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Form 990

Department-of the Treasury

Internal Revenue Service

Return of Organization Exempt From Income Tax

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.

2013

OMB No 1545-0047

Open to Public Inspection

<u>A</u>	For the	e 2013 calend	lar year, or tax year begin	ning		, 2013, and e	nding			, 20
В	Check if	applicable	C Name of organization LINS	LINENS INC AN ARIZ	ONA COR	?				D Employer identification no.
	Address	change	Doing Business As			· · · · · · · · · · · · · · · · · · ·				27-2942800
$\bar{\Box}$	Name ch	-		x if mail is not delivered to street addre			Room/	suite	1	E Telephone number
ŏ	Initial reti	-	1 E WASHINGTON		.337		270		l'	E reseptione flumber
H							1 2/0		-	21.750
님	Terminat			, country, and ZIP or foreign postal code	е					21,750
片	Amende		Phoenix, AZ 85				1			G Gross receipts \$
Ш	Application	on pending	· ·	pal officer Liz Balogh			H(a)	ls this a or	ouo reti	um for — ==
			Same as C abov	e				ls this a gr subordinal	tes'?	Yes X No
i	Tax-exer	mpt status 🛚 🗓	501(c)(3) 501(c) () ◀ (insert no)	or 52	27	H(b)	Are all sub	ordinat	es included? Yes No st (see instructions)
<u>J</u>	Website	. ► N/A					H(c)	Group exe	mption	number
K	Form of o	organization 🛚 🗓	Corporation Trust Ass	ociation Other ►	L	Year of formation 2	010	M State	of lega	il domicile AZ
P	art I	Summai	ry		•					
	1	Briefly desci	ribe the organization's miss	ion or most significant activities	s: RAIS	E FUNDS FOR	WOME	N WHO	ARE	INTREATMENT FOR
	i	CANCER	·	•						
Governance										<u></u>
퍨	-									
ě		Chook this h	nov b	n discontinued its operations or	diappood of	f mara than 250/	of ita na	t cocoto		
် (၁	2		_ •	•	•				١.	1
	3			rning body (Part VI, line 1a)					3	3
Activities &	4		,	s of the governing body (Part \	•				4	4
, ₹	5	Total number	er of individuals employed in	n calendar year 2013 (Part V, li	ıne 2a) .	· · · · · · · · ·			5	0
੍ਹੇ ਝੂ	6	Total number	er of volunteers (estimate if	necessary)					6	7
, •	7a	Total unrelat	ted business revenue from	Part Vill, column (C), line 12					7a	0
ر د	Ь	Net unrelate	ed business taxable income	from Form 990-T, line 34 .		. .			7b	0
?				·				Prior Year		Current Year
) o	8	Contribution	s and grants (Part VIII, line	1h)		<i></i>			,763	
			- ·	e 2g)						0
₹ 5	10	•	•	A), lines 3, 4, and 7d)		F		•		0
Revenue	10		, ,	•		F	-	1 5	,033	
- L	1		, , ,	nes 5, 6d, 8c, 9c, 10c, and 11e	•	-				
	12			(must equal Part VIII, column (,796	†
	13		sımılar amounts paid (Part	. , , ,		· · · · · · ·		14	,694	21,284
ດດ: ຄ	14	•	d to or for members (Part I)		ا ا	0 0 000				0
	15			e benefits (Part IX, column (A)		CENT	-		_	0
Expenses	16a		- ·	column (A), line 11e)	81		- I			1 0
8	. 6		ising expenses (Part IX, co		7 00	7 2 2 3 14	181			<u> </u>
Ω	17	Other exper	nses (Part IX, column (A), li	nes 11a-11d, 11f-24e) 💎 🌡	$i_{ij} \cdots i$	', 's A'CAI& [191	6	,417	15,691
	18	Total expens	ses. Add lines 13-17 (mus	t equal Part IX, column (A), Iเก็ย	e 25)		188	21	,111	L 36,975
	19	Revenue les	ss expenses Subtract line	18 from line 12	OG1	DENI. 11.15	3~~	(1	.,315	(18,516
5	S .					- 10 (C)	Begjaniı	ng of Curren		End of Year
Net Assets or	를 20	Total assets	(Part X, line 16)		. .				,436	
A	ž 21									0
2	22		or fund balances Subtract					12	,436	21,284
P	art II		ure Block						,	30,000
				m, including accompanying schedules	and statements,	and to the best of my	knowledg	e and belief,	ıt ıs	
true,	correct, a	and complete Dec	claration of preparer (other than offi	cer) is based on all information of which	h preparer has a	ny knowledge				
			Pologh t	T. 1 13-1	Ala					10/9/11
Sig	n		Balogh Lire of officer	Juny 1000	2 Arc				l_ Date	10/1//
	_									'
He	re		Balogh, PRESIDENT	<u>.</u>						
			r print name and title		-	Data		_	, ,	
_		Print/Type pr	reparer's name	Preparer's signature		Date		Check _] #	PTIN
Pa			PENEVOLPE	FRANK PENEVOLPE		10-09-2014		self-employ	/ed	P01249363
	epare		▶ PENEVOLI	PE&PENEVOLPE TAX PRI	EPARATIO	N	Firm's	EIN 🕨		
Us	e Onl	y Firm's addre	ss ▶ 342 ATL	ANTIC CITY BLVD			Phone	no		
_			Beachwood	od NJ 08722			1	7	32-2	40-2355
Ma	y the IR	S discuss this	s return with the preparer sl	nown above? (see instructions)	· · · · · · · · · · ·	<u> </u>	<u></u> .		🗌 Yes 💹 No
For	Paper	work Reduct	ion Act Notice, see the se	parate instructions.						Form 990 (2013)

