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Short Form Return of Organization Exempt From Income Tax

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

2014

OMB No 1545-1150

Open to Public Inspection

Department of the Treasury Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public. ▶ Information about Form 990-EZ and its instructions is at www.irs.gov/form990.

A	For the	2014 calendar year, or tax year beginning , 2014,	and ending			, 20	
В	Check if a	pplicable C Name of organization		D Emp	loyer id	lentification number	
	Address o	change FOUNDATION FOR MESA PARKS AND RECREATION			8	16-0673038	
Ц	Name cha	Number and street (or P O box, if mail is not delivered to street address)	Room/surte	E Telep	phone n	umber	
님	Initial retu	IPO BOY 4121		I I	48	30-291-9112	
님		City or fown, state or province, country, and ZIP or foreign postal code		F Grou		emption	
ㅐ	Amended	on pending MESA, AZ 85211-4121			nber I	•	
G		ting Method Cash				if the organization is not	
	Website		['			tach Schedule B	
		mpt status (check only one) —	or	•		0-EZ, or 990-PF).	
		forganization ☐ Corporation ☐ Trust ☐ Association ☑ Other is 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or	CHARITAB		DATIO	<u></u>	
		lumn (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ					
_					5	. (D)	
Į.	Part I	Revenue, Expenses, and Changes in Net Assets or Fund Balance					
_		Check if the organization used Schedule O to respond to any question	in this Par	<u> </u>		<u> </u>	
	1	Contributions, gifts, grants, and similar amounts received			1	28668	
	2	Program service revenue including government fees and contracts	· • • •		2		
	3	Membership dues and assessments			3		
	4	Investment income			4	9	
	5a	Gross amount from sale of assets other than inventory 5a	1				
•	j b	Less: cost or other basis and sales expenses	<u> </u>				
	С	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from	5c				
•	6	Gaming and fundraising events					
١ _	a	Gross income from gaming (attach Schedule G if greater than					
9		\$15,000) 6a	1		 		
Revenue	Ь	Gross income from fundraising events (not including \$	f contributi	ons	1 :		
á		from fundraising events reported on line 1) (attach Schedule G if the					
	1	sum of such gross income and contributions exceeds \$15,000) 6b	1	42864			
	l c	Less: direct expenses from gaming and fundraising events 6c		35737			
:	d	Net income or (loss) from gaming and fundraising events (add lines 6a an	d 6b and s		ł l		
		line 6c)			6d	7127	
	7a	Gross sales of inventory, less returns and allowances	1			7121	
,	Ь	Less: cost of goods sold	ļ				
	C	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	<u> </u>		7c		
	8	Other revenue (describe in Schedule O)			8	· · · · · · · · · · · · · · · · · · ·	
	9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8			9	25004	
_	10	Grants and similar amounts paid (list in Schedule-O)		· · ·	10	35804	
	11				11	9137	
co	142	Salaries, other compensation, and employee benefits 3.2015.					
Š	13	Brofossional food and other neumants the side and other ne			12	400	
Expense	13	Professional fees and other payments to independent contractors		• • •	13 14		
<u>.</u>	. 14	Occupancy, rent, utilities, and maintenance	Occupancy, rent, utilities, and maintenance				
	1.0	Printing, publications, postage, and shipping OCOEN, UT		15	59		
	16	Other expenses (describe in Schedule O)			16	110	
	17	Total expenses. Add lines 10 through 16		<u> ▶ </u>	17	9706	
ş	18	Excess or (deficit) for the year (Subtract line 17 from line 9)			18	26098	
ŝ	19	Net assets or fund balances at beginning of year (from line 27, column (A)					
As		end-of-year figure reported on prior year's return)			19	87255	
Net Assets	20	Other changes in net assets or fund balances (explain in Schedule 0)			20		
	21		<u> </u>	▶	21	113353	
Fo	r Papen	work Reduction Act Notice, see the separate instructions. Cat	No 10642I			Form 990-EZ (2014)	

Part				_
	instructions for Part V) Check if the organization used Schedule O to respond to any question in this	Part	V Yes	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O	33	163	√
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)	34		1
35a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a		1
b	If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O	35b		
С	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35c		1
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36		1
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 37a			
b	Did the organization file Form 1120-POL for this year?	37b		1
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return? .	38a		1
b	If "Yes," complete Schedule L, Part II and enter the total amount involved	4		
39	Section 501(c)(7) organizations. Enter:	}	1 1	
a b	Initiation fees and capital contributions included on line 9	-		
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ 0; section 4915 ▶ 0; section 4955 ▶ 0	-		
b	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		1
С	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			
d	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization			
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e		1
41	List the states with which a copy of this return is filed ► ARIZONA			
42a		602-76	3-2837	7
	Located at ► 4153 E HUBER CIRCLE, MESA, AZ ZIP + 4 ►	852		
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	_	Yes	
	If "Yes," enter the name of the foreign country: ▶	42b		_√_
	See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
c	At any time during the calendar year, did the organization maintain an office outside the U.S.?	42c		✓
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 – Check here		. •	▶ 🗆
	and enter the amount of tax-exempt interest received or accrued during the tax year			
			Yes	No
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44a		✓
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44b		1
С	Did the organization receive any payments for indoor tanning services during the year?	44c		✓
d	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an			
	explanation in Schedule O	44d		
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a		✓
Ь	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)	45b		1

