foundations)

A For the 2016 calendar year, or tax year beginning 07-01-2016 , and ending 06-30-2017

DLN: 93493093011568

2016

OMB No 1545-0047

Form **990**

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

▶ 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

Department of the Treasury Internal Revenue Service

Open to Public . Inspection

eck ıf applıcable ddress change	C Name of organization UNITED NATIONS ASSOC OF S AZ BETTER WORLD FUND	D Employer identification number 23-7181922
ame change nitial return nal	Doing business as	_
rn/terminated nended return	Number and street (or P O box if mail is not delivered to street address) Room/suite 6242 E SPEEDWAY BLVD	E Telephone number
plication pending	City or town, state or province, country, and ZIP or foreign postal code Tucson, AZ 857125129	C Cross receipts # E29 6E1
	F_Name and address of principal officer.	G Gross receipts \$ 538,651
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Form	990 (2016)						Page 2
Par	t IIII Statement of Progra	am Service	Accomplis	hments			
	Check if Schedule O cont	ains a response	or note to	any line in this Part III			. 🗆
1	Briefly describe the organization	's mission					
Provi	ide educational services and inform	n the public ab	out the Unite	ed Nations and how it fur	nctions in a non-political way		
	Did the organization undertake a	any significant i	nrogram ser	vices during the year wh	ich were not listed on		
_	the prior Form 990 or 990-EZ?		_		· · · · · · · · ·	□ Yes 🗸	No
	If "Yes," describe these new ser	vices on Schedi	ule O				
3	Did the organization cease cond	ucting, or make	significant	changes in how it conduc	cts, any program		
	services?					Yes	✓ No
	If "Yes," describe these changes	on Schedule C					
4) organizations	are required	to report the amount of	argest program services, as measur grants and allocations to others, th		•
4a	(Code) (Exp	enses \$	241,556	ıncludıng grants of \$) (Revenue \$	537,570)	
	See Additional Data						
4b	(Code) (Exp	enses \$		including grants of \$) (Revenue \$)	
	-						
4c	(Code) (Exp	enses \$		ıncludıng grants of \$) (Revenue \$)	
70	(Code)(Lxp	enses \$		including grants or \$) (Neverlue \$,	
4d	Other program services (Describ	ne in Schedule i	0)				
·u	(Expenses \$		o <i>)</i> ng grants of	\$) (Revenue \$)	
4e	Total program service expen		241,5	*		•	

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14b

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Yes

Yes

Yes

Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? . . .

or X as applicable

Section 501(c)(3) organizations.

5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,

Did the organization receive or hold a conservation easement, including easements to preserve open space.

Did the organization maintain collections of works of art, historical treasures, or other similar assets?

assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII

Was the organization included in consolidated, independent audited financial statements for the tax year?

14a Did the organization maintain an office, employees, or agents outside of the United States?

column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)

lines 1c and 8a? If "Yes," complete Schedule G, Part II

the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II

to provide advice on the distribution or investment of amounts in such funds or accounts?

a Did the organization report an amount for land, buildings, and equipment in Part X, line 10?

12a Did the organization obtain separate, independent audited financial statements for the tax year?

13 Is the organization a school described in section 170(b)(1)(A)(II)? If "Yes." complete Schedule E

or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV . . .

assessments, or similar amounts as defined in Revenue Procedure 98-19?

Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year?

Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right

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

Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments,

Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its

Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total

Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported

Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏

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

If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII,

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

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

permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 🕏 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX,

Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates

No No Nο

Page 3

Nο No Nο No

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No

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No

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No

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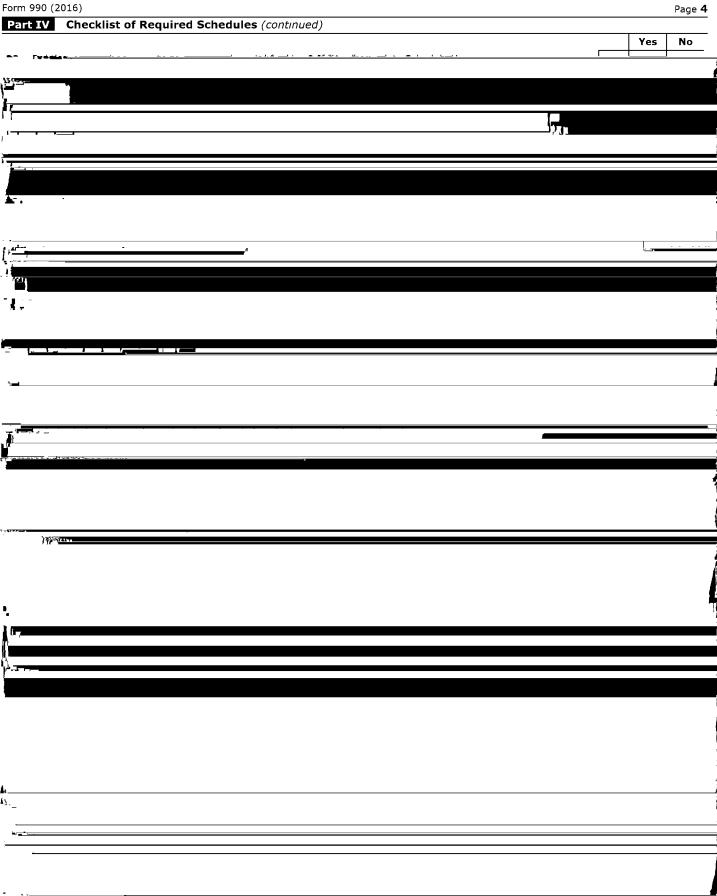
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No

Form 990 (2016)



orm '	990 (2016)			Page 5
Par	t V Statements Regarding Other IRS Filings and Tax Compliance			_
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 0 Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	Yes	
	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by			
	this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note.If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
b	If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	30		
·	If res, to fine 3a of 3b, and the organization me form 6000-1.	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as			
	required?	7g		No
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		No
8	Sponsoring organizations maintaining donor advised funds.	/"		110
•	Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during			
	the year?	8		No
9a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		No
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		No
LO	Section 501(c)(7) organizations. Enter			
	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			
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
L2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
L 3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for			
	additional information the organization must report on Schedule O Enter the amount of reserves the organization is required to maintain by the states in	13a		
	which the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		<u> </u>
_		=	orm 99	n (2016

