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Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

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

2014

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Α	For the	e 2014 calen	dar year, or tax	year beginnin	g 7/0:	1	, 20	14, and	l en <u>di</u> n	g 6/3	30		, 2015
В	Check if	applicable.	С			-					D Employ	er ident	tification number
	Add	ress change	STEWARDSH	IP ENDOWM	ENT FUI	ND					36-	4629	406
	∏ _{Naπ}	ne change		hea Boule							E Telepho		
	\dashv	al return		e, AZ 852							100	_524	-7200
	\vdash	return/terminated		•							400	-324	- 1200
	H										0 -		¢ 1 400 011
	H	ended return	F							lita) la ibra	G Gross r		- 1 1 1 1 2 2 1
	App	fication pending		ress of principal offi	cer					H(a) Is this			
			Same As C							H(b) Are all If 'No,'	subordinates attach a list	include) see ins)	rd? Yes No Structions)
1		xempt status	X 501(c)(3)	501(c) ()◀ (ıns	ert no)	4947(a)(1) or	527				
J	Webs	site: ► N/	A							H(c) Group	exemption ni	umber 🕨	<u> </u>
K	Form o	of organization	X Corporation	Trust As	sociation	Other ►		L Year	of formati	on 200°	7 M s	State of	legal domicile AZ
Pa	irt l×.	Summar	У										
	1 E	Briefly descri	be the organiza	ition's mission	or most si	gnificant a	activities:	Supp	orti	ng org	anizat	ion	for another
a)	1 1) organiza										
Governance	-												
Ë	-												
š	2 0	Check this bo	x ► If the	organization d	scontinue	d its opera	ations or d	sposed	d of mo	ore than 2	5% of its	net as	ssets
Ğ	3 1		ting members	•		-						3	4
S S	4 1		dependent votıı	-	_		-)			4	4
Activities &	5 T		of individuals			ar 2014 (P	art V, line	2a) .	• •		•	5	<u> </u>
흦	6 1		of volunteers (• •	•	•	•	6	5
ĕ			ed business rev						•	•		7a	0.
	ЬΓ	Net unrelated	business taxa	ble income from				-	•	· · · · · ·		7b	0.
					RF	CEIV				P	rior Year		Current Year
Lo »	8 (and grants (Pa	1.				ઝું ⊬	• • • •				
Š	9 1	9 Program service revenue (Part VIII, line 2g) 10 Investment income (Part VIII, column (A), inces 3,14 (and 7d)						Ģ∦	• • •		144,0		144,000.
Beviell úé	10	nvestment ir	icome (Part VII	I, column (A),	ines 3, 4	-y-v		\$.	• •	٠		27.	24.
			e (Part VIII, col								-450,7		-1,636,835.
=4			e – add lines 8), line 1	2) <i>.</i>		-306,7	00.	-1,492,811.
UĒĆ	!!		milar amounts		11		3)		•				
\exists	1	14 Benefits paid to or for members (Part IX, column (A), line 4)											
SCENERS?	15 5												
Lø	16a F	Professional	fundraising fee	s (Part IX, colu	mn (A), lii	ne 11e) .							
	ЬТ	Total fundrais	ising expenses (Part IX, column (D), line 25) ▶							1,41 7			
ďŽ.	17		es (Part IX, co			_					645,5	22	580,617.
7	18 7	-	es. Add lines 1			· ·	Δ1 line 25	٠		-	645,5	-	
ď	1 -		expenses. Sul				A), IIIIC 20		• • •				580,617.
8 8	 	Veveriue less	expenses. Sui		0111 11116 12	<u>-</u>	·	<u>····</u>		- 	<u>-952, 2</u>		-2,073,428.
Net Assets of Fund Balance	20 1	Total assets	(Part X, line 16	`							g of Currer	_	End of Year
10	21 7		s (Part X, line	•	•	• •	•		• • • • •	· <u> </u>	<u>, 520, 4</u>	0.	25,447,000.
ž.5				•			• ••		• • • • •				0.
	122		fund balances	Subtract line	21 from III	ne 20	· · ·			27	<u>,520,4</u>	28.	25,447,000.
		Signatur					 .						· — — — — —
Und	er penaltie	es of perjury, I de	clare that I have express control	amined this return, i	nctuding acco	mpanying so	hedules and ser has any kno	tatements wiedge.	, and to t	the best of m	y knowledge	and bel	ief, it is true, correct, and
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۸.		Signatu	re of officer		\Rightarrow					Da	11101	<u>8</u>	
Sig He	gn												
пе	ere		Petty print name and title							Treas	urer		
_			reparer's name		eparer's signa	ata ma		Dat				1, 1	DTIN
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	eparei				CO.								
Use Only Firm's address 1757 E BASELINE RD STE 105										Firm's EIN	86	-0649284	
				RT, AZ 852							Phone no	(48	0) 820-5041
Ma	y the IR	RS discuss th	is return with t	he preparer she	own above	? (see in:	structions)						X Yes No
RΔ	A For I	Panerwork R	eduction Act N	lotice, see the	senarate i	nstruction	16		TEE	A0113 05/	20/1/		Form 990 (2014)

Form	990	(2014)	STEWARDSHIP E	ENDOWMENT F	UND		36-	462940	6	P	age 2
Par			ment of Program							•	
		Check	if Schedule O contail	ns a response o	r note to any line in t	this Part III .					
1	Briefl	y descrit	e the organization's	mission:							
	Sup	porti	ng organizati	on for ano	ther 501(c)(3) organiz	ation.				
	~		- 4 2								
		- -									
2	Did th	ne organiz	zation undertake anv s	ignificant program	services during the y	ear which were	not listed on the prior		-		
		990 or 9					•	П	Yes	X	No
	If 'Ye	s.' descr	the these new servic					ш		ت	
3						how it conduct	s, any program services?	П	Yes	X	No
•			be these changes or	=	gg		-, ,.			لشفا	
4			_		anlishments for each	of its three lar	gest program services, as	measure	d by ex	mens	ses
7	Section	on 501(c	:)(3) and 501(c)(4) or	ganizations are	required to report the	amount of gra	ants and allocations to oth	ers, the t	otal exp	pens	es,
	and r	evenue,	if any, for each prog	ram service repo	orted						
								····			
4 a	(Code) (Expenses \$	580,6	17. including gran	ts of \$) (Revenue	\$	144	, 00	<u>)().</u>)
	<u>To</u> _	opera	<u>te as a suppo</u>	<u>rt organiz</u>	ation for and	ther_501(c) (3) entity.		-	. – –	
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4	d Othe	r progra	m services. (Describe	n Schedule O.	· .	-					
		enses	\$		grants of \$) (Revenue \$)	
4	e Total	l progran	n service expenses	>	580,617.						