romi 98	JU-EZ (21	114)							ugo i
			· · · · · · · · · · · · · · · · · · ·					Yes	No
46		ne organization engage, directly or in							,
		ndidates for public office? If "Yes," o		, Part I		<u>· · · · </u>	46		✓
Part		Section 501(c)(3) organizations		ations 47, 40h and	52 and samp	loto tho	tables f	ar line	20
		All section 501(c)(3) organization 50 and 51.	s must answer que	SUUIIS 47–430 ANU	oz, and comp	ete me	(apies it	אווו וכ	5 3
		Check if the organization used Sci	hedule () to respond	to any question in t	his Part VI				
		oneon in the organization used con	ricadio o to respond	to any question in a	ino i dit vi	<u>· · · · · · · · · · · · · · · · · · · </u>	<u> </u>	Yes	No
47	Did th	ne organization engage in lobbying	activities or have a	section 501(h) electio	n in effect duri	ng the t	ax 「	7	
		If "Yes," complete Schedule C, Par					47		1
48	Is the	organization a school as described in	n section 170(b)(1)(A)(ı	i)? If "Yes," complete	Schedule E .		48		√
49a		ne organization make any transfers t		_	zation?		49a		✓
b		s," was the related organization a se					49b		
50		plete this table for the organization's							d key
	empi	oyees) who each received more than	1 \$100,000 of comper	nsation from the organ	(d) Health bene		, enter iv	one.	
	(a)	Name and title of each employee	(b) Average hours per week	(c) Reportable compensation	contributions to en	nployee	(e) Estimate		
	(-,	Marile and this of salest employee	devoted to position	(Forms W-2/1099-MISC)	benefit plans, and compensation		other com	pensat	ion
							·		
			· · · · · · · · · · · · · · · · · · ·						
				1		Ì			
		···							
						1			
51	Comp	number of other employees paid ovolete this table for the organization 000 of compensation from the organization from the organizati	s five highest compe	ensated independent one, enter "None."	contractors wh	o each	received	more	thar
	(a)	Name and business address of each independ	lent contractor	(b) Type of serv	nce	(c) (Compensation	on	
 -									
				}					
			· · · · · · · · · · · · · · · · · · ·						
				-					
					l				
				<u> </u>					
		number of other independent contra			-				
52		he organization complete Scheduleted Schedule A	ıle A? Note . All se	ction 501(c)(3) orga	nizations must				
l ladar a					-4		► ✓ Yes		
true, co	rrect, an	of perjury, I declare that I have examined this is declaration of preparer to their than	return, including accompany officer) is based on all info	ying scriedules and stateme irmation of which preparer f	ents, and to the best nas any knowledge,	or my kno	wieage and	Deliet,	it is
	$\overline{}$	1 (line)			14/6	7/15			
Sign		Signature of officer			Date	' '``			
Here		James Kuiz	Ireas	19er					
		Type or print name and fitle							
Paid		Print/Type preparer's name	Preparer a signature	Da ,/	tey ci	heck 🗹			-
Prep		ROBERT HOLSO	MANAGERA	<u> </u>		elf-employe	ed PO	108478	32
Use (Only	Firm's name RDH TAX SERVICE	F 14F04 63 0505	 	Firm's El				
May th	ne IRS	Firm's address ▶ 4153 E HUBER CIRCI discuss this return with the preparer		nstructions	Phone no		602-763-		<u> </u>

SCHEDULE A (Form 990 or 990-EZ)

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.

Department of the Treasury Internal Revenue Service

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

OMB No 1545-0047

2014

Open to Public Inspection

Name	of the organization					Employer identification	number
	IDATION FOR MESA PARKS AND R						73038
Par							ons.
ine o	organization is not a private found		•		-	•	
2	☐ A church, convention of church ☐ A school described in section			idea in Se	cuon 17	υ(b)(ι)(A)(ι).	
3	A hospital or a cooperative ho			n section	170(b)(1	ιλαλιίίι	
4	A medical research organizati						(iii). Enter the
•	hospital's name, city, and stat		,			, , , , , , , , , , , , , , , , , , ,	(,
5	An organization operated for section 170(b)(1)(A)(iv). (Com		college or university	owned o	r operate	ed by a government	al unit described in
6	☐ A federal, state, or local gover	-					
7	An organization that normally described in section 170(b)(1		•	port from	a gover	nmental unit or fron	n the general public
8	A community trust described	in section 170(b))(1)(A)(vi). (Complete l	Part II.)			
9	☐ An organization that normally						
	receipts from activities relate	•			-		
	support from gross investme acquired by the organization a						x) trom businesses
10	☐ An organization organized and		,		•	•	
11	☐ An organization organized and	·		-			out the purposes of
	one or more publicly supporte the box in lines 11a through 11	d organizations d	escribed in section 5	<mark>09(a)(1)</mark> o	r section	509(a)(2). See sect	ion 509(a)(3). Check
а	☐ Type I. A supporting organia	zation operated,	supervised, or control	led by its	supporte	ed organization(s), ty	pically by giving
	the supported organization(sorganization)			ct a majo	rity of the	e directors or trustee	es of the supporting
b	Type II. A supporting organi	zation supervise	d or controlled in con	nection w	ith its su	pported organization	n(s), by having
	control or management of the organization(s). You must control	omplete Part IV	, Sections A and C.				
C	☐ Type III functionally integral its supported organization(s)						y integrated with,
d	☐ Type III non-functionally in		• •	•			-
	that is not functionally integr requirement (see instruction						an attentiveness
е	Check this box if the organize functionally integrated, or Ty						I, Type III
f	Enter the number of supported			or any	gai iizatio		
g	Provide the following information	•					[
	(i) Name of supported organization	(ii) EIN	(described on lines 1-9		rganization ir governing ment?	(v) Amount of monetary support (see	(vi) Amount of other support (see
			above or IRC section (see instructions))	1	TREIT!	instructions)	instructions)
				Yes	No		
(A)							
(B)							
(C)							
(D)							
(E)							
Total							