Par	t VI	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions	" respo	nse to li	nes			
		Check if Schedule O contains a response or note to any line in this Part VI			✓			
Se	ction	A. Governing Body and Management						
				Yes	No			
1a	Enter	the number of voting members of the governing body at the end of the tax year						
	body,	ere are material differences in voting rights among members of the governing , or if the governing body delegated broad authority to an executive committee or ar committee, explain in Schedule O						
b	Enter	the number of voting members included in line 1a, above, who are independent 1b 15						
2		iny officer, director, trustee, or key employee have a family relationship or a business relationship with any other er, director, trustee, or key employee?	2		No			
3	he organization delegate control over management duties customarily performed by or under the direct supervision ficers, directors or trustees, or key employees to a management company or other person?	3		No				
4	4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?							
5	Did th	he organization become aware during the year of a significant diversion of the organization's assets?	5		No			
6	Did th	he organization have members or stockholders?	6		No			
7a		he organization have members, stockholders, or other persons who had the power to elect or appoint one or more						
		bers of the governing body?	7a		No			
	perso	iny governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or ons other than the governing body?	7b		No			
	the fo	he organization contemporaneously document the meetings held or written actions undertaken during the year by ollowing						
	-	governing body?	8a	Yes				
		committee with authority to act on behalf of the governing body?	8b	Yes				
	orgar	ere any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the nization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No			
Se	ction	B. Policies (This Section B requests information about policies not required by the Internal Revenue	e Code	∍.)				
	D. J ±	ha annon makan kana kana kana kana kana kana an affikakan	10-	Yes	No			
		he organization have local chapters, branches, or affiliates?	10a	Yes	No No			
b	If "Ye	es," did the organization have written policies and procedures governing the activities of such chapters, affiliates, oranches to ensure their operations are consistent with the organization's exempt purposes?	10a 10b	Yes				
b 11a	If "Ye and b Has t form?	es," did the organization have written policies and procedures governing the activities of such chapters, affiliates, oranches to ensure their operations are consistent with the organization's exempt purposes? the organization provided a complete copy of this Form 990 to all members of its governing body before filing the		Yes				
b 11a b	If "Ye and b Has t form? Descr	ces," did the organization have written policies and procedures governing the activities of such chapters, affiliates, oranches to ensure their operations are consistent with the organization's exempt purposes? The organization provided a complete copy of this Form 990 to all members of its governing body before filing the process. If any, used by the organization to review this Form 990	10b		No			
b 11a b 12a	If "Ye and be Has to form?" Descripted the Were	es," did the organization have written policies and procedures governing the activities of such chapters, affiliates, branches to ensure their operations are consistent with the organization's exempt purposes? The organization provided a complete copy of this Form 990 to all members of its governing body before filing the ribe in Schedule O the process, if any, used by the organization to review this Form 990	10b 11a 12a	Yes	No			
b 11a b 12a b	If "Ye and b Has t form? Descr Did th Were confli	es," did the organization have written policies and procedures governing the activities of such chapters, affiliates, pranches to ensure their operations are consistent with the organization's exempt purposes? The organization provided a complete copy of this Form 990 to all members of its governing body before filing the process. If any, used by the organization to review this Form 990 to the organization have a written conflict of interest policy? If "No," go to line 13 to officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to licts?	10b 11a 12a 12b		No			
b 11a b 12a b	If "Ye and b Has t form? Described the Were conflicitly bid the Scheet	es," did the organization have written policies and procedures governing the activities of such chapters, affiliates, branches to ensure their operations are consistent with the organization's exempt purposes? The organization provided a complete copy of this Form 990 to all members of its governing body before filing the prize in Schedule O the process, if any, used by the organization to review this Form 990 to the organization have a written conflict of interest policy? If "No," go to line 13 to officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to licts? The organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in dule O how this was done.	10b 11a 12a 12b 12c	Yes Yes	No			
b 11a b 12a b c	If "Ye and b Has t form? Descr Did th Were conflict Did th Scheet Did th	ces," did the organization have written policies and procedures governing the activities of such chapters, affiliates, branches to ensure their operations are consistent with the organization's exempt purposes? The organization provided a complete copy of this Form 990 to all members of its governing body before filing the prize in Schedule O the process, if any, used by the organization to review this Form 990 to the organization have a written conflict of interest policy? If "No," go to line 13 to the organization have a written conflict of interest policy? If "No," go to line 13 to the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in dule O how this was done to the organization have a written whistleblower policy?	10b 11a 12a 12b 12c 13	Yes Yes	No			
b 111a b 12a b c 13	If "Ye and b Has t form? Descr Did th Were conflicted by the Did th Did th Did th	ces," did the organization have written policies and procedures governing the activities of such chapters, affiliates, branches to ensure their operations are consistent with the organization's exempt purposes? The organization provided a complete copy of this Form 990 to all members of its governing body before filing the prize in Schedule O the process, if any, used by the organization to review this Form 990 to all members of its governing body before filing the prize in Schedule O the process, if any, used by the organization to review this Form 990 to all members of its governing body before filing the prize in the organization have a written conflict of interest policy? If "No," go to line 13 to a line 14 to a line 14 to a line 15 to a line 15 to a line 15 to a line 16 to a line 17 to a line 18	10b 11a 12a 12b 12c	Yes Yes	No			
b 11a b 12a b c 13 14	If "Ye and be has to form? Described the were conflicted to be	es," did the organization have written policies and procedures governing the activities of such chapters, affiliates, branches to ensure their operations are consistent with the organization's exempt purposes? The organization provided a complete copy of this Form 990 to all members of its governing body before filing the process. If any, used by the organization to review this Form 990 to the organization have a written conflict of interest policy? If "No," go to line 13 to enterest policy? If "No," go to line 13 to enterest policy? If "No," go to line 13 to enterest that could give rise to licts? The organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in dule O how this was done to the organization have a written whistleblower policy? The organization have a written document retention and destruction policy? The organization have a written document retention and destruction policy? The process for determining compensation of the following persons include a review and approval by independent ons, comparability data, and contemporaneous substantiation of the deliberation and decision?	10b 11a 12a 12b 12c 13 14	Yes Yes	No No			
b 11a b 12a c 13 14 15	If "Ye and be Has to form?" Described the Were conflicted the Did the Did the Did the Did the person The conflicted the Did the person the conflicted the Did	es," did the organization have written policies and procedures governing the activities of such chapters, affiliates, branches to ensure their operations are consistent with the organization's exempt purposes? The organization provided a complete copy of this Form 990 to all members of its governing body before filing the control of the process, if any, used by the organization to review this Form 990 to the organization have a written conflict of interest policy? If "No," go to line 13 to enficiers, directors, or trustees, and key employees required to disclose annually interests that could give rise to lock? The organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in dule O how this was done to enganization have a written whistleblower policy? The organization have a written document retention and destruction policy? The organization have a written document retention and destruction policy? The process for determining compensation of the following persons include a review and approval by independent ons, comparability data, and contemporaneous substantiation of the deliberation and decision? Torganization's CEO, Executive Director, or top management official	10b 11a 12a 12b 12c 13 14	Yes Yes	No No No			