	990 (2343) LINS LINENS INC AN ARIZONA CORP	27-2942800	Page 2
Pa	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		🛛 _
1	Briefly describe the organization's mission:		
	RAISE FUNDS FOR WOMEN WHO ARE INTREATMENT FOR CANCER		
2	Did the organization undertake any significant program services during the year which were not listed on the	_	_
	prior Form 990 or 990-EZ?	🗌 Yes	X No
	If "Yes," describe these new services on Schedule O		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program	_	_
	services?	∐ Yes	X No
	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 measur		
	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to o	thers,	
	the total expenses, and revenue, if any, for each program service reported.		
4-	(O-1-)		
4a	(Code:) (Expenses \$ including grants of \$) (Revenue	\$)
	COMPLETED HEALING SANCTUARY'S FOR 7 INDIVIDUALS IN 2013		
		-	
		-	
4b	(Code) (Expenses \$ including grants of \$) (Revenue	<u> </u>	
70	/ Codd / (Expenses ψ) (Nevende	Ψ	
4c	(Code) (Expenses \$ including grants of \$) (Revenue	<u> </u>)
		·	
4d	Other program services. (Describe in Schedule O.)		
	(Expenses \$ including grants of \$) (Revenue \$)	
40	Total program seques expenses.		

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,"		х	
_	complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	^	
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		х
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		Х
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		X
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		X
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		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		Х
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		i	
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		Х
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		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable	1		
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		X
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more	441		v
_	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
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	44.		Х
a	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets	11c		
u	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
0	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
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		Х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		Х
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		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
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		_X_
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	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other	_	1	٦,
4-	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	ا جد	}	v
10	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		<u> </u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	40	Ì	v
19	Part VIII, lines 1c and 8a? If "Yes" complete Schedule G, Part II	18		<u> </u>
13	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		х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a		41
<u> </u>				

Part IV

Checklist of Required Schedules (continued) Yes No Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or 21 Х Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States 22 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III Х Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the 23 organization's current and former officers, directors, trustees, key employees, and highest compensated X 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 25a Х 24a Did the organization invest any proceeds of tax-exempt bonds beyond a temporary penod exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year 24c Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? d 24d 25a 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 X 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 pnor Forms 990 or 990-EZ? 25b X 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 X 26 27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III X 27 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): Х A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28a A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete X 28b 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 Х 28c 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified Х Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, 31 X 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes." 32 Х Did the organization own 100% of an entity disregarded as separate from the organization under Regulations 33 Х Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, 34 Х Х 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Х 35b Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable 36 Х 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, X 37 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 38

Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 0 Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0 Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? X 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 b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? X Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a X 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 At any time duning 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, secunties account, or other financial X 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 X 5a Ь Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b If "Yes" to line 5a or 5b, did the organization file Form 8886-T? C 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? Х If "Yes," did the organization include with every solicitation an express statement that such contributions or 7 Organizations that may receive deductible contributions under section 170(c). 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? Х 7a If "Yes," did the organization notify the donor of the value of the goods or services provided? b 7b Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was Х d Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Х 7f If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? g 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? Х Sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 4966? Х 9a b Х Did the organization make a distribution to a donor, donor advisor, or related person? 9b 10 Section 501(c)(7) organizations. Enter. Initiation fees and capital contributions included on Part VIII, line 12 а b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 11 Section 501(c)(12) organizations. Enter Gross income from other sources (Do not net amounts due or paid to other sources h 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b b 13 Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state? а 13a Note. 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 b Enter the amount of reserves on hand c 14a Х Did the organization receive any payments for indoor tanning services during the tax year? 14a

If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

14b

Pa	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a	'No"		
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.			
	Check if Schedule O contains a response or note to any line in the Part VI			
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	r		
	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			
	committee, explain in Schedule O	1		
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	† †	·	
_		,		v
	any other officer, director, trustee, or key employee?	2		<u> </u>
3	Did the organization delegate control over management duties customanly performed by or under the direct			3.5
_	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		X
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		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,		l	
	stockholders, or persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:			
а	The governing body?	8a	Ī	Х
b	Each committee with authority to act on behalf of the governing body?	8b	,	Х
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		Х
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	100		
	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 filling the form?	11a		Х
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	Ì	Х
 b	Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	120		
·	decembe in Schedule O how this was done	12c		
13	Did the organization have a written whistleblower policy?	13		X
14	Did the organization have a written document retention and destruction policy?	\vdash		$\frac{\Lambda}{X}$
	Did the process for determining compensation of the following persons include a review and approval by	14		
15	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
_		45-		v
a	The organization's CEO, Executive Director, or top management official	15a		X_
b	, , , , , , , , , , , , , , , , , , ,	15b		X
4.0	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity dunng the year?	16a		X
þ	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	1		
	organization's exempt status with respect to such arrangements?	16b		X
Sec	tion C. Disclosure			_
17	List the states with which a copy of this Form 990 is required to be filed			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)			
	available for public inspection. Indicate how you made these available. Check all that apply.			
	aranable for passe ineposition introduction yet made alooe available. Officer all alar apply.			
	Own website Another's website W Upon request Other (explain in Schedule O)			
19				
19	☐ Own website ☐ Another's website ☐ Upon request ☐ Other (explain in Schedule O)			
19 20	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 of interest policy, and			
	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 of interest policy, and financial statements available to the public during the tax year			

Form	990	(2013)	

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LINS LINENS INC AN ARIZONA CORP

27-2942800

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Form 990 (2013)

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 neither the organization nor any related organization compensated any current officer, director, or trustee (A) (B) (C) (E) (F) Name and Title Average Position Reportable Reportable Estimated hours per compensation compensation from amount of (do not check more than one week (list any from related other box, unless person is both an hours for the compensation organizations (W-2/1099-MISC) related organization from the officer and a director/trustee) organizations (W-2/1099-MISC) organization Individual or director Institutional Highest compensated below dotted and related organizations employee trustee (1) Liz Balogh X PRESIDENT 0 0 0 (2) MICHARLINE STEVENS VP TREASURER 0 0 0 (3) LIN M SALERNO SECRETARY X 0 0 (4) (5) (6) (7) (8) (9) (10) (11) (12) (13)_ (14)_