1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	
Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2010 (b) 2011 (c) 2012 (d) 2013 (e) 2014 (f) 3 (f) 3 (f) 2015	under
Calendar year (or fiscal year beginning in) 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	
1 Grits, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	
membership fees received. (Do not include any "unusual grants.")) Total
organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge . 4 Total. Add lines 1 through 3	167830
furnished by a governmental unit to the organization without charge . 4 Total. Add lines 1 through 3	
The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) . Public support. Subtract line 5 from line 4. Section B. Total Support Amounts from line 4	
each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f). 6	167830
Section B. Total Support Calendar year (or fiscal year beginning in) Amounts from line 4 Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Net income from unrelated business activities, 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 VI.) Total support. Add lines 7 through 10 Gross receipts from related activities, etc. (see instructions) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 50 organization, check this box and stop here Section C. Computation of Public Support Percentage Public support percentage from 2013 Schedule A, Part II, line 14 Public support percentage from 2013 Schedule A, Part II, line 14 Sala's support test—2014. If the organization did not check the box on line 13, and line 14 is 331-3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly support.	73570
Calendar year (or fiscal year beginning in) (a) 2010 (b) 2011 (c) 2012 (d) 2013 (e) 2014 (f) Amounts from line 4	94260
Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Net income from unrelated business activities, 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 VI.) Total support. Add lines 7 through 10 Gross receipts from related activities, etc. (see instructions) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 50 organization, check this box and stop here Section C. Computation of Public Support Percentage Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f)) Public support test — 2014. If the organization did not check the box on line 13, and line 14 is 33¹/a% or more, check this box and stop here. The organization qualifies as a publicly supported organization 10%-facts-and-circumstances test — 2014. If the organization did not check a box on line 13, 16a, or 16b, and line 10% or more, and if the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly support or test, check this box and stop here. Expla Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly support.	
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources) Total
payments received on securities loans, rents, royalties and income from similar sources	167830
9 Net income from unrelated business activities, whether or not the business is regularly carried on	59
loss from the sale of capital assets (Explain in Part VI.)	
First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 50 organization, check this box and stop here Section C. Computation of Public Support Percentage Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f)) Public support percentage from 2013 Schedule A, Part II, line 14 15 Public support test—2014. If the organization did not check the box on line 13, and line 14 is 33½% or more, check box and stop here. The organization qualifies as a publicly supported organization b 33½% support test—2013. If the organization did not check a box on line 13 or 16a, and line 15 is 33½% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test—2014. If the organization did not check a box on line 13, 16a, or 16b, and line 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Expla Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly support	
First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 50 organization, check this box and stop here Section C. Computation of Public Support Percentage Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f)) Public support percentage from 2013 Schedule A, Part II, line 14 15 16a 33¹/a% support test—2014. If the organization did not check the box on line 13, and line 14 is 33¹/a% or more, check box and stop here. The organization qualifies as a publicly supported organization b 33¹/a% support test—2013. If the organization did not check a box on line 13 or 16a, and line 15 is 33¹/a% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test—2014. If the organization did not check a box on line 13, 16a, or 16b, and line 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Expla Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported or	167889
organization, check this box and stop here Section C. Computation of Public Support Percentage 14 Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f))	
Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f))	1(c)(3)
Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f))	<u>.</u> ▶ □
 Public support percentage from 2013 Schedule A, Part II, line 14 33¹/₃% support test – 2014. If the organization did not check the box on line 13, and line 14 is 33¹/₃% or more, check box and stop here. The organization qualifies as a publicly supported organization 33¹/₃% support test – 2013. If the organization did not check a box on line 13 or 16a, and line 15 is 33¹/₃% or more, check this box and stop here. The organization qualifies as a publicly supported organization 10%-facts-and-circumstances test – 2014. If the organization did not check a box on line 13, 16a, or 16b, and line 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Expla Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported orga	
 33¹/₃% support test – 2014. If the organization did not check the box on line 13, and line 14 is 33¹/₃% or more, check box and stop here. The organization qualifies as a publicly supported organization	56.14 %
 box and stop here. The organization qualifies as a publicly supported organization	59.01 %
 b 33¹/₃% support test—2013. If the organization did not check a box on line 13 or 16a, and line 15 is 33¹/₃% or more check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test—2014. If the organization did not check a box on line 13, 16a, or 16b, and line 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Expla Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization qualifies. 	
check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test – 2014. If the organization did not check a box on line 13, 16a, or 16b, and line 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Expla Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly support	
10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Expla Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly support	• □
organization	in in
b 10%-facts-and-circumstances test — 2013. If the organization did not check a box on line 13, 16a, 16b, or 17a, and 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop h Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a pub supported organization	ere.
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see	- 🗆

Part III	0 101			December of the C	Section 509(a)(2)
2617	SUDDON SCI	enille tot i	Urnanizations	Described in 5	ecnon Susiaiizi
I GILC III	Oupport Con		or garnization of	D00011000 111 C	

(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 quality	under the te	sts listed bei	ow, please co	omplete Part	II.)	
	on A. Public Support		T	T			
	dar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and membership fees		Į.	İ	İ.	ļ	
2	received. (Do not include any "unusual grants.") Gross receipts from admissions, merchandise			}		<u> </u>	
~	sold or services performed, or facilities]	İ		ļ	}
	furnished in any activity that is related to the		ļ		,	ļ	
_	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an		}				
	unrelated trade or business under section 513						
4	Tax revenues levied for the				1	ļ	
	organization's benefit and either paid		1		ii		
	to or expended on its behalf			<u> </u>	}		
5	The value of services or facilities		1				
	furnished by a governmental unit to the						ĺ
	organization without charge						
6	Total. Add lines 1 through 5				ļ		
7a	Amounts included on lines 1, 2, and 3		Į.	l	[l
	received from disqualified persons .				<u> </u>		
b	Amounts included on lines 2 and 3				i		
	received from other than disqualified				1	Į.	(
	persons that exceed the greater of \$5,000]	1	1
	or 1% of the amount on line 13 for the year						
_	Add lines 7a and 7b		ļ			ļ	
8	Public support (Subtract line 7c from				ĺ		
	line 6.)		<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>
	on B. Total Support			T	T	r	
	dar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
9	Amounts from line 6			ļ		ļ	
10a	Gross income from interest, dividends,			1		1	
	payments received on securities loans, rents,						
	royalties and income from similar sources						
Þ	Unrelated business taxable income (less		1				
	section 511 taxes) from businesses acquired after June 30, 1975		ļ	1	ł	ļ	·
	Add lines 10a and 10b						
11	Net income from unrelated business			1			
	activities not included in line 10b, whether or not the business is regularly carried on		1	1	1		
	• •						<u> </u>
12	Other income. Do not include gain or		1		1		
	loss from the sale of capital assets (Explain in Part VI.)		1]	1	1	
13	Total support. (Add lines 9, 10c, 11,			 	 		
13	and 12.)			1	ļ		
14	First five years. If the Form 990 is for the	o organizatio	l e firet esse	d third fourth	or fifth toy ::	par an a sastis	E01(c)(2)
177	organization, check this box and stop he i	-			_		—
Sacti	on C. Computation of Public Suppor					- · · · · · · · · · · · · · · · · · · ·	
15	Public support percentage for 2014 (line 8			2 column (fl)	·	15	%
16	Public support percentage from 2013 Sch						
	on D. Computation of Investment Inc			<u>· · · · · · · · · · · · · · · · · · · </u>	· · · · ·	10	
17	Investment income percentage for 2014 (I			v line 13 colu	mn (fl)	17	%
18	Investment income percentage for 2013 (investment income percentage from 2013						
19a	331/3% support tests—2014. If the organi						
130	17 is not more than 331/3%, check this box						
b	331/3% support tests—2013. If the organiz		-	•		_	
U	line 18 is not more than 331/3%, check this b						
20	Private foundation. If the organization di			•			_

Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Good	Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete P	aπ v	.)	
Secu	on A. All Supporting Organizations		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1	res	No
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2) (B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3с		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and If you checked 11a or 11b in Part I, answer (b) and (c) below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
6	Substitutions only. Was the substitution the result of an event beyond the organization's control? Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations; (b) individuals that are part of the charitable class benefited by one or more of its supported organizations; or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.	5c		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .	9a		
b	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.	9b		
С	Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .	9c		
	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer (b) below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to	ĺ		1

determine whether the organization had excess business holdings.)