b 11a b 12a c 13 14 15	If "Ye and be Has to form? Described the School of the Did the Did the Did the Did the Did the Other Other Did the	es," did the organization have written policies and procedures governing the activities of such chapters, affiliates, branches to ensure their operations are consistent with the organization's exempt purposes? The organization provided a complete copy of this Form 990 to all members of its governing body before filing the process of the organization provided a complete copy of this Form 990 to all members of its governing body before filing the process of the organization have a written conflict of interest policy? If "No," go to line 13 to officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to lock? The organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in dule O how this was done The organization have a written whistleblower policy? The organization have a written document retention and destruction policy? The process for determining compensation of the following persons include a review and approval by independent ons, comparability data, and contemporaneous substantiation of the deliberation and decision? Torganization's CEO, Executive Director, or top management official Torfficers or key employees of the organization	10b 11a 12a 12b 12c 13 14	Yes Yes	No No			
b 11a b 12a c 13 14 15 a b	If "Ye and be Has to form? Described the Scheet Did the Did the Did the Did the Did the Confliction of the C	es," did the organization have written policies and procedures governing the activities of such chapters, affiliates, branches to ensure their operations are consistent with the organization's exempt purposes? The organization provided a complete copy of this Form 990 to all members of its governing body before filing the prices. The organization provided a complete copy of this Form 990 to all members of its governing body before filing the prices. The organization have a written conflict of interest policy? If "No," go to line 13	10b 11a 12a 12b 12c 13 14	Yes Yes	No No No			
b 11a b 12a c 13 14 15 a b	If "Ye and be Has to form? Described the School of the Did the	es," did the organization have written policies and procedures governing the activities of such chapters, affiliates, branches to ensure their operations are consistent with the organization's exempt purposes? The organization provided a complete copy of this Form 990 to all members of its governing body before filing the cribe in Schedule O the process, if any, used by the organization to review this Form 990 the organization have a written conflict of interest policy? If "No," go to line 13 to efficiers, directors, or trustees, and key employees required to disclose annually interests that could give rise to licts? The organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in dule O how this was done to ensure the organization have a written whistleblower policy? The organization have a written document retention and destruction policy? The process for determining compensation of the following persons include a review and approval by independent ones, comparability data, and contemporaneous substantiation of the deliberation and decision? Torganization's CEO, Executive Director, or top management official to ensure the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a ble entity during the year?	10b 11a 12a 12b 12c 13 14	Yes Yes	No No No			
b 11a b 12a c 13 14 15 a b	If "Ye and be Has to form? Described the School of the Did the person of the Did the D	es," did the organization have written policies and procedures governing the activities of such chapters, affiliates, branches to ensure their operations are consistent with the organization's exempt purposes? The organization provided a complete copy of this Form 990 to all members of its governing body before filing the cribe in Schedule O the process, if any, used by the organization to review this Form 990	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes	No No No No			
b 11a b 12a b c 13 14 15 a b	If "Ye and be the form? Did the School of the Did the School of the Did the Did the Did the School of the Did the Did the School of the Did th	es," did the organization have written policies and procedures governing the activities of such chapters, affiliates, branches to ensure their operations are consistent with the organization's exempt purposes? The organization provided a complete copy of this Form 990 to all members of its governing body before filing the process. If any, used by the organization to review this Form 990 to the organization have a written conflict of interest policy? If "No," go to line 13 to efficiers, directors, or trustees, and key employees required to disclose annually interests that could give rise to licts? The organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in dule 0 how this was done the organization have a written whistleblower policy? The organization have a written document retention and destruction policy? The organization have a written document retention and destruction policy? The organization have a written document retention and destruction policy? The organization have a written document retention and destruction policy? The organization have a written document retention and destruction policy? The organization have a written document retention and destruction policy? The organization have a written document of the following persons include a review and approval by independent organization's CEO, Executive Director, or top management official to organization and decision? The organization or the organization or the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a olie entity during the year?	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes	No No No No No			
b 11a b 12a c 13 14 15 a b	If "Ye and be the form? Did the School of the Did the The Cother If "Ye Did the Taxab If "Ye in join status.	es," did the organization have written policies and procedures governing the activities of such chapters, affiliates, branches to ensure their operations are consistent with the organization's exempt purposes? the organization provided a complete copy of this Form 990 to all members of its governing body before filing the companization have a written conflict of interest policy? If "No," go to line 13	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes	No No No No No			
b 11a b 12a b c 13 14 15 a b	If "Ye and be the form? Did the School of the Did the Texas Did the Di	es," did the organization have written policies and procedures governing the activities of such chapters, affiliates, branches to ensure their operations are consistent with the organization's exempt purposes? The organization provided a complete copy of this Form 990 to all members of its governing body before filing the consistent with the organization to review this Form 990 to the organization have a written conflict of interest policy? If "No," go to line 13 to efficiers, directors, or trustees, and key employees required to disclose annually interests that could give rise to cits? The organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in dule O how this was done. The organization have a written whistleblower policy? The organization have a written document retention and destruction policy? The organization have a written document retention and destruction policy? The process for determining compensation of the following persons include a review and approval by independent ones, comparability data, and contemporaneous substantiation of the deliberation and decision? Organization's CEO, Executive Director, or top management official or officers or key employees of the organization. The organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a ole entity during the year? The organization follow a written policy or procedure requiring the organization to evaluate its participation in venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt is with respect to such arrangements?	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes	No No No No No			
b 111a b 112a c 113 114 115 a b 116a b	If "Ye and be the form? Did the School of the Did the Texas Did the Di	es," did the organization have written policies and procedures governing the activities of such chapters, affiliates, branches to ensure their operations are consistent with the organization's exempt purposes? The organization provided a complete copy of this Form 990 to all members of its governing body before filing the ribe in Schedule O the process, if any, used by the organization to review this Form 990 the organization have a written conflict of interest policy? If "No," go to line 13 to efficiers, directors, or trustees, and key employees required to disclose annually interests that could give rise to exist? The organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in dule O how this was done. The organization have a written whistleblower policy? The organization have a written document retention and destruction policy? The process for determining compensation of the following persons include a review and approval by independent ons, comparability data, and contemporaneous substantiation of the deliberation and decision? Torganization's CEO, Executive Director, or top management official Torficers or key employees of the organization Torficers or key employees of the organization The organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a cole entity during the year? The organization follow a written policy or procedure requiring the organization to evaluate its participation in venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt swith respect to such arrangements? The Consciouse The States with which a copy of this Form 990 is required to be filed.	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes	No No No No No			

