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Form 990-EZ

## **Short Form** Return of Organization Exempt From Income Tax

OMB No 1545 1150

2015

**Open to Public** Inspection

Department of the Treasury

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-EZ and its instructions is at www.irs.gov/form990 Internal Revenue Service A For the 2015 calendar year, or tax year beginning July, 01 2015, and ending June 30 20 B Check if applicable C. Name of omanization D Employer identification number Address change Arizona PIRG Education Fund, Inc. 35-2259362 Room/suite Name change Number and street (or P O box if mail is not delivered to street address) E Telephone number Initial return 130 N Central Ave Ste 202 602-252-9227 Final return/terminated City or town, state or province, country, and ZIP or foreign postal code F Group Exemption Amended return Number ▶ Phoenix, AZ 85004 Application pending Other (specify) G Accounting Method H Check ▶ ☐ if the organization is not I Website ▶ www arizonapirgedfund org required to attach Schedule B J Tax-exempt status (check only one) - 501(c)(3) (Form 990 990-EZ or 990-PF) 501(c) ( ) ◀ (insert no ) 🔲 4947(a)(1) or ✓ Corporation K Form of organization Other ☐ Trust ☐ Association L Add lines 5b, 6c and 7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ 90,852 Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I) Part I Check if the organization used Schedule O to respond to any question in this Part I  $\square$ Contributions, gifts, grants, and similar amounts received 90,849 2 Program service revenue including government fees and contracts. 2 3 Membership dues and assessments 3 0 4 Investment income 4 5a Gross amount from sale of assets other than inventory 5a 5b Less cost or other basis and sales expenses Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) 5c 0 Gaming and fundraising events 6 Gross income from gaming (attach Schedule G if greater than 6a Gross income from fundraising events (not including o of contributions from fundraising events reported on line 1) (attent Schools & if the sum of such gross income and contributions exceeds \$15,000) 6b Less direct expenses from gaming and ¢raışıngγev<u>9</u>en<u>9</u>s 2017 6с 0 Net income or (loss) from gaming and the graising events (add lines) a and 6b and subtract line 6c) 6d Ω Gross sales of inventory, less returns and alloward DEN, UT 7a 7a Less cost of goods sold 7b Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) C 7с 8 Other revenue (describe in Schedule O) 8 0 9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 9 90,852 10 Grants and similar amounts paid (list in Schedule O) 10 1,000 11 Benefits paid to or for members 11 12 Salaries, other compensation, and employee benefits 12 74,750 13 Professional fees and other payments to independent contractors. 13 7,801 14 Occupancy, rent, utilities, and maintenance 14 2,127 15 Printing, publications, postage, and shipping 15 2,703 16 Other expenses (describe in Schedule O) 16 4,122 17 Total expenses. Add lines 10 through 16 17 92,503 18 Excess or (deficit) for the year (Subtract line 17 from line 9) 18 (1.651)Net Assets Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return) 19 110,163 Other changes in net assets or fund balances (explain in Schedule O) 20 Net assets or fund balances at end of year Combine lines 18 through 20 21 108,512

For Paperwork Reduction Act Notice, see the separate instructions



Cat No 10642I



Form 990-EZ (2015)