10b

	10 A (1 0 M 330 0) 330 EL 20 14		:	ugo 🕶
Part	Supporting Organizations (continued)			
44		г	Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?	}		
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI .	11c		
	ion B. Type I Supporting Organizations		'	
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	١.		•
^		1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part	1		
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,]	ł
	supervised, or controlled the supporting organization.	2		
Sect	ion C. Type II Supporting Organizations	<u> </u>	<u>. </u>	L
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control	1	1	
	or management of the supporting organization was vested in the same persons that controlled or managed	}	ŀ	
	the supported organization(s).	1		
Sect	ion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax			
	year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1	ļ	ļ
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	 -	 	
_	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2	ľ	İ
3	By reason of the relationship described in (2), did the organization's supported organizations have a		· · · · ·	
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		<u> </u>
Sect	ion E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see	nstru	ctions	s):
а	☐ The organization satisfied the Activities Test. Complete line 2 below.			
b	☐ The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	☐ The organization supported a governmental entity. Describe in Part VI how you supported a government entity (s	ee ins	tructi	ons).
2	Activities Test. Answer (a) and (b) below.	-	Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then In Part VI identify		ŀ	
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	OL.		
2		2b		
3 a	Parent of Supported Organizations. <i>Answer (a) and (b) below.</i> Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
а	trustees of each of the supported organizations? <i>Provide details in Part VI</i> .	3a		
ь	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	Ja		
J	of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard.	3b]

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	jani	zations				
1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970. See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.						
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)			
1 Net short-term capital gain	1					
2 Recoveries of prior-year distributions	2					
3 Other gross income (see instructions)	3					
4 Add lines 1 through 3	4					
5 Depreciation and depletion	5					
6 Portion of operating expenses paid or incurred for production or						
collection of gross income or for management, conservation, or	i '					
maintenance of property held for production of income (see instructions)	6					
7 Other expenses (see instructions)	7					
8 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8					
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)			
Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):						
a Average monthly value of securities	1a					
b Average monthly cash balances	1b					
c Fair market value of other non-exempt-use assets	1c					
d Total (add lines 1a, 1b, and 1c)	1d					
e Discount claimed for blockage or other factors (explain in detail in Part VI):						
2 Acquisition indebtedness applicable to non-exempt-use assets	2					
3 Subtract line 2 from line 1d	3					
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4					
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5					
6 Multiply line 5 by .035	6					
7 Recoveries of prior-year distributions	7					
8 Minimum Asset Amount (add line 7 to line 6)	8					
Section C - Distributable Amount			Current Year			
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1					
2 Enter 85% of line 1	2					
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3					
4 Enter greater of line 2 or line 3	4					
5 Income tax imposed in prior year	5					
6 Distributable Amount. Subtract line 5 from line 4, unless subject to						
emergency temporary reduction (see instructions)	6					
7 Check here if the current year is the organization's first as a non-functionall instructions).	y-in	tegrated Type III support	ing organization (see			

Part	Type III Non-Functionally Integrated 509(a)(3	3) Supporting Organi	zations (continued)	
Secti	on D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish	<u> </u>		
2	Amounts paid to perform activity that directly furthers exe	rted		
	organizations, in excess of income from activity			
3_	Administrative expenses paid to accomplish exempt purp	oses of supported orga	nizations	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.		·	<u> </u>
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which	h the organization is res	ponsive	
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2014 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount	T		
Se	ection E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1	Distributable amount for 2014 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2014			
	(reasonable cause required-see instructions)	F		
3_	Excess distributions carryover, if any, to 2014:			
<u>a</u>				
b				
C				
d				
e	From 2013	ļ		
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
<u>h</u>	Applied to 2014 distributable amount			
<u> </u>	Carryover from 2009 not applied (see instructions)			<u></u>
	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2014 from Section D, line 7: \$			
	D, line 7: \$ Applied to underdistributions of prior years			
<u>a</u> b	Applied to Underdistributions of prior years Applied to 2014 distributable amount			
	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2014, if			
3	any. Subtract lines 3g and 4a from line 2 (if amount			
	greater than zero, see instructions).			
6	Remaining underdistributions for 2014. Subtract lines 3h			
•	and 4b from line 1 (if amount greater than zero, see			
	instructions).			
7	Excess distributions carryover to 2015. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:		··· ·	
а				
b				
С				
d	Excess from 2013		· · · · · · · · · · · · · · · · · · ·	
е	Excess from 2014			

Schedule A (F	Form 990 or 990-EZ) 2014	Page C
Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12. Also complete this part for any additional information. (See instructions.)	; and
		•••••
		·
		 -
·		
		
		
		-
		-
#		
		
		

SCHEDULE G (Form 990 or 990-EZ)

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

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service **Employer identification number FOUNDATION FOR MESA PARKS AND RECREATION** 86-0673038 Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Part I Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply. e

Solicitation of non-government grants Mail solicitations ☐ Internet and email solicitations ☐ Solicitation of government grants b Phone solicitations Special fundraising events d In-person solicitations Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☐ Yes ☐ No If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (v) Amount paid to (iii) Did fundraiser have (vi) Amount paid to (i) Name and address of individual (iv) Gross receipts (or retained by) fundraiser listed in custody or control of contributions? (ii) Activity (or retained by) from activity or entity (fundraiser) organization col (i) Yes No 1 2 3 5 6 8 9 10 **Total** List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