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Form 990 (2014) STEWARDSHIP ENDOWMENT FUND
Part IV Checklist of Required Schedules

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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	Х	1
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		Х
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		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4		Х
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_		Х
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	6		Х_
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		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	_8		Х
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	9	.	Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		х
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable			
i	a Did the organization report an amount for land, buildings and equipment in Part X, line 10° If 'Yes,' complete Schedule D, Part VI	11 a	х	
ı	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	11 b		Х
•	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	11 c		X
	d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX	11 d		Х
	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e		X
	f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X	11 f	Х	
	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, and XII	12a		X
	b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional	12ь	Х	,,-
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		X
	a Did the organization maintain an office, employees, or agents outside of the United States?	14a	-	<u> </u>
	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		Х
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		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If 'Yes,' complete Schedule F, Parts III and IV	16		х
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		х
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		х
	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		Х
	a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20		X
	b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 b		!

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Form 990 (2014) STEWARDSHIP ENDOWMENT FUND

Part IV | Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21		Х
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22		X_
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		х
24 a	a 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		х
t	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		
C	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	a Section 501(c)(3), 501(c)(4), and 501(c)(29) 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		X
t	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		х
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 'Yes', complete Schedule L, Part II	26		Х
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		Х
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)			
i	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		X
ı	b A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		X
(c 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		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Schedule R, Part I	33	Х	
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	Х	
35 a	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
1	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		х
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		х
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	Х	
3AA		Form	990	(2014)

14b

Form 990 (2014)

OHIPSSO (2014) SIEWARDSHIP ENDOWMENT FOND	30-40234	100		aye
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	0	! ;	
b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1 b	0		
c Did the organization comply with backup withholding rules for reportable payments to vendors and r (gambling) winnings to prize winners?	eportable gamıng	1 c		
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax State-	2-			
ments, 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	2a	0 2 b		L
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see in:		20		_
3a Did the organization have unrelated business gross income of \$1,000 or more during the year		3 a		X
b If 'Yes' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule 0	11 '	3 b		
		30		
4a At any time during the calendar year, did the organization have an interest in, or a signature or other financial account in a foreign country (such as a bank account, securities account, or other f	er authority over, a inancial account)?	4 a		Х
b If 'Yes,' enter the name of the foreign country: ►			i	
See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial				
5a Was the organization a party to a prohibited tax shelter transaction at any time during the ta	x year?	5 a		<u> </u>
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelf	er transaction?	5 b		X
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?		5 c		
6 a Does the organization have annual gross receipts that are normally greater than \$100,000, a solicit any contributions that were not tax deductible as charitable contributions?	ind did the organization	6a		Х
b If 'Yes,' did the organization include with every solicitation an express statement that such contribut not tax deductible?	ions or gifts were	6 b		
7 Organizations that may receive deductible contributions under section 170(c).				
a Did the organization receive a payment in excess of \$75 made partly as a contribution and p	partly for goods and	7 a		X
services provided to the payor?	•	7 b		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w		10		
Form 8282?	vas required to me	7 c		X
d If 'Yes,' indicate the number of Forms 8282 filed during the year	7 d			
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal	benefit contract?	7 e		X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal ben	nefit contract?	. 7f		X
g If the organization received a contribution of qualified intellectual property, did the organization file I as required?	Form 8899	7 g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the	organization file a	, 9		
Form 1098-C?		7 h		
8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained	by the sponsoring			
organization have excess business holdings at any time during the year?	•	8		
9 Sponsoring organizations maintaining donor advised funds.				
a Did the sponsoring organization make any taxable distributions under section 4966?		9 a		
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related per	Sonr	9 b		
10 Section 501(c)(7) organizations. Enter:	1 10-1	1	,	
a 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	106			
11 Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders	11 a			
	118			
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	116			
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of) 1	12 a		
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year	12b			
13 Section 501(c)(29) qualified nonprofit health insurance issuers.				
a Is the organization licensed to issue qualified health plans in more than one state?		13a		
Note. See the instructions for additional information the organization must report on Schedu	le O.			
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	13 Ь			
c Enter the amount of reserves on hand	13c			1,
14a Did the organization receive any payments for indoor tanning services during the tax year?		. 14al		ΙX

Form 990 (2014) STEWARDSHIP ENDOWMENT FUND Page 6 36-4629406 Part VI Governance, Management, and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI Section 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 1 a 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 1 b 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X officer, director, trustee, or key employee? 2 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 X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Х X Did the organization become aware during the year of a significant diversion of the organization's assets? 5 X Did the organization have members or stockholders? 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more X members of the governing body? 7 a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 7 b Х Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following X a The governing body? 8 a b Each committee with authority to act on behalf of the governing body? 8 b X 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 Х Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code No Yes X 10 a Did the organization have local chapters, branches, or affiliates? 10 a b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10 b 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? X 11 a b Describe in Schedule O the process, if any, used by the organization to review this Form 990 See Schedule 0 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13 X 12 a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise X to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this was done See Schedule O X 12 c 13 Did the organization have a written whistleblower policy? X 13 $\overline{\mathbf{x}}$ 14 Did the organization have a written document retention and destruction policy? 14 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? a The organization's CEO, Executive Director, or top management official 15 a X b Other officers or key employees of the organization. 15 b If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? X 16 a bilf 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its â participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 161 Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed > Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Another's website Other (explain in Schedule O) Upon request 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. See Schedule O State the name, address, and telephone number of the person who possesses the organization's books and records

Form 990 (2	2014)	STEWARDSHIP	ENDOWMENT	FIIND
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Page 7

Form 990 (2014)

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

Check if Schedule O contains a response or note to any line in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of 'key employee'
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

|X| Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee (C) Position (do not check more than one box, unless person is both an officer and a (A) (B) (D) (E) **(F)** Name and Title Average hours Reportable Reportable Estimated compensation from the organization (W 2/1099-MISC) compensation from related organizations (W 2/1099-MISC) amount of other compensation from the director/trustee) per week (list any Officer Key employee Institutional employee Highest compensated organization and related organizations hours for related organiza tions l trustee I trustee below dotted line) (1) Ron Eriksson 1 President 0 Х X 0 0. 0 (2) Don Petty 1 X 0 X Treasurer 0 0 0. (3) Matt Everroad 1 Secretary 0 X X 0 0 0. (4) Ed Grant 1 Vice President 0 Х Х 0 0 0. (5) (6) (8) (9) (10) (11)(12)(13)(14)

