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DLN: 93493119002235

Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

► Do not enter Social Security numbers on this form as it may be made public By law, the IRS generally cannot redact the information on the form

► Information about Form 990 and its instructions is at <u>www.IRS.gov/form990</u>

OMB No 1545-0047

2013

Open to Public Inspection

A Fo	r the	2013 cal	endar year, or tax year beginnin	g 07-01-2013 , 2013, and end	ling 06-3	0-2014			
		applicable	C Name of organization GUADALUPE CENTER EDUCATIONAL	. PROGRAMS INC			D Emplo	yer iden	tification number
		hange	Doing Business As				87-02	299521	
_	me cha	_							
_	tıal retu		Number and street (or P O box if r 1385 N 1200 W	naıl ıs not delivered to street address)	Room/su	ite	E Telepho	one numb	er
	rmınate						(801)	531-6	100
_		return	SALT LAKE CITY, UT 84116	ntry, and ZIP or foreign postal code					
Application pending									6,925,111
			F Name and address of pri JACK ELIZONDO	ncipal officer			Is this a group subordinates?		for ┌ Yes ┌ No
			1385 N 1200 W SALT LAKE CITY,UT 841:	16					
			SALI LAKE CITT, OT 841.	10			Are all subordi included?	nates	│ Yes │ No
Ta	x-exer	mpt status	✓ 501(c)(3)	(insert no)	527			a list (see instructions)
	ebsit	e:► WV		DRG		H(c)	Group exempt	uon num	nber ►
<u></u>			Corporation Trust Association			1			
	m or or rt I	_	mary	on Other F		L Yea	r of formation 19	66 M	State of legal domicile UT
F G			escribe the organization's missi	on or most significant activities	-				
		THE MI	SSION OF GUADALUPE SCHO	OL IS TO TEACH ECONOMIC	ALLY DI				AND NON-ENGLISH
e e		<u>SPEAKI</u>	NG ADULTS THE VISION AND	SKILLS NEEDED TO LIVE PR	RODUCT	IVE, RE	WARDING LIV	ES	
Governance									
Ĕ									
§ 6€	2	Check t	nis box দ if the organization di	scontinued its operations or di	sposed o	f more t	han 25% of its	net ass	sets
		N	. C	on a back (Bank) (Tabor 4a)				1 - 1	2.0
Activities &			of voting members of the goverr of independent voting members					3	20
Ė			mber of individuals employed in					5	99
ទ្ធ								6	340
•	6 Total number of volunteers (estimate if necessary)							7a	0
	1		elated business taxable income t					7a 7b	0
	 	Wet anne	nacea business taxable income i	Tom Form 550 F, mie 54 F	· · · ·	$\dot{}$	Prior Year	1 75 1	Current Year
	8	Contr	butions and grants (Part VIII le	ne 1h)			2,840,	403	5,546,862
ā	8 Contributions and grants (Part VIII, line 1h)							927	1,242,377
Ravenue	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)							486	4,625
æ	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)							546	85,195
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line								
	12)						2,907,		6,879,059
	13		s and similar amounts paid (Part ts paid to or for members (Part :			0	6,957,900		
	14		ts paid to or for members (Part . es, other compensation, employ	, , ,,					0
\$	15	5-10		ee bellents (Fart 1x, Column (A), iiiles		1,559,	696	1,704,745
<u>e</u>	16a	Profes		102,	000	72,000			
ੜੀ	Ь	Total fu	ındraısıng expenses (Part IX, column (D), line 25) • 130,913					
	17	Other	expenses (Part IX, column (A),	lines 11a-11d, 11f-24e) .			449,	302	586,577
	18	Total	expenses Add lines 13–17 (mu	ıst equal Part IX, column (A), lı	ne 25)		2,110,		9,321,222
	19	Rever	ue less expenses Subtract line	18 from line 12			796,		-2,442,163
8 S 20 S 30 S						Beg		nt	End of Year
to State	20	Total	assets (Part X, line 16)				4,570,6	674	5,426,773
AAS MB	21		liabilities (Part X, line 26)				205,		3,477,989
žÏ	22		ssets or fund balances Subtract				4,365,		1,948,784
Pa	rt II	Sign	ature Block						
Not Assets or Expenses Fund Balances	17 18 19	Profes Total fu O ther Total Rever	ssional fundraising fees (Part IX) indraising expenses (Part IX, column (D expenses (Part IX, column (A), expenses Add lines 13–17 (mu	o), line 25) ► 130,913 lines 11a-11d, 11f-24e) . est equal Part IX, column (A), li 18 from line 12	 ne 25)		102, 449, 2,110, 796, inning of Curre Year	302 998 364 nt	586,5 9,321,2 -2,442,1 End of Year
35e	20	Total	assets (Part X, line 16)				4,570,	674	5,426,77
ž Ž	1					·			
				inne zi nom nne zu	• •		4,365,	172	1,948,/84
		_	perjury, I declare that I have ex	amined this return, including ac	ccompan	yıng sch	nedules and sta	tement	s, and to the best of
			belief, it is true, correct, and cor nowledge	mplete Declaration of preparer	(other th	ian office	er) is based on	all infor	mation of which
		****					2015-04-20		
Sigr		Sign	ature of officer				Date		
Her	е		C ELIZONDO PRESIDENT						
		<u> </u>	or print name and title					I n	
_			Print/Type preparer's name TED L HILL CPA	Preparer's signature	D	ate	Check If	PTIN P00097	
Paid			Firm's name F EIDE BAILLY LLP	l	<u> </u>		self-employed Firm's EIN 🕨 4		
Pre	pare	er							
Use	On	ıly 📙	Firm's address 🕨 5 TRIAD CENTER STE	600			Phone no (801) 532-22	00
		-	SALT LAKE CITY, UT 8	341801128					

May the IRS discuss this return with the preparer shown above? (see instructions)

