Form **990-PF**

EXTENDED TO NOVEMBER 15, 2018
Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation

Do not enter social security numbers on this form as it may be made public.

2017

			venue Service			irs.gov/Form990PF for inst			Open to Public Inspection	
46	For	cale	ndar year 2017 or tax yea	r beginning	FEE	3 1, 2017	, and ending	DEC 31, 2017		
*0	Name of foundation							A Employer identificatio	n number	
	CAMISA FOUNDATION							_		
		C/O HENRY & HORNE LLP						81-5192556		
			and street (or P O box number	if mail is not de	elivered to stree	t address)	Room/suite	B Telephone number		
	_7	<u>09</u>	8 E COCHISE				100	480-483-11	.70	
			own, state or province, co			ostal code		C If exemption application is p	pending, check here	
	_ <u>S</u>	<u> CO</u>	TTSDALE, AZ	8525	3					
	G C	heck	call that apply.	Initial returi	n	Initial return of a fo	ormer public charity	D 1 Foreign organization	s, check here	
,				Final return		Amended return		2 5		
)				Address ch		Name change	4	Foreign organizations macheck here and attach contacts.	omputation	
U	H C	heck	k type of organization:	X Section	n 501(c) <u>(3) e</u> :	xempt private foundation	04	E If private foundation sta	atus was terminated	
•		Se	ection 4947(a)(1) nonexen	npt charitable	trust 📖	Other taxable private founda	ation	under section 507(b)(1)(A), check here	
	l Fa	ır ma	arket value of all assets at	end of year	J Account	-	Accrual	F If the foundation is in a	60-month termination	
	(fr	om f	Part II, col. (c), line 16)		▎ └┴○	ther (specify)		under section 507(b)(1)(B), check here	
						nn (d) must be on cash bası	s.)			
	Pa	rt I	Analysis of Revenue ar	nd Expenses	d (d) may not	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements for charitable purposes	
			(The total of amounts in colunecessarily equal the amoun	nts in column (a))` ,,	expenses per books	income	income	(cash basis only)	
		1	Contributions, gifts, gran	ts, etc , recei	ved	538,509.		N/A		
		2		n is not required to	attach Sch B				<u> </u>	
		3	Interest on savings and temp cash investments	urary						
		4	Dividends and interest fro	om securities	;	4,975.	4,975.		STATEMENT 1	
		5a	Gross rents						<u> </u>	
		b	Net rental income or (loss)			400 053				
	re		Net gain or (loss) from sale of Gross sales price for all			400,053.				
	ent	_ b	assets on line 6a		,053.		400,053.	-	CENTED 1	
	Revenue	7	Capital gain net income (from				400,053.	RE		
	1	8	Net short-term capital ga	ın				-		
		40-	Income modifications Gross sales less returns	1			.,	BB NO	V 2 0 2018 O	
			and allowances					0		
			Less Cost of goods sold Gross profit or (loss)					-00	DEN, UT	
		11	Other income							
		12	Total. Add lines 1 through	h 11		943,537.	405,028.			
•		13	Compensation of officers, dire		etc	0.	0.		0.	
		14	Other employee salaries		, 0.0					
			Pension plans, employee	-						
	es		Legal fees		MT 2	4,628.	2,314.		2,314.	
	ens		Accounting fees				-			
<u>n</u> `	Expenses		Other professional fees	ST	MT 3	1,524.	1,524.		0.	
200	ve		Interest							
3	rati	18	Taxes	ST	MT 4	32.	32.		0.	
>	nist	19	Depreciation and depletion	n						
	and Administrative	20	Occupancy							
3	Ad	21	Travel, conferences, and	meetings		3,441.	1,721.		1,720.	
	and	22	Printing and publications							
TI TI	ug	23	Other expenses	ST	MT 5	365.	183.		182.	
Ž	Operating	24	Total operating and adm	ninistrative						
SCANNEL	be		expenses Add lines 13 t	-		9,990.	5,774.	, ,	4,216. 5,263.	
3	٥		Contributions, gifts, gran			5,263.			5,263.	
Ľ)		26	Total expenses and disb	ursements.						
			Add lines 24 and 25			15,253.	5,774.		9,479.	
		27	Subtract line 26 from line	: 12:					1	
			Excess of revenue over exper			928,284.				
			Net investment income (.399,254.		l l	
_		С	Adjusted net income (if n	egative, enter -	0-)			N/A	5- 000 PF (0047)	