						rage =
Pai	·					
	Check if the organization used Schedule	O to respond to ar	ny question in this		<del></del>	· · · · ✓
00	Ocale assures and assessments		-	(A) Beginning of year	001	(B) End of year
22 23	Cash, savings, and investments		• • • • • • •	165,913	23	111,560
23				1,277	_	0
25	Total assets			167,190		12,341 123,901
26	Total liabilities (describe in Schedule O)			57,027		15,389
27	Net assets or fund balances (line 27 of column	(B) must agree with	n line 21)	110,163		108,512
Par						` `
	Check if the organization used Schedule	O to respond to ar	ny question in this	Part III	l	Expenses
What	is the organization's primary exempt purpose?	See Schedule O				uired for section c)(3) and 501(c)(4)
as m	ribe the organization's program service accomplist leasured by expenses. In a clear and concise mons benefited, and other relevant information for ea	anner, describe the ach program title.	services provide	d, the number of		nizations, optional for
28	Researching and influencing public policy: staff enga education, and legal and policy development. The top					
	health insurance, transportation & energy efficiency.	·			Ì	
		includes foreign gra			28a	51,899
29	Public education and outreach services: media outre		•		ļ	
	communicating issues in the public interest with tho			Arizona PIRG		
	Education Fund's agenda include: health insurance, (Grants \$ ) If this amount	transportation & ener includes foreign gra		▶ □	29a	22.242
30	Grants \$ ) if this amount	includes loreign gra	ints, check here	···	254	22,242
30						
					1	
	(Grants \$ ) If this amount	ıncludes foreign gra	ints, check here .	▶ 🗆	30a	
31	Other program services (describe in Schedule O)					
	(Grants \$ ) If this amount	includes foreign gra	ints, check here .	<u> ▶_□</u>	31a	
32	Total program service expenses (add lines 28a t		<u> </u>		32	74,141
Par	-				nstruc	ctions for Part IV)
	Check if the organization used Schedule	O to respond to ar			<del></del>	<u> D</u>
	(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISO (rf not paid, enter -0-)		0	Estimated amount of their compensation
Carl	Perry				Ì	
Presi	dent ·	.5hrs/week	-0	<u>-</u>	D-	-0-
	ierzwinski					
	President	.5hrs/week	-0	-	0-	-0-
	Eccelston	55			_	
	/Treasurer	.5hrs/week	-0	•	0-	-0-
Direc	n Nebrich	.5hrs/week	-0		0-	-0-
	Beattie	.SIII SIWEEK		-	<del></del>	
Direc		.5hrs/week	-0	.  .	0-	-0-
	e Brown				1	<u>~</u>
	utive Director	40 hrs/week	42,520.6	6 -	0-	-0-
					1_	
					İ	
		<u> </u>	<del> </del>	<del> </del>		
		1				
				<del> </del>		
		1				
		-	<del> </del>		+-	<del></del> -
		1		1		
		<del> </del>		<del> </del>	+-	<del></del>
		1	1			

Part	•			
	instructions for Part V) Check if the organization used Schedule O to respond to any question in this	Part	V Yes	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O	33	162	\dol{\dol{\dol{\dol{\dol{\dol{\dol{
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the	33		
35a	change on Schedule O (see instructions)	34		✓
	activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a		✓
c	If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35b 35c		1
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36		1
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 27a n/a			
ь 38а	Did the organization file <b>Form 1120-POL</b> for this year?	37b 38a		<b>✓</b>
b	If "Yes," complete Schedule L, Part II and enter the total amount involved 38b	7	e e	
39 a	Section 501(c)(7) organizations. Enter:  Initiation fees and capital contributions included on line 9			
ь 40а	Gross receipts, included on line 9, for public use of club facilities			
b	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b	***************************************	<u> </u>
С	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958	3		
d	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations Enter amount of tax on line 40c reimbursed by the organization	, ;	:: .3 .49>.3	
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e	Ť	
41	List the states with which a copy of this return is filed ► Arizona			
42a	The organization's books are in care of ▶ Leah Perkins Telephone no. ▶ 303	-573-5	995 x	413
	Located at ► 1543 Wazee St., Ste. 400, Denver, CO ZIP + 4 ►	802		
р	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b	Yes	No
	If "Yes," enter the name of the foreign country: ▶ n/a		T T	3.3
	See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
С	At any time during the calendar year, did the organization maintain an office outside the U.S.?  If "Yes," enter the name of the foreign country:	42c		<b>✓</b>
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of <b>Form 1041</b> —Check here and enter the amount of tax-exempt interest received or accrued during the tax year		, l	<b>▶</b> □
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44a	Yes	No ✓
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44b		1
c d	Did the organization receive any payments for indoor tanning services during the year?  If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	44c	<u> </u>	<b>√</b>
45a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a		<b>√</b>

Form	n	<sup>'</sup> 990-EZ	(2015

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_	- 4
Page.	

