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Short Form
Return of Organization Exempt From Income Tax

OMB No 1545-1150

2013

Open to Public
InspectionDepartment of the Treasury
Internal Revenue ServiceUnder 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-EZ and its instructions is at www.irs.gov/form990.

A For the 2013 calendar year, or tax year beginning 4/01, 2013, and ending 3/31, 2014

B Check if applicable

- Address change
- Name change
- Initial return
- Terminated
- Amended return
- Application pending

C

THE VALLEY OF THE SUN CHAPTER OF THE
CONSTRUCTION FINANCIAL MGMT ASSOCIATION
PO BOX 7703
PHOENIX, AZ 85011-7703

D Employer identification number

86-0556988

E Telephone number

480-424-7855

F Group Exemption
Number

► 9139

G Accounting Method: Cash Accrual Other (specify) ►I Website: ► WWW.CFMA.ORG/VALLEYOFTHE SUNJ Tax-exempt status (check only one) — 501(c)(3) 501(c)(6) ►(insert no.) 4947(a)(1) or 527H Check ► if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF).K 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 ► \$ 162,670.

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

REVENUE	1 Contributions, gifts, grants, and similar amounts received	1
	2 Program service revenue including government fees and contracts	2 96,415.
	3 Membership dues and assessments	3 16,497.
	4 Investment income	4 5,881.
	5a Gross amount from sale of assets other than inventory	5a
	b Less cost or other basis and sales expenses	5b
	c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	
	6 Gaming and fundraising events	5c
	a Gross income from gaming (attach Schedule G if greater than \$15,000)	6a
	b Gross income from fundraising events (not including \$ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000)	
	c Less, direct expenses from gaming and fundraising events	6b 43,877.
	d Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	6c 17,510.
	7a Gross sales of inventory, less returns and allowances	6d 26,367.
	b Less cost of goods sold	7a
	c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7b
	8 Other revenue (describe in Schedule O)	7c
	9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8' RECEIVED	8
		9 145,160.
EXPENSES	10 Grants and similar amounts paid (list in Schedule O)	10 21,375.
	11 Benefits paid to or for members	11
	12 Salaries, other compensation, and employee benefits	12
	13 Professional fees and other payments to independent contractors	13 32,024.
	14 Occupancy, rent, utilities, and maintenance	14
	15 Printing, publications, postage, and shipping	15 90.
	16 Other expenses (describe in Schedule O)	16 85,375.
	17 Total expenses. Add lines 10 through 16	17 138,864.
	18 Excess or (deficit) for the year (Subtract line 17 from line 9)	18 6,296.
	19 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)	19 83,358.
	20 Other changes in net assets or fund balances (explain in Schedule O)	20
	21 Net assets or fund balances at end of year Combine lines 18 through 20	21 89,654.

BAA For Paperwork Reduction Act Notice, see the separate instructions.

Form 990-EZ (2013)

Part V Other Information (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V) Check if the organization used Schedule O to respond to any question in this Part V

33 Did the organization engage in any significant activity not previously reported to the IRS? If 'Yes,' provide a detailed description of each activity in Schedule O 33 X

34 Were any significant changes made to the organizing or governing documents? If 'Yes,' attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions) 34 X

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)? 35a X

b If 'Yes,' to line 35a, has the organization filed a Form 990-T for the year? If 'No,' provide an explanation in Schedule O 35b

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 35c X

36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If 'Yes,' complete applicable parts of Schedule N 36 X

37a Enter amount of political expenditures, direct or indirect, as described in the instructions ► **37a** 0. 37b X

b Did the organization file **Form 1120-POL** for this year? 38a X

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 N/A

b If 'Yes,' complete Schedule L, Part II and enter the total amount involved 39a N/A

39 Section 501(c)(7) organizations. Enter 39b N/A

a Initiation fees and capital contributions included on line 9 40a N/A

b Gross receipts, included on line 9, for public use of club facilities 40b 0.

40a Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under: N/A

section 4911 ► **N/A**; section 4912 ► **N/A**; section 4955 ► **N/A** 40c 0.

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 40d 0.

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 40e X

d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization 40f 0.

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 40g 0.