Sche	edule G	(Form 990 or 990-EZ) 2014				Page 2
Pa	ırt II	Fundraising Events. Cor than \$15,000 of fundraising gross receipts greater that	ng event contributions			
		gross rescripte greater the	(a) Event #1 POW WOW (event type)	(b) Event #2 TRIATHLON (event type)	(c) Other events	(d) Total events (add col. (a) through col. (c))
Revenue	1	Gross receipts	13500	29364		42864
_	2 3	Less: Contributions Gross income (line 1 minus line 2)	12500			4000
		mre z)	13500	29364		42864
	4	Cash prizes				
	5	Noncash prizes		····		
enses	6	Rent/facility costs				
Direct Expenses	7	Food and beverages				
ē	8	Entertainment				
	9	Other direct expenses .	13482	22255		35737
	10 11	Direct expense summary. Ac Net income summary. Subtra			: : : : : : : : :	35737 7127
Pa	rt III	Gaming. Complete if the	e organization answer			
		than \$15,000 on Form 9	90-EZ, line 6a.		 	
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
æ	1	Gross revenue				
_ Ses	2	Cash prizes				
Expenses	3	Noncash prizes				
Direct	4	Rent/facility costs				
	5	Other direct expenses .				
	6	Volunteer labor	☐ Yes% ☐ No	☐ Yes % ☐ No	☐ Yes % ☐ No	
	7	Direct expense summary. Ac	dd lines 2 through 5 in co	olumn (d)		·
	8	Net gaming income summar	y. Subtract line 7 from li	ne 1, column (d)		
	a Is	nter the state(s) in which the or the organization licensed to c "No," explain:	-	s in each of these states		Yes No
10	a W	ere any of the organization's g	gaming licenses revoked	, suspended or termina	ted during the tax year?	. 🗌 Yes 🗌 No

b If "Yes," explain:

chedu	le G (Form 990 or 990-EZ) 2014 Page 3
11	Does the organization conduct gaming activities with nonmembers?
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?
13	Indicate the percentage of gaming activity conducted in:
a	The organization's facility
ь	An outside facility
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:
	Name ►
	Address ►
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?
b	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue retained by the third party ▶ \$
С	If "Yes," enter name and address of the third party:
	Name ►
	Address ►
16	Gaming manager information:
	Name ►
	Gaming manager compensation ► \$
	Description of services provided ►
	□ Director/officer □ Employee □ Independent contractor
17 a	Mandatory distributions: Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year > \$
Part	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).
	·
<i></i> -	

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization ► 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.

FOUNDATION FOR MESA PARKS AND R	ECREATION	86-0673038
EXPLANATION FOR LINE 10:		
SAVE THE TRAIN \$2,	952	
NEIGHBORHOOD SERVICES 9	950	
CELEBRATE MESA 3,	712	
FLAG FOOTBALL	300	
MESA YOUTH BASKETBALL LEAGUE	750	
MESA PUBLIC SAFETY FOUNDATION 4	110	
GENERAL PARKS AND REC PRGMS	63	
TOTAL LINE 10 \$9,1	137	
EXPLANATION FOR LINE 16:		
	14	
ATM FEE	1	
AZ CORPORATION COMMISSION	10	
DOMAIN RENEWAL	25	
GIFT CARDS AND MISC	60	·
TOTAL LINE 16 \$1	110	
EXPLANATION FOR LINE 31:		
BASKET BALL YOUTH LEAGUE \$7	750	
FLAG FOOTBALL SPONSOR	300	
MESA PUBLIC SAFETY FOUNDATION 4	110	
OTHER MISC.	63	
TOTAL LINE 31 \$1,5	23	

FOUNDATION FOR MESA PARKS AND RECREATION 2014 MAJOR FUNDRAISING EVENTS

EVENT	RE	VENUE	EXF	PENSES	PRO	OFIT/(LOSS)
TRIATHLON	\$	29,364	\$	22,255	\$	7,109
MESA POW WOW	\$	13,500	\$	13,482	\$	18
SUB TOTALS	\$	42,864	\$	35,737	\$	7,127
OTHER CONTRIBUTIONS, MEMBERSHIPS AND DUES	\$	28,668	\$	9,706	\$	18,962
INTEREST	\$	9	\$	-	\$	9
GRAND TOTALS	\$	71,541	\$	45,443	\$	26,098

FOUNDATION FOR MESA PARKS AND RECREATION FINANCIAL STATEMENTS - 2014 As Of December 31, 2014

	Be	ginning of Year Balance		Year-to-date Deposits & Transfers		Year-to-date Disbursements	E	End-of year or YTD Balance	20	14 Budget	ı	ariance to Forecast - Favorable Infavorable)
Assets												
Cash in Checking	\$	57,151 59		71,531 87	\$	(45,442 94)		•				
Cash in Savings	\$	30,103 15	\$	9 04			\$					
PayPal	\$	-					\$					
Rec from the City of Mesa	\$						_\$					
	\$	87,254.74	J				\$	113,352.71				
Fund Balance(s)												
Adaptive Programs	\$	2,949 91					\$	2,949 91				
General	\$	13,493 60	S	15,518 89	\$	(5,504 49)	_	_,				
Dog Park	Š	419 87	۳	10,01000	۳	(0,004 43)	S	•				
Field Improvements	\$	9,135 78					S					
Save the Train	Š	18,469 17	\$	6,797 49	\$	(2,951 99)	_	-,				
Playground	Š	3,750 00		0,. 0. 10	•	(2,001.00)	\$	•				
Making Waves	Š	17,233 37		-	\$		\$	-1				
Buy-A-Brick / Aquatic Events	\$	4,741 84	•		S		\$	•				
Flag Football	\$	2,500 00			\$.,				
Neighborhood Sivs	\$	5,858 91	g.	1,850 00	\$	(/						
Sgt Mendoza Park Fund	Š	0,000 01	\$	4,686 47			\$	•				
Sum Rec Prog	\$	499 93	•	4,000 47	Ψ	,	\$.,				
Trees	\$	1,826 61	\$	6,200 00	¢	_	\$					
Fundraising Events *	•	1,020 01	•	0,200 00	Ψ	,	Ψ	0,020 0 1				
Pow Wow	\$	(80 31)	¢	13,580 31	¢	(13,481 51)	œ	18 49				
Triathlon	\$	6,456 06		22,907 75								
Balances	\$	87,254.74	ľ	22,001 10	Ψ	(22,204 30)	\$					
'			'			,	\$					
Revenues												
Membership Dues			\$	-			\$	-	\$	-	\$	-
Interest Income			\$	9 04			\$	9 04	\$	-	\$	9 04
Other Donations			\$	28,668 06			\$		\$	-	\$	28,668 06
Playground			\$	-			\$	-	\$	-	\$	-
Grants - United Way			\$	-			\$	-	\$	-	\$	_
Grants - Other			\$	-			\$	-	\$	-	\$	-
Fundraising Events												
Pow Wow			\$	13,500 00			\$	13,500 00	\$	-	\$	13,500 00
Triathlon			\$	29,363 81			\$		\$		\$	29,363 81
Total Revenues			\$	71,540 91		į	\$	71,540.91	\$		\$	71,540 91
Expenses												
Office / Administrative					\$	569 27	\$	569 27	•		_	(500.07)
Other Expenses					\$		\$		\$	-	\$	(569 27)
Grants					\$		ъ \$	•	\$ \$	-	\$ \$	(9,208 40)
Program Expenses					\$		\$		5 5	-		-
Taxes and Registration					\$		\$	-	5 S	-	\$ \$	•
Fundraising Events					Ф	-	Þ	-	Ф	-	ъ	-
Pow Wow Expenses					s	13,481 51	\$	13,481 51	æ		æ	(43 404 E4)
Triathlon Expenses					э \$,	\$,	\$ \$	-	\$ \$	(13,481 51)
Total Expenses				Г	\$	45,442 94	_		\$		\$	(22,183 76)
Deposits Over (Under) Disbursement	~			Į.	Ψ	75,442 84	\$		\$	-	\$	(45,442.94)
	-					=	*	20,001.81	_		<u> </u>	26,097.97