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Form 990 (2014) STEWARDSHIP ENDOWMENT F	UND	Kev	Fn	ank		- AC 3	and	l Highest Con	36-462940	
型型は変更にあってCHOH A. OHICE13, DHCCCO13, TH	(B)	\ey	Liv	(0	C)		211	i nigitest con	ipensated Limp	loyees (conunueo)
(A) Name and title	Average hours per week	offic	, unle	check ess pe nd a c	erson direct	e than o is both or/trust	an tee)	(D) Reportable compensation from the organization	(E) Reportable compensation from	(F) Estimated amount of other compensation
	(list any hours for	Individu or direct	Institut	Officer	Key employee	Highest	Former	(W-2/1099-MISC)	related organizations (W-2/1099-MISC)	from the organization and related
	related organiza - tions below	Individual trustee or director	nstitutional trustee		ployee	compe	_			organizations
	dotted line)	ee	ıstee			Highest compensated employee				
(15)										
(16)							_	.==		
(17)										
(18)										
(19)								:		
(20)										
(21)										
(22)										
(23)										
(24)										
(25)										
1 b Sub-total	4						•	0.	0.	0.
c Total from continuation sheets to Part VII, Section d Total (add lines 1b and 1c)			•			· · · · · · · · · · · · · · · · · · ·	>	0. 0.	0.	0.
2 Total number of individuals (including but not limited from the organization ► 0	to those li	sted	abov	ve) v	vho r	eceiv	ed '			pensation
3 Did the organization list any former officer, direct	tor or tru	ctae	دما	· or				waterst component		Yes No
on line 1a? If 'Yes,' complete Schedule J for such	h individu	ıal	•					·		3 X
4 For any individual listed on line 1a, is the sum of the organization and related organizations greate such individual	er than \$1	le coi 50,00	007	insa If 'Y	es' (and comp	olet	er compensation to e Schedule J for 	from 	4 X
5 Did any person listed on line 1a receive or accrue for services rendered to the organization? If 'Yes	e compen ,' comple	satio te Sc	n fre	om a lule	any i <i>J for</i>	unrel <i>suci</i>	late h p	_	ındividual	5 X
1 Complete this table for your five highest compensation from the organization. Report compens	sated indi	epeni	deni	t cor	ntrac	tors	tha	t received more th	nan \$100,000 of	
(A) Name and business addr		110 00	210	<u> </u>	/cu.	Ci ic	ly .	Description of		(C) Compensation
Total number of independent contractors (including bis \$100,000 of compensation from the organization.)		ted to	tho	se li	isted	abov	/e) \	who received more	than	

Part VIII Statement of Revenue

		Check if Schedule O	contains a res	sponse or note to ar	ny line in this Part V	THI		
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	b c d e f	Federated campaigns Membership dues Fundraising events Related organizations Government grants (contribution All other contributions, gifts, g similar amounts not included Noncash contributions included Total. Add lines 1a-1f	grants, and above 1 f					
				Business Code				
Program Service Revenue	2 a b	Rental income		531120	144,000.	144,000.		
Servic	c d							
Ē	e	All other program comm						
8		All other program service						
<u> </u>	g	Total. Add lines 2a-2f			144,000.		<u> </u>	
	3 4 5	Investment income (inc other similar amounts) Income from investmen Royalties						24.
	-	[(i) Real	(ii) Personal				
	6 a	Gross rents			1			<u> </u>
		Less: rental expenses		-	1			
		Rental income or (loss)			†			
		Net rental income or (ic	nee)					
		· 1	(i) Securities	(ii) Other				
		Gross amount from sales of assets other than inventory	(y occurracy	(ii) Gale.				
		Less cost or other basis and sales expenses Gain or (loss)						
		Net gain or (loss)			 			
The state of the s		Gross income from fund (not including .\$	draising event	s				
Š		of contributions reporte	d on line 1c)	-				
Other Revenue		See Part IV, line 18		a	1			
호	b	Less: direct expenses		Ь	1			
돌		Net income or (loss) fro	om fundraising	events . ►				
	9 a	Gross income from gan See Part IV, line 19	ning activities	а				
	Ь	Less: direct expenses		b				
	С	Net income or (loss) fro	om gaming act	tivities				
	10 a	Gross sales of inventor and allowances	y, less returns	a				
	b	Less: cost of goods sole	d.	b				
	С	Net income or (loss) fro		ventory >				
		Miscellaneous Reveni	ue	Business Code				
	11 a	Loss on demo of pr	operty	900099	<u>-1,636,835.</u>	<u>-1,636,835.</u>		
	b			ļ				
	С	All allege		<u> </u>		ļ		<u> </u>
	_	All other revenue						
		Total. Add lines 11a-11			-1,636,835.			
	12	Total revenue. See inst	ructions	· >	-1,492,811.	<u> -1,492,835.</u>	0.	24.

Form 990 (2014) STEWARDSHIP ENDOWMENT FUND Part IX Statement of Functional Expenses

<u>ı aı</u>	CIA Statement of Functional Experi				
Sect	ion 501(c)(3) and 501(c)(4) organizations must con			omplete column (A).	· -
	Check if Schedule O contains a r				
	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	0.	0.	0.	0.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.1	0.	0.	0.
7	Other salaries and wages				
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	-			
10	Payroll taxes				
	Fees for services (non-employees):				
	Management				
	Legal				
	: Accounting				
	Lobbying				
	Professional fundraising services See Part IV, line 17				
g	Other. (If line 11g amt exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule 0) Advertising and promotion				
13	Office expenses				
14	Information technology .				
15	Royalties				
16	Occupancy	<u> </u>			<u> </u>
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .				<u> </u>
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization .	430,617.	430,617.		
23 24	Insurance 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.)		_		
á	Distributions to SBC	150,000.	150,000.		<u></u>
ŀ)				
0	;				
•	All other expenses				
	Total functional expenses. Add lines 1 through 24e	580,617.	580,617.	0.	0.
26	__	,	,		

Form 990 (2014)

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Part X Balance Sheet Check if Schedule O contains a response or note to any line in this Part X (A) Beginning of year (B) End of year 1 Cash - non-interest-bearing 2 25,272 Savings and temporary cash investments 31,248 3 Pledges and grants receivable, net 3 4 Accounts receivable, net Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L 6 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10 a 28,566,497 10 b 10 c b Less, accumulated depreciation. 3,144,769 27,489,180 25, 421, 728. 11 11 Investments — publicly traded securities. 12 Investments - other securities. See Part IV, line 11 12 Investments - program-related See Part IV, line 11 13 14 Intangible assets 14 15 15 Other assets. See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 34) 27,520,428. 25,447,000 Accounts payable and accrued expenses 17 17 18 18 Grants payable Deferred revenue 19 19 20 20 Tax-exempt bond liabilities 21 21 Escrow or custodial account liability. Complete Part IV of Schedule D Liabilities Loans and other payables to current and former officers, directors, trustees, 22 key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties 23 24 24 Unsecured notes and loans payable to unrelated third parties Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D 25 26 0. Total liabilities. Add lines 17 through 25 0. Organizations that follow SFAS 117 (ASC 958), check here X and complete or Fund Balances lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets . 27,520,428. 27 25,447,000. 28 28 Temporarily restricted net assets 29 29 Permanently restricted net assets. Organizations that do not follow SFAS 117 (ASC 958), check here > and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 30 Assets Paid-in or capital surplus, or land, building, or equipment fund. 31 31 32 Retained earnings, endowment, accumulated income, or other funds 32 Žet Total net assets or fund balances 27,520,428. 33 25,447,000. 34 Total liabilities and net assets/fund balances 27,520,428 25,447,000.