				·				Yes	No
46		ne organization engage, directly or in adidates for public office? If "Yes," of the control of				of or in opposit	tion (	KAN	1
Part \		Section 501(c)(3) organizations All section 501(c)(3) organization 50 and 51.	s must answer que			-	e tables f	or lin	es
		Check if the organization used Sc	hedule O to respond	to any question in	n this Part	: VI	<del></del>	1	<del>.   </del>
47	Did tl	ne organization engage in lobbying	activities or have a	section 501(h) elec	tion in eff	ect during the	tax [	Yes	No
	year?	If "Yes," complete Schedule C, Par	tll				. 47	1	
48		organization a school as described ii		•			. 48	<u> </u>	1
49a b		ne organization make any transfers t s," was the related organization a se	•	_	nization /	• •	. 49a	ļ	<del>                                     </del>
50		olete this table for the organization's				officers, direct		es an	id key
		oyees) who each received more than							
	(a)	Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MIS	contribu	ealth benefits, tions to employee lans, and deferred mpensation	(e) Estimate other con		
None									
			<del></del>		_				
	<del></del>								
f	Total	number of other employees paid ov	er \$100,000	.~ <b>▶</b> 0	)			-	
51		olete this table for the organization			nt contrac	ctors who each	received	more	than
	\$100	,000 of compensation from the orga	anization. If there is no	one, enter "None."		<del></del>			
	(a)	Name and business address of each independ	dent contractor	(b) Type of s	ervice	(c)	Compensati	ion	
None									
						<del></del>			
				1					
								-	
				-		l l			
ď	Total	number of other independent contra	actors each receiving	over \$100,000	.▶		0		
52	Did 1	the organization complete Schedu	ule A? <b>Note:</b> All se	ection 501(c)(3) or	ganızatıon	s must attach	n a		
		pleted Schedule A	· · · · · ·	· · · · ·	<u> </u>	<u></u>	► ✓ Yes		<u>No</u>
		of perjury, I declare that I have examined this discomplete. Declaration of preparer (other that					nowledge and	belief,	ıt ıs
		Nia E.R				9/15	2017		
Sign		Signature of officer				Date			
Here		Diane Brown, Executive Director Type or print name and title	<del></del>	<del></del>					
<u></u>		Print/Type preparer's name	Preparer's signature		Date		PTIN		
Paid Prep	arer	A the first of a time.				Check L self-emplo	11		
Use		Firm's name ▶				Firm's EIN ▶			
		Firm's address ▶	abaum at a 200			Phone no			
May th	ne IRS	discuss this return with the prepare	r snown above? See	instructions	• •	<u> </u>	Yes		No
							Form <b>99</b>	U-EZ	. (2015)

### SCHEDULE A (Form 990 or 990-EZ)

# **Public Charity Status and Public Support**

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

▶ Attach to Form 990 or Form 990-EZ.

Department of the Treasury Internal Revenue Service

Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

Open to Public Inspection

Name	of the organization					Employer identification	n number
	n PIRG Education Fund, Inc.		<del></del>			35-22	59362
Pai							ns.
	organization is not a private founda				•	•	
1 2	☐ A church, convention of churc ☐ A school described in <b>section</b>						
3	A hospital or a cooperative ho		•			• •	
4	A medical research organization						(iii) Enter the
•	hospital's name, city, and state		man a noop	, G G G G			(iii)i Entor tho
5	An organization operated for section 170(b)(1)(A)(iv). (Com		college or university	owned o	r operate	ed by a government	al unit described in
6	A federal, state, or local gover-	nment or govern	mental unit described	ın sectio	on 170(b)	(1)(A)(v).	
7	An organization that normally described in section 170(b)(1)			oort from	a gover	nmental unit or fron	n the general public
8	A community trust described in	n section 170(b)	(1)(A)(vi). (Complete	art II.)			
9	☐ An organization that normally						
	receipts from activities related						
	support from gross investme						x) from businesses
	acquired by the organization a	•	-		•	·	
10	An organization organized and		-	-			
11	An organization organized and one or more publicly supported						
	the box in lines 11a through 11						
а			• • • • •	•		•	, ,
	the supported organization(sorganization. You must com	s) the power to re	egularly appoint or ele				
b	Type II. A supporting organi	zation supervised	d or controlled in coni	nection w	nth its sui	pported organization	n(s), by having
	control or management of th						
	organization(s). You must co	omplete Part IV,	Sections A and C.				
C	☐ Type III functionally integrates supported organization(s)						y integrated with,
d	<del>_</del> ,.						
	that is not functionally integr						an attentiveness
	requirement (see instructions						
е	functionally integrated, or Ty	pe III non-function					I, Type III
f	Enter the number of supported	_					
g		<del>,</del>		r		<del> </del>	<del></del>
	(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9		rganization ir governing	(v) Amount of monetary support (see	(vi) Amount of other support (see
		1	above (see instructions))	docu	ment?	instructions)	instructions)
		ļ		Yes	No		
(A)					<u> </u>		
(B)							
(C)							
(D)							
(E)							
Tota			7				,