^{*} Adjusted Beginning Balances - Transferred to General Fund 01/01/2014 (See Deposit Transaction Detail)

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Grants - Other	4	;	\$ 2,220 00 \$ 2,220 00 \$ 650 00	\$ 27.62 \$ 147.79		\$ 397.10	\$ \$40.10	\$ 2415	\$ 350.00	\$ 20.07	\$ 107.54 \$ 0.74	\$ 250.00 \$ 1.850.00		%0 *	\$ 488.70	\$ 185.00	\$ 48870	\$ 1,026.30	s 194 8137	67 00 8 8 30000	0000	89 71	60 00 00 00 00 00 00 00 00 00 00 00 00 0	\$ 67.50		!	5 11678 S	3103		\$ 410.00 \$ 335.00	\$ 72.82 \$ 077	\$ 100 00 \$ 250 00			\$ 250 00	20 00	\$ 1,000 00		\$ 074	s 480 00	5 1,44150	•		75.80	,
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1.1	Fund General \$ Pow Wow \$	Seneral reathlon	Seneral Save the Train	Seneral	Seneral	Save the Train \$	Save the Train	Save the Train 9 General 5	Save the Train \$ General \$	General	General	Neighborhood Services \$	Spt Mendoza Park Fund \$ General	Triathion	Triathion	Save the Train \$ Spt Mendoza Park Fund \$	Sgt Mendoza Park Fund S General S	Sgt Mendoza Park Fund \$	Sgt Mendoza Park Fund S	Fraes	General S	Triethion	Sqt Mendoza Park Fund \$	Sgt Mendoze Park Fund S Pow Wow	Pow Wow S	Triathion	Sgt Mendoza Park Fund \$	Trethlon	Triathion \$ Triathion \$	General Spt Mendoza Park Fund \$	Sgt Mendoza Park Fund 5 General	Save the Train S	Triathlon 5	Triethion \$	Institution State Fund State Fund State St	Save the Train S Triethlon S	Seneral S	Pow Wow \$	riathion	Save the Train S riathlon S	Save the Train \$ General \$	Pow Wow \$ Triathion \$	Triethlon \$	Triathion	
Description / Donor.	Description / Donor Fransfer Pow Wow 12/31/13 Bal to GF Sredit Pow Wow from General Fund	framsfer Traithlon 12/31/13 Bal to GF Credit Traithlon from General Fund Mesa Fast 1 ion's Club	Double Play Fundraiser Proceeds Double Play Fundraiser Proceeds	Mile High United Way United Way Individual Donors	Wells Fargo - Interest on Savings Acct Wells Fargo - Interest on Savings Acct Wells Fargo - Interest on Savings Acct	AZ Reilway Days & Falcon Fid Open Has	Kall Alley Bowling Tournament Two Private Donations of \$20	Peypai - Car Show Entry Receipt Mesa Celebrates - Pioneer Park	Mesa Celebrates - Ploneer Park Crty of Mesa Community Spirit Donations	United Way Individual Donors United Way Individual Donors	Wells Fargo - Interest on Savings Acct	Intel	Paypal - Memorial Donations Wells Fargo - Interest on Savings Acct	Reg Fees for 2014 MST - Active com	Reg Fees for 2014 MST - Active com	Private Contribution United Way Individual Donor	Paypal - Mendoza Pk Fund - David Lune Wells Fargo - Interest on Savings Acct	Paypal - Mendoza Pk - \$1k Mayor Finter South In Transaction	Square Up - Mendoza Park Raffle	Square Op - Mendoza Para Ramile Riverview Pk Bushes-Councilman Richem 1	Councilman Richens United Way Donors	Reg Fees for 2014 MST - Active com	Larry John Wright PR Firm	Paypel - Mendoza Park Satt Rwer Pima Indian Community F		Reg Fees for 2014 MST - Active com				Fundraising Proceeds for MPS Endtion Fundraising Proceeds for Mendoza Park				MST Sponsorship Reg Fees for 2014 MST - Active com T		Private Contribution Reg Fees for 2014 MST - Active com T							Private Sponsor California Pizza Kitchen Fundraiser S	Ε	
Total	68 37	(8 458 08) (8 458 08) (9 00)	2,220 00	147 79	000	397 10	200	580 00	350 00	28 67 107 54	47.0	1,850 00	131 13 77 0	100 00	27.	26 S	488 70	1,026 30	81 37	8 200 00	500 00 14 88	355 00	8 8 8 8 8 8	97 50 5,000 00	1,000 00 5 000 00	3 974 43	116 78	888	1,635 00	335 00 335 00 335 00	74.0	250 00	200 00	500 00 1,080 00	250 00	1,900 00	500 00 00 00 00 00	5,000 00	1,000 00	25 28	1 441 50	2,500 00 2,097 62	250 00 75 88	4 873 75	10 00

