

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form

10)

For Paperwork Reduction Act Notice, see the separate instructions.

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.

OMB No 1545-0047 2013 **Open to Public** Inspection

Form 990 (2013)

For the 2013 calendar year, or tax year beginning 07/01/13, and ending 06/30/14C Name of organization Employer Identification number Check if applicable Address change MESA SPORTS ASSOCIATION, INC Doing Business As 86-0540940 Name change Number and street (or P O box if mail is not delivered to street address) Room/suite Telephone number Initial return 602-999-0419 P.O. BOX 261 Terminated City or town, state or province, country, and ZIP or foreign postal code MESA 85211 Amended return G Gross receipts \$ Name and address of principal officer Application pending H(a) Is this a group return for subordinates? MICHAEL WHALEN H(b) Are all subordinates included? P.O. BOX 261 If "No." attach a list (see instructions) MESA 85211 501(c)(3) (insert no) Tax-exempt status MESACHAMBER.ORG/NONPROFIT-ORGANIZATION Website: H(c) Group exemption number 1952 X Corporation Trust Association Year of formation Form of organization M State of legal domicile Part I Summary 1 Briefly describe the organization's mission or most significant activities: PROMOTE SPORTING ACTIVITIES FOR THE CITY OF MESA, ARIZONA INCLUDING Activities & Governance SPONSORSHIP OF CHICAGO CUBS SPRING TRAINING IN ARIZONA. 2 Check this box ► if the organization discontinued its operations or disposed of more than 25% of its net assets. 11 3 Number of voting members of the governing body (Part VI, line †a) 4 Number of independent voting members of the governing body (Part VI, MED) EIVED 11 11 5 Total number of individuals employed in calendar year 2013 (Party) line 2a) 5 RS-OSC 6 Total number of volunteers (estimate if necessary) 6 164 NOV 1 0 2014 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a b Net unrelated business taxable income from Form 990-T, line 34 **Prior Year Current Year** 200 15 15,700 8 Contributions and grants (Part VIII, line 1h) 214,401 9 Program service revenue (Part VIII, line 2g) 768 994 591 -86, 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 88,62 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 962 762 232 131 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 14 Benefits paid to or for members (Part IX, column (A), line 4) 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 83,624 16a Professional fundraising fees (Part IX, column (A), line 11e) 0 b Total fundraising expenses (Part IX, column (D), line 25) 516,325 138,833 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 929,069 191 200 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) -166,107 -40 -931 19 Revenue less expenses Subtract line 18 from line 12 **Beginning of Current Year** End of Year 471 126 844 20 Total assets (Part X, line 16) 21 Total liabilities (Part X, line 26) 0 Net assets or fund balances. Subtract line 21 from line 20 Signature Block 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 Jernad Signature of officer Sign TREASURER ZEPER BERNARD Here Type or print name and title Preparer's signature Print/Type preparer's name Date PTIN Check Paid 10-29-14 self-employed P00136557 WILLIAM J. GOSNEY Preparer GOSNEY & COMPANY 86-0336564 Firm's EIN ▶ **Use Only** 9 W PEPPER PLACE MESA, AZ 85201 480-834-4300 Phone no May the IRS discuss this return with the preparer shown above? (see instructions) X Yes No

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,"	Ì	1	
	complete Schedule A	1		<u>X</u>
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to		1	
	candidates for public office? If "Yes," complete Schedule C, Part I	3		<u>X</u>
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		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,	- }	ł	
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,	- 1	1	
	Part III	5		_X_
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors	- 1	- 1	
	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		<u>X</u>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,		ł	
	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,"		- 1	
	complete Schedule D, Part III	8	X	
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a		Ì	
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		_X_
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.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 109 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			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			İ
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	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	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		'	1
	Schedule D, Parts XI and XII	12a		X
- 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		X
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		İ	
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	<u> </u>	X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			l
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	<u> </u>	X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	<u> </u>	X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on		1	
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	 	X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	}		ļ _
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	<u> </u>	X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	1	1	1
	If "Yes," complete Schedule G, Part III	19	X	ļ
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	<u> </u>	X
<u>b</u>	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	<u></u>	

_	990 (2013) MESA SPORTS ASSOCIATION, INC. 86-0540940		Р	age 4
<u> Pa</u>	rt IV : Checklist of Required Schedules (continued)		T	· · ·
04	Did the exceptration report more than 05 000 of avents or other populations to any democity organization or	<u></u>	Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	21	Х	
00	government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States		12	-
	on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the	<u> </u>		1
23	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23	1	X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
240	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25a	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	1	
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year		1	
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	The second secon			
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior	į		T
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?	l		
	If "Yes," complete Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any			1
	current or former officers, directors, trustees, key employees, highest compensated employees, or	ŀ	1	
	disqualified persons? If so, complete Schedule L, Part II	26	+	X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,		1	
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27	+	X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			٠.
	Part IV instructions for applicable filing thresholds, conditions, and exceptions).		-	,,
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			~
	Schedule L, Part IV	28b	<u> </u>	X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)	1,00		X
00	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	280		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	23	+	 - 4 2
30	conservation contributions? If "Yes," complete Schedule M	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,	1.50		
٠.	Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33	<u> </u>	X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,			ļ
	or IV, and Part V, line 1	_34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	358	3	X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a	1	1	
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	351	b	4_
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	1	1	
	related organization? If "Yes," complete Schedule R, Part V, line 2	36	<u> </u>	
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,]	ı	

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and

19? Note. All Form 990 filers are required to complete Schedule O

37

Part VI

, a	Check if Schedule O contains a response or note to any line in this Part V				
	Check if Schedule O contains a response or note to any line in this Part V			V 1	N-
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a 11		Yes	No_
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b 0		,	
c	Did the organization comply with backup withholding rules for reportable payments to vendors and	1 <u>-Y</u>			
-	reportable gaming (gambling) winnings to prize winners?		1c	x	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	1	7		4
	Statements, filed for the calendar year ending with or within the year covered by this return	2a 11	,		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return	ns?	2b	Х	*
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions				
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a		_X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule 0		3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a	uthority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other final	ancial			
	account)?		4a		<u>X</u>
b	If "Yes," enter the name of the foreign country. ▶		* .		
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial	Accounts	* * * *		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	_	5a		<u>X</u>
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transact	tion'?	5b		X
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	_	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	e			v
b	organization solicit any contributions that were not tax deductible as charitable contributions?	ne or	<u>6a</u>		<u>X</u>
D	If "Yes," did the organization include with every solicitation an express statement that such contribution gifts were not tax deductible?	ns or	6ь		
7	Organizations that may receive deductible contributions under section 170(c).		00	— ,	
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for o	roods	»',	·*	1
_	and services provided to the payor?	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	7a	/ // · . `	~ ^*
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	s			
	required to file Form 8282?	_	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	J , , ,	ı,	
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit or	ontract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra	act?	7 1		
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo	rm 8899 as required?	7 <u>g</u>		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization	tion file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting		. "	` "	٠,,
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			-	2 2 2
_	organization, have excess business holdings at any time during the year?		8	ļ	
9	Sponsoring organizations maintaining donor advised funds.		<u> </u>		
a	Did the organization make any taxable distributions under section 4966?		9a	ļ	-
10	Did the organization make a distribution to a donor, donor advisor, or related person?		9b	<u> </u>	<u> </u>
10 a	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12	10a			, 1
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	-	• `	, .
11	Section 501(c)(12) organizations. Enter:	100	-	1	
···	Gross income from members or shareholders	11a	1		ر ا
, b	Gross income from other sources (Do not net amounts due or paid to other sources		1 .		
	against amounts due or received from them.)	11b	.		\ ' / .
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		12a		1
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		`		Ŀ
а	Is the organization licensed to issue qualified health plans in more than one state?		13a		
	Note. See the instructions for additional information the organization must report on Schedule O.				,
b	Enter the amount of reserves the organization is required to maintain by the states in which			1	
	the organization is licensed to issue qualified health plans	13b	_		1
С	Enter the amount of reserves on hand	13c	<u> </u>	<u> </u>	
14a	Did the organization receive any payments for indoor tanning services during the tax year?		14a	1	X
<u>b</u>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedul	e O	14b	<u> </u>	<u> </u>
DAA			Fo	orm 99	0 (2013)