(A) Name and title	(B) Average hours per week (list any hours for	officer and director/trustee)						(D) Reportable compensation from the	(E) Reportable compensation from related organizations	com	(F) timated ount of other pensation
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	C) from the organization and relations organization	
(15)											
(16)									_		
<u>(17)</u>											
(18)					_						
(19)									-		
(20)											
(21)											
(22)											
(23)											
(24)								-			
(25)											
1b Sub-total	ion A .						. • •	0	0		0
Total number of individuals (including but not limite reportable compensation from the organization							nore	than \$100,000 of	0	·	
3 Did the organization list any former officer, directo employee on line 1a? If "Yes," complete Schedule		-				-		pensated		3	Yes No
For any individual listed on line 1a, is the sum of re organization and related organizations greater than individual	portable comp \$150,000? If	ensat "Yes,"	ion a ' con	nd c	the e S	r comp chedul	ens: e J f	ation from the for such		4	X
5 Did any person listed on line 1a receive or accrue for services rendered to the organization? If "Yes,"	compensation	from a	any ι	ınrel	atec	d organ	nzat			5	X
Section B. Independent Contractors											
 Complete this table for your five highest compensation from the organization. Report compensation. 											
(A) Name and business address	S			_				(B) Description of			C) ensation
	-										
			-				••				
Total number of independent contractors (including	but not limite	d to th	ose	listed	da b	ove) w	/ho				

Part '	VIII	Statement of Revenue		-			
	•	Check if Schedule O contains a response or n	ote to any line in thi	s Part VIII			[
•			·	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ts ts	1a	Federated campaigns 1a					
i a	Ь	Membership dues 1b					
عَ ق	C	Fundraising events 1c					
ar /	d	Related organizations 1d	-				
e, ë E	е	Government grants (contributions) 1e					
Contributions, Gifts, Grants and Other Similar Amounts	f	All other contributions, gifts, grants,					
the the		and similar amounts not included above 1f	15,975			‡	
a de de	g	Noncash contributions included in lines 1a-1f: \$					
S E	h	Total. Add lines 1a-1f		15,975	,		
			Business Code				
2	2a						
Program Service Revenue	b						
<u>9</u>	С						-
کھے	d			-			
Ē	е		-				
<u>5</u>	f	All other program service revenue					
	g	Total. Add lines 2a-2f					
	3	Investment income (including dividends, interest,					
		and other similar amounts)					
	4	Income from investment of tax-exempt bond proc	eeds▶				
	5	Royalties					
		(ı) 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) Secunties	(II) Other				
		assets other than inventory					
	ь	Less: cost or other basis		-			
		and sales expenses					
		Gain or (loss)					
-		Net gain or (loss)					,
ane	8a	Gross income from fundraising		:			
946		events (not including \$					
Other Revenu		of contributions reported on line 1c).					
ŧ		See Part IV, line 18 a					
0		Less: direct expenses b	L				
		Net income or (loss) from fundraising events .	· · · · · · · •				" 11 - 11 - 1
	9a	Gross income from gaming activities.					
	١.	See Part IV, line 19 a					
		Less: direct expenses b					
		Net income or (loss) from gaming activities					
	10a	Gross sales of inventory, less					
	١.	returns and allowances a					
		Less: cost of goods sold b					
	<u>c</u>	Net income or (loss) from sales of inventory		2,484	2,484		
	-	Miscellaneous Revenue	Business Code			· ·	
	11a						
	Ь						
	C	All all and a second				-	
		All other revenue	<u> </u>			<u> </u>	
		Total. Add lines 11a-11d	1			<u></u>	
	12	Total revenue. See instructions		18,459	2,484	0	0

Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

	Check if Schedule O contains a response or note to ar	ny line in this Part IX			<u>.</u> [
Dοι	not include amounts reported on lines 6b, 7b,	(A)	(B)	(C)	(D)
8b, 9	9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the United States See Part IV, line 21 .				
2	Grants and other assistance to individuals in				
	the United States. See Part IV, line 22	21,284	21,284		
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				
5	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	Other salanes and wages				
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees):			<u> </u>	
а	Management				
b	Legal				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
C	Accounting	100	100		
d	Lobbying				-
0	Professional fundraising services See Part IV, line 17 .			14- <u>24</u> -31, 11111	-
f	Investment management fees			<u>.</u>	
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	519	519		
13	Office expenses	524	524		
14	Information technology	<u>-</u>			
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses				
40	for any federal, state, or local public officials				
19 20	Conferences, conventions, and meetings			<u> </u>	
20 21	Interest				<u> </u>
22	Depreciation, depletion, and amortization				
23	Insurance				
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	SHIPPING	79	79	······································	
b	INVENTORY	12,090	12,090		
C	MISC OTHER	2,379	2,379		
d					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e .	36,975	36,975	0	0
26	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				
	following SOP 98-2 (ASC 958-720)				