TEEA0111L 05/28/14

Form 990 (2014) STEWARDSHIP ENDOWMENT FUND	36-46	29406	Pa	ge 12
Part XI Reconciliation of Net Assets	-			
Check if Schedule O contains a response or note to any line in this Part XI .		<u> </u>		
1 Total revenue (must equal Part VIII, column (A), line 12)	[1	-1,	492,8	11.
2 Total expenses (must equal Part IX, column (A), line 25) .	2	2	580,6	<u> 17.</u>
3 Revenue less expenses Subtract line 2 from line 1	[3	-2,	073,4	
4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)).	. 4		520,4	
5 Net unrealized gains (losses) on investments	<u> </u>			
6 Donated services and use of facilities .	-	5		
7 Investment expenses	7	7		
8 Prior period adjustments	8	3		
9 Other changes in net assets or fund balances (explain in Schedule O).	9)		0.
10 Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,				
column (B)).	10	25,	447,0	<u> 100.</u>
Part XII Financial Statements and Reporting				
Check if Schedule O contains a response or note to any line in this Part XII				$\cdot \square$
			Yes	No
1 Accounting method used to prepare the Form 990: Cash X Accrual Other		۳,		Care;
If the organization changed its method of accounting from a prior year or checked 'Other,' explain				
ın Schedule O.		- 1	26,15,1	547.1
2 a Were the organization's financial statements compiled or reviewed by an independent accountant?		2	a	X
If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled	or reviewed o	na 📜 🚆	7	
separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis		, ;	130.0	2.4
				ı
b Were the organization's financial statements audited by an independent accountant?		2	b X	
If 'Yes,' check a box below to indicate whether the financial statements for the year were audited or basis, consolidated basis, or both	n a separate	22,0		
Separate basis X Consolidated basis Both consolidated and separate basis			1	
	f the endit		1	للختا
c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight or review, or compilation of its financial statements and selection of an independent accountant?	i ule audit,	2	c X	
If the organization changed either its oversight process or selection process during the tax year, ex in Schedule O.	plaın		Parties.	100 m
3 a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Audit Act and OMB Circular A-133?	ie Single	3	a	Х
b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the re	quired audit		\top	
or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3	ь	ı İ
BAA		For	rm 990 ((2014)

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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.

at www.irs.gov/form990.

Attach to Form 990 or Form 990-EZ. ► Information about Schedule A (Form 990 or 990-EZ) and its instructions is OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number STEWARDSHIP ENDOWMENT FUND 36-4629406 Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state 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) 5 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) An organization that normally receives: (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions — subject to certain exceptions, and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after 9 June 30, 1975. See section 509(a)(2). (Complete Part III.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g. a |X| Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) You must complete Part IV, Sections A and D, and Part V. X Check this box if the organization received a written determination from the IRS that is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations . 1

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	organiza	Is the tion listed governing ment?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)	
			Yes	No			
Scottsdale Bible Ch	nurch						
(A)	86-0179808	_ 1	X		150,000.	0.	
(B)							
<u>(C)</u>							
(D)			<u> </u>				
(E)							
Total		Paris.	,		150,000.	0.	

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2014

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 u	nder Part III If	the
organization fails to qualify under the tests listed below, please complete Part III.)		

<u>Sec</u>	tion A. Public Support		<u>. </u>				
	ndar year (or fiscal year nning in) ►	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any 'unusual grants')						
2	Tax revenues levied for the 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						
5	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)						
6	Public support. Subtract line 5 from line 4					-	
Sec	tion B. Total Support						
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	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 VI.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activ	vities, etc (see ins	structions)	-		12	
13	First five years. If the Form 990 is organization, check this box and		n's first, second, th	nird, fourth, or fifth t	ax year as a sectio	n 501(c)(3)	▶□
_	tion C. Computation of Pu						
	Public support percentage for 20	•	• • • • • • • • • • • • • • • • • • • •	, ,,,		14	
15	Public support percentage from	2013 Schedule A	, Part II, line 14		•	15	%
16 a	a 33-1/3% support test — 2014. If and stop here. The organization	the organization qualifies as a pu	did not check the blicly supported o	box on line 13, arorganization	nd the line 14 is 3	3-1/3% or more, c	heck this box
ı	33-1/3% support test – 2013. If and stop here. The organization	the organization of qualifies as a pu	did not check a bo iblicly supported o	ox on line 13 or 16 or 1			check this box
17 8	10%-facts-and-circumstances to or more, and if the organization the organization meets the 'facts	meets the 'facts-	and-circumstance	s' test, check this	box and ston her	e. Explain in Part	VI how
	o 10%-facts-and-circumstances to organization meets the 'facts-an	meets the 'facts- d-circumstances'	and-circumstance test. The organiz	es' test, check this ation qualifies as a	box and stop her a publicly support	e. Explain in Part i ed organization	VI how the ▶ □
	Private foundation. If the organi	zation did not chi	eck a box on line	13, 16a, 16b, 17a,			
RAA					Cal	adula A /Farm 00/	0 000 E3 0014

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)