CAMISA FOUNDATION C/O HENRY & HORNE LLP

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Part II Balance Sheets Attached schedules and amounts in the description rolliums should be for end-of-year amounts only	Beginning of year	End of year			
column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value		
1 Cash - non-interest-bearing		14,498.	14,498.		
2 Savings and temporary cash investments		16,878.	16,878.		
3 Accounts receivable ►					
Less: allowance for doubtful accounts ▶					
4 Pledges receivable ►			Ĭ		
Less allowance for doubtful accounts ▶					
5 Grants receivable					
6 Receivables due from officers, directors, trustees, and other					
disqualified persons					
7 Other notes and loans receivable		-			
Less: allowance for doubtful accounts					
	 				
9 Prepaid expenses and deferred charges	···		· · · · · · · · · · · · · · · · · · ·		
10a Investments - U.S. and state government obligations					
102 investments 5 0 3. and state government obligations	l	_			
b Investments - corporate stock	<u> </u>				
c Investments - corporate bonds					
11 Investments - land, buildings, and equipment basis					
Less accumulated depreciation					
12 Investments - mortgage loans	<u> </u>	306 505	100 601		
13 Investments - other STMT 7	0.	386,595.	402,601.		
14 Land, buildings, and equipment basis ▶		<u>,,,, , , , , , , , , , , , , , , , , ,</u>			
Less accumulated depreciation					
15 Other assets (describe ►)					
16 Total assets (to be completed by all filers - see the					
instructions. Also, see page 1, item I)	0.	417,971.	433,977.		
17 Accounts payable and accrued expenses					
18 Grants payable					
lan n					
Deterred revenue Loans from officers, directors, trustees, and other disqualified persons Mortgages and other notes payable		28,196.			
21 Mortgages and other notes payable		· · · · · · · · · · · · · · · · · · ·			
22 Other liabilities (describe >					
23 Total liabilities (add lines 17 through 22)	0.	28,196.			
		20,150.			
Foundations that follow SFAS 117, check here					
and complete lines 24 through 26, and lines 30 and 31.					
g 24 Unrestricted					
25 Temporarily restricted	ļ				
26 Permanently restricted	<u> </u>		}		
Temporarily restricted 26 Permanently restricted Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. Capital stock, trust principal, or current funds Paid-in or capital surplus, or land, bldg, and equipment fund Retained earnings, accumulated income, endowment, or other funds Total net assets or fund balances			ļ		
and complete lines 27 through 31.	_	_	ł		
27 Capital stock, trust principal, or current funds	0.	0.			
28 Paid-in or capital surplus, or land, bldg , and equipment fund	0.	0.			
29 Retained earnings, accumulated income, endowment, or other funds	0.	389,775.			
30 Total net assets or fund balances	0.	389,775.			
_					
31 Total liabilities and net assets/fund balances	0.	417,971.			
Part III Analysis of Changes in Net Assets or Fund E	Balances				
1 Total net assets or fund balances at beginning of year - Part II, column (a), line	: 30				
(must agree with end-of-year figure reported on prior year's return)		1	0.		
2 Enter amount from Part I, line 27a		2	928,284.		
3 Other increases not included in line 2 (itemize)		3	0.		
4 Add lines 1, 2, and 3		4	928,284.		
	SEE STA	ATEMENT 6 5	538,509.		
 Decreases not included in line 2 (itemize) Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, c 		6	389,775.		
- Town field assets of futing balances at end of year time 4 fillings inte 3) * Fall II, C	oranini (b), iiilo oo		Form 990-PF (2017)		