(F)

Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, Part VII

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, or highest compensated employees who received more than \$100,000
- of reportable compensation from the organization and any related organizations • List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the
- organization, more than \$10,000 of reportable compensation from the organization and any related organizations List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons
- 🗹 Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee (A) (B) (C) (D) (F)

(A) Name and Title	(B) Average hours per week (list any hours for related		ne bo	ox, ι n of tor/t	t che unle: ficer rust	ss pers and a ee)	i	(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the organization and
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	MISC)	MISC)	related organizations
(1) Christine Auerbach	2 00	Х						0	0	0
Director	0 00									
(2) Richard Dodge Director	2 00	х						0	0	0
(3) Delores Faison	2 00									
Director	0 00	Х						0	0	0
(4) Eddie Geisel	2 00									_
Director	0 00	Х						0	0	0
(5) John Kellen	5 00			١,,						
President	0 00			×				0	0	0
(6) Phyllis Woods	5 00			,						
Vice President Education	0 00			×				0	0	0
(7) Freddie Adkinson	5 00			,						
Vice President Center	0 00			X				0	0	0
(8) Steve Powers	2 00			x				0	0	0
Secretary	0 00			Ĺ				0	0	
(9) Ruth Biedermann	40 00				X			46,452	0	0
Manager	0 00				^			40,432	0	0
										Form 990 (2016)

Part VII

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

Page 8

	(A) Name and Title	(B) Average hours per week (list any hours for related	than o	ne b	ox, ι in of tor/t	t ch unle: ficei	eck moss pers r and a ee)	son	Repo compe fron organiza	D) ortable ensation orthe ation (W- O-MISC)	(E) Reportable compensation from related organizations (2/1099-MISC	w-	amount o compens from t	Estimated nount of other compensation from the ganization and	
		organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	2/1093	9-1413-0)	2/1099-1113C	,	relati organiza	ed	
												+			
												+			
												+			
												+			
												+			
c ·	Sub-Total		nΑ.				*			46,452		0		0	
2	Total number of individuals (including of reportable compensation from the	but not limited	to thos				e) who	rec	eıved mor	e than \$1	00,000				
													Yes	No	
3	Did the organization list any former line 1a? <i>If "Yes," complete Schedule</i> .											3		No	
4	For any individual listed on line 1a, is organization and related organization										n the				
5	Individual	ve or accrue cor	 mpensal	tion fi	rom	• anv	• unrela	· ·	organizat	on or indi	· · · ·	4		No	
	services rendered to the organization											5		No	
Se	ection B. Independent Contract Complete this table for your five high		d indep	ender	nt co	ontra	actors	that	received	more than	1 \$100,000 of cor	mpen:	 sation		
	from the organization Report compe	(A) and business addre	alendar	year	enc	ding	with o	r wit	thin the oi	rganızatıoı	n's tax year (B)	1	(C		
	ivame :	and pusiness addre	:55							Desc	ription of services		Compen	isatioN	

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of

compensation from the organization \blacktriangleright

Check if Schedule O contains a response or note to any line in this Part VIII	Form	99	0 (20	016)						Page 9
C C C C C C C C C C	Par	t۷	100	Statement of Revenue						
Total revenue Related or exempt function revenue variety function function variety function revenue variety function revenue variety function variety function revenue variety function variety function revenue variety function vari				Check if Schedule O contains	a respo	onse or note to an	y line in this Part VII	ı		\square
b Membership dues								Related or exempt function	Unrelated business	Revenue excluded from tax under sections
b 33 1/3% support test—2015. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test—2016. 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 organization b 10%-facts-and-circumstances test—2015. 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 supported organization Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		(A)	1a F	ederated campaigns	1a				•	·
b 33 1/3% support test—2015. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test—2016. 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 organization b 10%-facts-and-circumstances test—2015. 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 supported organization Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions	ınts	m I	ЬΝ	Membership dues	1b					
b 33 1/3% support test—2015. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test—2016. 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 organization b 10%-facts-and-circumstances test—2015. 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 supported organization Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions	Gr2	<u>u</u>	c F	undraising events	1c	723				
b 33 1/3% support test—2015. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test—2016. 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 organization b 10%-facts-and-circumstances test—2015. 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 supported organization Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions	ń	ਕੋ ∣	-1 0	Anlahad assassassass	4					
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ınstructions ▶□		orga 10 15 Ex	0% o art Vi anızat I %-f a IS 10 plaın	or more, and if the organization I how the organization meets the tion acts-and-circumstances tested or more, and if the organization Part VI how the organization	meets ne "fact –2015 tion me	the "facts-and-circ ts-and-circumstand 5. If the organization eets the "facts-and	cumstances" test, ch ces" test The organi on did not check a b d-circumstances" tes	eck this box and sto zation qualifies as a ox on line 13, 16a, i t, check this box and	op here. Explain publicly supported 16b, or 17a, and lid d stop here.	►□
	18	Priv	vate	foundation. If the organization	did no	ot check a box on	line 13, 16a, 16b, 17	a, or 17b, check thi	s box and see	
Schedule A (Form 990 or 990-EZ) 2016		ınst	ructio	ons						▶ □
								Sch	nedule A (Form 9	990 or 990-EZ) 2016