Pa	t VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See			ıs.
	Check if Schedule O contains a response or note to any line in this Part VI			X
<u>Sec</u>	ion A. Governing Body and Management		V	
1a	Enter the number of voting members of the governing body at the end of the tax year 11	-	Yes	No_
ıa	If there are material differences in voting rights among members of the governing body, or	. 1	٠, ا	
		3.		
	If the governing body delegated broad authority to an executive committee or similar	* .	* *	**,
	committee, explain in Schedule O. Enter the number of voting members included in line 1a, above, who are independent 10 11			
b		٨	ı	, ,
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	2		· •
•	any other officer, director, trustee, or key employee?	-		<u> X</u>
3	Did the organization delegate control over management duties customarily performed by or under the direct	_		v
	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?	5		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	6	Х	
6	Did the organization have members or stockholders?	-	-^-	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint	7.	v	
L	one or more members of the governing body?	7a	Х	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	76	х	
	stockholders, or persons other than the governing body?	7b ∫	<u> </u>	i
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	·^ _ [X	^
a	The governing body?	8a 8b	X	
Ъ	Each committee with authority to act on behalf of the governing body?	OD		
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		_x_
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Coo			
<u>566</u>	HOIT D. POINTES (THIS Section B requests information about policies not required by the internal revenue occ	<u>.c.,</u>	Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		Х
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			
-	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		Х
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	,	, *	7.7,
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
_	describe in Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13		X
14	Did the organization have a written document retention and destruction policy?	14		Х
15	Did the process for determining compensation of the following persons include a review and approval by	,	,	< 85
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	<u>L</u>	X
b	Other officers or key employees of the organization	15b		Х
	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 during the year?	16a		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its	5	,,,,	`.;
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the	x ,	3^	
	organization's exempt status with respect to such arrangements?	16b		
Sec	etion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶ ARIZONA			
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.			
	Own website Another's website X Upon request Other (explain in Schedule O)			
19	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.			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the			
	organization: ► NANCY HUNTER 8231 E. WELDON AVENUE			
S	COTTSDALE AZ 85251 602	-99	9-0)419

86-	0 =	10	Ω.	1 0
^n-	117	411	71.0	

Form 990 (2013)	MESA	SPORTS	ASSOCIATION.	INC

Page 7

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.

X Check this box if neither the organization nor any related organizations compensated any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week (list any	box	(C) Position do not check more than one lox, unless person is both an officer and a director/trustee)				an	(D) Reportable compensation from the	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	hours for 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)	from the organization and related organizations
(1) MICHAEL WHALEN										
	4.00	l i		'	İ					
PRESIDENT	0.00	X	-	X	<u> </u>	-		0	0	0
(2) PAUL BUSER	4.00]				
VICE-PRESIDENT	0.00	x		x			i	0	0	0
(3) JEFF BERNING	1-0.00	12	 						<u> </u>	<u> </u>
(0) 5 11 1 1 1 1 1 1 1 1	4.00	1		İ						
SECRETARY	0.00	X		X		1 1		0	0	0
(4) BERNIE ZEPER										
•	4.00				l	1				
TREASURER	0.00	X		X				0	0	0
(5) BUD PAGE		l				1	ŀ			
	2.00					-	<u> </u>		<u> </u>	
PAST PRESIDENT	0.00	X	<u> </u>	<u> </u>	-	-	<u> </u>	0	0	0
(6) BRYAN VIVIAN	1 2 00	1								
DIDEGMOD	2.00	x						0	0	0
DIRECTOR (7) TIM GUMP	0.00	┿	\vdash	╁─╴	┼─	+	-			
() THE GOIN	2.00					1				
DIRECTOR	0.00	X						0	C	0
(8) JOHN DENNETT		-			1	T				
	2.00									
DIRECTOR	0.00	X		1_	L			0	<u> </u>	0
(9) BRANDON SMITH										
	2.00	1				1	l			
DIRECTOR	0.00	X	↓_	╄	╄		_	ļC	0	0
(10) RON DURANTI				1						
	2.00	1,,								o
DIRECTOR	0.00	X	+	+-	╁╌	+	╁╾	ļ <u>.</u>	0	'
(11) DAVE WIER	2.00		1				1			
DIRECTOR	0.00	x								0
DAA		1.12					ــــــــــــــــــــــــــــــــــــــ	.l		Form 990 (2013)

86-	n	5	1	Λ	Q	1	Λ
00-	u	\cdot	4	U	J	4	v

Page 8

Par	t VII Section A. Officers	s, Directors, Tru	stee	s, K	ey E	mpl	oyee	s, a	nd Highest Compensated	Employees (continued)			
	(A) Name and title	(B) Average hours per week (list any hours for	bo: off	x, unle	Pos check ess pe nd a d	more rson ı	than o s both r/truste	an ee)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estima amour othe compens	ated nt of er sation	
		related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)		organiz and rel organiza	ation ated	
(12)													
(13)		 	-		-								
(14)													
(15)													
(16)						_							
(17)												<u> </u>	
(18)			-										
(19)					}		ļ						
1b c d	Sub-total Total from continuation she Total (add lines 1b and 1c)							> >		2400.000			
2	Total number of individuals (in reportable compensation from				thos	se (18	sied a		ve) who received more than	1 \$ 100,000 in		Yes	No
3 - 4	Did the organization list any f employee on line 1a? If "Yes, For any individual listed on lin	_complete_Sche	dule	_J_fo	r_suc	h_in	divid	ual_					_X_
5	organization and related orga individual Did any person listed on line	inizations greate	r thai	n \$1	50,00	00?	lf "Y∈	es,"	complete Schedule J for su	ıch	4		X
Sect	for services rendered to the clion B. Independent Contract	rganization? If "	Yes,"	con	plet	e So	hedi	ıle .	J for such person		5	<u> </u>	X
1	Complete this table for your f compensation from the organ	ive highest comp	ensa	ated	inde	pen	dent	con	tractors that received more	than \$100,000 of	rear		
	Name an	(A) d business address								(B) ption of services		(C) compensa	ition_
										<u></u>			_
		· · · ·					-						
2	Total number of independent received more than \$100,000									0			
DAA											F	orm 99	0 (2013

Statement of Revenue

		Check	if Schedule () con	tains a	response o	or note to any line	in this Part VIII			
			-				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue		(D) Revenue duded from tax ider sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a b c d e	Federated cam Membership du Fundraising evi Related organia Government grants (c All other contributions and similar amounts in	ents zations contributions) s, gifts, grants,	1a 1b 1c 1d 1e		15,700	,				312 317
Contrik and Ot	g h	Noncash contribution Total. Add line	s included in lines 1a-		B	•	15,700				
Program Service Revenue	2a b c	GAMES SE PROGRAMS TRAINING	;			Busn. Code 711210 711210 711210	148,200 47,112 6,000	148,200 47,112 6,000	-		
gram Serv	d e	CUBS PAR	K OPEN HOUS ATHLETIC CO	NFERE	NCE	711210 711210 711210 711210	4,414	4,414 3,262			
Pro				nue		<u> </u>	214,401	5,413		L	
	3	Investment inco and other similar Income from in	ome (including ar amounts)		•	est,	1,144				1,144
	5 6a b	Gross rents Less. rental exps	(ı) Real		(II) F	Personal		,			:
	d 7a	Rental inc or (loss) Net rental incor Gross amount from sales of assets other than inventory	me or (loss) (i) Securities		(n)) Other		. ,			, , , , , , , , , , , , , , , , , , , ,
	b	Less cost or other basis & sales exps Gain or (loss)				87,735 -87,735	** * *			-~	
Other Revenue	d 8a	Net gain or (los Gross income fro (not including \$ of contributions re See Part IV, line	m fundraising eve	ļ		<u>P</u> _	-87,735		- · · · · · · · · · · · · · · · · · · ·	-	_ -87,735
Othe	С	Less: direct ex Net income or Gross income fro	penses (loss) from func	b Iraising	events	>		, ,			×
	b	See Part IV, line Less: direct ex Net income or	19 penses	a b	tivities	181,465 92,844	 88,621		-		99 631
	10a b	Gross sales of returns and allo Less: cost of g Net income or	inventory, less owances oods sold	a b				man in the state of the state o		**************************************	88,621
	11a	Misc	ellaneous Revenue			Busn. Code		-			
	c d	All other reven				•					
	12	Total revenue	. See instruction	ns	 -		232,131	214,401	0		2,030

Page 10 (D) Fundraising expenses

Form 990 (2013)