FOUNDATION FOR MESA PARKS & RECREATION DEPOSITS - 2014

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			┑		General			Fundralating Events	Pow Wow	Triathlon	Sub total Fundraisin	Events	General	Transfer	Sum Rec Prog	Dog Park	Field Improvements	Save the Train	Playground	Making Waves	Urban Fishing	Flag Football	Neighborhood Services	Sgt Mendoza Park Fund	Trees	Buy-A-Brick / Aquatic Ev	Total - All Deposits	
			Description / Donor	0 74 Wells Fargo - Interest on Savings Acct	0 77 Wells Fargo - Interest on Savings Acct	540.91													40,528 47 57%			,540 91						
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FOUNDATION FOR MEIA PARKS & RECREATION DABURSEMENTS - 2014

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Maricope County DOT - MST permits 1579	3 060 00	-	3 050 00			2	
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Shirthall Mess AZ Bave The Train	952 25				-	8 9	
Bucca De Baptoo - Sami Annual FAIPR Lunch CC	137.00				-	137.00	
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Angele's Jumparound - Backup Generators	25 55	•	8		•	***	
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Linds Abbott Carnival Game Prizes 1803	8		!		-	38.63	
8 5	3 9				•	8	
City of Mess Rafuse Charges CC	731.47		•	241.47	•	71.19	
12/12/14 21st Century Native Ameri Truck Rental 1605 Pow Wow S	22188		•	2 2 2			
Oriental Tradito Co - Fun and Fitness Staff OC	2,261.80		2261.80	}			

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General	-	5,504.49							
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Serve the Train	_	2951 80							
Buy A Brick	_								
Flag Football		30000							
Making Waves									
Neighborhood Svc		88							
Sqt Mendoza Park	_								
Trace	_		970848						
Fendralshq									
Triathlon	_	22,24.88							
Pow Wow	_	13,481,51	25 735 45						
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FOUNDATION FOR MESA PARKS & RECREATION CASH RECONCILIATION - 2014

Statement Cut-off Date Balance per Wells Fargo Statement

CHECKING	SAVINGS	PayPal
12/31/2014	12/31/2014	
83,279,45	30,112,19	-

Add Outstanding Deposits

Less Outstanding Disbursements Check # 1603 Check # 1578

(38.93) Unknown AMT

Adjusted Balance Balance per Financial Statements Variance

83,240.52	30,112.19	-
83,240 52	30,112 19	
	-	-

113,352.71

FOUNDATION FOR MESA PARKS AND RECREATION TRIATHLON - 2014 As Of December 31, 2014

Date	Transactions	Check No.	Begir	Beginning of Year Balance	Year-to-date Deposits &	Year-to-date	End-of year or
12/31/13	12/31/13 Triathion 2013 Year End Fund Balance		69	(6,456 06)			Dalaire Colorida
01/01/14 Deposits	01/01/14 Transfer 2013 Balance to General Fund 8		69	6,456 06			У
08/02/14 08/18/14 07/31/14 07/31/14 08/14/14 08/14/14 08/14/14 09/03/14 09/10/14 09/10/14 09/10/14 10/22/14 10/22/14	Reg Fees for 2014 MST - Active com Reg Fees for 2014 MST - Active com Forever Living Inc. Reg Fees for 2014 MST - Active com Forever Living Inc. Reg Fees for 2014 MST - Active com Image Eyecare - 2014 MST - Active com Reg Fees for 2014 MST - Active com Reg Fees for 2014 MST - Active com MST Sponsorship MST Sponsorship Reg Fees for 2014 MST - Active com MST Sponsorship Reg Fees for 2014 MST - Active com MST Sponsorship Reg Fees for 2014 MST - Active com MST Sponsorship Reg Fees for 2014 MST - Active com RST Sponsorship 2014 MST - Square Inc Reg Fees for 2014 MST - Active com Private Sponsor Reg Fees for 2014 MST - Active com Private Sponsor Reg Fees for 2014 MST - Active com Private Sponsor				\$ 5.00 00 \$ 5.00 00		
Disbursomenta 02/27/14 02/18/14 04/18/14 06/01/16/14 08/12/14 08/12/14 09/12/14 09/12/14 10/02/14 10/11/14 10/12/14 10/12/14 11/19/14 11/19/14	ements 02/27/14 Race Timers - Splish, Splash, Dash 04/18/14 Tace Timers - Splish, Splash, Dash Event 06/01/14 TS Printing Service - Triathlon Post Cards 07/15/14 City of Mesa - Permits for MST 08/02/14 T & S Printing Svas - MST Postcards 08/02/14 T & S Printing Svas - MST Postcards 08/02/14 A Allien Financial Group - MST Insurance 08/02/14 A Race Plece Events - Timekeeping Sva MSt 09/02/14 National Engravers - MST 20/14 Medals, atc 09/02/14 National Engravers - MST 20/14 Medals, atc 09/02/14 National Engravers - MST Poermits 10/02/14 National Engravers 10/07/14 Southwast Barrcades - MST raffic control 10/1/14 Barb McCeffrey - Reunb For Food Exp - MST 10/1/14 The Multi Sports - MST Awards 10/20/14 Role Mourtain 10/20/14 Role Mourtain 10/20/14 Role Mourtain 10/20/14 Role Mourtain 10/20/14 Role Mourtain 10/20/14 Role Mourtain 10/20/14 Role Mourtain 10/20/14 Role Mourtain 10/20/14 Role Mourtain 10/20/14 Marchael McCeffrey - Remb for MST 11/19/14 Machael McCeffrey - Remb for MST Expenses 12/18/14 Oriental Trading Co - Fun and Fitness Staff	1564 1564 1570 1571 1572 1573 1573 1573 1589 1589 1588 1588 1588 1588 1588 1588				\$ 50 00 00 00 00 00 00 00 00 00 00 00 00	