Page 2 Schedule A (Form 990 or 990-EZ) 2015 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to gualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning in) ▶ (a) 2011 **(b)** 2012 (c) 2013 (d) 2014 (e) 2015 (f) Total Gifts. grants, contributions. membership fees received. (Do not include any "unusual grants.") 90,849 78,731 137,280 163,189 110,977 581.026 levied the revenues for organization's benefit and either paid to or expended on its behalf 0 0 The value of services or facilities furnished by a governmental unit to the organization without charge . . . . 0 Total. Add lines 1 through 3. 78,731 137,280 90.849 581,026 The portion of total contributions by (other each person governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) . . . . (78,871) Public support. Subtract line 5 from line 4. 659,897 Section B. Total Support (a) 2011 **(b)** 2012 Calendar year (or fiscal year beginning in) ▶ (c) 2013 (d) 2014 (e) 2015 (f) Total 7 Amounts from line 4 . . . . . . 78.731 137.280 163,189 110,977 90,849 581,026 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar . . . . . 381 394 Net income from unrelated business activities, whether or not the business is regularly carried on 0 0 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) . . . . 0 Total support. Add lines 7 through 10 11.600 11 581,420 Gross receipts from related activities, etc. (see instructions) . . . . . 12 12 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public support percentage for 2015 (line 6, column (f) divided by line 11, column (f)) . . . . 96 % 14 Public support percentage from 2014 Schedule A, Part II, line 14 . . . . . . 15 89 % 331/3% support test - 2015. If the organization did not check the box on line 13, and line 14 is 331/3% or more, check this 16a 331/3% support test - 2014. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3% or more. check this box and **stop here.** The organization qualifies as a publicly supported organization 10%-facts-and-circumstances test - 2015. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported b 10%-facts-and-circumstances test - 2014. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here.

Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly 

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

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## Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

	if the Organization falls to quality	under the te	JOIG HOLEU DEI	Ow, picase C	ompiete rait	11./	
	on A. Public Support				· · · · · · · · · · · · · · · · · · ·		
	dar year (or fiscal year beginning in)	(a) 2011	<b>(b)</b> 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1	Gifts, grants, contributions, and membership fees						
_	received. (Do not include any "unusual grants.")			ļ			
2	Gross receipts from admissions, merchandise sold or services performed, or facilities						
	furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the			ļ		ļ	
	organization's benefit and either paid						
_	to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the organization without charge						
_			<del>                                     </del>	<del>                                     </del>	<del> </del>	<del> </del>	
6 7a	<b>Total.</b> Add lines 1 through 5		<del> </del>	ļ	<del> </del>	<del> </del>	
7a	received from disqualified persons .					1	
L	· ' '		+	<del>                                     </del>	-	<del> </del>	<del></del>
b	Amounts included on lines 2 and 3 received from other than disqualified						
	persons that exceed the greater of \$5,000		1		1	1	
	or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b			<del>                                     </del>	<del> </del>	<del> </del>	
8	Public support. (Subtract line 7c from	P. S.		· 30:	7° 3		<del></del>
	line 6.)						
Secti	on B. Total Support					<u> </u>	
Calen	dar year (or fiscal year beginning in)	(a) 2011	<b>(b)</b> 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends,			,			
	payments received on securities loans, rents,						
	royalties and income from similar sources .		ļ				
b	Unrelated business taxable income (less			1			
	section 511 taxes) from businesses						
	acquired after June 30, 1975		ļ		Ļ	ļ	
_	Add lines 10a and 10b		<u> </u>	<u> </u>	<del></del> _		
11	Net income from unrelated business						
	activities not included in line 10b, whether			1			
	or not the business is regularly carried on		-	<del>                                     </del>	<b>_</b>		
12	Other income. Do not include gain or					ļ	
	loss from the sale of capital assets (Explain in Part VI)						
12	Total support. (Add lines 9, 10c, 11,	<del></del>	<del>                                     </del>	<del> </del>	<del> </del>	<del> </del>	
13	and 12.)			1			
14	First five years. If the Form 990 is for the	e organizatio	n's firet secon	d third fourth	1 Or fifth tay w	ear as a section	n 501(c)(3)
. •	organization, check this box and stop he	_			-		55 ·(5)(5)
Secti	on C. Computation of Public Suppor						
15	Public support percentage for 2015 (line 8			13, column (f))		15	%
16	Public support percentage from 2014 Sch		-			16	%
-	on D. Computation of Investment Inc						
17	Investment income percentage for 2015 (	line 10c, colu	mn (f) divided b	oy line 13, colu	mn (f))	17	%
18	Investment income percentage from 2014					18	%
19a	331/3% support tests-2015. If the organ						•
	17 is not more than 331/3%, check this box		-	-		_	_
þ	331/3% support tests—2014. If the organiz						
	line 18 is not more than 331/3%, check this I		_			· -	_
20	Private foundation. If the organization di	d not check a	a box on line 14	1, 19a, or 19b,	check this box	and see instru	ctions ► 🗆