Part X

Balance Sheet

		Check if Schedule O contains a response or note to any line in this Part X	(A)		(B)
	<u> </u>		Beginning of year		End of year
	1	Cash - non-interest-bearing	2,870	1	9,194
	2	Savings and temporary cash investments	<u> </u>	2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors,		1	
		trustees, key employees, and highest compensated employees		1 1	
		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			
		organizations (see instructions) Complete Part II of Schedule L		6	
ş	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use	9,566	8	12,090
	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 secunties		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)	12,436	16	21,284
	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	
Liabilities	22	Loans and other payables to current and former officers, directors,			
pili		trustees, key employees, highest compensated employees, and		1 1	
Lıa		disqualified persons Complete Part II of Schedule L		22	
	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
		Organizations that follow SFAS 117 (ASC 958), check here ▶ ☐ and			
108	27	complete lines 27 through 29, and lines 33 and 34.		!	
alar	27	Unrestricted net assets		27	
B	28 29	Temporanly restricted net assets		28	
ū	29	Permanently restricted net assets		29	·····
of F		Organizations that do not follow SFAS 117 (ASC 958), check here		1	
ts (30	complete lines 30 through 34. Capital stock or trust principal, or current funds		20	
SS	30 31	Paid-in or capital surplus, or land, building, or equipment fund		30	
Net Assets of Fund Balances	32	Retained earnings, endowment, accumulated income, or other funds	12,436	32	21,284
Ne	33	Total net assets or fund balances		33	21,284
	34	Total liabilities and net assets/fund balances	12,436 12,436	34	21,284
		rown mapmiles and het assetshally balances	14,430	ا بسر ز	41,404