Par				ervice Accompl response or note to	l ishments o any line in this Part	III	٧
1	Brief	ly describe the or	ganızatıon's mıss	sion			
REFU THE	JGEES BARRI	ON SALT LAKE ERS OF POVERT	CITY'S WEST SI Y, ILLITERACY	DE SINCE 1966 ⁻ , AND SCHOOL FA	THROUGH EDUCAT AILURE OUR MISSI	TAGED CHILDREN AND ADL ION, OUR PROGRAMS HELP ON IS TO TEACH ECONOMI EEDED TO LIVE PRODUCTI	STUDENTS OVERCOME CALLY DISADVANTAGEI
2		ne organization ur rior Form 990 or 9			rvices during the yea	r which were not listed on	
	If"Y∈	s," describe thes	e new services o	n Schedule O			
3	servi	ces?			t changes in how it c	onducts, any program · · · · · · · ·	. Tyes V No
_		es," describe thes	_				
4	exper	nses Section 501	(c)(3) and 501(are required to repo	nree largest program services, rt the amount of grants and all	
4a	(Code) (Expenses \$ ALUPE HOLDING COM	6,957,900 IPANY AND FRIENDS O	including grants of \$ F GUADALUPE	6,957,900) (Revenue \$	1,242,377)
	(6.1) (F	4 202 447) (D	,
4b	AND RECE	TTER GRADE SCHOOL MOTIVATION TO ACHI IVING INDIVIDUALIZE	EVE LIFE-LONG LEAF D INSTRUCTION CL	RNING THE SCHOOL SE ASS SIZES ARE SMALL V	ERVES UP TO 150 CHILDR WITH A 1 12 INSTRUCTO) (Revenue \$ JR CHILDREN'S BASIC ACADEMIC SK EN IN KINDERGARTEN THROUGH TH R-STUDENT RATIO THE ENHANCED I WITH VOLUNTEERS DAILY, COMPUTI	E 5TH GRADE WITH STUDENTS ELEMENTARY CURRICULUM IS
	INTE	GRATION OF CURRIC	JLUM INTO DAILY AC		RE BUSSED DOOR TO DO	OR, AS WELL AS PROVIDED BREAKFA	
 4с	(Code	e) (Expenses \$	234,175	ıncludıng grants of \$) (Revenue \$)
	BETT OVER COMI COMI PROF RECE	ER PROVIDE FOR THE . 250 ADULT NON-ENG MUNITY, SINCE 1966 MUNITY VOLUNTEERS ESSIONAL STAFF A F	ETR FAMILIES, ACHIE GLISH SPEAKING IMN TUESDAY AND THUI AS TUTORS USING I AMILY LITERACY PRO INSTRUCTIONS PER	VE CITIZENSHIP, AND E MIGRANTS AND REFUGE RSDAY CLASSES ARE TA PREPARED LESSON PLA DGRAM IS AVAILABLE O	BECOME ACTIVE CONTRIE EES WHO ARE RESPONSIE AUGHT ONE-ON-ONE OR I NS MONDAY AND WEDNE N TUESDAY AND THURSD	ITED ENGLISH PROFICIENCY, THE LA SUTORS TO THEIR COMMUNITY THE SLE FOR THEIR FAMILY'S SURVIVAL AT IN SMALL GROUP TUTORING PROFES SDAY CLASSES ARE TAUGHT IN A SM AY MORNINGS AND IS TAUGHT BY PROCARE SERVICES ARE PROVIDED THE	PROGRAM ANNUALLY SERVES ID WELFARE IN OUR SIONAL STAFF SUPERVISE ALL CLASSROOM SETTING BY OFESSIONAL STAFF STUDENTS
	(Cod) (Expenses \$	106,178	ıncludıng grants of \$) (Revenue \$	\
	TODE IN TH AT NE FING	DLER BEGINNINGS TO IE IN-HOME PROGRAI EIGHBORHOOD HOUS ERPLAYS, READING A	DDDLER BEGINNINGS A NURTURING AN E SIX TEACHERS, TH ND DRAMATIC PLAY	PROVIDES ADDITIONA D LITERACY-RICH ENV HREE OF WHOM ARE BI	L SERVICES FOR CHILDR IRONMENT IS PROVIDED ILINGUAL, TEACH LANGUA JDENT RATIO IS 1 3 PAR) (Revenue 3 EN, ONE TO THREE YEARS OLD, WHO FOR UP TO 22 CHILDREN, FOUR DAY GE AND LITERACY DEVELOPMENT TH ENTS VOLUNTEER A MINIMUM OF SI	S PER WEEK AND IS LOCATED ROUGH TALKING, SINGING,
	INDE DEVE FOUR	CHOOL PROGRAM GI PENDENT THINKING T LOPMENTAL DOMAINS THALF DAYS A WEEK	THROUGH POSITIVE THE PRESCHOOL P ACADEMIC SKILLS A	CHILD, PARENT AND TE PROGRAM PROVIDES SE ARE TAUGHT BY INTEGE	EACHER RELATIONSHIPS, ERVICES FOR 50 THREE A RATING PRE-LITERACY SK) (Revenue \$ 1992, FOSTER CHILDREN'S LOVE OF I WHICH LEAD CHILDREN TO REACH T ND FOUR YEAR OLD CHILDREN VIA C (ILLS AND MATH CONCEPTS INTO EVI R AND ARE PROVIDED BREAKFAST O	HEIR FULL POTENTIAL IN ALL ENTER-BASED INSTRUCTION, RYDAY LIFE THE INSTRUCTOR-
	10-1) /E	102.022	moluding ===++5-4	\ /D	
	RELA	OME THE IN-HOME P	ENTS WHILE TEACH	ING AND MONITORING) (Revenue \$ E, AND THEIR FAMILIES PARENT EDU AR-ROUND, WEEKLY VISITS FOSTER RINGS	
	O+b.	or program comus	os (Dosserba in C	Schodulo (C.)			
-ru		er program servic enses \$		including grants o	f \$) (Revenue \$)
 4е		I program service		9,014,203	•	, , , , , , , , , , , , , , , , , , ,	,
	. 5.0			2,021,203			

Part IV Checklist of Required Schedule
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			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
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? <i>If "Yes," complete Schedule C, Part II</i>	4		Νo
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I^{2}	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV^{\square}	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	10	Yes	
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 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
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		No
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		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d	Yes	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
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	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
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		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
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		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	Yes	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23		No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year 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	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
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		No
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? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
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, Part VI	37		No
38	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	38	Yes	
		F	orm 99 0	(2013)

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V			
	,		Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 12			
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 reportable gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Νo
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
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		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5B		
C	In 163, to line 3a of 3b, and the organization line form 0000-17	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		Νo
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).		1	
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		Νo
	If "Yes," indicate the number of Forms 8282 filed during the year		li.	
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Νo
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
_	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	1		
a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
b	Enter the amount of reserves the organization is required to maintain by the states			
	In which the organization is licensed to issue qualified health plans	<u> </u>		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Νo
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Se	ection A. Governing Body and Management			
			Yes	No
1 a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
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		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	eveni	ie Cod	e.)
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ue Cod Yes	e.) No
	Did the organization have local chapters, branches, or affiliates?	evenu 10a		
10a	Did the organization have local chapters, branches, or affiliates?			No
10a b	Did the organization have local chapters, branches, or affiliates?	10a		No
10a b 11a	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	No
10a b 11a b	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	No
10a b 11a b 12a	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a	Yes	No No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b	Yes	No No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b	Yes Yes	No No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes	No No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes	No No
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes	No No
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes	No No No
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates? 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes	No No No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes	No No No

- 17 List the States with which a copy of this Form 990 is required to be filed ►UT
- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply

✓ Own website ✓ Another's website ✓ 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 ►MARYSUE HOWISEY 1385 N 1200 W
 SALT LAKE CITY, UT 84116 (801)531-6100

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

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, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

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

(A) Name and Title	(B) A verage hours per week (list any hours	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	from the organization and related organizations	
(1) MELINDA PELO	2 00	х		х				0	0	0	
VICE PRESIDENT (2) PHILIP M BALLIF	1.00										
BOARD MEMBER	1 00	x						0	0	0	
(3) RICHARD L PATER	2 00	х		х				0	0	0	
VICE PRESIDENT (4) GREG SUMMERHAYS											
PAST PRESIDENT	2 00	x		х				0	0	0	
(5) JODI MORGAN	1 00										
BOARD MEMBER		X						0	0	0	
(6) TOM DUNLAP	2 00	х		х				0	0	0	
VICE PRESIDENT (7) PAUL R BERTHELSON	2 00			,,							
VICE PRESIDENT		Х		Х				0	0	0	
(8) JACK ELIZONDO	2 00	х		х				0	0	0	
PRESIDENT (9) MARY KATE IVORY	1 00										
BOARD MEMBER		х						0	0	0	
(10) SHANNON MULLINS	1 00										
BOARD MEMBER		X						0	0	0	
(11) CLAUDIA LARSEN	2 00			,,							
VICE PRESIDENT		X		Х	L			0	0	0	
(12) KATHIE MILLER	1 00	x						0	0	0	
BOARD MEMBER								Ŭ	3		
(13) SENATOR LUZ ROBLES	1 00	×						0	0	0	
BOARD MEMBER (14) MARK MURDOCK	1.00										
. ,	1 00	х						0	0	0	
BOARD MEMBER (15) KATHY ETCHEVERRY	2 00	-			<u> </u>						
VICE PRESIDENT		X		Х				0	0	0	
(16) MICHAEL BARRY	1 00										
BOARD MEMBER		Х		L	L_		L	0	0	0	
(17) SILVIA BEESLEY	1 00	х						0	0	0	
BOARD MEMBER								<u> </u>	0		