	tion A. Public Support						_
	dar year (or fiscal yr beginning in) 🟲	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions and membership fees received. (Do not include any 'unusual grants ')						
2	Gross receipts from admis-		-		1		
	sions, 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 business under section 513.						
4	Tax revenues levied for the organization's benefit and			,			
	either paid to or expended on						
_	its behalf The value of services or						
3	facilities furnished by a						
	governmental unit to the organization without charge .				i		
6	Total. Add lines 1 through 5				 		
	Amounts included on lines 1,						
	2, and 3 received from disqualified persons						
h	Amounts included on lines 2				<u> </u>		
_	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 : Add lines 7a and 7b						
	Public support (Subtract line	د ولا (ووسال رواد د در		1.			
	7c from line 6)	The second second	المسلم والرابي في المائي	1	,	The state of the s	
	tion B. Total Support				T		
	dar year (or fiscal yr beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
_	Amounts from line 6						
10 a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable						
	income (less section 511						
	taxes) from businesses acquired after June 30, 1975						
c	taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b						
11	taxes) from businesses acquired after June 30, 1975; Add lines 10a and 10b Net income from unrelated business						
	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						
11	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						
11	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						
11	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 VI.)						
11 12 13	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 VI.) Total support. (Add lines 9, 10c, 11 and 12)						
11 12 13	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 VI.) Total support. (Add lines 9,	is for the organizatop here		nd, third, fourth, c	•	a section 501(c)(3).
11 12 13 14 Sec	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 VI.) Total support. (Add lines 9, 10c, 11 and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Pul	stop here blic Support P	ercentage	···	·····	a section 501(c)(3).
11 12 13 14 Sec 15	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 VI.) Total support. (Add lines 9, 10c, 11 and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Pul	stop here blic Support P 014 (line 8, colum	ercentage n (f) divided by lir	ne 13, column (f)		a section 501(c)(
11 12 13 14 Sec 15 16	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 VI.) Total support. (Add lines 9, 10c, 11 and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Pul Public support percentage from 20 public support percentage from	stop here blic Support P 014 (line 8, colum 2013 Schedule A,	Percentage n (f) divided by lin Part III, line 15.	ne 13, column (f)			<u> </u>
11 12 13 14 Sec 15 16 Sec	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 VI.) Total support. (Add lines 9, 10c, 11 and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Pulpublic support percentage for 20 Public support percentage from tion D. Computation of Inv	blic Support P 014 (line 8, colum 2013 Schedule A, restment Incor	Percentage In (f) divided by lir Part III, line 15. The Percentage	ne 13, column (f))		. 15	·
11 12 13 14 Sec 15 16 Sec 17	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 VI.) Total support. (Add lines 9, 10c, 11 and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Pul Public support percentage from the tion D. Computation of Invinvestment income percentage from the tion D. Computation of Invinvestment income percentage from the tion D. Computation of Invinvestment income percentage from the tion D. Computation of Invinvestment income percentage from the tion D. Computation of Invinvestment income percentage from the tion D. Computation of Invinvestment income percentage from the tion D. Computation of Invinvestment income percentage from the tion D. Computation of Invinvestment income percentage from the tion D. Computation of Invinvestment income percentage from the tion D. Computation of Invinvestment income percentage from the tion D. Computation of Invinvestment income percentage from the tion D. Computation of Invinvestment Income percentage from the tion D. Computation of Invinvestment Income percentage from the tion D. Computation of Invinvestment Income percentage from the tion D. Computation of Invinvestment Income percentage from the tion D. Computation of Invinvestment Income percentage from the tion D. Computation of Invinvestment Income percentage from the tion D. Computation	blic Support P 014 (line 8, colum 2013 Schedule A, restment Incor or 2014 (line 10c,	Percentage In (f) divided by lin Part III, line 15. Ine Percentage column (f) divide	ne 13, column (f))	imn (f))	. 15 . 16	\$ \$
11 12 13 14 Sec 15 16 Sec 17 18	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 VI.) Total support. (Add lines 9, 10c, 11 and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Pull Public support percentage for 20 Public support percentage from tion D. Computation of Investment income percentage finvestment income percentage f	blic Support P 014 (line 8, colum 2013 Schedule A, restment Incor or 2014 (line 10c, rom 2013 Schedu	Percentage In (f) divided by lin Part III, line 15. Ine Percentage Column (f) divided Ile A, Part III, line	e d by line 13, column (f):	ımn (f)		00 00 00 00
11 12 13 14 Sec 15 16 Sec 17 18	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 VI.) Total support. (Add lines 9, 10c, 11 and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Pul Public support percentage from the support percentage from the support percentage from 10 lines	blic Support P 14 (line 8, colum 2013 Schedule A, estment Incor or 2014 (line 10c, rom 2013 Schedul i the organization	Percentage In (f) divided by lin Part III, line 15. Ine Percentage Column (f) divided Ile A, Part III, line Ildid not check the	ne 13, column (f)) e d by line 13, column 17	imn (f))	15 16 17 18 e than 33-1/3%, a	\$ 8 8 9 md line 17 —
11 12 13 14 Sec 15 16 Sec 17 18 19a	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 VI.) Total support. (Add lines 9, 10c, 11 and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Pul Public support percentage from the support percentage from the support percentage from 10 investment income percentage from 10 investment income percentage from 10 investment income percentage from 11 in income percentage from 12 in income percentage from 13 in income perc	blic Support P 14 (line 8, colum 2013 Schedule A, estment Incor or 2014 (line 10c, rom 2013 Schedul i the organization this box and sto the organization	Percentage In (f) divided by lin Part III, line 15. INTERIOR TO III, line 15. INTERIOR TO III, line III, l	the 13, column (f)) Be the by line 13, column 17	imn (f)) and line 15 is more as a publicly supprine 19a, and line	15 16 17 18 e than 33-1/3%, a orted organization 16 is more than 3	% % % % % % % % % % % % % % % % % % %
11 12 13 14 Sec 15 16 Sec 17 18 19a	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 VI.) Total support. (Add lines 9, 10c, 11 and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Pul Public support percentage from the support percentage from the support percentage from 1 linestment income percentage from 1 linestment income percentage from 1 sale 1/3% support tests — 2014. If is not more than 33-1/3%, check	blic Support P 14 (line 8, column 2013 Schedule A, restment Incor or 2014 (line 10c, rom 2013 Schedul i the organization i this box and sto i the organization i, check this box	Percentage In (f) divided by lin Part III, line 15. Ine Percentage Column (f) divided Ile A, Part III, line Idid not check the In here. The organ Idid not check a beand stop here. The	the 13, column (f)) ed by line 13, column (f) 17 be box on line 14, and a column (f) control of the column (f)	amn (f)) and line 15 is more as a publicly suppline 19a, and line ralifies as a public	15 16 17 18 e than 33-1/3%, a orted organization 16 is more than 3 ly supported organization 19	\$ 8 8 9 10d line 17 1

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.)

Section 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	1	Х	·]
	the designation. If historic and continuing relationship, explain	<u> </u>		
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		5 ~ \$ ' - 7 \$ ' .	;
	described in section 509(a)(1) or (2)	2	7.75	X ST
3 a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If 'Yes,' answer (b)		1,43	[- m], =}
	and (c) below	3a	الا مقالة،	X
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	3c		
4 a	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		X
t	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	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		
5 a	a 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 ElN 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		X
t	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		
C	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5с		
6	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 .	6		X
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		X
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		X
9 a	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		X
t	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		Х
(c 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		Х
0 a	a Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations)? If 'Yes,' answer (b) below	10a		Х
ŧ	b Did the organization, have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.).	10b		

Hai	Supporting Organizations (Continued)			
11	Has the organization accepted a gift or contribution from any of the following persons?		Yes	No
â	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		Х
ŀ	b A family member of a person described in (a) above?.	11b		X
(c 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		Х
Sec	ction B. Type I Supporting Organizations			
	Out the directors to release as manches to a second and a second as a second a		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	1	X	
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 VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.	2		X
Sec	ction C. Type II Supporting Organizations			
			Yes	No
	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 or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s)	1		
Sec	ction 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		
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		
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		
Sec	ction 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 instructions):			
	The organization satisfied the Activities Test. Complete line 2 below			
ı	\mathbf{b} The organization is the parent of each of its supported organizations. Complete line 3 below.			
(The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instruction	ns).		
2	Activities Test Answer (a) and (b) below.		Yes	No
•	a 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 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		
I	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	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
i	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI	3a		
	b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If 'Yes,' describe in Part VI the role played by the organization in this regard	3b		

Pa	Type III Non-Functionally Integrated 509(a)(3) Supporting Organic	anizati	ons	
1	Check here if the organization satisfied the Integral Part Test as a qualifying trust on Norther Type III non-functionally integrated supporting organizations must complete	ovember e Section	r 20, 1970. See instruct ons A through E	ions. All
Sec	tion 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 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		
Sec	tion B — Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
	Average monthly value of securities	1a		
	Average monthly cash balances	1b		
	Fair market value of other non-exempt-use assets .	1c		
	i 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		
	Recoveries of prior-year distributions .	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sec	tion 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-functionally-integrated (see instructions).	egrated	Type III supporting or	ganization
D 4 4				

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Schedule A (Form 990 or 990-EZ) 2014