Yes No

#### Part IV Supporting Organizations

(Complete only if you checked a box in line 11 on 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

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation if historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- 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.
- 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.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 11a or 11b in Part I, answer (b) and (c) below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- 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.
- Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in **Part VI**, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **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?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) 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.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 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 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in **Part VI.**
- c Did a disqualified person (as defined in line 9a) 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.**
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
  - **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.)

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Schedul	le A (Form 990 or 990-EZ) 2015		F	Page <b>5</b>
Part	Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			لــــا
L	below, the governing body of a supported organization?	11a		—
	A family member of a person described in (a) above?	11b		-
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.  on B. Type I Supporting Organizations	11c		Щ
ocou	on B. Type I dupporting Organizations		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> 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		The state of the s
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 <b>Part VI</b> how providing such benefit carned out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.	2		3.77
Section	on C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
Section	on D. All Type III Supporting Organizations			
			Yes	Νο
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, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1	1 1 1 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 <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s)	2	6.	
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 <b>Part VI</b> the role the organization's supported organizations played in this regard.	3		
Section	on 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 i	nstru	tions	3):
a b c	☐ The organization satisfied the Activities Test. Complete line 2 below. ☐ 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 (s			,
2	Activities Test. Answer (a) and (b) below.	Γ	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 <b>Part VI identify those supported organizations and explain</b> how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in <b>Part VI</b> the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.			
3 a	Parent of Supported Organizations. <i>Answer (a) and (b) below.</i> Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>	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 <b>Part VI</b> the role played by the organization in this regard.	ة 3b		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functional Part V Type III Non-Function Part V Type III Non	jan	izations	
1 Check here if the organization satisfied the Integral Part Test as a qualifying			nstructions. All
other Type III non-functionally integrated supporting organizations must con	mpi	ete Sections A through E.	1 6 6
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or			
collection of gross income or for management, conservation, or			
maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see	14. 13.		7,4
instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
<b>b</b> Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other	Ž		
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,	Π		
see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3	24 / 18 M	
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	S. S	·L
7 Check here if the current year is the organization's first as a non-functional	y-ır	ntegrated Type III supportin	g organization (see
instructions).			

