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

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

2013

OMB No 1545-1150

Department of the Treasury Internal Revenue Service

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

C Name of organization    Address change   BEAVER LAKE SAILING CLUB, INC.   71-0536267   Name change   Initial return   Terminated   Amended return   Application pending   FAYETTEVILLE, AR 72701-4345   Tax-exempt status (check only one) —	per		
Name change Initial return Terminated Amended return Application pending  G Accounting Method I Website: ► BEAVERLAKESAILCLUB.COM J Tax-exempt status (check only one) —			
Name change   Initial return   Terminated   Amended return   Application pending   FAYETTEVILLE, AR 72701-4345   P.O. BEAVERLAKESAILCLUB.COM   Form of organization   Trust   Association   Other   Add lines 5b, 6c, and 7b, to line 9 to determine gross receipts If gross receipts are \$200,000 or more, or if total assets (Part II, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ   Fart II   Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part II)   Check if the organization is not delivered to street address)   Room/suite   Fayerian   Telephone number   479-643-2282     Arghidal return   479-643-2282   Fart II   Group Exemption   Number   Fayerian   Fay			
Initial return   Terminated   Amended return   Application pending   FAYETTEVILLE, AR 72701-4345   F Group Exemption   Number   Number   FAYETTEVILLE, AR 72701-4345   F Group Exemption   Number   F Group Exemption			
City or town, state or province, country, and ZIP or foreign postal code    Amended return			
Amended return  Application pending  FAYETTEVILLE, AR 72701-4345  G Accounting Method			
G Accounting Method			
I Website: ► BEAVERLAKESAILCLUB.COM  J Tax-exempt status (check only one) —			
J Tax-exempt status (check only one) — ☐ 501(c)(3) ☑ 501(c) ( 7 ) ◀ (insert no ) ☐ 4947(a)(1) or ☐ 527 (Form 990, 990-EZ, or 990-PK Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other L Add lines 5b, 6c, and 7b, to line 9 to determine gross receipts If gross receipts are \$200,000 or more, or if total assets (Part II, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ	on is <b>not</b>		
K Form of organization	equired to attach Schedule B		
K Form of organization	)		
(Part II, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ  Part I  Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I)  Check if the organization used Schedule O to respond to any question in this Part I			
(Part II, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ  Part I  Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I)  Check if the organization used Schedule O to respond to any question in this Part I			
Check if the organization used Schedule O to respond to any question in this Part I	94,436		
Check if the organization used Schedule O to respond to any question in this Part I	34,430		
I I Continutions, dits, drants, and similar amounts received			
	15,246		
2 Program service revenue including government fees and contracts	_		
3 Membership dues and assessments	76,415		
4 Investment income			
5a Gross amount from sale of assets other than inventory			
b Less: cost or other basis and sales expenses			
c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) 5c			
6 Gaming and fundraising events			
a Gross income from gaming (attach Schedule G if greater than			
\$15,000)			
b Gross income from fundraising events (not including \$ of contributions			
from fundraising events reported on line 1) (attach Schedule G if the			
The second direct expenses from garning and fandraising events			
d Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract			
line 6c)			
7a Gross sales of inventory, less returns and allowances			
b Less. cost of goods sold			
c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	311		
8 Other revenue (describe in Schedule O)	2,464		
9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	94,436		
40 Cramba and availar area of the first of the first of the data of the first of the data of the first of the			
11 Benefits paid to or for members			
2 12 Salaries, other compensation, and employee benefits			
13 Professional fees and other payments to independent contractors . NAY 0 5 2014 . VI 13			
14 Occupancy, Terit, utilities, and maintenance	75,739		
- 10 Timing, papileations, postage, and shipping	378		
16 Other expenses (describe in Schedule O)	6224		
17 Total expenses. Add lines 10 through 16			
2 18 Excess or (deficit) for the year (Subtract line 17 from line 9)	82,341		
9 19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with	82,341 12,095		
end-of-year figure reported on prior year's return)			
Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)  Other changes in net assets or fund balances (explain in Schedule O)	12,095		
21 Net assets or fund balances at end of year. Combine lines 18 through 20	12,095 461,801		
For Paperwork Reduction Act Notice, see the separate instructions.  Cat No 10642   Form 990-E	12,095		