41 List the states with which a copy of this return is filed ► **AZ**

42a The organization's books are in care of ► **RAYLEEN F COLLETTI, CPA** Telephone no ► **480-946-0751**
Located at ► **4110 N SCOTTSDALE RD, SUITE 200 SCOTTSDALE AZ** ZIP + 4 ► **85251** 42b X

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 ► 42c X

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 of the U.S.?
If 'Yes,' enter the name of the foreign country ► 42d X

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** N/A

44a Did the organization maintain any donor advised funds during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ 44a X

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 X

c Did the organization receive any payments for indoor tanning services during the year? 44c X

d If 'Yes' to line 44c, has the organization filed a Form 720 to report these payments?
If 'No,' provide an explanation in Schedule O 44d

45a Did the organization have a controlled entity of the organization within the meaning of section 512(b)(13)? 45a X

b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions) 45b X

46 Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I

	Yes	No
46		X

Part VI Section 501(c)(3) organizations only

All section 501(c)(3) organizations must answer questions 47-49b and 52, and complete the tables for lines 50 and 51.

Check if the organization used Schedule O to respond to any question in this Part VI

47 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

48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E

49a Did the organization make any transfers to an exempt non-charitable related organization?

b If 'Yes,' was the related organization a section 527 organization?

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter 'None'

f Total number of other employees paid over \$100,000

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter 'None.'

(a) Name and business address of each independent contractor	(b) Type of service	(c) Compensation

d Total number of other independent contractors each receiving over \$100,000

52 Did the organization complete Schedule A? **Note:** All section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A.

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	 Signature of officer	 Date			
	► LYNNE PACE Type or print name and title	TREASURER			
Paid Preparer Use Only	Print/Type preparer's name RAYLEEN F. COLLETTI, CPA	Preparer's signature <i>Rayleen F. Colletti CPA</i>	Date 7-16-14	<input type="checkbox"/> if self-employed	PTIN P00018254
	Firm's name ► HUNTER HAGAN & COMPANY, LTD.	Firm's EIN ► 86-0528831			
	Firm's address ► 4110 N SCOTTSDALE RD STE 200 SCOTTSDALE, AZ 85251-3635	Phone no (480) 946-0751			

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

► Yes No

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No 1545-0047

2013

**Open to Public
Inspection**

Name of the organization **THE VALLEY OF THE SUN CHAPTER OF THE CONSTRUCTION FINANCIAL MGMT ASSOCIATION** Employer identification number **86-0556988**

Employer identification number
86-0556988

Part I **Fundraising Activities.** Complete if the organization answered 'Yes' to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

a Mail solicitations **e** Solicitation of non-government grants
b Internet and email solicitations **f** Solicitation of government grants
c Phone solicitations **g** Special fundraising events
d In-person solicitations

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No

2b If 'Yes,' list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in column (i)	(vi) Amount paid to (or retained by) organization
		Yes	No		
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
Total					

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing

Part II Fundraising Events Complete if the organization answered 'Yes' to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

REVENUE		(a) Event #1 GOLF TOURNAMENT (event type)	(b) Event #2 (event type)	(c) Other events NONE (total number)	(d) Total events (add column (a) through column (c))
	1 Gross receipts	43,877.			43,877.
	2 Less: Charitable contributions				
	3 Gross income (line 1 minus line 2)	43,877.			43,877.
DIRECT EXPENSES	4 Cash prizes	2,100.			2,100.
	5 Noncash prizes	1,192.			1,192.
	6 Rent/facility costs	12,513.			12,513.
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses	1,705.			1,705.
	10 Direct expense summary Add lines 4 through 9 in column (d)				17,510.
	11 Net income summary. Subtract line 10 from line 3, column (d)				26,367.

Part III Gaming Complete if the organization answered 'Yes' to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

REVENUE		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add column (a) through column (c))
	1 Gross revenue				
DIRECT EXPENSES	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
	7 Direct expense summary. Add lines 2 through 5 in column (d)				
	8 Net gaming income summary. Subtract line 7 from line 1, column (d)				