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Part IV Capital Gains a	nd Losses for Tax on Ir	nvestmen	t Income						
(a) List and describe the 2-story brick war	ne kınd(s) of property sold (for exal ehouse; or common stock, 200 shs	mple, real est s. MLC Co.)	ate,	` P	How ac - Purci - Dona	hase	(c) Date a (mo., da		(d) Date sold (mo , day, yr.)
1a TIEMPO INC, 65,	000 SHARES					D			05/15/17
b CAPITAL GAINS I									
c									
d						Ī		_	
e							-		`
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale					in or (loss (f) minus i	
a 400,051.									400,051.
b 2.									2.
C									
đ									
e			•						
Complete only for assets showing	gain in column (h) and owned by t	the foundatio	n on 12/31/69.				(I) Gains (Co		
(1) 500 / (10/01/00	(j) Adjusted basis	(k) E	xcess of col (i)			CO	(k), but no	ot less thai from col (n -0-) or
(i) FMV as of 12/31/69	as of 12/31/69	ove	r col (j), if any				Losses (ironi coi (п))
a									400,051.
b									2.
c									
d			-						
e									
	∫ If gain, also enter	r in Part I. line	7	7					
2 Capital gain net income or (net cap		- in Part I. line	. 7 ! 7	-	2				400,053.
			, •	7					•
3 Net short-term capital gain or (loss if gain, also enter in Part I, line 8, co		10 (6):		٦١	1				
If (loss), enter -0- in Part I, line 8	bidiiii (c)			71	3			N/A	
Part V Qualification Un	der Section 4940(e) for	Reduced	Tax on Net	Inv	estm	ent In	come	-1, -1	
(For optional use by domestic private f						•			N/A
(i or opnomination by democrate private)		10 10(0) (0)			, ,				-1,
If section 4940(d)(2) applies, leave this	s part blank								
Was the foundation liable for the section	on 4942 tay on the distributable am	ount of any v	ear in the hace ner	chor.					Yes No
If "Yes," the foundation doesn't qualify			•	iou.					163100
1 Enter the appropriate amount in ea				ntries	-				
(a)	(b)	1011 00110110 20	l				I		(d)
Base periód years Calendar year (or tax year beginning	A discount asset & safe as about	tributions	Net value of no	(c) nchai		use assets	; <i>(</i>		putión ratio ided by col. (c))
2016)		1					JOI (D) UIV	ided by cor (c))
2015			ļ				_		
2014			<u> </u>				_		
2013			<u> </u>						
2012			<u> </u>				+		
2. Total of loss 1. caliums (a)									
2 Total of line 1, column (d)	unna hann massa al-aliin de die de l'Al-	ء مامداده	O as but the	a '	100		2		
3 Average distribution ratio for the 5-		on line 2 by 5	o, or by the number	er or y	/ears				
the foundation has been in existence	e if less than 5 years						3		
4 Enter the net value of noncharitable	-use assets for 2017 from Part X, I	line 5					4		
5 Multiply line 4 by line 3							5		
6 Enter 1% of net investment income	(1% of Part I, line 27b)						6		
7 Add lines 5 and 6							7		
-									
8 Enter qualifying distributions from I	Part XII, line 4						8		
If line 8 is equal to or greater than li See the Part VI instructions		1b, and comp	olete that part using	g a 19	% tax ra	ate	·		