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and Title		(B) A verage hours per week (list any hours	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations		(F Estim amount o compen from	ated of other sation the
	organizations below dotted line) organizations below dighest compensated below dotted line) organizations below dighest compensated below dotted line)						(W- 2/1099 MISC)		organiz	lated			
(18)	LEE CARTER	1 00	x						0		0		0
	D MEMBER								-		\dashv		_
` '	MARYAM PEDRAZA	1 00	x						0		0		0
	D MEMBER TRENT TENNEY	1 00											
	D MEMBER		х						0		0		0
	VICTORIA M MORI	40 00											
EXEC	DIRECTOR				×				94,335		0		2,830
											_		
											\dashv		
1b	Sub-Total			•			F				Τ.		
c	Total from continuation sheets to Part	VII, Section A					▶□						
d	Total (add lines 1b and 1c)		•				•		94,335		0		2,830
2	Total number of individuals (including be \$100,000 of reportable compensation				ed al	bove	e) who	rec	eived more than				
										_		Yes	No
3	Did the organization list any former offi					plo	yee, o	r hıç	ghest compensate	d employee			_
_	on line 1a? If "Yes," complete Schedule 3						• •				3		N o
4	For any individual listed on line 1a, is torganization and related organizations									om the			
	ındıvıdual			•			•				4		No
5	Did any person listed on line 1a receive services rendered to the organization?								_	ndıvıdual for	5		N.o.
	-	,		-			,	•		- L	<u> </u>		No_
Se	ection B. Independent Contracto	ors											
1	Complete this table for your five highes compensation from the organization Re	port compensa								the organizati			
	(A) (B) Name and business address Description of services									(C) Compen			
											\dashv	· · · · · · · · · · · · · · · · · · ·	
											_		
											\dashv		
	Total number of independent contractors	(ıncludına but ı	not lım	ıted t	o th	ose	listed	l ab	ove) who received	more than			

\$100,000 of compensation from the organization $\blacktriangleright 0$

Form 99						Page \$
Part V	<u> </u>	Statement of Revenue Check if Schedule O contains a response or note to any I	ine in this Part VIII			
			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
s £	1a	Federated campaigns 1a 172,551				
Contributions, Gifts, Grants and Other Similar Amounts	ь	Membership dues 1b				
j m	С	Fundraising events 1c				
iffs, ar A	d	Related organizations 1d				
£, G	e	Government grants (contributions) 1e 1,362,712				
iğ iz	f	All other contributions, gifts, grants, and 1f 4,011,599				
buti the		similar amounts not included above Noncash contributions included in lines				
n di	g	1a-1f \$				
Coma	h	Total. Add lines 1a-1f	5,546,862			
<u> </u>		Business Code				
ve TI	2a	DEVELOPMENT FEE 900099	· ·	795,771		
<u>22</u>	Ь	OTHER PROGRAM REVENUE 900099	446,606	446,606		
Program Serwce Revenue	d					
	e					
<u> </u>	f	All other program service revenue				
ر م			4 242 277			
	g 3	Total. Add lines 2a-2f	1,242,377			
		and other similar amounts)	4,625			4,62
	4 5	Income from investment of tax-exempt bond proceeds				
		(i) Real (ii) Personal				
	6a	Gross rents]			
	b	Less rental expenses				
	С	Rental income or (loss)				
	d	Net rental income or (loss)				
	7a	(i) Securities (ii) Other Gross amount	-			
	/a	from sales of assets other				
	 b	than inventory Less cost or	-			
	"	other basis and sales expenses				
	С	Gain or (loss)]			
	d	Net gain or (loss)				
æne æ	8a	Gross income from fundraising events (not including \$				
Other Revenue		of contributions reported on line 1c) See Part IV, line 18 a 131,247				
ţ.	b	Less direct expenses b 46,052]			
0	C	Net income or (loss) from fundraising events	85,195			85,19
	9a	Gross income from gaming activities See Part IV, line 19 a				
	l	Less direct expenses b]			
		Net income or (loss) from gaming activities				
	10a	Gross sales of inventory, less returns and allowances .	-			
	ь	Less cost of goods sold b	j			
	С	Net income or (loss) from sales of inventory				
	-	Miscellaneous Revenue Business Code	↓			
	11a b					
	C					
	d	All other revenue				1
	e	Total. Add lines 11a-11d				
	12	Total revenue. See Instructions		4 343 3		22.55
	1	<u> </u>	6,879,059	1,242,377	(89,82

	770 (2013)				Page 10
	Statement of Functional Expenses			laha aaluman (A.)	
ectio	on 501(c)(3) and 501(c)(4) organizations must complete all columns All			lete column (A)	
	Check if Schedule O contains a response or note to any line in this		 (B)		<u> </u> (D)
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	6,957,900	6,957,900		
2	Grants and other assistance to individuals in the United States See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	93,370	85,328	4,936	3,106
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	1,357,235	1,283,461	43,957	29,817
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	12,239	10,181	1,100	958
9	Other employee benefits	135,265	128,543	3,790	2,932
10	Payroll taxes	106,636	97,778	5,394	3,464
11	Fees for services (non-employees)				
а	Management				
b	Legal				
С	Accounting	19,065	15,370	1,478	2,217
d	Lobbying				_
е	Professional fundraising services See Part IV, line 17	72,000			72,000
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	102,519	82,647	7,950	11,922
12	Advertising and promotion	102,513	02,017	7,550	11,322
13	Office expenses	197,944	193,508	2,837	1,599
14	Information technology	251,511		2,55.	
15	Royalties				_
16	Occupancy	88,078	83,477	3,008	1,593
17	Travel	00,070	03,477	3,000	1,333
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest	85,836	231	85,605	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	67,017	57,704	9,112	201
23	Insurance				
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
а	OTHER	23,762	15,719	6,939	1,104
b	PROPERTY AND EQUIPMENT	2,356	2,356		
c					
d					
e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	9,321,222	9,014,203	176,106	130,913
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