9 Enter the state(s) in which the organization operates gaming activities: _____

a Is the organization licensed to operate gaming activities in each of these states? Yes No

b If 'No,' explain: _____

10 a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? Yes No

b If 'Yes,' explain: _____

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

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

OMB No 1545-0047

2013

Open to Public
Inspection

Name of the organization

THE VALLEY OF THE SUN CHAPTER OF THE
CONSTRUCTION FINANCIAL MGMT ASSOCIATION

Employer identification number

86-0556988

FORM 990-EZ, PART III - ORGANIZATION'S PRIMARY EXEMPT PURPOSE

THE VALLEY OF THE SUN CHAPTER OF THE CONSTRUCTION FINANCIAL MANAGEMENT ASSOCIATION

IS A BROAD BASED ORGANIZATION OF PROFESSIONALS COMMITTED TO SERVING THE

CONSTRUCTION INDUSTRY. ITS MISSION IS TO UNITE INDIVIDUALS HAVING FINANCIAL

RESPONSIBILITIES IN THE CONSTRUCTION INDUSTRY, AND TO PROVIDE A FORUM THROUGH

WHICH THE ASSOCIATION'S MEMBERS CAN MEET TO EXCHANGE IDEAS. THE ASSOCIATION WORKS

TO DEVELOP AND COORDINATE EDUCATION PROGRAMS DEDICATED TO THE PURPOSE OF IMPROVING

THE PROFESSIONAL STANDARDS OF CONSTRUCTION FINANCIAL MANAGERS, AND TO ENHANCE THE

ROLE AND PROMOTE THE IMAGE OF THE CONSTRUCTION FINANCIAL MANAGER.

FORM 990-EZ, PART III, LINE 28 - STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS

LUNCH/DINNER MEETINGS - MEMBERSHIP MEETINGS FEATURE SPEAKERS WHO REPORT ON ISSUES

OF INTEREST TO THE CONSTRUCTION INDUSTRY AND MEMBERS ARE GIVEN AN OPPORTUNITY TO

DISCUSS THESE ISSUES WITH BOTH GUEST SPEAKERS AND FELLOW MEMBERS.

FORM 990-EZ, PART III, LINE 30 - STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS

CONSTRUCTION EXECUTIVE OF THE YEAR - THE ANNUAL BANQUET HONORS THE CHIEF EXECUTIVE

OF A LOCAL CONSTRUCTION FIRM AND RECOGNIZES THE EFFORTS OF A CHAPTER MEMBER WHO

HAS WORKED ON BEHALF OF THE CHAPTER AND ITS MISSION.

2013

SCHEDULE O - SUPPLEMENTAL INFORMATION

PAGE 2

THE VALLEY OF THE SUN CHAPTER OF THE
CONSTRUCTION FINANCIAL MGMT ASSOCIATION

86-0556988

FORM 990-EZ, PART I, LINE 16
OTHER EXPENSES

ADVERTISING AND PROMOTION	\$ 191.
BANK CHARGES/MERCHANT FEES	2,351.
CONSTRUCTION EXEC OF YEAR EXP.	37,014.
EDUCATIONAL CONFERENCE EVENT	14,465.
GIFTS	100.
LUNCH/DINNER MEETING	27,338.
MISCELLANEOUS	310.
OFFICE EXPENSES	411.
OTHER SPECIAL EVENTS	2,096.
SALARY SURVEY EXPENSES	1,099.
TOTAL	\$ 85,375.

FORM 990-EZ, PART II, LINE 24
OTHER ASSETS

	<u>BEGINNING</u>	<u>ENDING</u>
PREPAID EXPENSES AND DEFERRED CHARGES	\$ 7,739.	\$ 6,251.
TOTAL	\$ 7,739.	\$ 6,251.

FORM 990-EZ, PART II, LINE 26
TOTAL LIABILITIES

	<u>BEGINNING</u>	<u>ENDING</u>
ACCOUNTS PAYABLE AND ACCRUED EXPENSES	\$ 4,746.	\$ 4,750.
DEFERRED REVENUE	19,280.	34,445.
TOTAL	\$ 24,026.	\$ 39,195.

FORM 990-EZ, PART III, LINE 31
STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS

<u>DESCRIPTION</u>	<u>GRANTS</u>	<u>PROGRAM SERVICE EXPENSES</u>
SEMINARS - DURING THE YEAR, THE ORGANIZATION SPONSORED VARIOUS CONSTRUCTION INDUSTRY SPECIFIC AND CCIFP EXAM REVIEW COURSES.		
INCLUDES FOREIGN GRANTS: NO		
	TOTAL \$ 0.	\$ 0.