86-0540940 MESA SPORTS ASSOCIATION, INC. Form 990 (2013) Statement of Functional Expenses Part IX 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 any line in this Part IX (B) Program service (C) Management and (A) Total expenses Do not include amounts reported on lines 6b, 7b. 8b, 9b, and 10b of Part VIII. general expenses expenses Grants and other assistance to governments and 3 52,367 52,367 organizations in the U.S. See Part IV, line 21 Grants and other assistance to individuals in the U.S. See Part IV. line 22 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV. lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salaries and wages 7 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) Other employee benefits 10 Payroll taxes Fees for services (non-employees): 12,000 12,000 Management а 545 6,285 ,260 b Legal 6,500 6,500 c Accounting Lobbying d ,, . Professional fundraising services See Part IV, line 17 e Investment management fees f Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O) 392 25,392 12 Advertising and promotion Office expenses 13 Information technology 14 Royalties 15 Occupancy 16 Travel 17 Payments of travel or entertainment expenses for any federal, state, or local public officials 178 19 Conferences, conventions, and meetings 20 Interest 21 Payments to affiliates 396 600 796 Depreciation, depletion, and amortization 22 519 706 187 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 چھ کی جمع ہے گ (A) amount, list line 24e expenses on Schedule O.) 047 047 HOLIDAY PARTY а <u>5,</u>015 015 MARKETING b 4,234 234 UNIFORMS 454 2,454 GRANT RECIPIENT RECEPTION 4,477 366 6,889 e All other expenses 154, 423 36,777 0 191, 200 Total functional expenses. Add lines 1 through 24e 25 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) End of year Beginning of year 287 127,033 Cash-non-interest bearing 201,849 2 Savings and temporary cash investments 2 3 Pledges and grants receivable, net 3 4 Accounts receivable, net 4 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. 5 Complete Part II of Schedule L 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 7 Notes and loans receivable, net 7 8 Inventories for sale or use 885 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or 197,783 10a other basis. Complete Part VI of Schedule D 139,359 159,618 10b 10c b Less: accumulated depreciation 11 Investments—publicly traded securities 11 12 Investments-other securities. See Part IV, line 11 12 13 Investments-program-related. See Part IV, line 11 13 14 14 Intangible assets 15 000 Other assets. See Part IV, line 11 15 471,126 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 17 Accounts payable and accrued expenses 17 18 Grants payable 18 19 19 Deferred revenue 20 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 Loans and other payables to current and former officers, directors, 22 trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 23 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X 25 of Schedule D 0 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here ▶ complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 471,126 512,057 27 Unrestricted net assets 28 28 Temporarily restricted net assets 29 Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund 31 32 32 Retained earnings, endowment, accumulated income, or other funds 512,057 33 Total net assets or fund balances 33 512,844 Total liabilities and net assets/fund balances

Form.	990 (2013) MESA SPORTS ASSOCIATION, INC. 86-0540940			Pag	e 12
Pai	t XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI	,		·	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		2,1	
2	Total expenses (must equal Part IX, column (A), line 25)	2		1,2	
3	Revenue less expenses. Subtract line 2 from line 1	3		0,9	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	<u>47</u>	1,1	<u> 126</u>
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line	1 1	l		
	33, column (B))	10	51	<u> 2,(</u>	<u> </u>
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990. Cash X Accrual Other		, `	٠. ا	1
	If the organization changed its method of accounting from a prior year or checked "Other," explain in			, (- '
	Schedule O.		1,15	, 5mm	- * ,
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				,
	X Separate basis Consolidated basis Both consolidated and separate basis		(_
b	Were the organization's financial statements audited by an independent accountant?		2b		Х
	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		· ~~ ^ `		, ,
Ç	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	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in		,		l :
	Schedule O.		. ,	*	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in			1	
	the Single Audit Act and OMB Circular A-133?		3a	<u> </u>	X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the			1	
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		3b		
			For	m 99 6	0 (2013)

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990.

▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047 Open to Public Inspection

Employer Identification number

	ME	SA SPORTS ASSOCIATION, INC.		86-0	540940
_	Pai		unds or Other Similar Funds or A		
~	,,,,,,,,	Complete if the organization answered "Yes" to I	Form 990. Part IV. line 6.	coount	.
_			(a) Donor advised funds	(b) Funds and other accounts
	1	Total number at end of year	(b) Said Carios Island		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
		•			······································
		Aggregate contributions to (during year)			
		Aggregate grants from (during year)			
		Aggregate value at end of year	et the popula held in depar advised		
		Did the organization inform all donors and donor advisors in writing the			□ var □ va
		funds are the organization's property, subject to the organization's exc			☐ Yes ☐ No
		Did the organization inform all grantees, donors, and donor advisors in			
		only for charitable purposes and not for the benefit of the donor or dor	nor advisor, or for any other purpose		□ v □ v
_		conferring impermissible private benefit?			Yes No
ŧ	Pa	t II Conservation Easements. Complete if the organization answered "Yes" to	Form 990 Part IV line 7		
_	_				
	1	Purpose(s) of conservation easements held by the organization (chec			-d
		Preservation of land for public use (e.g., recreation or education)	Preservation of an historically imp		
		Protection of natural habitat	Preservation of a certified historic	structure	1
	_	Preservation of open space	and the second s		
	2	Complete lines 2a through 2d if the organization held a qualified cons- easement on the last day of the tax year.	ervation contribution in the form of a conse		Hold at the End of the Tou Ver-
	_				Heid at the End of the Tax Year
	a L	Total number of conservation easements		2a	
	D	Total acreage restricted by conservation easements	aludad in (a)	2b 2c	
		Number of conservation easements on a certified historic structure inc		20	
	d	Number of conservation easements included in (c) acquired after 8/17	7/06, and not on a	ا ما	
	_	historic structure listed in the National Register			- AL -
	3	Number of conservation easements modified, transferred, released, e	extinguished, or terminated by the organizar	tion during	g the
		tax year	located N		
		Number of states where property subject to conservation easement is			
	5	Does the organization have a written policy regarding the periodic mo	intoning, inspection, nationing of		Yes No
	•	violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enfo	round conconviction accoments during the v	005	. Li les Li No
	6	Stan and volunteer floors devoted to monitoring, inspecting, and emo	icing conservation easements during the y	eai	
	7	Amount of avnoyage inquired in monitoring leaguesting and enforcing	a concentation occoments during the year		
	7	Amount of expenses incurred in monitoring, inspecting, and enforcing \$ \\$	conservation easements during the year		
	8	Does each conservation easement reported on line 2(d) above satisfy	the requirements of section 170(b)(4)(B)		
	0		y the requirements of section 170(ff)(4)(b)		Yes No
	9	(i) and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation ease	mente in ite revenue and evnence statemer	nt and	1es 100
	9	balance sheet, and include, if applicable, the text of the footnote to the			the
		organization's accounting for conservation easements.	o organization o interioral statements that t	100011000	
-	Pa	rt III : Organizations Maintaining Collections of Art	t. Historical Treasures, or Other	Similar	Assets.
***	7	Complete if the organization answered "Yes" to			
_	1a	If the organization elected, as permitted under SFAS 116 (ASC 958),	not to report in its revenue statement and	balance s	heet
		works of art, historical treasures, or other similar assets held for public	-		
		public service, provide, in Part XIII, the text of the footnote to its finan			
	b	If the organization elected, as permitted under SFAS 116 (ASC 958),			ıt
		works of art, historical treasures, or other similar assets held for public	-		
		public service, provide the following amounts relating to these items:			
		(i) Revenues included in Form 990, Part VIII, line 1		•	\$
		(ii) Assets included in Form 990, Part X		ĺ	▶ \$
	2	If the organization received or held works of art, historical treasures,	or other similar assets for financial dain, or	ovide the	*
	-	following amounts required to be reported under SFAS 116 (ASC 958	• •		
	а	Revenues included in Form 990, Part VIII, line 1	-,	b	▶ \$
		Assets included in Form 990, Part X		Ď	→ \$
-	<u> </u>	*			