Pan	$\mathbf{V} = \mathbf{I} \mathbf{y} \mathbf{p} \mathbf{e} \mathbf{l} \mathbf{l} \mathbf{N} \mathbf{o} \mathbf{n} - \mathbf{F} \mathbf{u} \mathbf{n} \mathbf{c} \mathbf{t} \mathbf{l} \mathbf{o} \mathbf{n} \mathbf{a} \mathbf{l} \mathbf{y} \mathbf{l} \mathbf{n} \mathbf{t} \mathbf{e} \mathbf{g} \mathbf{r} \mathbf{a} \mathbf{t} \mathbf{e} \mathbf{d} 5 0 9 (\mathbf{a}) (3) \mathbf{S} \mathbf{l}$	upporting Organiza	tions (continued)	<u> </u>
Sect	ion D — Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exempt pu	irposes		
2	Amounts paid to perform activity that directly furthers exempt purposes in excess of income from activity	• • • •		
3	Administrative expenses paid to accomplish exempt purposes of si		•	
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			
7	Total annual distributions. Add lines 1 through 6		•	
8	Distributions to attentive supported organizations to which the organization Part VI). See instructions	ion is responsive (provide	details · ·	
9	Distributable amount for 2014 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
Sect	ion E — Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
	Distributable amount for 2014 from Section C, line 6			
	Underdistributions, if any, for years prior to 2014 (reasonable cause required – see instructions)			
3	Excess distributions carryover, if any, to 2014:			
a				
b				
с				
d				
е	From 2013			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years .	<u> </u>		
h	Applied to 2014 distributable amount			
i	Carryover from 2009 not applied (see instructions)			_
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f			_
4	Distributions for 2014 from Section D, line 7: \$	1		
а	Applied to underdistributions of prior years .			
	Applied to 2014 distributable amount			
С	Remainder. Subtract lines 4a and 4b from 4 .			
5	Remaining underdistributions for years prior to 2014, if 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			
544			<u> </u>	***

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Schedule A (Form 990 or 990-EZ) 2014

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No. 1545-0047 2014

Department of the Treasury Internal Revenue Service Name of the organization

rm990. Open to Rublic Inspection
Employer identification number

	STEWARDSHIP ENDOWMENT FUND				36-4629406	
Par	t Organizations Maintaining Dono	or Advised Funds or Oth	er Similar Fun	ds or Acc		
rai	Complete if the organization answ	wered 'Yes' to Form 990,	, Part IV, line 6	5.		
		(a) Donor advised	funds	(b) F	unds and other acc	ounts
1	Total number at end of year					
2	Aggregate value of contributions to (during year)					
3	Aggregate value of grants from (during year) .					
4	Aggregate value at end of year					
5	Did the organization inform all donors and dor are the organization's property, subject to the	nor advisors in writing that the organization's exclusive legal	assets held in do control?	nor advised	funds Yes	No
6	Did the organization inform all grantees, dono for charitable purposes and not for the benefit impermissible private benefit?	ors, and donor advisors in writing tof the donor or donor advisor	ng that grant fund r, or for any other	s can be us purpose co	sed only nferring Yes	☐ No
Dav	t II Conservation Easements.				<u></u>	
Par	Complete if the organization ans	wered 'Yes' to Form 990	, Part IV, line	7.		
1	Purpose(s) of conservation easements held by			-		
	Preservation of land for public use (e.g , r	-	_	f a historica	illy important land a	rea
	Protection of natural habitat		Preservation of	f a certified	historic structure	
	Preservation of open space	'				
2	Complete lines 2a through 2d if the organization h	held a qualified conservation con	ntribution in the form	of a conser	vation easement on t	he
	last day of the tax year.					. <u> </u>
				-	Held at the End of the	ne Tax Year_
	a Total number of conservation easements.	• .	•	. 2 a		
	b Total acreage restricted by conservation ease			2 b		
	c Number of conservation easements on a certi			. 2c		
(d Number of conservation easements included i structure listed in the National Register.	• •	•	. 20		
3	Number of conservation easements modified, trar tax year ▶	nsferred, released, extinguished,	or terminated by th	e organizatio	on during the	
4	Number of states where property subject to conse					
5	Does the organization have a written policy re and enforcement of the conservation easemet	nts it holds?			. Yes	No No
6	Staff and volunteer hours devoted to monitoring,				ar	
7	Amount of expenses incurred in monitoring, inspenses	ecting, and enforcing conservation	on easements during	the year		
8	21.0 00011011 11.0(1.7(1.7(1.7)		• • • • • • • • • • • • • • • • • • • •		. Yes	No No
9	In Part XIII, describe how the organization reports include, if applicable, the text of the footnote conservation easements.	s conservation easements in its to the organization's financial	revenue and expens statements that de	e statement escribes the	, and balance sheet, e organization's acco	and ounting for
Pā	Organizations Maintaining Colle Complete if the organization ans	ections of Art, Historical swered 'Yes' to Form 990	Treasures, or 9	Other Sir	nilar Assets.	
1	a if the organization elected, as permitted unde art, historical treasures, or other similar assets hi in Part XIII, the text of the footnote to its final	eld for public exhibition, education	on, or research in fur	ue stateme therance of	ent and balance she public service, provid	et works of de,
	b If the organization elected, as permitted unde historical treasures, or other similar assets held f following amounts relating to these items:	for public exhibition, education, o	or research in further	ance of pub	lic service, provide th	orks of art, ne
	(i) Revenue included in Form 990, Part VIII,					
	(ii) Assets included in Form 990, Part X				▶\$	
2	amounts required to be reported under SFAS	i 116 (ASC 958) relating to the	ese items:			
	a Revenue included in Form 990, Part VIII, line					
	b Assets included in Form 990, Part X				▶\$	

Schedule D (Form 990) 2014 STEW				36-462		Page 2
Part III Organizations Mainta	ining Collect	ions of Art, Histo	orical Treasures, o	Other Similar Ass	ets (continu	ıed)
3 Using the organization's acquisition items (check all that apply)	i, accession, and	other records, check a	iny of the following that a	re a significant use of its	collection	
a Public exhibition		d 🗌 Loan	or exchange programs			
b Scholarly research		e 🗌 Other				
c Preservation for future gene						
4 Provide a description of the organiz Part XIII	zation's collection	s and explain how they	y further the organization's	s exempt purpose in		
5 During the year, did the organizato be sold to raise funds rather t	ition solicit or re han to be mainta	ceive donations of ar	t, historical treasures, corganization's collection	or other similar assets	Yes	No
Part IV Escrow and Custodia					rm 990, Parl	
line 9, or reported an	amount on F	orm 990, Part X,	line 21.		•	•
1 a Is the organization an agent, true on Form 990, Part X?	stee, custodian,	or other intermediary	for contributions or oth	ner assets not included	☐ Yes 「	No
b If 'Yes,' explain the arrangement	t in Part XIII and	complete the follow	ng table		L L	
•		·	•		Amount	
c Beginning balance				1 c		
d Additions during the year			• •	1 d		
e Distributions during the year				. 1e		
f Ending balance .				1f		
2a Did the organization include an a				_	Yes	No
b If 'Yes,' explain the arrangement	in Part XIII. Ch	eck here if the explai	nation has been provide	d in Part XIII	L	
D. A.V. E. L. C.			104 11 5			
Part V Endowment Funds. C						
1 a Beginning of year balance.	(a) Current yea	ar (b) Prior yea	r (c) Two years back	(d) Three years back	(e) Four years	s back
b Contributions						
_		-			 	
c Net investment earnings, gains, and losses						
d Grants or scholarships .						
 Other expenditures for facilities and programs 						
f Administrative expenses						
g End of year balance						
2 Provide the estimated percentag		•	e 1g, column (a)) held	as.		
a Board designated or quasi-endown		%				
b Permanent endowment	⁸					
c Temporarily restricted endowme						
The percentages in lines 2a, 2b,	and 2c should e	equal 100%.				
3 a Are there endowment funds not in	the possession of	the organization that a	ire held and administered	for the		
organization by					Yes	No
(i) unrelated organizations .(ii) related organizations .		• • • • •	• • •		3a(i)	
b If 'Yes' to 3a(II), are the related	organizations lis	ted as required on Sc	hedule R?	• • • • • • •	3a(ii)	
4 Describe in Part XIII the intende					30	L
Part VI Land, Buildings, and						
Complete if the organ		ered 'Yes' to Form	n 990. Part IV. line	11a. See Form 99	0 Part X lin	ne 10
Description of property		Cost or other basis	(b) Cost or other	(c) Accumulated	(d) Book va	
	(a)	(investment)	basis (other)	depreciation	(u) Book va	ilue
1 a Land			17,610,000.	はなる さだと	17,610,	,000.
b Buildings			10,956,497.	3,144,769.	7,811,	
c Leasehold improvements.	∟					
d Equipment						
e Other	· · · · · · · · · · · · · · · · · · ·	15 225 5				
Total. Add lines 1a through 1e (Colum	าก (d) must equa	al Form 990, Part X, o	column (B), line 10c.).		25,421	
BAA				Sched	lule D (Form 990) 2014