Par	't X	Check if Schedule O contains a response or note to any line in t	hıs Part	: X			
					(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing			32,035	1	1,060,520
	2	Savings and temporary cash investments			679,446	2	
	3	Pledges and grants receivable, net			253,902	3	278,673
	4	Accounts receivable, net			7,202	4	12,706
	5	Loans and other receivables from current and former officers, demployees, and highest compensated employees. Complete Paschedule L	, trustees, key	.,	5	12,,,,,,	
Assets	6	Loans and other receivables from other disqualified persons (a: $4958(f)(1)$), persons described in section $4958(c)(3)(B)$, and and sponsoring organizations of section $501(c)(9)$ voluntary erorganizations (see instructions) Complete Part II of Schedule II	tıng employers		6		
	7	Notes and loans receivable, net				7	228,210
	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges			38,784	9	41,453
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	1 1	1,126,379	·		11,100
	ь	Less accumulated depreciation	10b	853.493	623,695	10c	272,886
	11	Investments—publicly traded securities	· · ·	,	11	,	
	12	Investments—other securities See Part IV, line 11		•		12	
	13	Investments—program-related See Part IV, line 11				13	
	14	Intangible assets				14	
	15				2,935,610		3,532,325
	16	Other assets See Part IV, line 11			4,570,674		5,426,773
					98,217	17	108,837
	17 18	Accounts payable and accrued expenses			90,217	18	100,037
					47,354		44,786
	19	Deferred revenue			47,334	19	44,780
	20	Tax-exempt bond liabilities				20	
S	21	Escrow or custodial account liability Complete Part IV of Sche				21	
Liabiliti	22	Loans and other payables to current and former officers, direct key employees, highest compensated employees, and disqualif	fied				
<u> </u>		persons Complete Part II of Schedule L				22	
_	23	Secured mortgages and notes payable to unrelated third partie				23	
	24	Unsecured notes and loans payable to unrelated third parties			59,978	24	
	25	Other liabilities (including federal income tax, payables to relate and other liabilities not included on lines 17-24) Complete Pa	rt X of S	chedule	0	25	3,324,366
	26	Total liabilities. Add lines 17 through 25			205,549	26	3,477,989
— s		Organizations that follow SFAS 117 (ASC 958), check here Ines 27 through 29, and lines 33 and 34.					
anc	27	Unrestricted net assets			1,299,061	27	-1,759,903
<u> </u>	28	Temporarily restricted net assets			2,901,064	28	3,543,687
=	29	Permanently restricted net assets			165,000	29	165,000
r Fund Balance		Organizations that do not follow SFAS 117 (ASC 958), check he complete lines 30 through 34.					<u> </u>
ō	30	Capital stock or trust principal, or current funds	_			30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund				31	
25.5	32	Retained earnings, endowment, accumulated income, or other f				32	
Net /	33	Total net assets or fund balances		_	4,365,125	33	1,948,784
ž	34	Total liabilities and net assets/fund balances		-	4,570,674	34	5,426,773
		rotar navincies and net assets/juna valances	• • •	•	4,570,674		5,426,773

Par	Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				F
1	Total revenue (must equal Part VIII, column (A), line 12)	1		6,8	379,059
2	Total expenses (must equal Part IX, column (A), line 25)	2		9,3	321,222
3	Revenue less expenses Subtract line 2 from line 1	3		-2,4	142,163
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		4,3	365,125
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			25,822
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		1,9	948,784
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				. Г
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review a separate basis, consolidated basis, or both	wed on			
	Separate basis Consolidated basis Both consolidated and separate basis				
ь	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepa basis, consolidated basis, or both	ırate			
	▼ Separate basis				
C	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigh audit, review, or compilation of its financial statements and selection of an independent accountant?	nt of the	e 2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain it Schedule O	n			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	e	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		3b		

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OMP No. 1545 0045

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

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

2013

Open to Public Inspection

		e organization	Employer identification number
GUADA	ALUPE (CENTER EDUCATIONAL PROGRAMS INC	87-0299521
Da	rt I	Reason for Public Charity Status (All organizations must complete this pa	
		zation is not a private foundation because it is (For lines 1 through 11, check only one box	
1		A church, convention of churches, or association of churches described in section 170(b)	-
2	<u></u>	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)	(1-)(-)(-)
3	<u>'</u>	A hospital or a cooperative hospital service organization described in section 170(b)(1)(a)	Δ)(iii)
4	<u>'</u>	A medical research organization operated in conjunction with a hospital described in sect	
_	'	hospital's name, city, and state	ion 170(b)(1)(A)(iii). Enter the
5	Γ	An organization operated for the benefit of a college or university owned or operated by a	governmental unit described in
		section 170(b)(1)(A)(iv). (Complete Part II)	-
6	\sqcap	A federal, state, or local government or governmental unit described in section 170(b)(1)	(A)(v).
7	굣	An organization that normally receives a substantial part of its support from a governmen	
	·	described in section 170(b)(1)(A)(vi). (Complete Part II)	<u>-</u>
8	Г	A community trust described in section 170(b)(1)(A)(vi) (Complete Part II)	
9	Γ	An organization that normally receives (1) more than $331/3\%$ of its support from contribution	tions, membership fees, and gross
		receipts from activities related to its exempt functions—subject to certain exceptions, an	d (2) no more than 331/3% of
		its support from gross investment income and unrelated business taxable income (less se	ection 511 tax) from businesses
		acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part	III)
10	\sqcap	An organization organized and operated exclusively to test for public safety See section	509(a)(4).
11	\sqcap	An organization organized and operated exclusively for the benefit of, to perform the funct	ions of, or to carry out the purposes of
		one or more publicly supported organizations described in section $509(a)(1)$ or section 5	
		the box that describes the type of supporting organization and complete lines 11e through	
_	_	a Type I b Type II c Type III - Functionally integrated d Ty	· · -
e	,	By checking this box, I certify that the organization is not controlled directly or indirectly other than foundation managers and other than one or more publicly supported organization.	·
		section 509(a)(2)	
f		If the organization received a written determination from the IRS that it is a Type I, Type	II, or Type III supporting organization,
		check this box	Γ.
g		Since August 17, 2006, has the organization accepted any gift or contribution from any o	if the
		following persons? (i) A person who directly or indirectly controls, either alone or together with persons desc	cribed in (ii) Yes No
		and (III) below, the governing body of the supported organization?	11g(i)
		(ii) A family member of a person described in (i) above?	11g(ii)
		(iii) A 35% controlled entity of a person described in (i) or (ii) above?	11g(iii)
h		Provide the following information about the supported organization(s)	[±±9(···/

(i) Name of supported organization	(ii) EIN	EIN (iii) Type of organization (described on lines 1 - 9 above or IRC section (see	organizati col (i) list your gove	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		the on in anized S ?	(vii) A mount of monetary support
		instructions))	Yes	No	Yes	No	Yes	No	
Total									

instructions

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2009 **(b)** 2010 (c) 2011 (d) 2012 (e) 2013 (f) Total in) 🟲 1 Gifts, grants, contributions, and membership fees received (Do not 1,759,245 2,321,180 3,690,063 2,840,403 5,546,862 16,157,753 include any "unusual grants ") 7 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge 1,759,245 2,321,180 3,690,063 2,840,403 5,546,862 16,157,753 Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly 3,312,774 supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column Public support. Subtract line 5 12,844,979 from line 4 Section B. Total Support Calendar year (or fiscal year (a) 2009 **(b)** 2010 (c) 2011 (d) 2012 **(e)** 2013 (f) Total beginning in) 🟲 1,759,245 2,321,180 3,690,063 2,840,403 5,546,862 16,157,753 Amounts from line 4 Gross income from interest, dividends, payments received on 12,261 6,621 5,818 6,486 4,625 35,811 securities loans, rents, royalties and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) 11 Total support (Add lines 7 16,193,564 through 10) Gross receipts from related activities, etc (see instructions) 12 12 2,313,437 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check Section C. Computation of Public Support Percentage 14 Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f)) 14 79 320 % Public support percentage for 2012 Schedule A, Part II, line 14 15 15 84 310 % 16a 33 1/3% support test—2013. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box **▶**▽ and **stop here.** The organization qualifies as a publicly supported organization b 33 1/3% support test - 2012. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test - 2013. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported $\vdash \Gamma$ organization b 10%-facts-and-circumstances test - 2012. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

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

Schedule A (Form 990 or 990-EZ) 2013 Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support