FEI	The state of the s	(3) S	uppo	orting	g Orgar	nizati	ons (	contin	ued)				
	tion D - Distributions										Curre	ent Yea	ar
1	Amounts paid to supported organizations to accomplish	exer	npt p	urpos	ses								
2	Pare to portorni doubtly that directly fulfillers ex	emp	t pur	oses	of supp	orted							
	organizations, in excess of income from activity					_				1			
3	Administrative expenses paid to accomplish exempt pur	pose	s of s	suppo	rted org	anızat	ions			1			
4	paid to degains exempt dec assets												
5	Qualified set-aside amounts (prior IRS approval required	)											
6	Other distributions (describe in Part VI). See instructions												
	Total annual distributions. Add lines 1 through 6.												
8	Distributions to attentive supported organizations to which	ch the	e org	anıza	tion is re	spons	ive						
	(provide details in Part VI) See instructions.					_							
9	Distributable amount for 2015 from Section C, line 6									T -			
10	Line 8 amount divided by Line 9 amount												
_				(i)				ii)				(iii)	
5	ection E - Distribution Allocations (see instructions)	Exc	cess		ibutions	Und	derdis	tribut	ions	1		butabl	e
				D13(1)	ibuuqiis		Pre-	2015		A	moun	t for 20	<b>)15</b>
_1_	Distributable amount for 2015 from Section C, line 6	8,	<b>%</b>	Ą.,	<b>1</b> %	Va.	á i	1	( <b>1</b> )				
2	Underdistributions, if any, for years prior to 2015	2	1							10. 1	4	- 2	(\$ <b>1</b>
	(reasonable cause required-see instructions)	1	7								44		
_3_	Excess distributions carryover, if any, to 2015:	1	78	1	<b>4.</b> F	-\$\$}1	1/4	1	i ii	1		· %	1
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b				k V	. '>	, r		174	( 9	1	¥3.	<del>1</del> <del>3</del>	* ×.
<u>c</u>		-	, . , .				P 3	30	1. 1		300	<u> </u>	
<u>d</u>	From 2013 . ~	ĺ.	<b>1</b> 4.		<b>%</b> %	¥. :	i ž		<u>S</u>				
e	From 2014		4.	<u> </u>	1		3. 9		1		1 1		¥. ?
f	Total of lines 3a through e					Tarith.	F	. 4	1			2 3	
g_	Applied to underdistributions of prior years	. Ay	Æ.	***	1 %						<u> </u>		1
<u>h</u>	Applied to 2015 distributable amount	<b>%</b>	1	1	. A. K.	盤	700	ŭ a	A. Ser		271 882		538.5 /8
i_	Carryover from 2010 not applied (see instructions)	*,'	18	4	3 ' 17	3.	#	F 19	\$	1	30 I	81	\$ \
<u>         j                           </u>	Remainder Subtract lines 3g, 3h, and 3i from 3f					1.0		à ä.	W.				3 1
4	Distributions for 2015 from Section		:70	T.	1	.4h		to M.	Â	1.0	Y: - 1	100.0	
	D, line 7. \$					4		À Á					
a	Applied to underdistributions of prior years	·	1	1						- S	iei ge		
b	Applied to 2015 distributable amount	-		a.	Jai		ži,		k é.				
c	Remainder Subtract lines 4a and 4b from 4.					漁、	<b>3</b>	2 1c		\$	* X		· 1
5	Remaining underdistributions for years prior to 2015, if	- %,	- (1)	1 469	(4 <sup>2</sup> ) (2)	7000	· · · · ·	** **	<u> </u>		* 1	<u>,                                      </u>	- X
	any Subtract lines 3g and 4a from line 2 (if amount		- 3							10	A		
	greater than zero, see instructions).		- Ays										1.
6	Remaining underdistributions for 2015. Subtract lines 3h	uni.	***	***	4.3	ĝá:	5	€ &.			<u> </u>		<u>. %. !</u>
	and 4b from line 1 (if amount greater than zero, see	<b>.</b>	X9	72		A.C.	. 1	i ji					
	instructions).	, ş	<b>.</b>	Ži		200	,)*	. "					
7	Excess distributions carryover to 2016. Add lines 3		<u>~</u> ·	38 Y.		3377			4.7	- W		<u></u> ,	3 71
	and 4c.					<b>1</b>	\$ }	• >{	, Ž	٦. په	*	¥ 1	.
8	Breakdown of line 7:		- G	1	. 3	12			* · · · · · · · · · · · · · · · · · · ·	. «	- 73 - 45 #	<u> </u>	- 3
а		140	<u> </u>	3.7		* *		**	<u> </u>	; 1	<u> </u>	S\$4 "0	- 1
b		967	<u>~</u>		- A - A - A - A - A - A - A - A - A - A	<u>***                                  </u>	4/2	**			7/4 10		%   
С	Excess from 2013	·徐蒙	3					, , , , , , , , , , , , , , , , , , , ,	& \ <b>(</b> . )	. *	<u> </u>		
d	Excess from 2014	18	1/2	**	<u>.</u>				3	1 13			3/
е	Excess from 2015	1	ì.			* 3 * 2	*		3.	: <u>%</u>		- 75	<del></del>
		260	446	Am û	.us , 🖔 [	55c	**	,	%	<u> </u>	5 8	· '}	الت

### **SCHEDULE C** (Form 990 or 990-EZ)

# **Political Campaign and Lobbying Activities**

For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No 1545-0047 2015

Open to Public Inspection

Department of the Treasury Internal Revenue Service

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ▶ Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B.
- · Section 527 organizations: Complete Part I-A only

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)). Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)). Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes." on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part IV, line 35c (Proxy