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Part VII	Investments - Other Securities.		N/A	
	Complete if the organization answered		***************************************	
	ription of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-o	f-year market value
	al derivatives			
	-held equity interests .			
(3) Other				
$\frac{A}{A}$				
(B)				
(C)				
(D) (E)				
(F)				
(G) ·				
(H)				
(1)				
	nn (b) must equal Form 990, Part X, column (B) line 12)			
	Investments — Program Related. Complete if the organization answered		N/A	
			, Part IV, line 11c. See Form 99	30, Part X, line 13.
	(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-	of-year market value
(1)				
(2)				
(3)				
<u>(4)</u>				
(5)				
<u>(6)</u> (7)				
(8)				
(9)			· -	
(10)				
	nn (b) must equal Form 990, Part X, column (B) line 13)			
Part IX	Other Assets.	N/A	Don't IV Inc. 11d Co. Forms Of	NO Dark V June 15
	Complete if the organization answered	i tes lo comi 990 scription	, Part IV, line 11d. See Form 99	(b) Book value
(1)	(a) De	scription		(b) Dook Value
(2)				
(3)				
(4)		 		
(5)				
(6)				
(8)				
(9)				
(10)				
Total. (Co	lumn (b) must equal Form 990, Part X, column (B), line 15.)		
Part X	Other Liabilities.			
	Complete if the organization answered 'Yes' to F	(b) Book value	e or 111. See Form 990, Part X, Tine 25	
(1) Fede	eral income taxes	(b) Book value		
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9) (10)		· ·	 	
(11)			 	
	nn (b) must equal Form 990, Part X, column (B) line 25.).	•		
	or uncertain tax positions. In Part XIII, provide the text of the fo		nancial statements that reports the organization's I	liability for uncertain

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII.

Schedule D (Form 990) 2014	CORRESPONDED	PAIDOLAMPAIR	DIMIN
schedule v (Form 990) ZU14	STEWARDSHIP	P.NIJOWMP.NT	נומנוא

36-4629406

Page 4

<u>Part XI </u> Reconciliation of Revenue per Audited Financial St	atements With Revenue per R	Return. N/A
Complete if the organization answered 'Yes' to Form	990, Part IV, line 12a.	
1 Total revenue, gains, and other support per audited financial statement	ts	1
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a Net unrealized gains (losses) on investments	2a	_}
b Donated services and use of facilities	2 b	7
c Recoveries of prior year grants .	2 c	7
d Other (Describe in Part XIII.)	2 d	7
e Add lines 2a through 2d		. 2e
3 Subtract line 2e from line 1		3
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b Other (Describe in Part XIII.)	4b	7
c Add lines 4a and 4b		4 c
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I,	line 12.)	5
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, Part XII Reconciliation of Expenses per Audited Financial S		1 0
	tatements With Expenses per	1 0
Part XII Reconciliation of Expenses per Audited Financial S	tatements With Expenses per	1 0
Part XII Reconciliation of Expenses per Audited Financial S Complete if the organization answered 'Yes' to Form	tatements With Expenses per	Return. N/A
Part XII Reconciliation of Expenses per Audited Financial S Complete if the organization answered 'Yes' to Form 1 Total expenses and losses per audited financial statements	tatements With Expenses per	Return. N/A
Part XII Reconciliation of Expenses per Audited Financial S Complete if the organization answered 'Yes' to Form 1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25	tatements With Expenses per 1990, Part IV, line 12a.	Return. N/A
Part XII Reconciliation of Expenses per Audited Financial S Complete if the organization answered 'Yes' to Form 1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25 a Donated services and use of facilities	itatements With Expenses per 1990, Part IV, line 12a.	Return. N/A
Part XII Reconciliation of Expenses per Audited Financial S Complete if the organization answered 'Yes' to Form 1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25 a Donated services and use of facilities b Prior year adjustments	tatements With Expenses per 1990, Part IV, line 12a 2 a 2 b	Return. N/A
Part XII Reconciliation of Expenses per Audited Financial S Complete if the organization answered 'Yes' to Form 1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25 a Donated services and use of facilities b Prior year adjustments c Other losses	tatements With Expenses per 1990, Part IV, line 12a.	Return. N/A
Part XII Reconciliation of Expenses per Audited Financial S Complete if the organization answered 'Yes' to Form 1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25 a Donated services and use of facilities b Prior year adjustments c Other losses d Other (Describe in Part XIII.)	tatements With Expenses per 1990, Part IV, line 12a.	Return. N/A
Part XII Reconciliation of Expenses per Audited Financial S Complete if the organization answered 'Yes' to Form 1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25 a Donated services and use of facilities b Prior year adjustments c Other losses d Other (Describe in Part XIII.) e Add lines 2a through 2d.	tatements With Expenses per 1990, Part IV, line 12a.	Return. N/A
Part XII Reconciliation of Expenses per Audited Financial S Complete if the organization answered 'Yes' to Form 1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25 a Donated services and use of facilities b Prior year adjustments c Other losses d Other (Describe in Part XIII.) e Add lines 2a through 2d. 3 Subtract line 2e from line 1	tatements With Expenses per 1990, Part IV, line 12a.	Return. N/A
Part XII Reconciliation of Expenses per Audited Financial S Complete if the organization answered 'Yes' to Form 1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25 a Donated services and use of facilities b Prior year adjustments c Other losses c Other losses d Other (Describe in Part XIII.) e Add lines 2a through 2d. 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part IX, line 25, but not on line 1	tatements With Expenses per 1990, Part IV, line 12a. 2a 2b 2c 2d	Return. N/A
Part XII Reconciliation of Expenses per Audited Financial S Complete if the organization answered 'Yes' to Form 1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25 a Donated services and use of facilities b Prior year adjustments c Other losses d Other (Describe in Part XIII.) e Add lines 2a through 2d. 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part IX, line 25, but not on line 1 a Investment expenses not included on Form 990, Part VIII, line 7b.	tatements With Expenses per 1990, Part IV, line 12a. 2 a 2 b 2 c 2 d 4 a 4 b	Return. N/A

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information.