CMITS	A FU	OTAT	NITON	
C/O H	ENRY	&	HORNE	LLE

Part VI Excise Tax Based on Investment Income (Section	4940(a), 4940(b), 4940(e), or 4	1948 - see	instruc	tions)
1a Exempt operating foundations described in section 4940(d)(2), check here	<u> </u>			
	if necessary-see instructions)			
b Domestic foundations that meet the section 4940(e) requirements in Part V, check her		1	7	,985.
of Part I, line 27b				
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, en	ter 4% of Part I, line 12, col. (b).			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations or		2		0.
3 Add lines 1 and 2	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	3	7	,985.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations o	nly others enter -0-)	4		0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5	7	,985.
6 Credits/Payments				1
a 2017 estimated tax payments and 2016 overpayment credited to 2017	6a 0.			
b Exempt foreign organizations - tax withheld at source	6b 0.	†		ì
c Tax paid with application for extension of time to file (Form 8868)	6c 12,000.	1		
d Backup withholding erroneously withheld	6d 0.	1		
7 Total credits and payments. Add lines 6a through 6d		7	12	,000.
8 Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 i	s attached	8		229.
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		9		
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpa	aid hie	10	3	,786.
11 Enter the amount of line 10 to be: Credited to 2018 estimated tax	3,786. Refunded ▶	11		0.
Part VII-A Statements Regarding Activities	3 / 1 3 0 1 Helanded	<u> </u>		
1a During the tax year, did the foundation attempt to influence any national, state, or local	l legislation or did it participate or intervene	ın	TY	es No
any political campaign?	riogiciation of all it participate of intervent		1a	X
b Did it spend more than \$100 during the year (either directly or indirectly) for political p	ournoses? See the instructions for the defin	ition	1b	X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and co				
distributed by the foundation in connection with the activities.	prod or any materials patiented or			
c Did the foundation file Form 1120-POL for this year?		•	1c	X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during	on the year.		"	
(1) On the foundation > \$ 0 • (2) On foundation man			1	
e Enter the reimbursement (if any) paid by the foundation during the year for political ex		•	1 1	
managers. > \$ 0.	portation tax imposta on roundation			
2 Has the foundation engaged in any activities that have not previously been reported to	the IRS?		-	<u></u> _
If "Yes," attach a detailed description of the activities			-	
3 Has the foundation made any changes, not previously reported to the IRS, in its govern	ning instrument, articles of incorporation, o	nr		
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3	X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the			4a	X
b If "Yes," has it filed a tax return on Form 990-T for this year?	,	N/A	4b	
5 Was there a liquidation, termination, dissolution, or substantial contraction during the	vear?	,	5	X
If "Yes," attach the statement required by General Instruction T	, u.			- -
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisf	fied either:			
By language in the governing instrument, or				- -
By state legislation that effectively amends the governing instrument so that no man	datory directions that conflict with the state	law .		
remain in the governing instrument?	,		6	X
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes,"	complete Part II. col. (c), and Part XV			X
To the roundation have at least \$6,000 in addition at any time during the your in 100,	50111p1010 1 are 11, 5011 (5), and 1 are 111			
8a Enter the states to which the foundation reports or with which it is registered. See insti	ructions.			
AZ				
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to	the Attorney General (or designate)			
of each state as required by General Instruction G? If "No," attach explanation	- · · · · · · · · · · · · · · · · · · ·		8b	x
9 Is the foundation claiming status as a private operating foundation within the meaning	of section 4942(i)(3) or 4942(i)(5) for cale	ndar		
year 2017 or the tax year beginning in 2017? See the instructions for Part XIV If "Yes,			9	$\overline{\mathbf{x}}$
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a s		TMT 8	10	$\overline{\mathbf{x}}$
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Part VII-A Statements Regarding Activities (continued)			
r		Yes	No
11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
section 512(b)(13)? If "Yes," attach schedule See instructions	11		X
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			
If "Yes," attach statement. See instructions	12		X
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
Website address ► NA	· 1	170	
14 The books are in care of ► HENRY & HORNE, LLP Telephone no ► 480 - 48		1/0	
Located at ► 7098 E COCHISE ROAD, SUITE 100, SCOTTSDALE, AZ ZIP+4 ►85	453		
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here	NT.	/ 3	
and enter the amount of tax-exempt interest received or accrued during the year 15		/A Yes	No
16 At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank,	16	162	X
securities, or other financial account in a foreign country?	10]		
See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country.			1
Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required	<u> </u>		<u>'</u>
File Form 4720 If any item is checked in the "Yes" column, unless an exception applies.	TT	Yes	No
1a During the year, did the foundation (either directly or indirectly):	-	.00	
(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X, No			
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
a disqualified person?			
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			ļ
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	1 1		1
(5) Transfer any income or assets to a disqualified person (or make any of either available]
for the benefit or use of a disqualified person)?			
(6) Agree to pay money or property to a government official? (Exception. Check "No"			
if the foundation agreed to make a grant to or to employ the official for a period after			
termination of government service, if terminating within 90 days.)			
b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions N/A	1b		
Organizations relying on a current notice regarding disaster assistance, check here			
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected		;	
before the first day of the tax year beginning in 2017?	1c		X
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			
defined in section 4942(j)(3) or 4942(j)(5))			
a At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
before 2017? Yes X No			
If "Yes," list the years \(\) , , , , , , , , , , , , , , , , , ,			
valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions.) N/A	2b		
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here	20		
The provisions of section 4342(a)(2) are being applied to any or the years listed in 2a, list the years here			
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
during the year?			.
b If "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or disqualified persons after			
May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			1
of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,		_	,
Form 4720, to determine if the foundation had excess business holdings in 2017) N/A	3b		
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			
had not been removed from sonardy before the first day of the tay year beginning in 20172	1		V