Cale	ndar year (or fiscal year beginning in) 🟲	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
2	include any "unusual grants ") Gross receipts from admissions,						
_	merchandise sold or services						
	performed, or facilities furnished in						
	any activity that is related to the organization's tax-exempt						
	purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or						
4	business under section 513 Tax revenues levied for the						
•	organization's benefit and either						
	paid to or expended on its						
_	behalf The value of services or facilities						<u> </u>
5	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
7a	A mounts included on lines 1, 2,						
	and 3 received from disqualified persons						
ь	Amounts included on lines 2 and 3						
	received from other than						
	disqualified persons that exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
c	Add lines 7a and 7b						
8	Public support (Subtract line 7c						
	from line 6) ction B. Total Support						
	ndar year (or fiscal year beginning	() 2000	(1) 2010	() 2011	(1) 2012	() 2012	(C) T
				(A) 2011 I	(d) 2012	(e) 2013	(f) Total
	in) ►	(a) 2009	(b) 2010	(c) 2011	(4) 2012	(-,	(-,
9	in) ► A mounts from line 6	(a) 2009	(B) 2010	(6) 2011	(4) 2012	(5, 2222	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	in) ► A mounts from line 6 Gross income from interest,	(a) 2009	(B) 2010	(6) 2011	(4) 2012	(0, 2000	(7,7,5,5,1)
9	in) ► A mounts from line 6	(a) 2009	(b) 2010	(6) 2011	(4) 2012	(5,232	
9	in) A mounts from line 6 Gross income from interest, dividends, payments received on	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable	(a) 2009	(b) 2010	(6) 2011	(4) 2012		
9 10a	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a b	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	(a) 2009	(b) 2010	(6) 2011	(4) 2012		
9 10a b	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated	(a) 2009	(b) 2010	(6) 2011	(4) 2012		
9 10a b	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a b c 11	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a b	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include	(a) 2009	(b) 2010	(6) 2011			
9 10a b c 11	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of	(a) 2009	(b) 2010	(c) 2011			
9 10a b c 11	In) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	(a) 2009	(b) 2010	(6) 2011			
9 10a b c 11	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c,	(a) 2009	(b) 2010	(c) 2011			
9 10a b c 11	In) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
9 10a b c 11 12	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here	or the organizati	on's first, second				
9 10a b c 11 12 13 14	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here	or the organizati	on's first, second	, thırd, fourth, or		a 501(c)(3) orga	nization,
9 10a b c 11 12 13 14 Se 15	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage for 2013	or the organizati ic Support Pe (line 8, column (on's first, second ercentage f) divided by line	, thırd, fourth, or		a 501(c)(3) orga	nization,
9 10a b c 11 12 13 14 Se 15 16	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201	or the organization of the	on's first, second ercentage f) divided by line art III, line 15	, third, fourth, or		a 501(c)(3) orga	nization,
9 10a b c 11 12 13 14 Se 15 16 Se	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201 ction D. Computation of Inve	or the organization of the	on's first, second ercentage f) divided by line art III, line 15 me Percenta	, third, fourth, or 13, column (f))	fifth tax year as a	a 501(c)(3) orga 15 16	nization,
9 10a b c 11 12 13 14 Se 15 16 Se 17	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201 ction D. Computation of Inve	or the organization ic Support Performance (line 8, column (2 Schedule A, Paragraphic Performance) colors (line 10c, colors)	on's first, second ercentage f) divided by line art III, line 15 me Percentagolumn (f) divided	, third, fourth, or 13, column (f)) ge by line 13, colum	fifth tax year as a	15 16	nization,
9 10a b c 11 12 13 14 Se 15 16 Se 17 18	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201 ction D. Computation of Inve	or the organization of the organization of the organization of the state of the sta	on's first, second ercentage f) divided by line art III, line 15 me Percentago olumn (f) divided A, Part III, line 1	, third, fourth, or 13, column (f)) ge by line 13, column	fifth tax year as a	15 16	nization,

33 1/3% support tests—2012. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18

is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV		formation. Provide the explanations required by Part II, line 10; Part II, lin ne 12. Also complete this part for any additional information. (See instruction							
	Facts And Circumstances Test								
Return Reference Explanation									
		Schodulo A / Form 000 o	000 E7) 201						

Schedule A (Form 990 or 990-EZ) 2013

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DLN: 93493119002235

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

ADALUPE CENTER EDUCATIONAL PROGRAMS INC		Employer identification number				
	87-	0299521				
Organizations Maintaining Donor Advised Funds or Other Similar organization answered "Yes" to Form 990, Part IV, line 6.	r Funds	or Accou	·			
(a) Donor advised funds		(b) Funds a	nd other acco	ounts		
Total number at end of year						
Aggregate contributions to (during year)						
Aggregate grants from (during year)						
Aggregate value at end of year						
Did the organization inform all donors and donor advisors in writing that the assets held in funds are the organization's property, subject to the organization's exclusive legal control		ısed	☐ Yes	┌ No		
Did the organization inform all grantees, donors, and donor advisors in writing that grant fu used only for charitable purposes and not for the benefit of the donor or donor advisor, or fo conferring impermissible private benefit?			┌ Yes	┌ No		
rt II Conservation Easements. Complete if the organization answered "Ye	s" to Forn	n 990, Par	t IV, line 7.			
Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Protection of natural habitat Preservation of open space				ā		
Complete lines 2a through 2d if the organization held a qualified conservation contribution easement on the last day of the tax year	ın the forr	n of a conse	rvation			
sassing on the last day of the tax year		Held at	the End of th	e Year		
Total number of conservation easements	2a					
Total acreage restricted by conservation easements	2b					
Number of conservation easements on a certified historic structure included in (a)	2c					
Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d					
Number of conservation easements modified, transferred, released, extinguished, or termi	nated by th	ne organizat	ion during			
the tax year F						
Number of states where property subject to conservation easement is located 🛌						
Does the organization have a written policy regarding the periodic monitoring, inspection, enforcement of the conservation easements it holds?	handling of	f violations,	and	┌ No		
Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation ea	asements o	during the ye	ear			
A mount of expenses incurred in monitoring, inspecting, and enforcing conservation easem	nents durın	g the year				
▶ \$						
Does each conservation easement reported on line $2(d)$ above satisfy the requirements of and section $170(h)(4)(B)(II)$?	f section 1	70(h)(4)(B)((ı)	┌ No		
In Part XIII, describe how the organization reports conservation easements in its revenue balance sheet, and include, if applicable, the text of the footnote to the organization's finar the organization's accounting for conservation easements	ncıal stater	ments that o	lescribes			
rt III Organizations Maintaining Collections of Art, Historical Treasure Complete if the organization answered "Yes" to Form 990, Part IV, line 8		her Simil	ar Assets.			
If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its rworks of art, historical treasures, or other similar assets held for public exhibition, education service, provide, in Part XIII, the text of the footnote to its financial statements that desc	ion, or rese	earch in furtl				
If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its rever works of art, historical treasures, or other similar assets held for public exhibition, educations service, provide the following amounts relating to these items	nue statem	nent and bal		blıc		
(i) Revenues included in Form 990, Part VIII, line 1		► \$				
(ii) Assets included in Form 990, Part X		F \$_				
If the organization received or held works of art, historical treasures, or other similar asse following amounts required to be reported under SFAS 116 (ASC 958) relating to these ite						
ionowing amounts required to be reported under STAS 116 (ASC 956) relating to these its						
Revenues included in Form 990, Part VIII, line 1		► \$				