THE VALLEY OF THE SUN CHAPTER OF THE
CONSTRUCTION FINANCIAL MGMT ASSOCIATION

86-0556988

FORM 990-EZ, PART IV
LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

NAME AND TITLE	AVERAGE HOURS PER WEEK DEVOTED	COMPEN- SATION	HEALTH BENEFITS & CONTRIB- UTION TO EBP & DC	ESTIMATED AMOUNT OF OTHER COMPEN.
MICHELLE GRIDER SECRETARY	1	\$ 0.	\$ 0.	\$ 0.
KEVIN BURNETT PAST PRESIDENT	1	0.	0.	0.
JENNIFER AYERS DIRECTOR	1	0.	0.	0.
TODD COLEMAN DIRECTOR	1	0.	0.	0.
BILL JUDGE DIRECTOR	1	0.	0.	0.
STEPHAN KING DIRECTOR	1	0.	0.	0.
ANNE DEVINE THUL PRESIDENT	5	0.	0.	0.
MICHELLE WALKER DIRECTOR	1	0.	0.	0.
MICHAEL RIORDAN DIRECTOR	1	0.	0.	0.
JOHN VERHOFF DIRECTOR	1	0.	0.	0.
KEITH BIEBER DIRECTOR	1	0.	0.	0.
TAYLOR BROCKBANK DIRECTOR	1	0.	0.	0.
DAVE MILLER VICE PRESIDENT	2	0.	0.	0.
RYAN EVANS TREASURER	3	0.	0.	0.
RYAN SPRIGGS DIRECTOR	1	0.	0.	0.
DEBORAH ANDERSON DIRECTOR	1	0.	0.	0.

2013

SCHEDULE O - SUPPLEMENTAL INFORMATION

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THE VALLEY OF THE SUN CHAPTER OF THE
CONSTRUCTION FINANCIAL MGMT ASSOCIATION

86-0556988

FORM 990-EZ, PART IV (CONTINUED)
LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

NAME AND TITLE	AVERAGE HOURS PER WEEK DEVOTED	COMPEN- SATION	HEALTH BENEFITS & CONTRIB- BUTION TO EBP & DC	ESTIMATED AMOUNT OF OTHER COMPEN.
LISA VAGLIO DIRECTOR	1	\$ 0.	\$ 0.	\$ 0.
JARED ASAY DIRECTOR	1	0.	0.	0.
CORD ARMSTRONG DIRECTOR	1	0.	0.	0.
TOTAL	\$ 0.	\$ 0.	\$ 0.	\$ 0.

Application for Extension of Time To File an
Exempt Organization Return

► File a separate application for each return.

OMB No 1545 1709

► Information about Form 8868 and its instructions is at www.irs.gov/form8868.

- If you are filing for an **Automatic 3-Month Extension**, complete only Part I and check this box

- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only Part II (on page 2 of this form)

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868

Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on *e-file for Charities & Nonprofits*

Part I **Automatic 3-Month Extension of Time.** Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension – check this box and complete Part I only ►

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Enter filer's identifying number, see instructions

Type or print	Name of exempt organization or other filer, see instructions	Employer identification number (EIN) or
	THE VALLEY OF THE SUN CHAPTER OF THE CONSTRUCTION FINANCIAL MGMT ASSOCIATION	86-0556988
File by the due date for filing your return. See instructions	Number, street, and room or suite number If a P O box, see instructions	Social security number (SSN)
	PO BOX 7703	
	City, town or post office, state, and ZIP code For a foreign address, see instructions	
	PHOENIX, AZ 85011-7703	

Enter the Return code for the return that this application is for (file a separate application for each return)

01

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (section 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

- The books are in the care of ► **RAYLEEN F COLLETTI, CPA**

Telephone No ► **480-946-0751** Fax No ► **480-941-2188**

- If the organization does not have an office or place of business in the United States, check this box ►
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____ If this is for the whole group, check this box ► If it is for part of the group, check this box ► and attach a list with the names and EINs of all members the extension is for

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until **11/15**, 20 **14**, to file the exempt organization return for the organization named above

The extension is for the organization's return for

- calendar year 20 _____ or
- tax year beginning **4/01**, 20 **13**, and ending **3/31**, 20 **14**

2 If the tax year entered in line 1 is for less than 12 months, check reason Initial return Final return
 Change in accounting period

3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits See instructions	3a \$ 0.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made Include any prior year overpayment allowed as a credit	3b \$ 0.
c Balance due. Subtract line 3b from line 3a Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions	3c \$ 0.

Caution. If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.