Pa	rt II Balance Sheets (see the instructions f	•				
	Check if the organization used Schedule	O to respond to a	ny question in this			<u> </u>
				(A) Beginning of year	<del> </del>	(B) End of year
22	Cash, savings, and investments			12,926		25,021
23	Land and buildings			265,700		265,700
24	Other assets (describe in Schedule O)			183,175	-	183,175
25	Total assets			461,801	$\overline{}$	473,865
26	Total liabilities (describe in Schedule O)				26	
27	Net assets or fund balances (line 27 of column			461,801	27	473,896
Par	t III Statement of Program Service Accom	•		•		Expenses
\A/ba	Check if the organization used Schedule t is the organization's primary exempt purpose?	O to respond to al	ny question in this	Part III		uired for section
						c)(3) and 501(c)(4) nizations and section
as n	cribe the organization's program service accomplisheasured by expenses. In a clear and concise mons benefited, and other relevant information for ea	nanner, describe the ach program title.	e services provide	d, the number of		(a)(1) trusts, optional thers)
28	Provide recreational sailing facilities for approximate		s included boat laur	ich,		
	mooring/docking, picnic shelter and clubhouse facili	ties.			1	
	/O					
29	(Grants \$ ) If this amount				28a	
29						
	(Grants \$ ) If this amount	in all relation for a sure	nto charle have	<b></b>	00-	
30					29a	
50						
	(Grants \$ ) If this amount	includes foreign gra	ents check here	▶ □	30a	
31	(Grants \$ ) If this amount includes foreign grants, check here ▶ □ Other program services (describe in Schedule O)					
	(Grants \$) If this amount includes foreign grants, check here ▶ □					
32	Total program service expenses (add lines 28a t	through 31a)		<b>.</b>	31a 32	
	t IV List of Officers, Directors, Trustees, and Key				nstruc	tions for Part IV)
	Check if the organization used Schedule	O to respond to ar	ny question in this	Part IV		🗀
	(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISO (if not paid, enter -0-)		O	Estimated amount of ther compensation
Joe I	Benson					<u> </u>
P.O.	Box 8790, Fayetteville, AR 72703	Commodore - 8 hrs	1		}	
Mich	ael Carron	Vice Commodore -				
120 V	Noodside Lane, Rogers, AR 72756	4 hrs				· · · · · · · · · · · · · · · · · · ·
Rich	ard Harper	Rear Commodore -				
318 N	lorthcrest Ave., Lowell, AR 72745	4 hrs				
	nas Unger					
	1 Briarfield Rd., Elkıns, AR 72727	Treasurer - 4 hrs			-	<del>.</del>
	Mangione					
	N. Jimmie Ave., Fayetteville, AR 72703	Director - 2 hrs				
	Ward		1			
	anglebriar Lane, Fayetteville, AR 72701	Director - 2 hrs		+	+	
	nie White	D'				
2753	Hardy Lane, Fayetteville, AR 72703	Director - 2 hrs			+	
			<del></del>	<del> </del>	+	
					_	
			,		1	
				<u> </u>	$\top$	
			1		- [	