Section 501(c)(4), (5), or (6) organizations. Complete Part III  Name of organization  Arizona PIRG Education Fund, Inc.  Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.  Provide a description of the organization's direct and indirect political campaign activities in Part IV  Political expenditures  Volunteer hours  Part I-B Complete if the organization is exempt under section 501(c)(3).  Enter the amount of any excise tax incurred by the organization under section 4955  Enter the amount of any excise tax incurred by organization managers under section 4955  If the organization incurred a section 4955 tax, did it file Form 4720 for this year?  Was a correction made?  If "Yes," describe in Part IV  Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).  Enter the amount directly expended by the filing organization for section 527 exempt function	☐ No
Arizona PIRG Education Fund, Inc.  Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.  1 Provide a description of the organization's direct and indirect political campaign activities in Part IV  2 Political expenditures	∏ No
Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.  1 Provide a description of the organization's direct and indirect political campaign activities in Part IV  2 Political expenditures	∏ No
Part I-B Complete if the organization is exempt under section 501(c)(3).  Enter the amount of any excise tax incurred by the organization managers under section 4955  If the organization incurred a section 4955 tax, did it file Form 4720 for this year?  Was a correction made?  If "Yes," describe in Part IV  Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).  Enter the amount directly expended by the filing organization for section 527 exempt function	∏ No
Part I-B Complete if the organization is exempt under section 501(c)(3).  1 Enter the amount of any excise tax incurred by the organization under section 4955  2 Enter the amount of any excise tax incurred by organization managers under section 4955  3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year?  4 Was a correction made?  5 If "Yes," describe in Part IV  Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).  1 Enter the amount directly expended by the filing organization for section 527 exempt function	∏ No
Part I-B Complete if the organization is exempt under section 501(c)(3).  1 Enter the amount of any excise tax incurred by the organization under section 4955 . ▶ \$  2 Enter the amount of any excise tax incurred by organization managers under section 4955 . ▶ \$  3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year?	∏ No
Part I-B Complete if the organization is exempt under section 501(c)(3).  1 Enter the amount of any excise tax incurred by the organization under section 4955 .   2 Enter the amount of any excise tax incurred by organization managers under section 4955 .   3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year?	∏ No
1 Enter the amount of any excise tax incurred by the organization under section 4955 .   2 Enter the amount of any excise tax incurred by organization managers under section 4955 .   3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year?	∏ No
2 Enter the amount of any excise tax incurred by organization managers under section 4955 .  3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year?	∏ No
If the organization incurred a section 4955 tax, did it file Form 4720 for this year?	∏ No
4a Was a correction made?  b If "Yes," describe in Part IV  Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).  1 Enter the amount directly expended by the filing organization for section 527 exempt function	∏ No
b If "Yes," describe in Part IV  Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).  1 Enter the amount directly expended by the filing organization for section 527 exempt function	
Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).  1 Enter the amount directly expended by the filing organization for section 527 exempt function	
1 Enter the amount directly expended by the filing organization for section 527 exempt function	
activities A de la constant de la co	
activities	
2 Enter the amount of the filing organization's funds contributed to other organizations for section	
527 exempt function activities	
3 Total exempt function expenditures Add lines 1 and 2. Enter here and on Form 1120-POL,	
line 17b	
4 Did the filing organization file Form 1120-POL for this year?	☐ No
5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the	the filing
organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also	
the amount of political contributions received that were promptly and directly delivered to a separate political organization,	
as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Pa	Part IV.
(a) Name (b) Address (c) EIN (d) Amount paid from (e) Amount of politic	olitical
filing organization's contributions received	ved and
funds If none, enter -0- promptly and directly delivered to a separate	
political organization	tion If
none, enter -0-	<u></u>
(1)	
(2)	
(3)	
(4)	
LTP(	
(7)	
(5)	

Pa	ırt	II-A	Complete if the organization section 501(h)).	is exempt under section 501(c)(3) and filed	d Form 5768 (ele	ection under
A	Check ▶ ☐ If the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's					oup member's
	name, address, EIN, expenses, and share of excess lobbying expenditures).					
В	Ct	neck 🕨		cked box A and "limited control" provisions a	apply.	· · · · · · · · · · · · · · · · · · ·
			<del>-</del>	ying Expenditures	(a) Filing	(b) Affiliated
			(The term "expenditures" me	ans amounts paid or incurred.)	organization's totals	group totals
1	1a Total lobbying expenditures to influence public opinion (grass roots lobbying)				0	
	b	Total lobbying expenditures to influence a legislative body (direct lobbying)			0	
	С	Total lobbying expenditures (add lines 1a and 1b)			0	
	d	Other exempt purpose expenditures			92,503	
	е	Total exempt purpose expenditures (add lines 1c and 1d)			92,503	
	f	-	•	he amount from the following table in both		
	_	colum	ns.	-	18,501	
	L	If the ar	mount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	L	Not ove	r \$500,000	20% of the amount on line 1e.		
	L	Over \$5	00,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
	L	Over \$1	,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		(1)
	L	Over \$1	,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
		Over \$1	7,000,000	\$1,000,000		
	g	Grassroots nontaxable amount (enter 25% of line 1f)			4,625	
	h				-0-	-
	i		ct line 1f from line 1c. If zero or les	•	-0-	
	j			on either line 1h or line 1i, did the organization	file Form 4720	
reporting section 4911 tax for this year?					Yes No	
	4-Year Averaging Period Under section 501(h)					

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below.