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued) □ Using the organization's accession, and other records, check any of the following that are a significant use of its collection terms (check all that apply): □ X Public exhibition □ X Provide a description of thure generations □ Yereservation for future generations □ Provide a description of thure generations collections and explain how they further the organization's exempt purpose in Part XIII. □ During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? □ Yes X □ Part IV ∴ Escrow and Custodial Arrangements. □ Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. □ Is the organization an agent, fursted, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. □ If Yes X is a part of the part X is a part of the following table: □ If Yes X is a part of the part X is a part of the following table: □ If Yes X is a part of the part X is a part of the following table: □ If Yes X is a part of the part X is a part of the part X is a part of the part X is a part of the part X is a part X is	hedule D (Form 990) 2013 MESA SPC	RTS ASSOCIA	MOIT	, INC.			<u> 54094</u>			<u>Pa</u>	ige 2
Using the organization is acquisition, accession, and other records, check any of the following that are a significant use of its collection tems (check all that pply):	Part III Orga	nizations Maintainii	ng Collections of	Art, His	storical Tr	easures, o	r Other	Simila	r Assets (continu	ed)	
b	3 Using the organi	zation's acquisition, acces										
C M Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to rase funds rather than to be maintained as part of the organization's collection? Yee XI Part IV Escrow and Custodial Arrangements. Complete if the organization answered Yes' to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, fundsee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X we be with the organization and year of the organization and year or the organization and year or the organization and year or the organization and year or the organization include an amount on Form 990, Part X, line 21? 1 Ending balance 2 Beginning balance or the organization include an amount on Form 990, Part X, line 21? 2 Did the organization include an amount on Form 990, Part X, line 21? 3 Did the organization include an amount on Form 990, Part X, line 21? 4 Endowment Funds. Complete if the organization answered 'Yes' to Form 990, Part IV, line 10. Complete if the organization answered 'Yes' to Form 990, Part IV, line 10. Complete if the organization answered 'Yes' to Form 990, Part IV, line 10. Part V: Endowment Funds. Complete if the organization answered 'Yes' to Form 990, Part IV, line 10. Part Y: Complete if the organization answered 'Yes' to Form 990, Part IV, line 10. Complete organization by '% Permanent endowment IP % 1 Ferminated endowment IP % 1 Ferminated endowment IP % 2 Ferminated endowment III was a Board designated or quasi-relation by the organization of the organization is lited as required on Schedule R? 2 Described in Part XIII the intended uses of the organization's endowment funds. Part VI. Land, Buildings, and Equipment. Complete if the organization answered 'Ye	a X Public exhibit	ition	d 🗍 l	oan or e	xchange pro	grams						
Experientation for future generations A Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to rase funds rather than to be mantained as part of the organization's collection? Part IV. Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? It is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not include on Form 990, Part X? It is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not include on Form 990, Part X? Beginning blance C Beginning blance I Additions during the year I Ending blance Difference and the organization include an amount on Form 990, Part X, line 21? If Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII. Part V: Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Part V: Endowment Funds is the complete organization and programs of the current year end balance (line 1g, column (a)) held as: Board designated or quasi-endowment ▶ % Permanent endowment tunds not in the possession of the organization that are held and administered for the organization by: (I) current year and balance (line 1g, column (a)) held as: Board designated or quasi-endowment tunds not in the possession of the organization that are held and administered for the organization by: (I) unrelated organizations (b Scholarly res	search	e 🗍 (Other	-							
4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Fart IV Escrow and Crustodial Arrangements. Complete if the organization an aswered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X III and complete the following table: □ Beginning balance □ Distributions during the year □ Amount □ 1			L <u>-</u>									
XIII.		_	collections and explain	how they	v further the	organization's	exempt p	urpose in	Part			
5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization? Fart IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, fustee, oustodian or other intermediary for contributions or other assets not included on Form 990, Part X? b If "Yes," explain the arrangement in Part XIII and complete the following table: C Beginning balance d Additions during the year e Distributions during the year leading the yea		,			,	ŭ		•				
assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Part IV		did the organization solici	t or receive donations o	fart hist	orical treasu	res, or other s	mılar					
Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part IV, line 9 and IV, line 9, or reported an amount on Form 990, Part IV, line 9, or reported an amount on Form 990, Part IV, line 9, or reported an amount on Form 990, Part IV, line 9, or reported an amount on Form 990, Part IV, line 9 and IV,										☐ Ye	s X	No
Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? b If "Yes," explain the arrangement in Part XIII and complete the following table: C Beginning balance d Additions during the year 1 Id Obstributions during the year 1 Ending balance Distributions during the year 1 Endowment Funds. Complete if the organization in Part XIII. Check here if the explanation has been provided in Part XIII Part V: Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Ta Beginning of year balance Contributions C Net investment earnings, gains, and losses Grants or scholarships Other expenditures for facilities and programs 1 Administrative expenses 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶ % The percentages in lines 2a, 2b, and 2c should equal 100% 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations (iii) related organizations (iii) related organizations (iii) related organizations (iv) related organizations (iv) related organizations (iv) related organizations (iv) related organizations (iv) related organizations (iv) related organization in tunds not in the possession of the organization sendowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Described property (a) Octor or other bass (b) Cont or other bass (c) Accumulated (d) Book value (d) Book value				art or the	organization	o concoucir.						
13 Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? b If "Yes," explain the arrangement in Part XIII and complete the following table: C Beginning balance d Additions during the year 1e Distributions during the year 1 Ending balance 20 Did the organization include an amount on Form 990, Part X, line 21? 1 If "Yes," explain the arrangement in Part XIII, Check here if the explanation has been provided in Part XIII Part V : Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. 1a Beginning of year balance b Contributions c Net investment earnings, gains, and losses d Grants or scholarships c Other expenditures for facilities and programs f Administrative expenses g End of year balance Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶ % c Temporarily restricted endowment			to Form	n 990 Pai	rt IV line 9	or repo	rted an	amount o	n Form			
1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes Yes, "explain the arrangement in Part XIII and complete the following table: Amount 1c			on answered res	10 1 011	11 000, 1 a.	, 0,	0, .000		Q G G.			
included on Form 990, Part X? b If "Yes," explain the arrangement in Part XIII and complete the following table: c Beginning balance d Additions during the year e Distributions during the year f Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21? b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII Part V: Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. 1a Beginning of year balance b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶ % b Permanent endowment ▶ % c Temporarily restricted endowment ▶ % c Temporarily restricted endowment ▶ % c Temporarily restricted endowment ▶ % c Temporarily restricted endowment ▶ % c Temporarily restricted endowment ▶ % c Temporarily restricted endowment ▶ % c Temporarily restricted endowment ▶ % c Temporarily restricted endowment ▶ % c Temporarily restricted endowment ▶ % c Temporarily restricted endowment ▶ % c Temporarily restricted endowment ▶ % c Temporarily restricted endowment ▶ % c Temporarily restricted endowment ▶ % c Temporarily restricted endowment ▶ % c Temporarily restricted endowment ₱ % c Temporarily restricted endowment ₱ % c Temporarily restricted endowment ₱ % c Temporarily restricted endowment ₱ % c Temporarily restricted endowment ₱ % c Temporarily restricted endowment ₱ % c Temporarily restricted endowment ₱ % c Temporarily restricted endowment ₱ % c Temporarily restricted endowment ₱ % c Temporarily restricted endowment ₱ % c Temporarily restricted endowment ₱ % c Temporarily restricted endowment ₱ % c Temporarily restricted endowment ₱ % c Temporarily restricted endowment ₱ % c Temporarily restricted endowment ₱ % c Temporarily restricted endowment ₱ %			adian or other intermed	iany for co	ontributions o	or other assets	not					
b If "Yes," explain the arrangement in Part XIII and complete the following table: C Beginning balance d Additions during the year e Distributions during the year f Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21? b If "Yes," explain the arrangement in Part XIII, Check here if the explanation has been provided in Part XIII Part V: Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. 1a Beginning of year balance b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance b Permanent endowment ▶ % The percentages in lines 2a, 2b, and 2c should equal-100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organizations (I) related organizations (I) related organizations (I) related organizations (I) related organizations (I) related organizations (II) Recombined bases (II) Roomwinet bases (II) Roomwinet bases (II) Roomwinet bases (II) Roomwinet bases (II) Roomwinet bases (II) Roomwinet bases (III) Roomwinet			odian or other intermed	iary ioi co		n other assets	1101			□ ve		No
Beginning balance d Additions during the year e Distributions during the year f Ending balance b if "Yes," explain the arrangement in Part XIII, Check here if the explanation has been provided in Part XIII Part V ! Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Beginning of year balance b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance b Permanent endowment ▶ % The percentages in lines 2a, 2b, and 2c should equal-100%. 3a Are there endowment Indes not in the possession of the organization that are held and administered for the organizations (i) related organizations (ii) related organizations (ii) related organizations (ii) related organizations (iii) related organizations (iv) revers b (iv) Cost or other basis (iv) Cost or other basis (iv) Accombidate (ii) Book walue (ii) Book walue (ii) Book walue (iii) Book walue (iii) Book walue (iii) Book walue (iii) Book walue (iii		•	///		hla.					16:	• <u>_</u>] 110
C Beginning balance d Additions during the year 1 Id	b if "Yes," explain	the arrangement in Part X	and complete the fol	llowing ta	ibie:			Г		Amount		—
d Additions during the year e Distributions during the year 1 tending balance 2a Did the organization include an amount on Form 990, Part X, line 21? b if "Yes," explain the arrangement in Part XIII, Check here if the explanation has been provided in Part XIII Part V : Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Complete if the organization in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations (iii) relat								-	<u> </u>	Aillouit		
Distributions during the year Ending balance Did the organization include an amount on Form 990, Part X, line 21? If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII Part V : Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Beginning of year balance (a) Current year (b) Pnor year (c) Two years back (d) Three years back (e) Four years ba	• •							_			—	
t Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21? b if "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII. Part V : Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. 1a Beginning of year balance b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶ % c Temporarily restricted endowment ▶ % c The percentages in lines 2a, 2b, and 2c should equal 100%												
2a Did the organization include an amount on Form 990, Part X, line 21? b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII Part V : Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. 1a Beginning of year balance b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶ % c Temporarily restricted endowment ▶ % c Temporarily restricted endowment ▶ % c Temporarily restricted endowment ▶ % b Permanent endowment Inless 2a, 2b, and 2c should equal 100%. The percentages in lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations iii f "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.	 Distributions dur 	ring the year						<u> </u>				—
b If "Yes," explain the arrangement in Part XIII, Check here if the explanation has been provided in Part XIII Part V: Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. 1a Beginning of year balance b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment % b Permanent endowment % c Temporarily restricted endowment % The percentages in lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Describe of property (a) Dost or other basis (b) Cost or other basis (c) Accumulated (d) Book value	-					•		Ļ	1f	$\overline{}$		
Part V: Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. 1a Beginning of year balance (a) Current year (b) Phor year (c) Two years back (d) Three years back (e) Four years back (e)	_									∐ Ye	s 📙	∐ No
Complete if the organization answered "Yes" to Form 990, Part IV, line 10. 1a Beginning of year balance b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment % c Temporarily restricted endowment % c Temporarily restricted endowment % c Temporarily restricted endowment % c Temporarily restricted organizations for the organization that are held and administered for the organization by: (i) unrelated organizations b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? Describe in Part XIII the intended uses of the organization's endowment funds. Describe or Part XIII the intended uses of the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Describe or property (a) Cost or other basis (b) Cost or other basis (c) Accomulated (d) Book value		the arrangement in Part X	(III. Check here if the ex	xplanation	n has been p	rovided in Par	t XIII					<u> </u>
(a) Current year (b) Pnor year (c) Two years back (d) Three years back (e) Four years back (e) Fo												
1a Beginning of year balance b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶ % b Permanent endowment ▶ % c Temporarily restricted endowment ▶ % The percentages in lines 2a, 2b, and 2c should equal.100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (b) Cost or other basis (c) Accumulated (d) Book value	Com	plete if the organizati	on answered "Yes'	' to For	<u>m 990, Pa</u>	rt IV, line 10).					
b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶ % b Permanent endowment ▶ % c Temporarily restricted endowment ▶ % The percentages in lines 2a, 2b, and 2c should equal 100% 3a Are there endowment tinds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations (iii) related organizations b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (b) Cost or other basis (c) Accumulated (d) Book value			(a) Current year	(b)) Prior year	(c) Two year	s back	(d) Three	years back	(e) Four	years	back
c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶ % b Permanent endowment ▶ % The percentages in lines 2a, 2b, and 2c should equal 100% 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Describer or poperty (a) Cost or other basis (b) Cost or other basis (c) Accumulated (d) Book value	1a Beginning of year	ar balance								<u> </u>		
d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶ % b Permanent endowment ▶ % c Temporarily restricted endowment ▶ % The percentages in lines 2a, 2b, and 2c should equal 100% 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations b if "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Describe in Property (a) Cost or other basis (b) Cost or other basis (c) Accumulated (d) Book value	b Contributions									<u> </u>		
d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶ % b Permanent endowment ▶ % c Temporarily restricted endowment ▶ % The percentages in lines 2a, 2b, and 2c should equal 100% 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations b If "Yes" to 3a(ii), are the related organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (b) Cost or other basis (c) Accumulated (d) Book value	c Net investment	earnings, gains, and										
e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶ % b Permanent endowment ▶ % c Temporarily restricted endowment ▶ % The percentages in lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (b) Cost or other basis (c) Accumulated (d) Book value	losses					l						
e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶ % b Permanent endowment ▶ % c Temporarily restricted endowment ▶ % The percentages in lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (b) Cost or other basis (c) Accumulated (d) Book value	d Grants or schola	arships										
f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶ % b Permanent endowment ▶ % c Temporarily restricted endowment ▶ % The percentages in lines .2a, .2b, .and .2c .should .equal .100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (b) Cost or other basis (c) Accumulated (d) Book value	e Other expenditu	res for facilities and			-	i						
f Administrative expenses g End of year balance Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: Board designated or quasi-endowment ▶ % Permanent endowment ▶ % The percentages in lines. 2a, .2b, .and .2c .should .equal .100% 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (b) Cost or other basis (c) Accumulated (d) Book value	•			1								
g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶ % b Permanent endowment ▶ % c Temporarily restricted endowment ▶ % The percentages in lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part'VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (b) Cost or other basis (c) Accumulated (d) Book value	• •	expenses										
Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: Board designated or quasi-endowment ▶ % Permanent endowment ▶ % Temporarily restricted endowment ▶ % The percentages.in.lines.2a,.2b,.and.2c.should.equal.100% 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations (iii) related organizations if "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (b) Cost or other basis (c) Accumulated (d) Book value		•										
a Board designated or quasi-endowment ▶ % b Permanent endowment ▶ % c Temporarily restricted endowment ▶ % The percentages in lines 2a, 2b, and 2c should equal 100%. The percentages in lines 2a, 2b, and 2c should equal 100%. The percentages in lines 2a, 2b, and 2c should equal 100%. The percentages in lines 2a, 2b, and 2c should equal 100%. Yes organization by: (i) unrelated organizations (ii) related organizations b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (b) Cost or other basis (c) Accumulated (d) Book value	•		current year end halance	e (line 1c	column (a)) held as:		<u>. </u>				
b Permanent endowment % c Temporarily restricted endowment % The percentages in lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part'VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (b) Cost or other basis (c) Accumulated (d) Book value					g, 0010 (a)	, mora ao						
The percentages in lines 2a, 2b, and 2c should equal 100%. The percentages in lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations b if "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (b) Cost or other basis (c) Accumulated (d) Book value	=											
The percentages in lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (b) Cost or other basis (c) Accumulated (d) Book value		•										
Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (I) unrelated organizations (II) related organizations If "Yes" to 3a(II), are the related organizations listed as required on Schedule R? Describe in Part XIII the intended uses of the organization's endowment funds. Part-VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (b) Cost or other basis (c) Accumulated (d) Book value	•					_						
organization by: (i) unrelated organizations (ii) related organizations If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part'VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (b) Cost or other basis (c) Accumulated (d) Book value						d administered	for the					
(i) unrelated organizations (ii) related organizations b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part'VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (b) Cost or other basis (c) Accumulated (d) Book value			ssession of the organiza	allon mai	are neiu and	J administered	ווטו ווופ			!	Voc	No
(ii) related organizations b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (b) Cost or other basis (c) Accumulated (d) Book value										20/1)	163	1100
b If "Yes" to 3a(II), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (b) Cost or other basis (c) Accumulated (d) Book value				•								+
Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (b) Cost or other basis (c) Accumulated (d) Book value	* -											╁
Part'VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (b) Cost or other basis (c) Accumulated (d) Book value	• • •	· ·	•							36		
Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (b) Cost or other basis (c) Accumulated (d) Book value				owment f	unds.			· -·				
Description of property (a) Cost or other basis (b) Cost or other basis (c) Accumulated (d) Book value											_	
(7)	Com	plete if the organizat	tion answered "Yes	" to For	rm 990, Pa	art IV, line 1	<u>1a. See</u>	Form 9	90, Part 2	(, line 1	<u>0. </u>	
(investment) (other) depreciation	Desc	inption of property	(a) Cost or other	basis	(b) Cost or	r other basis	(c)	Accumulated		(d) Book	value	
			(investment)	(01		d	lepreciation		 		
1a Land 22,075 22,	1a Land					22,075					22,	07!
	b Buildings					125,075			947	1		
	- •	ovements						2,	959		8,	598
	•											81
e Other	•											
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))		rough 1e. (Column (d) mi	ist equal Form 990. Pa	rt X. colu	mn (B) line	10(c))			•	1	59	613