Form 990 (2016)				Page 10
Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all co	lumns All other orga	nızatıons must comp	lete column (A)	
Check if Schedule O contains a response or note to any	line in this Part IX			🗆
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraisingexpenses
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, line 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees				
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	96,754	87,079	9,675	
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes	11,627	10,661	966	
11 Fees for services (non-employees)				
a Management				
b Legal				
c Accounting	1,997	1,997		
d Lobbying		·		
e Professional fundraising services See Part IV, line 17				
- · · · · · · · · · · · · · · · · · · ·	256		256	
f Investment management fees	256		250	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	0.570	0.405		
12 Advertising and promotion	3,579	3,435	144	
13 Office expenses	2,305	2,245	2	58
14 Information technology	2,881	471	2,410	
16 Occupancy	75,289	75,289		
17 Travel	2,675	2,675		
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	1,212	256	956	
20 Interest	-7			
21 Payments to affiliates	30,621	30,621		
· · · · · · · · · · · · · · · · · · ·	30,021	30,021		
22 Depreciation, depletion, and amortization				
 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) 	4,475	4,475		
a Merchant fees and bank	15,364	15,364		
b Cash variance	32	32		
c Program supplies	2,222	2,222		
d Shipping postage	298	298		
e All other expenses	4,436	4,436		
25 Total functional expenses. Add lines 1 through 24e	256,023	241,556	14,409	58
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ▶ ☐ if following SOP 98-2 (ASC 958-720)		·	·	

Part X	Balance	Sheet
	Charles Cab	

		Check if Schedule O contains a response or not	e to ar	ny line in this Part IX	<u> </u>		<u> ⊔</u>
					(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing			125,375	1	103,642
	2	Savings and temporary cash investments .			74,492	2	74,604
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net				4	
	5	Loans and other receivables from current and fo					
		trustees, key employees, and highest compensa II of Schedule L	ated en	nployees Complete Part		5	
ts	6	Loans and other receivables from other disquali section 4958(f)(1)), persons described in sectio contributing employers and sponsoring organiza- voluntary employees' beneficiary organizations Part II of Schedule L Notes and loans receivable, net	n 4958 itions d	(c)(3)(B), and of section 501(c)(9)		6	
Assets	7			_	47.027	8	64 204
As	8	Inventories for sale or use		•	47,937		64,294
	9	Prepaid expenses and deferred charges		, · · · <u> </u>		9	
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	141,736			
	b	Less accumulated depreciation	10b	135,034	6,702	10 c	6,702
	11	Investments—publicly traded securities .			22,552	11	20,361
	12	Investments—other securities See Part IV, line	11 .			12	
	13	Investments—program-related See Part IV, line	= 11 .			13	
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11			1,100	15	1,100
	16	Total assets.Add lines 1 through 15 (must equ	al line	34)	278,158	16	270,703
	17	Accounts payable and accrued expenses			14,723	17	12,818
	18	Grants payable				18	
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
Sć	21	Escrow or custodial account liability Complete F	Part IV	of Schedule D		21	
Liabilities	22	Loans and other payables to current and former key employees, highest compensated employee					
iaŧ		persons Complete Part II of Schedule L				22	
Γ	23	Secured mortgages and notes payable to unrela	ted th	rd parties		23	
	24	Unsecured notes and loans payable to unrelated	thir <u>d</u>	parties		24	
_ (7-						
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		house states					
Z ****							

Form	990 (2016)				Page 12
Par	t XI Reconcilliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI		<u></u>	<u> </u>	
1	Total revenue (must equal Part VIII, column (A), line 12)	1			250,814
2	Total expenses (must equal Part IX, column (A), line 25)	2			256,023
3	Revenue less expenses Subtract line 2 from line 1	3			-5,209
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			259,869
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			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			254,660
Par	t XIII Financial Statements and Reporting				
	Check If Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed separate basis, consolidated basis, or both	on a			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate consolidated basis, or both	basis,			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
С	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche	edule O			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle			

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required

audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

За

3b

No

Form **990** (2016)

Audit Act and OMB Circular A-133?

Additional Data

Software ID: Software Version:

EIN: 23-7181922

Name: UNITED NATIONS ASSOC OF S AZ BETTER WORLD FUND

Education center, gift shop and program service revenues provide educational services to infomr the public about the United Nations and how it functions in a non-political

fashion

Form 990, Part III, Line 4a:

Form 990 (2016)

efile	GR/	APHIC prii	nt - DO NOT P	ROCESS	As Filed Data -			DLN: 9	3493093011568
SCI	IED	ULE A		Public C	harity Statu	s and Pub	olic Supp	ort	OMB No 1545-0047
(For	m 990			te if the org	ganization is a secti	on 501(c)(3) c	organization or		2016
990E	(Z)			4	4947(a)(1) nonexe ▶ Attach to Form 9				2010
		the Treasury	► Inform	ation about	Schedule A (Form			ıctions is at	Open to Public Inspection
lame	of th	ne Service ne organiza	tion F S AZ BETTER WOF	U.D. ELIND	WWW.m.s.rgc	, , , , , , , , , , , , , , , , , , ,		Employer identific	<u> </u>
INTIE	JIVALI	UNS ASSUC U	F S AZ BETTER WOR	LD FUND				23-7181922	
Pai					s (All organizations			See instructions.	
ne o 1	rganız		•		t is (For lines 1 thro	-		/A\/:\	
		•			ociation of churches			(A)(I).	
2)(A)(ii). (Attach Sch	,	• • • • • • • • • • • • • • • • • • • •		
3		•	•	·	ce organization descr			•	
4		name, city,	and state			-		170(b)(1)(A)(iii). E	·
5			ation operated foi (iv). (Complete F		of a college or univer	sity owned or op	erated by a gov	ernmental unit descri	bed in section 170
6		A federal, s	tate, or local gov	ernment or o	governmental unit de	scribed in sectio	on 170(b)(1)(A	\)(v).	
7			ation that normal '0(b)(1)(A)(vi)			s support from a	governmental u	init or from the gener	al public described in
8		A communi	ty trust described	ın section	170(b)(1)(A)(vi) (Complete Part II	I)		
9					scribed in 170(b)(1) e instructions Enter t			with a land-grant coll college or university	ege or university or a
.0	✓	from activit	ies related to its	exempt func lated busine	tions—subject to cert ss taxable income (le	ain exceptions, a	and (2) no more	s, membership fees, a than 331/3% of its su sses acquired by the c	pport from gross
1	П	•			exclusively to test for	public safety S	ee section 509	(a)(4).	
.2		more public	ly supported org	anızatıons de		09(a)(1) or sec	tion 509(a)(2	s of, or to carry out th). See section 509(a 12e 12f and 12g	
а		Type I. A so	supporting organi	zation operat regularly ap	ted, supervised, or co	ntrolled by its su	upported organiz	zation(s), typically by of the supporting orga	
b		Type II. A manageme	supporting organ	nization supe ing organizat	ion vested in the sam			organization(s), by ha ge the supported orga	
С		Type III f	unctionally inte	grated. A su				nd functionally integra	ited with, its
d		Type III n functionally	on-functionally integrated The	integrated organization	. A supporting organi	zation operated i y a distribution r	in connection wi	th its supported organ I an attentiveness req	
e		Check this	box if the organiz	ation receive	•	ation from the IF	RS that it is a Ty	pe I, Type II, Type II	I functionally
f	Enter		of supported org	· ·	g. acea supporting	o. gameadon			
g	Provid	de the follow	ıng ınformatıon a	bout the sup	ported organization(5)			_
(i)N	ame of	f supported (organization	(ii)EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv Is the organiz your governin	ation listed in	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
						Yes	No		
Γotal			tion Act Notice,			Cat No 11285		Schedule A (Form 9	

Sch	edule A (Form 990 or 990-EZ) 2016						Page 2
P	art II Support Schedule for (Organizations	Described in S	ections 170(b)(1)(A)(iv) an	nd 170(b)(1)(A)(vi)
	(Complete only if you ch						lıfy under Part
	III. If the organization fa	ıls to qualıfy un	der the tests lis	ted below, plea:	se complete Par	t III.)	
_ <u>S</u>	ection A. Public Support			T			
	Calendar year (or fiscal year beginning in) ▶	(a) 2012	(b) 2013	(c) 2014	(d)2015	(e) 2016	(f)Total
1	Gifts, grants, contributions, and						
-	membership fees received (Do not						
	ınclude any "unusual grant ")						
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						
	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						
	ection B. Total Support	T	1	F	1	1	1
	Calendar year (or fiscal year beginning in) ▶	(a)2012	(b) 2013	(c)2014	(d)2015	(e) 2016	(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						
4.2	10 Gross receipts from related activities, 6	tc (see instruction	l ns)			12	
13	First five years. If the Form 990 is fo	_					
	check this box and stop here					<u> ▶</u>	
	ection C. Computation of Public						
	Public support percentage for 2016 (lin			column (f))		14	
	Public support percentage for 2015 Sch					15	
16 a	33 1/3% support test—2016. If the	organization did i	not check the box	on line 13, and lin	ne 14 is 33 1/3% o	r more, check thi	
	and stop here. The organization qualit	fies as a publicly s	sunnorted organiza	ation			▶
-	-						
	•						
7							
7							
<u>.</u>	•						

Part III

_ :	section A. Public Support						
	Calendar year (or fiscal year beginning in) ▶	(a)2012	(b) 2013	(c)2014	(d)2015	(e) 2016	(f)Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	83,328	12,771	904	404	723	98,13
2	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	498,403	531,366	522,108	518,661	537,570	2,608,10
3	Gross receipts from activities that are not an unrelated trade or business under section 513						

544,13

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If

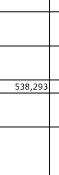
Support Schedule for Organizations Described in Section 509(a)(2)

the organization fails to qualify under the tests listed below, please complete Part II.)

	business under section 513		
4	Tax revenues levied for the 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		
6	Total. Add lines 1 through 5	581,731	
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons		

Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year Add lines 7a and 7b Public support. (Subtract line 7c from line 6)		
ction B. Total Support		
Calendar year (or fiscal year beginning in) ▶	(a)2012	(b
Amounts from line 6	581,731	

37	523,012





	from line 6)
Se	ection B. Total Suppor
	Calendar year
	(or fiscal year beginning
9	Amounts from line 6
10a	Gross income from inter
	dıvıdends, payments rec
	securities loans, rents, re