Part	Organizations Maintaining Co	llections of Art,	His	tori	cal Tr	easu	res, or O	the	r Similar Ass	ets (co	ontinued)
3	Using the organization's acquisition, accessicollection items (check all that apply)	on, and other record	ds, ch	eck :	·		_		significant use o	of its	
а	Public exhibition		d	Γ	Loan	or exch	nange progr	ams			
b	Scholarly research		e	Γ	Other	=					
c	Preservation for future generations										
4	Provide a description of the organization's co Part XIII	ollections and explai	n how	the	y furthe	r the o	rganızatıon	's ex	empt purpose ın	l	
5	During the year, did the organization solicit of									,	
Dar	assets to be sold to raise funds rather than t								•	Yes	No
- GII	Part IV, line 9, or reported an an	•			_		answere	u i	es to rolling:	,o,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ıan or other ınterme	dıary	for c	ontribu	tions o	r other ass	ets r		Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	I and complete the	follow	/ıng t	able		г				
								_	Amo	ount	
C	Beginning balance							1c			
d	Additions during the year						-	1d			
e f	Distributions during the year						-	1e			
	Ending balance						L	1f		- Yes	
2a 	Did the organization include an amount on Fo									Yes	Г No
D	If "Yes," explain the arrangement in Part XII									· · ·	<u>'</u>
Ра	rt V Endowment Funds. Complete	(a)Current year		were Prior y						(e)Four v	ears back
1a	Beginning of year balance	194,274	(-)		181,009	_ (-,	189,689	+	168,193	, ,	159,155
b	Contributions										
С	Net investment earnings, gains, and losses	25,822			18,531		-3,144	ŀ	26,841		13,813
d	Grants or scholarships										
e	Other expenditures for facilities and programs	5,473			5,266		5,536	i .	5,345		4,775
f	Administrative expenses	214,623			194,274		181,009	 	189,689		168,193
g	End of year balance	<u> </u>					· · · · · · · · · · · · · · · · · · ·	<u>' </u>	169,669		100,193
2	Provide the estimated percentage of the curr	ent year end balanc	e (line	e 1 g	, colum	n (a)) r	ield as				
а	Board designated or quasi-endowment										
Ь	Permanent endowment ► 76 880 %	120.00									
С	Temporarily restricted endowment • 231 The percentages in lines 2a, 2b, and 2c shot	120 % uld equal 100%									
3a	Are there endowment funds not in the posses	ssion of the organiza	ition t	hat a	are held	d and a	dmınıstere	d for	the		
	organization by								- C	Yes	No
	(i) unrelated organizations			•				•	3a(i		No
ь	(ii) related organizations		• I on S	chec	ule R?			٠. ٠	3b	' 	110
4	Describe in Part XIII the intended uses of th	•									'
Par	t VI Land, Buildings, and Equipme 11a. See Form 990, Part X, line 1		he or	gan	ıızatıor	n answ	ered 'Yes	' to	Form 990, Par	t IV, lı	ne
	Description of property				a) Cost o sis (inve		(b)Cost or o		(c) Accumulated depreciation	(d) B	ook value
1a				+						+	
	Buildings									+	
	Leasehold improvements						253	3,441	224,24	1	29,200
d I	Equipment						326	,768	136,70	4	190,064
	Other							5,170	492,54	8	53,622
	I. Add lines 1a through 1e <i>(Column (d) must e</i>			mn (B), line	10(c).)			🛌		272,886
1014		quai i Gilli 550, Fail A	, colul	(<i>D</i> ₁ , nne	<u> </u>		•	Schedule D	 (Form 9	-

See Form 990, Part X, line 12. (a) Description of security or category	(b)Book value	(c) Method of valuation
(including name of security)	(B)Book value	Cost or end-of-year market value
(1)Financial derivatives		
(2)Closely-held equity interests		
Other		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	<u>*</u>	
Part VIII Investments—Program Related. (See Form 990, Part X, line 13.	Complete if the organization	n answered 'Yes' to Form 990, Part IV, line 11c.
(a) Description of investment	(b) Book value	(c) Method of valuation
		Cost or end-of-year market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13) Part IX Other Assets. Complete if the organization	on ancwared 'Vec' to Form 990	D. Part IV, line 11d, See Form 990, Part V, line 15
(a) Desc		(b) Book value
(1) ASSETS RESTRICTED FOR PP&E	·	3,195,667
(2) INTEREST IN NET ASSETS OF RECIPIENT ORG		214,623
(3) FINANCING COSTS, NET		122,035
Total. (Column (b) must equal Form 990, Part X, col.(B) line		
Part X Other Liabilities. Complete if the org Form 990, Part X, line 25.	janization answered 'Yes' t	o Form 990, Part IV, line 11e or 11f. See
1 (a) Description of liability	(b) Book value	
Federal Income taxes		
CONSTRUCTION COSTS PAYABLE	3,324,366	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	3,324,366	

	e D (Form 990) 2013					Page 4
	the organization answ	evenue per Audited Financial Stat vered 'Yes' to Form 990, Part IV, line 1	12a.		e per Re	
1	Total revenue, gains, and othe	r support per audited financial statements			1	6,921,059
2	Amounts included on line 1 bu	t not on Form 990, Part VIII, line 12				
а	Net unrealized gains on invest	ments	2a			
b	Donated services and use of fa	acılıtıes	2b	42,0	00	
C	Recoveries of prior year grants	s	2c		_	
d	Other (Describe in Part XIII)		2d		<u>ا</u> ا	
e .	Add lines 2a through 2d .				. 2e	42,000
3	Subtract line 2e from line 1 .				3	6,879,059
4	Amounts included on Form 99	0, Part VIII, line 12, but not on line 1				
a	Investment expenses not incl	uded on Form 990, Part VIII, line 7b .	4a			
b	Other (Describe in Part XIII)		4b			
C .	Add lines 4a and 4b				4c	l
5	Total revenue Add lines 3 and	i 4c. (This must equal Form 990, Part I, line	:12) .		5	6,879,05
Part X		xpenses per Audited Financial Sta swered 'Yes' to Form 990, Part IV, line		nts With Expens	es per l	Return. Complete
1 -		audited financial statements			1	9,363,22
	·	t not on Form 990, Part IX, line 25				, ,
		acilities	2a	42,0	00	
			2b	1 = 73	`	
			2c		- 	
			2d			
	·			<u> </u>		42,00
	-				3	9,321,22
		0, Part IX, line 25, but not on line 1 :	• •			7,321,22
		uded on Form 990, Part VIII, line 7b	4a	I		
			4b		_	
	,					(
		nd 4c. (This must equal Form 990, Part I, lin				
Part X			ie 10)	<u> </u>	<u> </u>	9,321,22
Provide	e the descriptions required for line 4, Part X, line 2, Part XI,	Part II, lines 3, 5, and 9, Part III, lines 1a, lines 2d and 4b, and Part XII, lines 2d and				e any additional
	Return Reference	Explanation				
PART V	, LINE 4	THESE FUNDS ARE TO BE HELD TO GEN	J F R A T F	FARNINGS TO BE	VEELT TH	F PROGRAMS OF
. , , , , , ,	,	THE ORGANIZATION GENERALLY		2,111111100 10 02	12:11:11:	
PART X,		GEP IS ORGANIZED AS A UTAH NONPR THE INTERNAL REVENUE SERVICE (IRS SECTION 501(A) OF THE INTERNAL RE SECTION 501(C)(3), QUALIFIES FOR TH SECTION 170(B)(1)(A)(VI) AND (VIII), FOUNDATION UNDER SECTIONS 509(A ANNUALLY REQUIRED TO FILE A RETUL (FORM 990) WITH THE IRS IN ADDITIC ON NET INCOME THAT IS DERIVED FRO ITS EXEMPT PURPOSE THE ORGANIZA UNRELATED BUSINESS INCOME TAX A BUSINESS INCOME TAX RETURN (FORM ORGANIZED AS UTAH NONPROFIT CON INTERNAL REVENUE SERVICE (IRS) AS SECTION 501(A) OF THE INTERNAL RE SECTION 501(C)(3), QUALIFIES FOR TH SECTION 170(B)(1)(A)(VI) AND (VIII), FOUNDATIONS UNDER SECTIONS 509	S) AS EXVENUE HE CHA AND HA A)(1) AN RN OF (D)N, THE OM BUS TION H ND HAS RPORA EXEMP VENUE HE CHA AND HA	KEMPT FROM FEDE CODE AS AN ORG RITABLE CONTRIE AS BEEN DETERMIN D (3), RESPECTIV D RGANIZATION E ORGANIZATION E HAS DETERMINED TO WITH THE IRS G TIONS AND HAVE I TO FROM FEDERAL CODE AS ORGANI RITABLE CONTRIE AVE BEEN DETERMINED	RAL INCO ANIZATION D IED NOT ELY THE EMPT FRO S SUBJEC S THAT A IT IS NOT EMPT OR HC AND F BEEN REC INCOME T ZATIONS SUTION D	ME TAXES UNDER ON DESCRIBED IN EDUCTION UNDER TO BE A PRIVATE ORGANIZATION IS OM INCOME TAX TO INCOME TAX RE UNRELATED TO SUBJECT TO GANIZATION TOG ARE OGNIZED BY THE TAXES UNDER DESCRIBED IN EDUCTION UNDER