	Investments—Other Securities.	S Form 000 Port IV I'm	11h Soe Form 990 Part V line 12
	Complete if the organization answered "Yes" to		(c) Method of valuation
	(a) Description of security or category (including name of security)	(b) Book value	Cost or end-of-year market value
	· · · · · · · · · · · · · · · · · · ·		·
(1) Financial de			
	d equity interests		
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(Ġ)			
(H)			
	(b) must equal Form 990, Part X, col. (B) line 12.) ▶		
	Investments—Program Related.		
Petre Ami	Complete if the organization answered "Yes" t	o Form 990, Part IV, line	e 11c. See Form 990, Part X, line 13.
	(a) Description of investment	(b) Book value	(c) Method of valuation
	(4) 2555, p. 61 11 11 11 11 11 11 11 11 11 11 11 11		Cost or end-of-year market value
(1)			
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)	n (b) must equal Form 990, Part X, col. (B) line 13.) ▶		
Part IX	Other Assets. Complete if the organization answered "Yes" (a) Description	to Form 990, Part IV, lin	e 11d. See Form 990, Part X, line 15.
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(8)			
(9)			
	n (b) must equal Form 990, Part X, col (B) line 15.)		>
Part X	Other Liabilities. Complete if the organization answered "Yes" line 25.	to Form 990, Part IV, lir	ne 11e or 11f. See Form 990, Part X,
1.	(a) Description of hability	(b) Book value	. ,
	income taxes		
	AID MEMBERSHIP DUES	10	
	TID HILLIDIKOHII DOHO		
(3)			
(4)			┪╸
(5)			**
(6)			→
			· ·
(7)		<u> </u>	
(7) (8)			
(7) (8) (9)	n (b) must equal Form 990, Part X, col. (B) line 25) ▶	10	

Sche	dule D (Form 990) 2013 MESA SPORTS ASSOCIATION, INC.	86-054094	0	Page 4
Pa	rt XI Reconciliation of Revenue per Audited Financial Stateme	ents With Revenue per Re	turn.	
	Complete if the organization answered "Yes" to Form 990, Pa	art IV, line 12a.		
1	Total revenue, gains, and other support per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		1 1	
а	Net unrealized gains on investments	2a		
b	Donated services and use of facilities	2b	2	1
C	Recoveries of prior year grants	2c	<u> </u>	
d	Other (Describe in Part XIII.)	2d		
е	Add lines 2a through 2d		2e	· · · · · · · · · · · · · · · · · · ·
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a]	
b	Other (Describe in Part XIII.)	4b]	
C	Add lines 4a and 4b		4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	
Pa	rt XII - Reconciliation of Expenses per Audited Financial Staten	•	Retur	'n.
	Complete if the organization answered "Yes" to Form 990, Page 1	art IV, line 12a.		
1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
а	Donated services and use of facilities	2a	1	
þ	Prior year adjustments	2b	4	
C	Other losses	2c	1	
d	Other (Describe in Part XIII.)	2d		
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1	()	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	_	
b	Other (Describe in Part XIII.)	4b	J	
С	Add lines 4a and 4b		4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	

Part XIII Supplemental Information

2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

PART III, LINE 4 - COLLECTIONS AND RELATION TO EXEMPT PURPOSE

PHOTOGRAPHS OF FAMOUS AND NOT SO FAMOUS BASEBALL PLAYERS, HATS FROM

BASEBALL PLAYERS, BRONZED BASEBALL GLOVES FROM BASEBALL PLAYERS, AND OTHER

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line

PART X - FIN 48 FOOTNOTE

BASEBALL MEMORABILIA.