Part XI Reconciliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI	$\overline{}$	Form 990 (2013) LINS LINENS INC AN ARIZONA CORP 27-		0	Page 1	
1 Total revenue (must equal Part XIII, column (A), line 12) 2 Total expenses (must equal Part IX, column (A), line 25) 3 Revenue less expenses. Subtract line 2 from line 1 3 (18,516) 4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 5 Net unrealized gains (losses) on investments 5 Conated services and use of facilities 6 Prior period adjustments 7 Investment expenses 7 Prior period adjustments 8 Prior period adjustments 9 Other changes in net assets or fund balances (explain in Schedule O) 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)) Part XIII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII 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," explain in Schedule O 2a Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant? Yes, check a box below to indicate whether the financial statements for the year were audited on a separate basis Consolidated basis Both consolidated and separate basis Separate basis Consolidated basis Both consolidated and separate basis Separate basis Consolidated basis Both consolidated and separate basis Separate basis Consolidated basis Both consolidated and separate basis Separate basis Consolidated basis Both consolidated and separate basis Separate basis Consolidated basis Both consolidated and separate basis Separate basis Consolidated basis Both consolidated and se	Pa	Reconciliation of Net Assets				
1 Total revenue (must equal Part XIII, column (A), line 12) 2 Total expenses (must equal Part IX, column (A), line 25) 3 Revenue less expenses. Subtract line 2 from line 1 3 (18,516) 4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 5 Net unrealized gains (losses) on investments 5 Conated services and use of facilities 6 Prior period adjustments 7 Investment expenses 7 Prior period adjustments 8 Prior period adjustments 9 Other changes in net assets or fund balances (explain in Schedule O) 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)) Part XIII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII 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," explain in Schedule O 2a Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant? Yes, check a box below to indicate whether the financial statements for the year were audited on a separate basis Consolidated basis Both consolidated and separate basis Separate basis Consolidated basis Both consolidated and separate basis Separate basis Consolidated basis Both consolidated and separate basis Separate basis Consolidated basis Both consolidated and separate basis Separate basis Consolidated basis Both consolidated and separate basis Separate basis Consolidated basis Both consolidated and separate basis Separate basis Consolidated basis Both consolidated and se		Check if Schedule O contains a response or note to any line in this Part XI			<u>.</u>	. 🗆
Revenue less expenses. Subtract line 2 from line 1 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) Net unrealized gains (losses) on investments Donated services and use of facilities Investment expenses Prior period adjustments Prior period adjustments Prior period adjustments Reporting Net assets or fund balances (explain in Schedule O) Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)) Part XIII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII 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," explain in Schedule O Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis C If "Yes" to line 2 ao r 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. As as a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	1	Total revenue (must equal Part VIII, column (A), line 12)	1			
Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) Net unrealized gains (losses) on investments Donated services and use of facilities Obnated services and use of facilities Other changes in net assets or fund balances (explain in Schedule O) Other changes in net assets or fund balances (explain in Schedule O) Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)) Check if Schedule O contains a response or note to any line in this Part XII Accounting method used to prepare the Form 990: Cash Accrual Other If the organization changed its method of accounting from a pnor year or checked "Other," explain in Schedule O Accounting method used to prepare the Form 990: Cash Accrual Other If the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both Cash Separate basis Consolidated basis or both: Separate basis Consolidated basis Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: Separate basis Consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis If "Yes," to line 2 aor 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	2	Total expenses (must equal Part IX, column (A), line 25)	2		36,	975
5 Net unrealized gains (losses) on investments 6 Donated services and use of facilities 7 Investment expenses 7 7 8 Prior period adjustments 8 Other changes in net assets or fund balances (explain in Schedule O) 9 Other changes in net assets or fund balances (explain in Schedule O) 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)) Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII 1 Accounting method used to prepare the Form 990:	3	Revenue less expenses. Subtract line 2 from line 1	3		(18,	516)
6 Donated services and use of facilities 7 Investment expenses 7 Prior period adjustments 9 Other changes in net assets or fund balances (explain in Schedule O) 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)) Check if Schedule O contains a response or note to any line in this Part XII 10 (6,080) Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII	4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		12,	436
7 Investment expenses 7 8 Prior period adjustments 8 9 Other changes in net assets or fund balances (explain in Schedule O) 9 0 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 (6, 080) Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII	5	Net unrealized gains (losses) on investments	5			
8 Prior period adjustments 9 Other changes in net assets or fund balances (explain in Schedule O) 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)) Part XIII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII 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," explain in Schedule O 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 compiled or reviewed on a separate basis, consolidated basis or both Separate basis Consolidated basis Both consolidated and separate basis 5 Were the organization's financial statements audited by an independent accountant? 1 If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: 2 Separate basis, consolidated basis, or both: 3 Separate basis Consolidated basis Both consolidated and separate basis 4 If "Yes," to line 2 aor 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 If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. 3 As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? 3 X	6	Donated services and use of facilities	6			
9 Other changes in net assets or fund balances (explain in Schedule O) Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)) The extra XIII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XIII 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," explain in Schedule O 2a Were the organization's financial statements compiled or reviewed by an independent accountant? 2a X If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis b Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: Separate basis, consolidated basis, or both: Separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or complation 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. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? X	7	Investment expenses	7			
Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)) Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII Yes No	8	Prior period adjustments	8			
Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)) Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII Yes No	9	Other changes in net assets or fund balances (explain in Schedule O)	9			0
33, column (B)) (6, 080) Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII Ves No Ves	10	· · · · · · · · · · · · · · · · · · ·		-		
Check if Schedule O contains a response or note to any line in this Part XII Check if Schedule O contains a response or note to any line in this Part XII Teach of the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: Separate basis Consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis If "Yes," the change 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 oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?			10		(6.	(080
Check if Schedule O contains a response or note to any line in this Part XII Accounting method used to prepare the Form 990: Cash Accrual Other	Pa		· 			
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," explain in Schedule O 2a Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis b Were the organization's financial statements audited by an independent accountant? 2b X If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: Separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis 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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? X						. П
If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O 2a Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis b Were the organization's financial statements audited by an independent accountant? 2b X If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis 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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? 3a X				_		
If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O 2a Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis b Were the organization's financial statements audited by an independent accountant? 2b X If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis 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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? 3a X	1	Accounting method used to prepare the Form 990: XX Cash Accrual Other			-	
Schedule O 2a Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis b Were the organization's financial statements audited by an independent accountant? 2b X If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis 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? 2c If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? 3a X		· · · · · · · · · · · · · · · · · · ·			1	
Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both Separate basis					Ī	
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis	2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	T X	
reviewed on a separate basis, consolidated basis, or both Separate basis					<u> </u>	
Separate basis					ŧ	
b Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: 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 oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?					1	
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: 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 oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? 3a X	ь	— · — ,		2h	Ī	x
separate basis, consolidated basis, or both: 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 oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. Schedule O. As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? X	•				 	
Separate basis Consolidated basis Both consolidated and separate basis 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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		·			1	
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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		_'			ŧ	
of the audit, review, or compilation of its financial statements and selection of an independent accountant?	_	•			ŧ	
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	·	· · · · · · · · · · · · · · · · · · ·		20	1	}
Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?				20	<u> </u>	<u></u>
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?					Ī	
the Single Audit Act and OMB Circular A-133?	2-				Ŧ	1
<u> </u>	Ja			2-		v
	-	•		Ja	 	
required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	O	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		24		