7,108 86
22,254.95 \$
29,363 81 \$
ZU14 Inathion Performance

FOUNDATION FOR MESA PARKS AND RECREATION POW WOW - 2014 As Of December 31, 2014

Date	Transactions	Check No.	Beginning of Year Balance	Year-to-date Deposits & Transfers	o-date its & fers	Year-to-date Disbursements	End-of year or YTD Balance
12/31/13	12/31/13 Pow Wow 2013 Year End Deficit		\$ (80 31)		_		
01/01/14	01/01/14 Transfer Balance to General Fund		\$ 80.31				, 6
Deposits 07/31/14 07/31/14 09/30/14 10/22/14	ifs 07/31/14 Salt River Pima Indian Community 07/31/14 Boeing Corporation 09/30/14 Visit Mesa Donation 10/22/14 San Manuel Indian Mission			& & & & &	5,000.00 1,000.00 5,000.00 2,500.00		
Disbursements 10/08/14 10/20/14 10/21/14 10/21/14 10/21/14 10/21/14 12/12/14 12/12/14	sements 10/08/14 A Company - Portable Restrooms - Pow Wow 10/20/14 Shumway Security - Pow Wow Security 10/21/14 REC Agency Services - Pow Wow Insurance 10/21/14 SLFX - Sound/Lighting for Pow Wow 10/21/14 Gosai & Grandson's LLC - Hotel Rooms 10/21/14 David Begaye - PA System for Pow Wow 10/21/14 Westwood HS Native Amer Club - Cleanup 10/21/14 Docuprint Solutions - Pow Wow printing 12/12/14 21st Century Native Amer=Truck Rental	1582 1590 1591 1594 1596 1605				480 82 5,337.50 1,836.96 2,270 68 1,135 50 1,200 00 500.00 246 92 221 66 251.47	

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13,481.51 \$	
13,500.00 \$	
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Pow Wow Performanc	
2014 Pc	

FOUNDATION FOR MESA PARKS AND RECREATION SAVE THE TRAIN - 2014 As Of December 31, 2014

Date	Transactions	Check No.	Beginning of Year Balance	Year-to-date Deposits & Transfers	Year-to-date Disbursements	End-of year or YTD Balance
12/31/13			\$ 18,46917			
Deposits						
01/02/14	H Mesa East Lion's Club					
01/29/14	I Double Play Fundraiser Proceeds			\$ 850 00		
04/01/14	1 AZ Railway Days & Falcon Fld Open Hse					
04/07/14				\$ 549.10		
04/21/14	Two Private Donal			\$ 40.00		
04/21/14						
04/28/14	Mesa Celebrates -			\$ 350.00		
05/14/14	ZebraMax Manage			\$ 250.00		
06/19/14				\$ 195.00		
07/07/14	Square Up Transaction			194		
09/03/14	_			\$ 250.00		
09/24/14				\$ 50 00		
10/06/14				\$ 490.00		
10/21/14	_			\$ 1,441 50		
10/27/14						
11/10/14	Car Show Proceed			1,719 00		
11/10/14	Square Inc.			\$ 20.42		
11/19/14				\$ 33.39		
Disbursements						
411/2/11/0	04/04/14 Bringwick Zoog Donocit for Train Eundraisor	1555			140 36	
01/24/14	Formiswick Zone- Deposit for Train Fundialser	1000				
91/24/14	JIM KUIZ - Keim Tör	00 C			4	
4L/10/20		3 (
04/01/14		ဒ္ဌ			29.00	
04/05/14		1561				
09/08/14	+ Americopy - Flyers for Car Show	႘			•	
09/18/14	09/18/14 Americopy - Flyers for Bowling Tourney	႘				
09/16/14	09/16/14 William Pierce - Bowling Alley Deposit	1576				
09/30/14	09/30/14 Newline Trophies - Bowling Trophies	႘				
10/02/14	10/02/14 Americopy, Mesa, AZ	႘				
10/06/14	Brunswick Zone Mesa	8			\$ 403 81	
10/13/14	10/13/14 Legend Express - Printing - Train Flyers	1586				
10/15/14	0/15/14 William Pierce - Reimb for parchment paper	1589			\$ 23.99	
11/05/14	11/05/14 Shirttail, Mesa AZ - Save The Train	8				
11/07/14	1/07/14 Newline Trophies	႘				
11/11/14	Angela's Jumparound - Backup Generators	1601			_	
11/15/14	Linda Abbott - Carr	1603				
	2014 Save The Train Activity		\$ 18,469.17	\$ 6,797.49	\$ 2,951.99	\$ 22,314.67

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	Memo.	Momo.	Momo.	Momo.					
Major Contributors	2006	2007	2008	2009	2010	2011	2012	2013	2014
Contributions by Each Person that									
Exceeds 2% of 5 year contributions (Non-									
Governmental unit or publicly supported									
organization)									
Boeing		\$5,000	\$5,000	\$5,000	\$5,000	\$5,000	\$5,000	\$5.000	
Casino Arizona/Talking Stick Resort					\$5,000		\$5,000	\$5,000	
Intel Matching Grants Program							\$4.670		
Janet Lahodny					\$5,000				
Union Pacific Foundation				\$5,000					
Vice Mayor Scott Somers						\$5,000			
Councilman Dave Richins						\$7,200			\$6.700
Mr. & Mr.s Robert Duk Cross			\$15,000						
Newman's Own Brand						\$10,000			
Karl Krapek	\$5,000								
Subtotal	\$5,000	\$5,000	\$20,000	\$10,000	\$15,000	\$27,200	\$14.670	\$10.000	\$6.700
Five Previous Year Totals					\$55,000	\$77,200	\$86.870	\$76.870	\$73.570
Governmental or Non-publicly supported									
Orgainzations									
Mesa Hohokams				\$10,000	\$10,000	\$7,500			
Visit Mesa									\$5,000
East Valley Coummunity Foundation Inc.					\$2,500				
Salt River Pima Maricopa (SRPM) Indian									
Community		\$7,500	\$5,000	\$5,000	\$10,000	\$10,029	\$5,000	\$5,000	\$5,000
Salt River Project			\$5,000	\$5,000	ł	\$5,000	\$5,000	\$5,000	
Mesa Sports Association Inc.	\$5,000	\$10,000	\$8,000						
	\$36,201	\$38,066	\$45,606	\$48,467	\$52,137	\$48,893	\$17,037	\$21.095	\$28.668

668 \$167,830 2% \$3,357