PART X, LINE 2 -- THE ORGANIZATION HAS BEEN GRANTED TAX-EXEMPT STATUS UNDER SECTION 501(C)(6) OF THE INTERNAL REVENUE CODE. HOWEVER, INCOME FROM CERTAIN ACTIVITIES NOT DIRECTLY RELATED TO THE ORGANIZATION'S TAX-EXEMPT PURPOSE MAY BE SUBJECT TO TAXATION AS UNRELATED BUSINESS TAXABLE INCOME. DURING THE YEARS ENDED JUNE 30, 2014 AND 2013, THE ORGANIZATION DID NOT HAVE ANY UNRELATED BUSINESS TAXABLE INCOME; THEREFORE, THE ACCOMPANYING FINANCIAL STATEMENTS CONTAIN NO PROVISION FOR INCOME TAXES.

THE ORGANIZATION FOLLOWS THE GUIDANCE ISSUED BY THE FINANCIAL ACCOUNTING

Part XIII Supplemental Information (continued)

STANDARDS BOARD (FASB) RELATED TO ACCOUNTING FOR INCOME TAX UNCERTAINTIES. UNDER THIS GUIDANCE, THE ORGANIZATION ACCOUNTS FOR THE EFFECT OF ANY UNCERTAIN TAX POSITIONS BASED ON WHETHER IT IS "MORE-LIKELY-THAN-NOT" THAT THE POSITION WILL BE SUSTAINED BY THE TAXING AUTHORITY UPON EXAMINATION. THE ORGANIZATION ROUTINELY EVALUATES POTENTIAL UNCERTAIN TAX POSITIONS. THE ORGANIZATION HAS IDENTIFIED ITS STATUS AS A TAX-EXEMPT ORGANIZATION AS A TAX POSITION; HOWEVER, THE ORGANIZATION HAS DETERMINED THAT SUCH A POSITION DOES NOT RESULT IN AN UNCERTAINTY THAT REQUIRES RECOGNITION.

THE ORGANIZATION FILES INFORMATIONAL RETURNS IN THE U.S. FEDERAL JURISDICTION AND IN THE STATE OF ARIZONA. FEDERAL RETURNS ARE GENERALLY SUBJECT TO EXAMINATION FOR A PERIOD OF THREE YEARS AFTER THEY HAVE BEEN FILED AND STATE RETURNS ARE GENERALLY SUBJECT TO EXAMINATION FOR A PERIOD OF FOUR YEARS AFTER THEY HAVE BEEN FILED.

INTREST AND PENALTIES, IF ANY, ARE ACCRUED AS A COMPONENT OF MANAGEMENT AND GENERAL EXPENSES WHEN ASSESSED. AS OF JUNE 30, 2014 AND 2013, THE ORGANIZATION HAD NOT ACCRUED ANY INTEREST OR PENALTIES RELATED TO UNCERTAIN TAX POSITIONS.

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete If the organization answered "Yes" to Form 990, Part IV, Ilnes 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, Ilne 6a.

Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

Open to Public Inspection

MESA SPORTS ASSOC	IATION, IN	C.			86-05409	
Fundraising Activities. Complete	if the organization	n ans	wer	ed "Yes" to Form 9		
Form 990-EZ filers are not required Indicate whether the organization raised funds through				Check all that apply		
a Mail solicitations		_		ernment grants		
b Internet and email solicitations	f Solicitation		-	_		
c Phone solicitations	g Special fun	draisır	ng eve	ents		
d In-person solicitations						
 2a Did the organization have a written or oral agreement or key employees listed in Form 990, Part VII) or entit b If "Yes," list the ten highest paid individuals or entities compensated at least \$5,000 by the organization. 	v in connection with	profes ant to a	siona Igreei	I fundraising services?		Yes No
(I) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did raiser custo contr	have dy or ol of	(Iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in	(vi) Amount paid to (or retained by) organization
		contribu		- 	col (I)	
1		163	140			
2						
3						
4						
5						
6						
7		-				
8						
9						
10						
Total			•			
3 List all states in which the organization is registered	or licensed to solicit	contrib	oution	s or has been notified i	t is exempt from	

Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported Part II 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. (b) Event #2 (a) Event #1 (c) Other events (d) Total events (add col (a) through col (c)) (event type) (event type) (total number) 1 Gross receipts 2 Less: Contributions 3 Gross income (line 1 minus line 2) 4 Cash prizes 5 Noncash prizes 6 Rent/facility costs Direct Expenses 7 Food and beverages 8 Entertainment 9 Other direct expenses 10 Direct expense summary. Add lines 4 through 9 in column (d) 11 Net income summary Subtract line 10 from line 3, column (d) 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. (b) Pull tabs/instant (d) Total gaming (add Revenue (a) Bingo (c) Other gaming col (a) through col (c)) bingo/progressive bingo 181,465 181,465 1 Gross revenue 92,844 92,844 2 Cash prizes Expenses 3 Noncash prizes 4_Rent/facility_costs_ 5 Other direct expenses Yes 100.00 % Yes % Yes % 6 Volunteer labor No No No 92,844 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) 88,621 Enter the state(s) in which the organization operates gaming activities: AZYes X No a Is the organization licensed to operate gaming activities in each of these states? b If "No," explain: A LICENSE IS NOT REQUIRED UNDER STATE LAW. Yes X No 10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? b If "Yes," explain:

Sche	dule G (Form	990 or 990-EZ) 2013	MESA S	SPORTS	ASSOCI.	ATION,	INC.	86-054	0940	Page 3
11	Does the org	janization operate gamin	g activities with	nonmembe	rs?	<u> </u>			X	Yes No
12	Is the organi	zation a grantor, benefici	ary or trustee o	f a trust or a	member of a	partnership o	or other entity		_	
	formed to ad	lmınister charıtable gamiı	ng?						, , 📙	Yes X No
13	Indicate the	percentage of gaming ac	tivity operated i	ın.						
а	The organiza	ation's facility							13a 10	0.00%
b	An outside fa	acılıty							13b	%_
14	Enter the na	me and address of the p	erson who prep	ares the org	ganızation's ga	ming/special	events books and	d		
	Name ►	FERNANDO GUER 1550 N. BEVER								
	Address ▶	MESA						AZ 8520	1	
15a	Does the org	ganization have a contrac	ct with a third pa	arty from wh	om the organi	zation receiv	es gamıng			Yes X No
b	amount of ga	er the amount of gaming aming revenue retained l er name and address of t	by the third part	-	ganization >	\$		and the		
		or riamo ana addices er	ine time party.							
	Name ►									
	Address >									
16	Gaming mar	nager information								
	Name ► F	ERNANDO GUERRE	RO, JR.							
	Gaming mai	nager compensation >	\$							
	Description	of services provided >	COORDI	NATES	ALL RAF	FLE RE	LATED FUI	NCTIONS		
	Director	r/officer E	mployee	[] In-	dependent co	ntractor				
17	Mandatory of	distributions:								
a	•	ization required under st	ate law to make	e charitable	distributions fi	om the gami	ng proceeds to			
	•	ate gaming license?				J	. •			Yes X N
b	Enter the an	nount of distributions rec	quired under sta	ite law to be	distributed to	other exemp	t organizations or	•		
		organization's own exer								
Pa		upplemental Inforn								nd
		art III, lines 9, 9b, 10			7b, as app	icable. Als	o complete thi	is part to provide	e any	
	ad	<u>Iditional information</u>	(see instruc	tions).					 ·	

SCHEDULE (Form 990) Department of the Treasury Internal Revenue Service Name of the organization

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

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

Open to Public Inspection 2013

OMB No 1545-0047

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

Employer Identification number 86-0540940

MESA SPORTS ASSOCIATION,	ATION, INC						
Part I General Information on Grants and Assistance	Assistance			State of the forth	or accietance an		
1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees engining for the grants or assistance; and the selection criteria used to award the grants or assistance?	the amount of the gince?	rants or ass	istance, the grantees	eligibility for trie grants	o Or assistance, and	3	. X Yes
cribe .	onitoring the use of overnments ar	grant funds	in the United States zations in the Un	ited States. Com	plete if the orga	anization answ	ered "Yes" to Form 990,
Part II Crains and Other Assistance to the state of the s	received more	than \$5,0	00. Part II can be	Juplicated if additi	onal space is n	eeded.	
1 (a) Name and address of organization	(p) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LUB N. 19TH AVENUE			6,612				H.E.R.O.S./SPEC NEED
AZ 850	7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	_					
2) MESA HO HO KAM FOUNDAIION, INC. P.O. BOX 400	11-3642839	501C3	41,000			:	YOUTH SPORTS PROGRAM
	l						
(4)							
(5)							
(9)							
(8)							
(6)						3333	
- 1		out out at bo	1 table				> 2
2 Enter total number of section 501(c)(3) and government organizations listed in the line is table.	t organizations liste ne t table						0 •
							2 total (100 mm 000) (2013

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

Schedule I (Form 990) (2013)

Schedule I (Form 990) (2013) MESA SPORTS ASSOCIATION, INC. 86-0540940

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.