8	Public support. (Subtract line 7c from line 6)						2,706,238
Se	ection B. Total Support						
	Calendar year (or fiscal year beginning in) ▶	(a)2012	(b) 2013	(c)2014	(d)2015	(e)2016	(f) Total
9	Amounts from line 6	581,731	544,137	523,012	519,065	538,293	2,706,238
L0a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	1,176	679	1,018		468	3,341
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b	1,176	679	1,018		468	3,341
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
13	Total support. (Add lines 9, 10c,	582,907	544,816	524,030	519,065	538,761	2,709,579

	or loss from the sale of capital				
	assets (Explain in Part VI)				
3	Total support. (Add lines 9, 10c, 11, and 12)	582,907	54		
Ļ	First five years. If the Form 990 is fo	r the organization	n's first, seco		
	check this box and stop here				
-	Section C. Computation of Public Support Percentage				
5 E	ction c. compatation of rubic	p p			
<u>эе</u> ;	Public support percentage for 2016 (lir				
<u>эе</u> ;	•	ne 8, column (f) d	ivided by line		
; ;	Public support percentage for 2016 (lin	ne 8, column (f) d Schedule A, Part I	ivided by line II, line 15		
; ;	Public support percentage for 2016 (lin Public support percentage from 2015 S	ne 8, column (f) d Schedule A, Part I ment Income	ivided by line II, line 15 Percenta g		

Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

ond, third, fourth, or fifth tax year as a section 501(c)(3) organization e 13, column (f))

519,065

99 880 %

99 870 %

S ed by line 13, column (f)) 17 Investment income percentage from 2015 Schedule A, Part III, line 17 18

17

Schedule A (Form 990 or 990-EZ) 2016

16

0 % 0 %

- 19a 331/3% support tests-2016. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support tests—2015. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is ▶□ not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

20

14

15

16

Sche	dule A (Form 990 or 990-EZ) 2016		F	age 4
	EIV Supporting Organizations (Complete only if you checked a box on line 12 of Part I If you checked 12a of Part I, complete Sections A and B If Part I, complete Sections A and C If you checked 12c of Part I, complete Sections A, D, and E If you checked 12d of Sections A and D, and complete Part V)			
Se	ection A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
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)			
3а		2		
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	3a 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		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or	4b		
С	supervised by or in connection with its supported organizations 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 $(2)^2$ 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			
5a				
b	amendment to the organizing document) 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		
(2)				
(2)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)	(Column (h) must equal Form 000. Part V. col (P) line 12.)			
	. (Column (b) must equal Form 990, Part X, col (B) line 13)	lune 4.5	_	
eli	t IX Other Assets. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d See Form 990, Part X, (a) Description		ok valu	
/1\	(u) bescription	(2) 00	OR Vall	
(1)				

Sche	dule A (Form 990 or 990-EZ) 2016				F	age 5
Pa	Supporting Organizations (continued)					
			-		Yes	No
11	Has the organization accepted a gift or contribution from any of the follo	owing persons?				
а	A person who directly or indirectly controls, either alone or together with governing body of a supported organization?	h persons described in (b) and (d	c) below, the			
				11a		
b	A family member of a person described in (a) above?			11b 11c		
С	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					
S	ection B. Type I Supporting Organizations					
					Yes	No
	elect at least a majority of the organization's directors or trustees at all VLhow the supported organization(s) effectively operated supervised in					
Gıft	Ceritificates outstanding	2,289				
Dısa	ster Relief in Transit	378				
Rest	ricted Donation	558				
(4)						
(5)						
(6)						
(7)						
(8)						

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) 2016

Liability for uncertain tax positions. In Part XIII. provide the text of the footnote to the organization's financial statements that reports the

3,225

(9)

Total. (Column (b) must equal Form 990, Part X, col (B) line 25)

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 instructions for short tax year or assets held for part of year)	1		
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1 b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
e	Discount claimed for blockage or other factors (explain in detail in Part VI)			
2	Acquisition indebtedness applicable to non-exempt use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		

1

Section C - Distributable Amount

instructions)

Adjusted net income for prior year (from Section A, line 8, Column A)

Current Year

Schedule A (Form 990 or 990-FZ) 2016

Section D - Distributions

Current Year

1 Amounts paid to supported organizations to accomplish			
2 Amounts paid to perform activity that directly furthers excess of income from activity	organizations, in		
3 Administrative expenses paid to accomplish exempt pu	rposes of supported organizati	ons	
4 Amounts paid to acquire exempt-use assets			
5 Qualified set-aside amounts (prior IRS approval require	ed)		
6 Other distributions (describe in Part VI) See instruction	·		
·	15		
7 Total annual distributions. Add lines 1 through 6			
8 Distributions to attentive supported organizations to widetails in Part VI) See instructions	nich the organization is respon	sive (provide	
9 Distributable amount for 2016 from Section C, line 6			
40 Line 9 amount divided by Line 9 amount			
10 Line 8 amount divided by Line 9 amount			
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2016	(iii) Distributable Amount for 2016
Distributable amount for 2016 from Section C, line 6			
Underdistributions, if any, for years prior to 2016 (reasonable cause requiredsee instructions)			
3 Excess distributions carryover, if any, to 2016			
a			
b			
c From 2013			
d From 2014			
e From 2015			
f Total of lines 3a through e	-		
g Applied to underdistributions of prior years			
h Applied to 2016 distributable amount i Carryover from 2011 not applied (see			
instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2016 from Section D, line 7			
Applied to underdistributions of prior years			
b Applied to 2016 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2016, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2016 Subtract Upes 3h and 4h from line 1 (if amount greater than			
	1		
κ.			
		<u> </u>	
. * F			



efile GRAPHIC print - DO NOT PROCESS SCHEDULE D

(Form 990)

As Filed Data -

DLN: 93493093011568

OMB No 1545-0047

Supplemental Financial Statements

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

Open to Public Inspection

Department of the Treasury Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990. Internal Revenue Service Name of the organization **Employer identification number** UNITED NATIONS ASSOC OF S AZ BETTER WORLD FUND 23-7181922 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b)Funds and other accounts 1 Total number at end of year 2 Aggregate value of contributions to (during 3 Aggregate value of grants from (during year) Aggregate value at end of year 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ No Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c C Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year > Number of states where property subject to conservation easement is located > 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(II)? □ No In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the 2