ORGANIZATION UNDER SECTION 509(A)(3) THE ORGANIZATIONS ARE ANNUALLY REQUIRED TO FILE A RETURN OF ORGANIZATION EXEMPT FROM INCOME TAX (FORM 990) WITH THE IRS IN ADDITION, THE ORGANIZATIONS ARE SUBJECT TO INCOME TAX ON NET INCOME THAT IS DERIVED FROM BUSINESS ACTIVITIES THAT ARE UNRELATED TO ITS EXEMPT PURPOSE THE ORGANIZATIONS HAVE DETERMINED THAT THEY ARE NOT SUBJECT TO UNRELATED BUSINESS INCOME TAX AND HAVE NOT FILED AN EXEMPT ORGANIZATION BUSINESS INCOME TAX RETURN (FORM 990-T) WITH THE IRS THE ORGANIZATIONS BELIEVE THAT THEY HAVE APPROPRIATE SUPPORT FOR ANY TAX POSITIONS TAKEN AFFECTING ITS ANNUAL FILING REQUIREMENTS, AND AS SUCH, DOES NOT HAVE ANY UNCERTAIN TAX POSITIONS THAT ARE MATERIAL TO THE FINANCIAL STATEMENTS.

ORGANIZATIONS WOULD RECOGNIZE FUTURE ACCRUED INTEREST AND PENALTIES RELATED TO UNRECOGNIZED TAX BENEFITS AND LIABILITIES IN INCOME TAX EXPENSE IF

SUCH INTEREST AND PENALTIES ARE INCURRED

	<u> </u>	
Part XIII	Supplemental Info	ormation (continued)
Ret	turn Reference	Explanation

Schedule D (Form 990) 2013

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DLN: 93493119002235

OMB No 1545-0047

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

SCHEDULE G

Supplemental Information Regarding **Fundraising or Gaming Activities**

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. Attach to Form 990 or Form 990-EZ. See separate instructions.

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

Inspection

Name of the organization						Employer ident	ification number
GUADALUPE CENTER EDUCAT	IONAL PROGRAMS	5 INC				87-0299521	
Part I Fundraising Act Form 990-EZ filers					o Form 9	990, Part IV,	line 17.
1 Indicate whether the organ	ızatıon raısed funds	through ar	ny of the f	following activities Chec	ck all tha	t apply	
a Mail solicitations			-	Solicitation of non-			
b Internet and email solid	cıtatıons		f	Solicitation of gove			
c Phone solicitations			g	Special fundraising			
d 🔽 In-person solicitations			_				
2a Did the organization have a or key employees listed in							Γ _{Yes} Γ _N
b If "Yes," list the ten highes to be compensated at least			undraisei	rs) pursuant to agreeme	nts unde	r which the fun	draiser is
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	fundrais custo cont	Did ser have ody or rol of utions?	(iv) Gross receipts from activity	(or re fundra:	ount paid to tained by) ser listed in ol (i)	(vi) A mount paid to (or retained by) organization
		Yes	No				
1 PATHWAY ASSOC 2150 S 1300 E SLC, UT 84106	CAPITAL CAMPAIG		No	2,000,000		30,000	1,970,000
2	CAPITAL						
KATHERINE FIFE 848 W 900 S	CAMPAIG		No	800,000		42,000	758,000
SLC,UT 84104							
3							
4							
5							
6							
7							
8							
9							
10							
				2,800,000		72,000	2,728,000

Pa	rt II	Fundraising Events. Commore than \$15,000 of fundrevents with gross receipts g	aising event contributi			
			(a) Event #1	(b) Event #2	(c) O ther events	(d) Total events (add col (a) through col (c))
			(event type)	(event type)	(total number)	` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` `
Revenue	1	Gross receipts	83,137	48,110		131,247
φ	2	Less Contributions				
<u>~</u>	3	Gross income (line 1 minus line 2)	83,137	7 48,110		131,247
	4	Cash prizes				
မှာ ()	5	Noncash prizes				
Expenses	6	Rent/facility costs	18,856	11,599		30,455
	7	Food and beverages .				
Direct	8	Entertainment				
Δ	9	Other direct expenses .	14,044	1,553		15,597
	10	Direct expense summary Add lin	_			(46,052)
	11	Net income summary Subtract li Gaming. Complete if the oi	-			85,195
Revenue	1	\$15,000 on Form 990-EZ, lu	ne 6a. (a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
		Cash prizes				
Expenses	3	Non-cash prizes				
	4	Rent/facility costs				
Direct	5	Other direct expenses				
	6	Volunteer labor	┌ Yes	┌ Yes		
	7	Direct expense summary Add line	s 2 through 5 ın column (d)	•	
	8	Net gaming income summary Subt	ract line 7 from line 1, co	lumn (d)	<u> ▶</u>	
9		er the state(s) in which the organiza		•		
a b		he organization licensed to operate				
10a b		re any of the organization's gaming Yes," explain	licenses revoked, susper	nded or terminated during		

						11
Does	s the organization operate gaming activi	ties with nonmembers	s?	Г	Yes Γ_{No}	
12	Is the organization a grantor, beneficia					
	formed to administer charitable gamin	g [,]			┌ Yes ┌	No
13	Indicate the percentage of gaming act	ıvıty operated ın				
а	The organization's facility					%
b	An outside facility			13b		%
14	Enter the name and address of the per	son who prepares the	e organization's gaming/special eve	nts books and record	ls	
	Name 🟲					
	Address 🟲					
15a b	Does the organization have a contract revenue?	evenue received by the	he organization 🟲 \$		· 「Yes 「	No
	amount of gaming revenue retained by	the third party 🟲 🕏 _				
C	If "Yes," enter name and address of th	e third party				
	Name 🕨					
	Address ►					
16	Gaming manager information					
	Name ▶					
	Gaming manager compensation ► \$					
	Description of services provided					
	Director/officer	Employee	☐ Independent contr	actor		
17	Mandatory distributions					
а	Is the organization required under stat	:e law to make charita	able distributions from the gaming p	proceeds to		
	retain the state gaming license?				$\Gamma_{ m Yes}$ Γ	No
b	Enter the amount of distributions requ	red under state law d	distributed to other exempt organiza	ations or spent		
	ın the organızatıon's own exempt actıv	ities during the tax y	ear 🟲 💲			
Pai		5b, 15c, 16, and 17	planations required by Part I, 7b, as applicable. Also complet			nd
	Return Reference		Explanation	n		
		<u> </u>	·	Schodulo G /Forn	- 000 000 F7\	2012