See the separate instructions for lines 2a through 2f.)

	Lobby	ing Expenditures	During 4-Year Av	veraging Period		
	Calendar year (or fiscal year beginning in)	(a) 2012	<b>(b)</b> 2013	(c) 2014	<b>(d)</b> 2015	(e) Total
2a	Lobbying nontaxable amount	0	0	0	^ 18,501	18,501
b	Lobbying ceiling amount (150% of line 2a, column (e))					27,752
С	Total lobbying expenditures	0	0	0	0	0
d	Grassroots nontaxable amount	0	0	0	4,625	4,625
е	Grassroots ceiling amount (150% of line 2d, column (e))	\$ *** <b>!</b>				6,938
f	Grassroots lobbying expenditures	0	0	0	0	0

Schedule C (Form 990 or 990-EZ) 2015

Part	(election under section 501(h)).	,		
For e	"Yes," response on lines 1a through 1i below, provide in Part IV a detailed		3)	(b)
descri	ption of the lobbying activity.	Yes	No	Amount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of	()		
а	Volunteers?			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
С	Media advertisements?			
đ	Mailings to members, legislators, or the public?			
e	Publications, or published or broadcast statements?			
f	Grants to other organizations for lobbying purposes?			<del></del>
g	Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	-		
h i	Other activities?			
i	Total. Add lines 1c through 1i	1	vi.	<del></del>
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		200	
b	If "Yes," enter the amount of any tax incurred under section 4912	× 1.	82	
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912.  If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	<u> </u>		
Part	III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)	;)(5), (	or se	ction
	501(c)(6).			
				Yes No
1	Were substantially all (90% or more) dues received nondeductible by members?	-	•	1
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	•	•	2
3 Part	Did the organization agree to carry over lobbying and political expenditures from the prior year?  III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)	· ·	<del></del>	3
arc	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," C answered "Yes."			
1	Dues, assessments and similar amounts from members		1	
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts political expenses for which the section 527(f) tax was paid).	s of	1	
а	Current year		2a	
b	Carryover from last year		2b	
С	Total		2c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .		3	Ļ
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of excess does the organization agree to carryover to the reasonable estimate of nondeductible lobb			
	and political expenditure next year?		4	
5	Taxable amount of lobbying and political expenditures (see instructions)	•	5	
Part				
	le the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated gro	oup lis	t); Pai	rt II-A, lines 1 and
2 (see	instructions); and Part II-B, line 1. Also, complete this part for any additional information.			
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chedule C (Form 990 or 990-EZ) 2015 <sup>1</sup> Page <b>4</b>					
Part IV	Supplemental Information (continued)				
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### SCHEDULE O (Form 990 or 990-EZ)

## Supplemental Information to Form 990 or 990-EZ

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

20**15** 

Department of the Treasury Internal Revenue Service Name of the organization ► Attach to Form 990 or 990-EZ.

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

Open to Public Inspection

Employer identification number

Arizon PIRG Education Fund, Inc.	35-2259362			
990-EZ: Part I #10 Grant out to The American Museum of Tort Law (address: 654 Main St, Winsted, CT 06098) to support their grand opening.				
990-EZ: Part I	·			
#16 - Telephone \$1,016; Travel \$1,465; Conferences & Meetings \$105; Depreciation \$215; Insurance \$54	/1;			
Filing Fees \$10; Coalition Dues \$770				
990-EZ: Part II				
#24 - Accounts receivable \$11,330; Prepaid Expenses \$1,011				
#26 - Accounts Payable \$14,375; Payroll Liabilities \$1,014				
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990-EZ: Part III				
Arizona PIRG Education Fund's primary exempt purpose is to work to protect the consumers and prom	iote good government. We investigate			
problems, craft solutions, educate the public, and offer citizens meaningful opportunites for civic particles	cipation .			
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Schedule O (Form 990 or 990-EZ) (2015)	Page 2
Name of the organization	Employer identification number
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