Revenue included on Form 990, Part VIII, line 1

Assets included in Form 990, Part X

following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

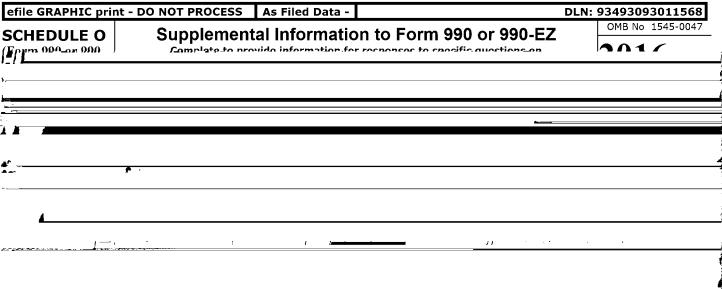
Par	t III	Organizations Maint	aining Col	lections of Art,	Histor	ical T	reas	ures, or C	ther	Similar As	sets (continuea	<u>') </u>
3		g the organization's acquisiti s (check all that apply)	on, accessioi	n, and other record	ls, check	any of	the f	ollowing tha	t are a	sıgnıfıcant u	se of its	collectio	n
а		Public exhibition			d		Loa	n or exchan	ge prog	rams			
b		Scholarly research			e		Oth	er					
С		Preservation for future ger	nerations										
4	Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII												
5	During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No												
Pa	rt IV	Escrow and Custodia			a ==== 000) Down	T\/	l.no 0 .n.m		.d an ama	n+ nn [O Dowt
		Complete if the organi X, line 21.	zation ansv	vered tes on F	oriii 990), Part	. IV,	line 9, or r	eporte	eu an amou	nic on i	-01111 991	J, Part
1a		Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No											
ь	If "Ye	If "Yes," explain the arrangement in Part XIII and complete the following table						Г		Aı	mount		
c	Begir	Beginning balance						1c					
d	Addıt	Additions during the year							ld				
е	Dıstrı	Distributions during the year				<u> </u>	Le						
f	Endır	ng balance				1f							
2 a	Dıd tl	he organization include an a	mount on Fo	rm 990, Part X, lın	e 21, for	escrov	v or c	ustodial acc	ount lia	bility?	☐ Ye	s 🗆	No
b	If "Y∈	es," explain the arrangemen	t ın Part XIII	Check here if the	explanat	ion ha	s beei	n provided i	n Part)	KIII			
Pa	rt V	Endowment Funds.	Complete if	the organization	n answe	red "Y	es" c	n Form 99	0, Par	t IV, line 1	0.		
			•	(a)Current year	(b)F	rior yea	ır	(c)Two year	s back	(d)Three yea	rs back	(e)Four y	ears back
1 a	Beginn	ning of year balance		22,38	7	2:	2,552		20,466		23,118		19,072
b	Contrib	butions											
С	Net inv	vestment earnings, gains, ai	nd losses	-1,86	1				2,251		-286		46
d	Grants	or scholarships									2,200		
	and pr	expenditures for facilities ograms											
f	Admın	istrative expenses		16			165		165		166		
g	End of	year balance		20,36	1	2:	2,387		22,552		20,466		19,118
2 a		Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as Board designated or quasi-endowment ►											
b	Perm	Permanent endowment ► 100 000 %											
c	Temp	porarily restricted endowmer	nt 🟲										
	•	percentages on lines 2a, 2b,		•									
3а	Are there endowment funds not in the possession of the organization that are held and administered for the organization by Yes No												
	(i) unrelated organizations 3a(i) (ii) related organizations 3a(ii)								No No				
b	If "Y∈	es" on $3a(\Pi)$, are the related	organization	·			. ?	· · · .				3b	
4		ribe in Part XIII the intended			lowment	funds							
Pa	rt VI	Land, Buildings, and			rm 000	Dart	T\ /	no 115 S	oo Eor	m 000 Bad	FV lin	0.10	
	Descr	Complete if the organi iption of property	(a) Cost or oth (investme	ner basis (b)Co	st or other					epreciation		d) Book va	alue
1a	Land												
	Buildin	<u> </u>											
С	Leaseh	nold improvements											
d	Equipn	ment											
е	Other					1	41,736	5		135,034			6,702
		lines 1a through 1e (Colum	n (d) must e	gual Form 990, Pai	rt X, colu	mn (B)	, line	10(c)).		>			6,702

Schedule D (Form 990) 2016		Page 3				
Part VII Investments—Other Securities. Complete if the organization See Form 990, Part X, line 12.	ition answer	ed 'Yes' on Form 990, Part IV, line 11b.				
(a) Description of security or category (including name of security)	(b)Book value	(c)Method of valuation Cost or end-of-year market value				
(1)Financial derivatives						
(A)						
(B)						
(C)						
(D)						
(E)						
(F)						
(G)						
(H)						
Total. (Column (b) must equal Form 990, Part X, col (B) line 12) Part VIII Investments—Program Related. Complete if the organize		and West on Form 000 Port IV line 11s				
Part VIII Investments—Program Related. Complete if the organize See Form 990, Part X, line 13.	zation answe	ered res on Form 990, Part IV, line IIC.				
	Book value	(c) Method of valuation				
b 33 1/3% support test—2015. If the organization did not check a box on loss and stop here. The organization qualifies as a publicly supported organization did not check and single process that 2016. If the organization did not the	nization	▶□				
L7a 10%-facts-and-circumstances test—2016. If the organization did not choose 10% or more, and if the organization meets the "facts-and-circumstances" in Part VI how the organization meets the "facts-and-circumstances" test. The	test, check th	nis box and stop here. Explain				
organization 10%-facts-and-circumstances test—2015. 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						
supported organization Private foundation. If the organization did not check a box on line 13, 16a,	. 16b, 17a, or	▶ ☐ 17b, check this box and see				
instructions		▶□				
		Schedule A (Form 990 or 990-EZ) 201				

Return Reference

Schedule D (Form 990) 2015

Schedule D (Fo	orm 990) 2015	Page 5	
Part XIII	Supplemental Info		
Ret	urn Reference	Explanation	
			Schedule D (Form 990) 2016



Return Explanation
Reference

990 Schedule O, Supplemental Information

Governing documents etc are available to the public at the store front location upon request etc available to public Part

VI line 19