Form 990 (2013)

EEA

SCHEDUŁE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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

▶ 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	identificatio	n number		
_	_	INENS INC AN A								942800			
Pa	rt l	Reason for P	ublic Charity	Status (All organiz	zations m	ust com	plete this	s part.)	See instr	uctions.	<u> </u>		
The	orgai			use it is: (For lines 1 thro	-	-							
1	\sqcup			ssociation of churches d		section 1	70(b)(1)(A)(i).					
2	\sqcup			1)(A)(ii). (Attach Schedul									
3	\sqcup			rvice organization describ									
4	Ш	A medical research of	organization opera	ited in conjunction with a	hospital de	scribed in	section 17	'0(b)(1)(A)	(iii). Enter	the			
	_	hospital's name, city	, and state										
5	Ш	An organization oper	rated for the benef	it of a college or universit	ty owned or	operated	by a goven	nmental u	nıt describe	ed in			
	_	section 170(b)(1)(A))(iv). (Complete P	art II.)									
6	Ш	A federal, state, or lo	cal government or	r governmental unit descr	nbed in sec	tion 170(b)(1)(A)(v).						
7	Ш			a substantial part of its s	support from	n a governi	mental unit	or from th	e general p	oublic			
	_	described in section 170(b)(1)(A)(vi). (Complete Part II)											
8	Ц	A community trust de	escribed in sectio i	n 170(b)(1)(A)(vi). (Comp	plete Part II	.)							
9	X	An organization that	normally receives	: (1) more than 33 1/3% o	of its suppo	rt from con	tributions,	membersh	nip fees, ar	ıd gross			
		receipts from activitie	es related to its ex	empt functions - subject t	to certain e	xceptions,	and (2) no	more than	n 33 1/3% d	of its			
		• • •	support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses										
				30, 1975. See section 5		· ·	=						
10	\sqcup		•	ed exclusively to test for p			• •						
11	Ш			ed exclusively for the bend					-				
				orted organizations descr		•	, , ,	٠,	• •	ection			
			_	s the type of supporting o	-				_				
		a TypeI	ь ∐ Тур			_			∫ Type III-		onally int	egrate	d
θ	Ц			organization is not contro	-								
			n managers and of	ther than one or more put	blicly suppo	rted organ	izations de	scribed in	section 50	19(a)(1)			
		or section 509(a)(2).											
f		-		etermination from the IRS			pe II, or Ty	pe III supp	porting				_
_		organization, check (• • •	L
g			vo, nas the organi	zation accepted any gift o	or contributi	on from ar	ly of the						
		following persons?				.41		1 ()					T
			-	controls, either alone or	-	•		` '			[44 #F	Yes	No
		· · · · · · · ·	• •	the supported organization							11g(i)	1 -	├
			•	cribed in (i) above? on described in (i) or (ii) al							11g(ii)		-
h		• •		t the supported organizati							11g(iii	<u> 11 </u>	<u> </u>
	/i) Na	ame of supported	(ii) EIN	(iii) Type of organization	(iv) is the or	manization	(v) Did yo	u notifi	(va) le	r the			
	(.,	organization	(1) (1)	(described on lines 1-9	in col (i) lis	•	the organi	•	(vi) li organizati		(vii) Amo	unt of mo support	onetary
				above or IRC section (see instructions))	governing o	locument?	col (i) o	of your port?	(ı) organız	ed in the S ?			
				(see manuctions))	Yes	No	Yes	No	Yes	No	1		
(A)				 	1 .63	110	165	110	163	110	 		
٧٠,													
(B)					1	<u> </u>		<u> </u>	<u> </u>				 -
` '													
(C)						1					1		
(D)													
(E)		 -					 -		 		1		
\~ /													
Tota	<u> </u>						<u> </u>		<u> </u>				