any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?  b if "Yes," complete Schedule L, Part II and enter the total amount involved 38b   N/A  Section 501(c)(7) organizations. Enter:  a Initiation fees and capital contributions included on line 9   39a   5,000  b Gross receipts, included on line 9, for public use of club facilities   39b   0  40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ N/A   section 4912 ▶ N/A   section 4915 ▶ N/A    b Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction of the year or did it engage in an excess benefit transaction of the year or did it engage in an excess benefit transaction of year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I   40b	he	
detailed description of each activity in Schedule O  Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)  34  35a  Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?  b If "Yes," to line 35a, has the organization filed a Form 990-IF for the year? If "No." provide an explanation in Schedule O C Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III  35b  Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete Schedule Parts of Schedule N  Did the organization bid promotive from or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?  36a  37b  Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?  37c  37d  37d  37d  37d  37d  37d  37d		<u> </u>
Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)  35a Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?  b If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O.  Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization buyet to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III.  5b Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N  37a Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 37a  37b Did the organization bin Form 1120-POL for this year?  37c Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return.  b If "Yes," complete Schedule L, Part II and enter the total amount involved  38b N/A  Section 501(c)(3) organizations. Enter:  Initiation fees and captal contributions included on line 9  Gross receipts, included on line 9, for public use of club facilities  b Gross receipts, included on line 9, for public use of club facilities  b N/A : section 4915 ▶ N/A : section 4955 ▶ N/A  Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax mposed on organization and prior year that has not been reported on any of its prior Forms 990 or 990-E27 if "Yes," complete Schedule L, Part I.  List the states with which a copy of this return is filed ▶ None  The organization in a foreign country: ▶	Yes	No
copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)  Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?  If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part II.  Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete schedule N.  36  Did the organization binorrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?  37  Bid the organization bid Form 1120-POL for this year?  38  Did the organization bid provides or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?  38  Did the organization bid provides and still outstanding at the end of the tax year covered by this return?  39  Bot the organization bid provides and still outstanding at the end of the tax year covered by this return?  30  Bot the organization still any enter the total amount involved  30  Bot the organization still any enter the total amount involved  30  Bot the organization still any enter the total amount involved  31  Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on the organization during the year under transaction any section 4911 P.  31  Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction any	<b>↓</b>	<b>↓</b> ✓
activities (such as those reported on lines 2, 6a, and 7a, among others)?  b   f"Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O c Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III		/
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c Was the organization a section 501(c)(4), 501(c)(6), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III.  36c  37d  37a  37a  37a  37a  37a  37a  37a	+	† <del>*</del>
during the year? If "Yes," complete applicable parts of Schedule N  37a Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 37a  38b Did the organization file Form 1120-POL for this year?  37b Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a pnor year and still outstanding at the end of the tax year covered by this return?  38a Did Times (10(7) organizations. Enter:		1
b Did the organization file Form 1120-POL for this year?  38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?  38b If "Yes," complete Schedule L, Part II and enter the total amount involved  38b N/A  39 Section 501(c)(7) organizations. Enter:  39a 5,000  40a Gross receipts, included on line 9, for public use of club facilities  39b 0  50 Gross receipts, included on line 9, for public use of club facilities  50 Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ► N/A; section 4912 ► N/A; section 4912 ► N/A; section 4915 ► N/A  50 Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I.  50 Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958  50 Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c rembursed by the organization  60 All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 886-T  50 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)? If "Yes," enter the name of the foreign country: ►  60 Section 4947(a)(1) nonexempt charitable trusts filling Form 990-EZ in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year: ► 143  61 Did the organization mai		1
Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a pnor year and still outstanding at the end of the tax year covered by this return?  38a bi if "Yes," complete Schedule L, Part II and enter the total amount involved 38b N/A  39 Section 501(c)(7) organizations. Enter:  a Initiation fees and capital contributions included on line 9 39a 5,000  Gross receipts, included on line 9, for public use of club facilities 39b 0  Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ► N/A; section 4912 ► N/A; section 4912 ► N/A; section 4915 ► N/A  Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4988 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? if "Yes," complete Schedule L, Part I. 40b  C Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958  G Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization  All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T  41 List the states with which a copy of this return is filed ► None  42a The organization's books are in care of ► Thomas Unger  Located at ▶ 18931 Briarfield Rd, Elkins, AR 72727  b 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; ► See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.  c At any time during the calendar year, did the organization maintain an office outside the U.S.?  42b If "Yes," en		×1
any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?  b If "Yes," complete Schedule L, Part II and enter the total amount involved  \$\$35\$ esction 501(c)(7) organizations. Enter:  Initiation fees and capital contributions included on line 9  \$\$35\$   \$35\$   \$35\$    \$\$35\$   \$35\$   \$35\$    \$\$40\$ Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:  \$\$80\$   \$\$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$   \$80\$		✓
a Initiation fees and capital contributions included on line 9  a Initiation fees and capital contributions included on line 9  b Gross receipts, included on line 9, for public use of club facilities  Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year undersection 4911 ▶ N/A; section 4912 ▶ N/A; section 4915 ▶ N/A  b Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I.  c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958  d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization  e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T.  40e  41 List the states with which a copy of this return is filed ▶ None  The organization's books are in care of ▶ Thomas Unger  Telephone no. ▶ 479-6  Located at ▶ 18931 Briarfield Rd, Elkins, AR 72727  b 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; ▶ See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.  c At any time during the calendar year, did the organization maintain an office outside the U.S.? If "Yes," enter the name of the foreign country: ▶ See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.  c At any time during the calendar year, did the organization maintain an office outside the U.S.? If "Yes," enter the name of the foreign		/
a Initiation fees and capital contributions included on line 9 b Gross receipts, included on line 9, for public use of club facilities  40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ N/A; section 4912 ▶ N/A; section 4955 ▶ N/A  b Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	+ 15	
Scrion 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ► NIA; section 4912 ► NIA; section 4915 ► NIA  b Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I  c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958  d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization  e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T  41 List the states with which a copy of this return is filed ▶ None  42a The organization's books are in care of ▶ Thomas Unger Located at ▶ 18931 Briarfield Rd, Elkins, AR 72277  b 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; ▶  See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.  c At any time during the calendar year, did the organization maintain an office outside the U.S.?  43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ  b Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ  c Did the organization receive any payments for indoor tanning services during the year?  44b		
Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ► NIA; section 4912 ► NIA; section 4915 ► NIA  b Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-E2? If "Yes," complete Schedule L, Part I.  c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958  d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization  e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T  41 List the states with which a copy of this return is filed ► None  12 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)? If "Yes," enter the name of the foreign country: ►  See the instructions for exceptions and filling requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.  At any time during the calendar year, did the organization maintain an office outside the U.S.?  If "Yes," enter the name of the foreign country: ►  Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ  b Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ  Did the organization receive any payments for indoor tanning services during the year?		100
b Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	*	
b Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I.  c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958  d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization  e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T.  1 List the states with which a copy of this return is filed ▶ None  The organization's books are in care of ▶ Thomas Unger  Located at ▶ 18931 Briarfield Rd, Elkins, AR 72727  b 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; Images as a bank account, securities account, or other financial account? If "Yes," enter the name of the foreign country: ▶  See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.  c At any time during the calendar year, did the organization maintain an office outside the U.S.?  If "Yes," enter the name of the foreign country: ▶  Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ  b Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ  b Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ  b Did the org		
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c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958.  d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization		1
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d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization  e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T  List the states with which a copy of this return is filed ▶ None  The organization's books are in care of ▶ Thomas Unger  Located at ▶ 18931 Briarfield Rd, Elkins, AR 72727  DA tany 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)? If "Yes," enter the name of the foreign country: ▶  See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.  c At any time during the calendar year, did the organization maintain an office outside the U.S.?  If "Yes," enter the name of the foreign country: ▶  Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year  Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ  b Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ  44b  c Did the organization receive any payments for indoor tanning services during the year?  44c  44c  44c  44d  Did the organization receive any payments for indoor tanning services during the year?	ŧ,	
e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T  40e  41 List the states with which a copy of this return is filed ▶ None  42a The organization's books are in care of ▶ Thomas Unger  Located at ▶ 18931 Briarfield Rd., Elkins, AR 72727  b 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)? If "Yes," enter the name of the foreign country: ▶  See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.  c At any time during the calendar year, did the organization maintain an office outside the U.S.?  If "Yes," enter the name of the foreign country: ▶  43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year  44a Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ  b Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ  c Did the organization receive any payments for indoor tanning services during the year?  44b	30	
transaction? If "Yes," complete Form 8886-T . 40e  41 List the states with which a copy of this return is filed ▶ None  42a The organization's books are in care of ▶ Thomas Unger Telephone no. ▶ 479-64. Located at ▶ 18931 Briarfield Rd., Elkins, AR 72727 ZIP + 4 ▶ 72  b 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)? If "Yes," enter the name of the foreign country: ▶  See the instructions for exceptions and filling requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.  c At any time during the calendar year, did the organization maintain an office outside the U.S.? 42c If "Yes," enter the name of the foreign country: ▶  43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 43  44a Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ		
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Located at ▶ 18931 Briarfield Rd., Elkins, AR 72727  b 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)?  If "Yes," enter the name of the foreign country: ▶  See the instructions for exceptions and filling requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.  c At any time during the calendar year, did the organization maintain an office outside the U.S.?		
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completed instead of Form 990-EZ	, 1	▶ □
b Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	Yes	A C MINI
c Did the organization receive any payments for indoor tanning services during the year?	*******	4
d If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an		7
explanation in Schedule O		
<ul> <li>45a Did the organization have a controlled entity within the meaning of section 512(b)(13)?</li> <li>45b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-F7 (see instructions)</li> </ul>	343	<b>✓</b>

