, 2013 the Company had cash and short term investments in excess of this insured limit. The Organization's investments totaling \$412,099 and \$418,342 respectively, as of December 31, 2013 and 2012 are held in a mutual fund that is not covered by insurance, therefore, all investments are subject to credit risk.

#### 3. Investments and Fair Value Measurements

The Organization's investment balance as of December 31, 2013 and 2012 consists of amounts held in a bond mutual fund, which is carried at its aggregate fair market value that is determined by quoted market prices. This investment can be liquidated at any time. The valuation is based on Level 1 inputs within the hierarchy used in measuring fair value. The Organization did not have investments valued using Level 2 or Level 3 inputs as of December 31, 2013 and 2012. In addition, there were no transfers between levels during the years ended December 31, 2013 and 2012.

#### 4. Related Party Transactions

The Board and Committee members are active employees within DT, and the primary recipients of the funds are DT employees and family members. Volunteers and donors are also primarily employees, families and retirees of DT.

The Organization did not receive any donated services that would qualify as contributions during the years ended December 31, 2013 and 2012. In addition, during the years ended December 31, 2013 and 2012, DT employees provided various administrative services that do not qualify as contributions.

#### 5. Investment (Loss) Income

Investment loss of \$6,243 for the year ended December 31, 2013 consisted of re-invested dividends in the amount of \$12,933 which was offset by unrealized losses in the amount of \$19,176. Investment income for the year ended December 31, 2012 consisted of re-invested dividends and unrealized gains in the amount of \$11,685 and \$16,170, respectively. All investment income or loss was considered unrestricted for the years ended December 31, 2013 and 2012.

#### 6. Temporarily Restricted Net Assets and Net Assets Released from Restriction

The Organization did not hold any temporarily restricted net assets during the years ended December 31, 2013 and 2012.

#### Notes to Financial Statements December 31, 2013 and 2012

#### 7. Unrestricted Contributions

Total unrestricted contributions totaled \$1,065,657 and \$937,057 for the years ended December 31, 2013 and 2012, respectively. These funds were collected from various fundraising events sponsored by outside organizations and/or groups of employees that donated net proceeds, DT employee payroll deductions, website donations, and general public support.

#### 8. Subsequent Events

The Organization's management has evaluated the possibility of subsequent events existing in the Organization's financial statements through June 13, 2014, the date the financial statements were available to be issued. There were no subsequent events that require adjustments to, or disclosures in, the financial statements.