Part X - FIN 48 Footnote

The Organization is exempt from income taxes under Internal Revenue Code Section 501(c)(3) and applicable Arizona Statutes. Therefore, no provision or liability for income taxes has been included in the financial statements. There was no unrelated business income for the year. Contributions to the Organization are tax deductible within the limitations described by the Code.

The Organization has adopted the provisions of FASB ASC Topic 740, Accounting for BAA

Part XIII | Supplemental Information (continued)

Part X - FIN 48 Footnote (continued)

Income Taxes. This standard clarifies the accounting for uncertainty in income taxes recognized in an entity's financial statements and prescribes a recognition threshold for the financial statement recognition of tax positions taken or expected to be taken on a tax return that are not certain to be realized. The implementation of this standard had no impact on the Organization's financial statements.

The Organization's income tax returns are subject to review and examination by federal and state authorities. The tax returns for the years ended June 30, 2012 through 2014 are open to examination by federal authorities and for year ended December 31, 2011 and for the six months ended June 30, 2011 and for the years ended June 30, 2012 through 2014 by state authorities.

SCHEDULE O (Form 990 or 990-EZ)

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Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/torm990.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

STEWARDSHIP ENDOWMENT FUND

Employer identification number

36-4629406

Form 990, Part VI, Line 11b - Form 990 Review Process

The Board of Directors reviews the Form 990 before it is signed and submitted to the IRS.

Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of Conflicts

The Board of Directors complete a conflict of interest form each year.

Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available

Governing documents, policies and financial statements are available upon request.

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

STEWARDSHIP ENDOWMENT FUND

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.

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

OMB No 1545 0047 2014 Open to Public Inspection

Employer identification number 36-4629406

Part 1 Identification of Disregarded Entities Complete If the		zation answe	ered 'Yes'	on Form 990	le organization answered 'Yes' on Form 990, Part IV, line 33.	33.			
(a) Name, address, and EIN (if applicable) of disregarded entity	ty Primary activity		(c) (state or foreign country)		(d) Total income	(e) End-of-year assets		(f) Direct controlling entity	6
(1) 7601_E. Shea_Blvd., LLC	 Own real and personal property	l and nal rty	AZ		-1, 516, 815.	19,894,536	•	Stewardship Endowment Fund, Inc.	Ω, ,
(2) <u>Shea_Chapel,_LLC</u>	Own real and personal property	l and nal rty	AZ		24,004.	5, 552, 438	•	Stewardship Endowment Fund, Inc.	Ω
(3)				<u>-</u>					
Part II Identification of Related Tax-Exempt Organizations Complete if the organization answered 'Yes' on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.	ations Complete of the tions during the tax	organization year.	answered	'Yes' on Forn	י 990, Part IV,	line 34 because	it had		
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)		(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) (atus Direct controlling entity	1	(g) Sec 512(b)(13) controlled entity?	13) tity?
							<u> </u>	Yes	No
(1) Scottsdale Bible Church 7601 E. Shea Blvd. Scottsdale, AZ 85260 86-0179808	Church	AZ		501 (c) (3)	-1	N/A	Æ		×
								-	
(3)									
(b)									

Schedule **R** (Form 990) 2014

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

Page 2,.

36-4629406

Schedule R (Form 990) 2014 STEWARDSHIP ENDOWMENT FUND

Parally Identification of Related Organizations Taxable as a Partnership Complete if the organization answered 'Yes' on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)		Share of total income	(g) Share of end-of-year assets	Disproportionate allocations?	Code V-UBI amount in box 20 of Schedule K-1 (Form	General or managing partner?	r Percentage	<u>B</u> _a
6										3		
8, 1												
(E)												
Parally Identification of Inc. 34 because	Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered 'Yes' on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.	izations ore relate	Taxable as ed organiza	a Corporations treated	n or Trust C as a corpor	complete if tale	he organiza st during the	tion answer tax year.	red 'Yes' on F	orm 990, F	Part IV,	
(a) Name, address, and EIN of related organization	of related organizatio		(b) Primary activity	(c) Legal domicile (state or foreign	(d) Direct controlling	Type of entity (C corp, S corp, or trust)		Share of Stotal income	(g) Share of end-of- year assets	(h) Percentage ownership	(f) Sec 512(b)(13) controlled entity?	اج د
(i)						5					Yes	
8												1
		- - -										
(3)												
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Page 3

Schedule R (Form 990) 2014 Yes No (d)
Method of determining amount involved 150,000. Fair value 144,000. Fair value Ξ l n ٦q 9 ا 1 s 1 b <u>ا</u> 누 9 **–** e 5 무 _ = Ξ 2 If the answer to any of the above is 'Yes,' see the instructions for information on who must complete this line, including covered relationships and transaction thresholds. (c) Amount involved During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV? (b) Transaction type (a-s) Д TEEA5003L 08/22/14 1 Performance of services or membership or fundraising solicitations for related organization(s) m Performance of services or membership or fundraising solicitations by related organization(s) n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule k Lease of facilities, equipment, or other assets from related organization(s) (a)
Name of related organization Juease of facilities, equipment, or other assets to related organization(s) c Gift, grant, or capital contribution from related organization(s) s Other transfer of cash or property from related organization(s) Reimbursement paid by related organization(s) for expenses Reimbursement paid to related organization(s) for expenses r Other transfer of cash or property to related organization(s) **b** Gift, grant, or capital contribution to related organization(s) d Loans or loan guarantees to or for related organization(s) Sharing of paid employees with related organization(s) e Loans or loan guarantees by related organization(s) Purchase of assets from related organization(s) i Exchange of assets with related organization(s) Sale of assets to related organization(s) f Dividends from related organization(s) (1) Scottsdale Bible Church Scottsdale Bible Church BAA BAA 3 ල € 9

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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

(a) Name, address, and ElN of entity	(b) Primary activity	(c)	(d) Predominant	(e) Are all partner	Share of	(g) Share of	(h) Dispropor-	Code V-UBI	(i) General or	(k) Percentage
		(state or foreign country)	related, unre- lated, excluded	section 501(c)(3) organizations?		end-or-year assets		20 of Schedule K-1	managing partner?	ownersnip
			section 512-514)	Yes No			Yes No	(2001)	Yes No	
(I)										
								•		
(2)										
									_	
(3)										
							_			
(4)										
							-			
(c)										
(9)										
6										
		•								
(8)										
			-							
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1										
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PartVIII Supplemental Information
Provide additional information for responses to questions on Schedule R (see instructions).

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