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Form 99	90-EZ (2013)	····					Page 4	
46	Did the organization engage, directly or in to candidates for public office? If "Yes," of	ndirectly, in political c	ampaign activities on	behalf of or in o	pposition	46 Y	es No	
Part		s only s must answer que	stions 47–49b and	52, and comple			lines	
47	Did the organization engage in lobbying year? If "Yes," complete Schedule C, Par	activities or have a	section 501(h) electio	n in effect durin	in effect during the tax			
48 49a b 50	year? If "Yes," complete Schedule C, Part II							
	(a) Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	(d) Health benef contributions to em benefit plans, and d	(d) Health benefits, contributions to employee (e) Estima		ated amount of ompensation	
f	Total number of other employees paid ov	er \$100 000	, i					
51	Complete this table for the organization \$100,000 of compensation from the organization	s five highest compe	ensated independent	contractors who	each rece	ived m	ore than	
(a) Name and business address of each inde		dent contractor	(b) Type of serv	се	(c) Comp	c) Compensation		
			,					
						- <del>-</del> -		
d	Total number of other independent contra	actors each receiving	over \$100,000 I	<b>&gt;</b>				
<b>52</b>	Did the organization complete Schedule Anonexempt charitable trusts must attach	a completed Schedui	e A	<u> </u>		Yes [	□ No	
	enalties of perjury, I declare that I have examined this rect, and complete. Declaration of preparer (other than				of my knowledg	e and be	elief, it is	
Sign Here	Signature of officer  Thomas Unger, Treasurer	<b>U</b>	- · · · · · · · · · · · · · · · · · · ·	Date Date	5/2014			

Preparer's signature

Type or print name and title

May the IRS discuss this return with the preparer shown above? See instructions

Pnnt/Type preparer's name

Firm's name

Firm's address ▶

Paid Preparer

**Use Only** 

PTIN

Check I if self-employed

Firm's EIN ▶

Phone no

Date

ı