•	Part III can be duplicated if additional space is needed.	nal space is needed.				and according to an action of the
	(a) Type of grant or assistance	(b) Number of	(c) Amount of	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(e) Method of valuation (book, (f) Description of non-cash assistance FMV, appraisal, other)
		Silipidiosi				
-						
,						
7						
,						
2						
4						
,						
2						
•						
و						
ı						
	S Later Later Brownide the information required in Part I. line 2. Part III. column (b), and any other additional information.	ide the information rec	unired in Part I line	2. Part III. column (b)	and any other additional	information.
Par IV	Supplemental Information.		6			

- PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS PART I, LINE 2 FUNDS ARE DONATED FOR LARGE EVENTS IN WHICH THE ORGANIZATION'S MEMBERSHIP

THE MONITORING IS DONE BY OBSERVATION BY THE ORGANIZATION'S IS INVOLVED.

MEMBERSHIP.

Schedule I (Form 990) (2013)

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

► 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

Open to Public Inspection

Internal Revenue Service
Name of the organization

Department of the Treasury

MESA SPORTS ASSOCIATION, INC.

Employer Identification number 86-0540940

FORM 990, PART III, LINE 4D - ALL OTHER ACCOMPLISHMENTS

SPONSORSHIP OF MESA CITY CHAMPIONSHIP TRACK MEET WHICH BENEFITS YOUTH

PARTICIPANTS BY PROMOTING YOUTH PARTICIPATION IN SPORTS.

FORM 990, PART VI, LINE 6 - CLASSES OF MEMBERS OR STOCKHOLDERS THE ORGANIZATION HAS 164 MEMBERS.

FORM 990, PART VI, LINE 7A - ELECTION OF MEMBERS AND THEIR RIGHTS THE 164 MEMBERS ELECT THE MEMBERS OF THE GOVERNING BODY.

FORM 990, PART VI, LINE 7B - DECISIONS SUBJECT TO APPROVAL OF MEMBERS CHANGES TO THE ORGANIZATION'S BY-LAWS REQUIRE APPROVAL BY THE MEMBERS.

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990 THE TREASURER AND PRESIDENT REVIEW THE FORM 990.

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY
THE BOARD OF DIRECTORS REVIEWS.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION
THE ORGANIZATION DOES NOT CURRENTLY MAKE ITS GOVERNING DOCUMENTS, CONFLICT
OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC. THE
ORGANIZATION DOES PLAN TO PUBLISH THE DOCUMENTS ON ITS WEBSITE.

Department of the Treasury Internal Revenue Service

Depreciation and Amortization

(Including Information on Listed Property)

OMB No 1545-0172

► See separate instructions.

Attach to your tax return.

Attachment Sequence No

vame(5	MESA SI	PORTS ASSOC	IATION,	INC.			_	86-0	-	
	s or activity to which this form relates									
	/50 RAFFLE	oo Cortain Brand	white I be alone Co	otion 1	70					 _
Pa	rt i : Election To Exper Note: If you have a					mplet	e Part I	l		
1	Maximum amount (see instruction		complete : a.	<u> </u>	<u> you oo</u>		<u> </u>		1	500,000
	Total cost of section 179 property	•	instructions)					[2	
3	Threshold cost of section 179 pro	perty before reduction	in limitation (see	ınstructio	ns)				3	2,000,000
4	Reduction in limitation Subtract li	ne 3 from line 2. If zer	o or less, enter -0)-					4	
5	Dollar limitation for tax year Subtract lii	ne 4 from line 1. If zero or	less, enter -0- If ma	arried filing	separately, se	e instru	ctions		5	
6	(a) Description	n of property		(b) Cost	(business use o	nly)	(c) E	lected cost		•
										
		- f D 00		l	 -	 -				
7	Listed property. Enter the amount		un aaluma (a) lu	ana 6 ana	L	7		I	8	····
8 9	Total elected cost of section 179 Tentative deduction, Enter the sm			ies o anc	1 /				9	
10	Carryover of disallowed deduction								10	
11	Business income limitation. Enter	•		ss than z	ero) or line 5	í (see ir	nstruction	ıs)	11	· · · · · · · · · · · · · · · · · · ·
12	Section 179 expense deduction		•		•				12	
13 _	Carryover of disallowed deduction				▶ [13				
Note	Do not use Part II or Part III below	w for listed property In	stead, use Part \	/						···
_Pa	rt II Special Depreciat	ion Allowance ar	nd Other Dep	reciation	on (Do no	t inclu	<u>ide liste</u>	d prope	rty.) (See instructions.)
14	Special depreciation allowance for		her than listed pr	operty) p	laced in serv	/ice]	
	during the tax year (see instruction	•							14	
15	Property subject to section 168(f)	` '							15	4 (22
16 Do	Other depreciation (including ACI		do listed prop	orty) (S	Soo instruc	otions			16	4,632
<u> Fd</u>	rt III MACRS Deprecia	tion (Do not inclu		tion A	see manut	LIONS	1			
17	MACRS deductions for assets pla	aced in service in tax v			13				17	39,372
18	If you are electing to group any assets place	-	-			here		▶ □		
	Section B—	Assets Placed in Ser	vice During 201	3 Tax Ye	ar Using the	Gene	ral Depre	eciation S	ystem	
-	(a) Classification of property	(b) Month and year placed in service	(c) Basis for depre (business/investm only-see instruc	ent use	(d) Recovery period	(e) Co	onvention	(f) Meth	od	(g) Depreciation deduction
19a	3-year property									
b	5-year property									
<u>c</u>	-7-year_property_		6	<u>,239</u>	7.0	1	QN	S/	<u>/</u> L	445
	10-year property	-								
e_	15-year property	- '						<u> </u>		
<u> </u>	20-year property	┥ :			05 vro			S/L		
<u></u> 9h	25-year property Residential rental				25 yrs 27 5 yrs.	 	MM	S/L		
"	property				27 5 yrs.	$\overline{}$	MM	S/L		
<u> </u>	Nonresidential real	03/17/14	122	2,925			MM	S/L		919
-	property	01/21/14		2,150			MM	S/L		28
	Section C—A	ssets Placed in Serv	ice During 2013	Tax Yea	r Using the	Altern	ative Dep	reciation	Syste	m
20a	Class life							S/l		
b	12-year				12 yrs.	<u> </u>		S/I		
	40-year				40 yrs.	<u></u>	MM	S/I		<u> </u>
	art IV , Summary (See in									
21	Listed property. Enter amount from				,	. . –			21_	
22	Total. Add amounts from line 12	_					iter here		1	45 304
00	and on the appropriate lines of y					s			22	45,396
23	For assets shown above and pla portion of the basis attributable t	-	-	enter the		23				{
	portion of the basis attributable t	O SECTION ZOOM COSIS	 			J_23				<u> </u>