27-2942800

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 falls to qualify under the tests listed below, please complete Part III \

	Air A Dublic Occupation	ians to quanty	under the test	s listed below,	please complet	e Part III.)				
	tion A. Public Support	1	T	1	I	T				
Cale	ndar year (or fiscal year beginning in) >	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total			
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")			_						
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 5	Total. Add lines 1 through 3 The portion of total contributions by				<u> </u>					
	each person (other than a				•					
	governmental unit or publicly				1					
	supported organization) included on		1		Ī					
	line 1 that exceeds 2% of the amount		į							
	shown on line 11, column (f)		1							
6	Public support. Subtract line 5 from line 4			·						
	tion B. Total Support	Ł	t	.1	.	<u></u>	1			
	ndar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total			
7	Amounts from line 4	(0) 2000	(5) 2010	(6) 2511	(4) 2012	(0,2010	(1) 10421			
8	Gross income from interest, dividends,					<u> </u>	 			
•	payments received on securities loans, rents, royalties and income from similar sources									
9	Net income from unrelated business activities, whether or not the business is regularly carned on									
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)									
11	Total support. Add lines 7 through 10 .		1							
12	Gross receipts from related activities, etc. (s	see instructions)				12				
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) organization, check this box and stop here									
Sec	tion C. Computation of Public S	upport Perce	ntage							
14	Public support percentage for 2013 (line 6,			(f))		14	%			
15	Public support percentage from 2012 Scheo		=				%			
16a	33 1/3% support test - 2013. If the organize	ation did not chec	k the box on line 1	3, and line 14 is 33	1/3% or more, ched	ck this				
	box and stop here. The organization qualifies as a publicly supported organization									
b	33 1/3% support test - 2012. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% 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									
	-	organization								
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									
	supported organization			-	•	~	▶ □			
18	Private foundation. If the organization did									
-	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.)

Se	ction A. Public Support						
Cal	endar year (or fiscal year beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")		5,769	4,291	4,763	15,873	30,696
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 bus under sec 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		5,769	4,291	4,763	15,873	30,696
7a	Amounts included on lines 1, 2, and 3						
-	received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b			İ			
8	Public support (Subtract line 7c from						
50	line 6)			<u>. </u>			30,696
	ction B. Total Support endar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
	Amounts from line 6	(a) 2009	5,769	4,291	4,763	15,873	30,696
			3,703	7,231	4,703	13,873	30,030
l0a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources		5,769	4,291	4,763	15,873	30,690
	Toyanies and income normalinal sources		3,703	4,231	4,703	13,873	30,030
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b		5,769	4,291	4,763	15,873	30,696
14	Net income from unrelated business						
	activities not included in line 10b, whether or not the business is regularly carried on						
2	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
3	Total support. (Add lines 9, 10c, 11, and 12.)	0	11,538	8,582	9,526	31,746	61,392
4	First five years. If the Form 990 is for the org organization, check this box and stop here	ganization's first, se	econd, third, fourth,	or fifth tax year as	a section 501(c)(3)	_
Se	ction C. Computation of Public Su					<u> </u>	<u></u> <u>ы</u>
5	Public support percentage for 2013 (line 8, co			· · · · · · · · ·		15	9
6	Public support percentage from 2012 Schedu					16	9
Se	ction D. Computation of Investme				<u> </u>	10 1	
7	Investment income percentage for 2013 (line			ımn (f))		17	9
8	Investment income percentage from 2012 Sci					18	9
9a	33 1/3% support tests - 2013. If the organiza	d line	▶ □				
b	33 1/3% support tests - 2012. If the organiza	ation did not check	a box on line 14 or	line 19a, and line 1	6 is more than 33	1/3%, and	
20	line 18 is not more than 33 1/3%, check this be Private foundation. If the organization did no			•	• • • •	iizavon	▶ □