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(Form 990)

Department of the Treasury

Internal Revenue Service

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

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

Attach to Form 990 ▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. OMB No 1545-0047

DLN: 93493119002235

Open to Public **Inspection**

Name of the organization						Employer identif	ication number
GUADALUPE CENTER EDUCA	TIONAL PROGRAMS	INC				87-0299521	
Part I General Inform	mation on Grants	and Assistance				•	
Does the organization mathe selection criteria useDescribe in Part IV the o	d to award the grants rganization's procedui	or assistance? res for monitoring the us	e of grant funds in the	United States			▽ Yes □
		Governments and recipient that receive					d "Yes" to
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) GUADALUPE HOLDING CO 1385 N 1200 W SALT LAKE CITY,UT 84116	46-3985736	501(C)(3)	233,900				PROVIDE ASSISTANCE FOR GUADALUPE HOLDING COMPANY'S CHARITABLE PURPOSE
(2) FRIENDS OF GUADALUPE 1385 N 1200 W SALT LAKE CITY,UT 84116	46-3984689	501(C)(3)	6 ,7 2 4 ,0 0 0				PROVIDE ASSISTANCE FOR FRIENDS OF GUADALUPE'S CHARITABLE PURPOSE
2 Enter total number of sec	tion 501(c)(3) and go	vernment organizations	listed in the line 1 tabl	e			

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

ī	Grants and Other Assistance to Individuals in the United States	. Complete if the organiza	tion answered	"Yes" to Form	990,	Part IV,	line 22.
	Part III can be duplicated if additional space is needed.						

(a)Type of grant or assistance	(b) Number of recipients	(c) A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
Part IV Supplemental Inf	ormation. Provide the inf	ormation required in Pa	art I, line 2, Part III, co	lumn (b), and any other a	dditional information.
Return Reference	Explanation				
PART I, LINE 2	HE ORGANIZATION REQUES	STS INFORMATION ON H	HOW THE GRANTS HAVE	BEEN USED	

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(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

As Filed Data -

DLN: 93493119002235

OMB No 1545-0047

2013

Open to Public Inspection

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 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.

Name of the organization GUADALUPE CENTER EDUCATIONAL PROGRAMS INC. Employer identification number

87-0299521

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11	LINE 11A EXPLANATION - FORM 990 IS SUBJECT TO BOARD REVIEW AND APPROVAL
FORM 990, PART VI, SECTION B, LINE 15A	THE COMPENSATION OF THE EXECUTIVE DIRECTOR IS AS DETERMINED BY THE BOARD OF DIRECTORS
FORM 990, PART VI, SECTION C, LINE 19	THE GOVERNING DOCUMENTS, POLICIES, AND FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST, AND ON WEBSITES SUCH AS GUIDESTAR
FORM 990, PART XI, LINE 9	CHANGE IN INTEREST IN NET ASSETS OF RECIPIENT ORGANIZATION 25,822

DLN: 93493119002235

OMB No 1545-0047 2013

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SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. ► Attach to Form 990. ► See separate instructions.

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

Name of the organization GUADALUPE CENTER EDUCATIONAL PROGRAMS INC **Employer identification number**

87-0299521

Part I Identification of Disregarded Entities Com	(b)					(f)		
(a) Name, address, and EIN (if applicable) of disregarded entity	Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income E	(e) End-of-year assets	Dı	(f) rect controlling entity		
Part II Identification of Related Tax-Exempt Orga or more related tax-exempt organizations during	inizations Complete if t g the tax year.	he organization an	swered "Yes" o	n Form 990, P	art IV, l	line 34 because it	had or	ne
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code sect	(e) Public charity (if section 50)	status 1(c)(3))	(f) Direct controlling entity	Section (13) co ent	ontrolle tity?
(1) FRIENDS OF GUADALUPE	SUPPORT ORGANIZATION	UT	501(C)(3)	LINE 11B, II			Yes	No No
1385 N 1200 W						N/A		
SALT LAKE CITY, UT 84116 46-3984689								
(2) GUADALUPE HOLDING COMPANY	REAL ESTATE HOLDING COMPANY	UT	501(C)(3)	LINE 11C, III-F	-I			No
1385 N 1200 W SALT LAKE CITY, UT 84116						N/A		
46-3985736								
								

(a) Name, address, and EIN of related organization		(b) Primary activit	(c) Legal domicile (state or foreign country)	entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets		prtionate	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene man part	j) eral or aging :ner?	(k) Percentag ownersh
					314)			Yes	No]	Yes	No	
V Identification of Related Org								were	d "Yes	" on Form	990,	Part	IV,
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)		(d) Direct controllin entity	(e) Type of entit (C corp, S corp, or trust)	y Share of income	total Share e of	(g) e of end- year ssets		(h) ercentage ownership	Section (b) cont	i) on 512 (13) rolled tity?	!
					1	<u> </u>			_		Yes		No
					_	+			_				+

Part	Transactions With Related Organizations Complete if the organization an	swered "Yes" on Forn	n 990, Part IV, lind	e 34, 35b, or 36.			
No.	te. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule					Yes	No
1 Durii	ng the tax year, did the orgranization engage in any of the following transactions with one or mor	e related organizations li	sted in Parts II-IV?				
a R	eceipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity				1a		No
b G	ft, grant, or capital contribution to related organization(s)				1b	Yes	
c G	ft, grant, or capital contribution from related organization(s)				1c	Yes	
d Le	oans or loan guarantees to or for related organization(s)				1d	Yes	
e Lo	oans or loan guarantees by related organization(s)				1e		No
f D	vidends from related organization(s)				1f		No
g S	ale of assets to related organization(s)				1 g		No
h P	urchase of assets from related organization(s)				1h		No
i Ex	change of assets with related organization(s)				1i		No
j Le	ase of facilities, equipment, or other assets to related organization(s)				1j		No
k Le	ease of facilities, equipment, or other assets from related organization(s)				1k		No
I Pe	rformance of services or membership or fundraising solicitations for related organization(s)				11		No
m Pe	rformance of services or membership or fundraising solicitations by related organization(s)				1m		No
n Sh	arıng of facılıtıes, equipment, mailing lists, or other assets with related organization(s)				1n		No
o S	naring of paid employees with related organization(s)				10		No
p R	eimbursement paid to related organization(s) for expenses				1p		No
-	embursement paid to related organization(s) for expenses				1q		No
q R	embursement paid by related organization(s) for expenses				-"		
r O	ther transfer of cash or property to related organization(s)				1r		No
s 0	ther transfer of cash or property from related organization(s)				1s		No
2 If	the answer to any of the above is "Yes," see the instructions for information on who must compl	ete this line, including co	overed relationships	and transaction thresho	lds		
	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining		ınvolved	
(1) FRIE	IDS OF GUADALUPE	В	6,724,000	FMV			
(2) FRIE	IDS OF GUADALUPE	С	46,373	FMV			
(3) GUAD	ALUPE HOLDING COMPANY	В	233,900	FMV			
(4) GUAD	ALUPE HOLDING COMPANY	D	93,784	FMV			

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships													
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512- 514)		(e) all partners section 501(c)(3) anizations?	(f) Share of total Income	(g) Share of end-of-year assets	(h) Disproprtiona allocations ⁷	_	(i) Code V ² UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?	_	(k) Percentage ownership
			314)	Yes	No			Yes	No		Yes	No	
												1	
													_
			<u> </u>				l					<u> </u>	

Schedule R (Form 990) 2013

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R (see instructions)

Return Reference Explanation

Schedule R (Form 990) 2013