59660 MESA SPORTS ASSOCIATION, INC.

Tax Asset Detail 7/01/13 - 6/30/14

7
0
6/30/2
<u>Š</u>
_
ΥË
ÌΙ

Tax Penod	00000000000000000000000000000000000000	7 7 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	00000000000000000000000000000000000000
Tax Method	200DB 200DB 200DB 200DB 200DB 200DB S/L S/L S/L S/L S/L S/L S/L S/L	200DB 200DB 200DB 200DB S/L S/L S/L	200DB 200DB 200DB 200DB 200DB 200DB 200DB 200DB 200DB 200DB 200DB 200DB
Tax Net Book Value	99 104 120 101 298 288 97 226 0 0 36 69 114 389 389 389 389 45 472	1,662 99 112 316 0 0 2,124 4,313 1,873	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
Tax End Depr	1,371 1,437 1,660 1,343 3,661 1,292 422 2,207 3,200 1,040 1,	17,207 1,052 1,688 4,760 1,350 8,351 1,857 36,265 29,648	5,121 572 557 2,285 1,716 322 441 916 861 440 440
Tax Current Depreciation	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0 0 0 796 796 0 0 0	000000000
Tax Prior Depreciation	1.371 1.660 1.660 1.343 3.661 1.292 2.207 3.200 3.99 3.99 3.99 3.99 3.89 3.89 3.89 3.89	17.207 1,052 1.688 4.760 1.350 8.351 1.061 35.469 29.648	5.121 5.72 5.57 2.285 1.716 1.716 1.716 861 441 916 861 487
Tax Bonus Amt			000000000
Sec 179 Exp Current = c			0000000000
Tax S	1.470 1.541 1.541 1.444 3.959 1,389 1,389 1,389 1,389 1,389 1,389 1,076 1.0776 1.076	18.869 1.151 1.800 5.076 1.350 8.351 3.981 40.578 31.521	5 121 572 557 2.285 1,716 352 474 994 940 633
Date In Service	UTER 3/01/04 UTER 3/01/04 UTER 6/01/04 UTER EQU 4/01/04 UTER MU: 6/10/04 3/19/05 R 4/25/06 1/29/07 R 4/02/09 ER 2/23/09 ER 2/23/09 ER 1/02/10 1/31/11 COFFICE 11/23/11 VARE 1/03/12 Computer Equipment ositions and Transfers	3/28/97 2/18/98 1/01/06 1/19/06 1/19/06 2/23/08 7/06/08 D ROON 3/15/12 Equipment - Other lions and Transfers	1/29/97 2/13/97 2/18/97 3/09/97 3/12/97 4/10/97 1/24/98 3/05/98 3/15/04
d t Property Description	Computer Equipment SCOREBOARD COMP SCOREBOARD COMP SCOREBOARD COMP DAKTRONICS COMPUTER COMPUTER COMPUTER COMPUTER COMPUTER COMPUTER COMPUTER COMPUTER COMPUTER COMPUTER COMPUTER H COMPUTER COMPUTER COMPUTER COMPUTER H COMPUTER COMPUTER COMPUTER COMPUTER H COMPUTER COMPUTER COMPUTER COMPUTER COMPUTER H COMPUTER COMPUTE	Group: Equipment - Other 65 d 1/3 SCREEN/TARP 3/28/97 70 d 2-WAY RADIO 2/18/98 85 d COPIER 1/01/06 86 TV'S IN HoHo ROOM 1/19/06 103 d GATE ACCESS CONTROL 2/23/08 105 d LAWN EQUIPMENT 7/06/08 116 REFRIGERATOR FOR HO ROON 3/15/12 Equipment - Other *Less: Dispositions and Transfers Net Equipment - Other	Group: Furniture & Fixtures 59 PRESS ROOM CHAIRS 60 d COUNTING ROOM CHAIRS 61 d SCOREBOARD ROOM DESK 62 d SPIENCERS TV DISH 63 FILL CABINE1/STOOL 64 BULLETIN BOARD 67 d SCOREBOARD CHAIR 68 PICTURL I'RAMING 69 d 235 CHAIRS 71 d FAX MACHINE 72 PRESS ROOM ARTWORK 77 d STADIUM CHAIR
Asset	Group: 74 77 75 76 78 80 93 93 96 1110 1111 1111 1111 1111 1111 1111 1	Group: 65 70 85 86 103 105 116	Group: 59 60 61 61 62 63 64 64 67 71

59660 MESA SPORTS ASSOCIATION, INC. 86-0540940 FYE: 6/30/2014

)	0,00,2014										
Asset t	Property Description	Date In Service	Tax Cost	Sec 179 Exp Current = c	Tax Bonus Amt	Tax Prior Depreciation	Tax Current Depreciation	Tax End Depr	Tax Net Book Value	Tax Method	Тах
Group: Fu 81 88 90 d 98 102	Furniture & Fixtures (continued) CHAIRS & TABLES FURNITURE TABLES & CHAIRS PHONE SYSTEM SIGN - I ODGE	12/01/04 1/24/06 2/11/06 3/01/07 1/31/08	14.977 256 85 1.122 2,821 579	00000	00000	13.793 227 75 1,043 2,821 0	0 0 0 0 0 14	13,793 227 75 1.122 2,821 41	1.184 29 10 0 0 0 538	200DB 200DB 200DB 200DB S/L S/L	7 7 0 7 0 7 0 0 7 0 0 7 0 0 7 0 0 7 0 0 7 0 0 7 0 0 7 0 0 7 0 0 0 7 0
2	s: Dispo	Furniture & Fixtures sitions and Transfers Furniture & Fixtures	34.676 6,205 28,471	0000	0	32,418 5,972 26.446	120	32,538 5.972 26,566	2,138 233 1.905		
66 d 73 d 79 d 79 d 79 d 88 d 88 d 89 d 90 d 100 d 100 d 111 d 112 d 122 d 123 d 123 d	66 d ROOM ADDITIONS FYE 9/30/98 4/01/97 73 d STADIUM FENCE 83 d STADIUM FENCE 83 d SHADE STRUCTURE 83 d SHADE STRUCTURE 84 d MPROVEMENTS 87 d KITCHEN IMPROVEMENTS 89 d IMPROVEMENTS 89 d IMPROVEMENTS 80 d IMPROVEMENTS 80 d IMPROVEMENTS 80 d IMPROVEMENTS 81/10/06 80 d MPROVEMENTS 80 d IMPROVEMENTS 80 d IMPROVEMENTS 81 d MPROVEMENTS 82/03/06 89 d SHADE AWNING 80 d OUTFIELD WALL PADDING 80 d AWNINGS 80 d AWN	98 4/01/97 98 4/01/98 5/24/04 12/30/05 12/30/05 1/24/06 3/01/06 3/01/06 5/01/06 5/01/06 1/126/07 9/17/07 1/12/08 1/12/08 5/23/09 6/13/14 6/13/14 6/13/14	- WW-WW00W4401-088W80W8-08 WV 4			27,509 3,380 21,400 3,273 3,273 6,815 2,475 3,273 1,395 5,116 1,947 412 2,162 0 0 0 0 0 0 0 0 111,305 111,305 111,305	0 0 135 135 135 102 102 135 136 137 137 137 137 137 137 137 137 137 137	27.509 3,380 22,107 3,408 3,408 3,408 3,408 3,408 2,577 2,577 1,635 2,176 2,177 2,176 2,176 2,176 2,176 2,176 2,176 2,177 2,177 2,176 2,17	6,887 0 1,897 1,897 1,897 1,897 1,510 22,750 3,304 1,737 1,510 4,694 4,694 3,468 3,348 3,488	150DB 150DB	200 200 200 200 200 200 200 200 200 200
Group: Lo	Net Improvements Croup: Lodge - 640 N. Center St. 117 BUILDING 3/17/14 118 LAND 3/17/14 124 APPRAISAL / INSPLCITON 1/21/14 1/24 APPRAISAL / INSPLCITON 1/21/14 1/24 APPRAISAL / INSPLCITON 1/21/14 1/21/	3/17/14 3/17/14 3/17/14 1/21/14 640 N. Center St.	122 925 22.075 2 150 147.150	30000		0 0 0	919 0 0 28 28 947	919 0 28 28 947	122.006 22.075 2.122 146.203	S/L Land S/L	39 0 0 0 39 0

59660 MESA SPORTS ASSOCIATION, INC. **Tax Asset Detail 7/01/13 - 6/30/14**FYE: 6/30/2014

	Tax od Period	7.0						
	Tax Method	200DB		1	0.11		~ 1 → 1	~ II
	Tax Net Book Value)		247.352	159.618
	Tax End Depr	549 782	247,105	549,782 549,782	0		756,560 718,395	38,165
	Tax Current Depreciation	37.487	70+, / 6	37,482 0	37,482		45,396	45,396
	Tax Prior Depreciation	200	212,300	512.300 512.300	0		711,164 675.916	35,248
	Tax Bonus Amt	c		00	0		0	0
	Sec 179 Exp Current = c	•	0	0 00	00		000	00
	Tax (Cost		549.782	549.782			1,003,912	197.783
	Date In Service		12/21/06	Scoreboard	Not Scorehoard	מבסו בספו	Grand Total	Net Grand Total
+107	Property Description	board	95 d SCOREBOARD	o Sucition of	"Less: Dispositions and Transicts		Grand Total	Less. Dispositions a
TIE. 0/20/2014	d Asset t	Group: Scoreboard	5 d SC			4		

•	•	· ———			
86-0540940	Fe	deral State	ements		
	Toyobi	la Interest on	Investments		
		<u>ie interest on</u>	investinents		
Descrip	tion	l lovelete d	Evaluaian Boatal	Acquired after	110
	Amount B	Unrelated Business Code	Exclusion Postal Code Code	6/30/75	US Obs (\$ or %)
	\$ 1,144		14		
TOTAL	\$ 1,144				
l					

86-0540940	Federal Statements	
	Form 990, Part IX, Line 24e - All Other Expenses	
Description	Program Management & Service	Fund Raising
TELEPHONE MOVING EXPENSE SUPPLIES PRINTING LODGE EXPENSES COMPUTER SERVICES PROCRAM AD PRODUCTION REPAIRS & MAINTENANCE MISCELLANEOUS PAYROLL SERVICE FEES BANK CHARGES LICENSES AND PERMITS WEBSITE POSTAGE/FREIGHT TOTAL	\$ 2,447 \$ 2,447 \$ 2,428 \$ 7.52	0