Part VII-B Statements Regarding Activities for Which I	Form 4720 May Be I	Required (contin	ued)					
5a During the year, did the foundation pay or incur any amount to	<u> </u>				Yes	No		
(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?								
(2) Influence tife outcome of any specific public election (see section 4955); or to carry on, directly or indirectly,								
any voter registration drive?						ļ		
(3) Provide a grant to an individual for travel, study, or other similar purposes'	?	Y	es 🗶 No					
(4) Provide a grant to an organization other than a charitable, etc., organization described in section								
4945(d)(4)(A)? See instructions Yes X No								
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or t							
the prevention of cruelty to children or animals?								
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations								
section 53.4945 or in a current notice regarding disaster assistance? See instructions								
Organizations relying on a current notice regarding disaster assistance, check here								
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr					- 1			
expenditure responsibility for the grant?	N	I/A Y	es L No					
If "Yes," attach the statement required by Regulations section 53.4945-5(d)					l			
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on					ŀ		
a personal benefit contract?	1 b 6 b 6 m 40	Y	es X No			X		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?		ŀ	6b		<u> </u>		
If "Yes" to 6b, file Form 8870	haltar transaction?		es X No	ļ				
7a At any time during the tax year, was the foundation a party to a prohibited tax s b If "Yes," did the foundation receive any proceeds or have any net income attribu		, i	N/A	7b	-	!		
Part VIII Information About Officers, Directors, Trusto		nagers Highly		70				
Paid Employees, and Contractors	ees, i oundation wa	magers, riigin	,					
1 List all officers, directors, trustees, and foundation managers and t	heir compensation.							
(b) Title, and average (c) Compensation (d) Contributions to								
(a) Name and address	hòurs per week devoted to position	(If not paid, enter -0-)	and deferred compensation	(e) Expense account, other allowances		ices		
			·					
				İ				
SEE STATEMENT 9		0.	0			0.		
				↓				
2 Compensation of five highest-paid employees (other than those inc	ludad on line 1) If none	enter "NONE "		J				
2 Compensation of five nignest-paid employees (other than those inc	(b) Title, and average	enter NONE.	(d) Contributions to	1 6	e) Expe	ense		
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	employee benefit plans and deferred	ac	e) Expe count, illowan	other		
NONE	devoted to position		compensation	+-	illowali			
NONE	V							
				+				
		,		+				
								
				†				
		1						
				+-	-			
				1				
Total number of other employees paid over \$50,000	·		▶	-		0		
			Forn	1 990	-PF (2017)		

Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	on Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "N	NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		D 0
Part IX-A Summary of Direct Charitable Activities		<u> </u>
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical number of organizations and other beneficiaries served, conferences convened, research papers produce		Expenses
1 N/A		
2		
3		
4		
Part IX-B Summary of Program-Related Investments		·
Describe the two largest program-related investments made by the foundation during the tax year on line	s 1 and 2.	Amount
1 N/A		
2		
All other program-related investments. See instructions.		<u> </u>
3		
Total. Add lines 1 through 3	<u> </u>	0 . Form 990-PF (2017)

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes. 316,133. a Average monthly fair market value of securities 1a 104,558. b Average of monthly cash balances 1b c Fair market value of all other assets 10 420,691 d Total (add lines 1a, b, and c) 1d e Reduction claimed for blockage or other factors reported on lines 1a and 0. 1c (attach detailed explanation) 1e Acquisition indebtedness applicable to line 1 assets 2 Subtract line 2 from line 1d 3 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 4 414,381. 5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 18,959. Minimum investment return. Enter 5% of line 5 ADJUSTED FOR SHORT TAX PERIOD 6

Part XI | Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations, check here
and do not complete this part.) 18,959. Minimum investment return from Part X, line 6 7,985 Tax on investment income for 2017 from Part VI, line 5 2b b Income tax for 2017 (This does not include the tax from Part VI.) c Add lines 2a and 2b 3 Distributable amount before adjustments. Subtract line 2c from line 1 Recoveries of amounts treated as qualifying distributions 4 10.974 5 Add lines 3 and 4 6 Deduction from distributable amount (see instructions) 10,974 Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1

Part XII Qualifying Distributions (see instructions)

4940(e) reduction of tax in those years.

1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	9,479.
b Program-related investments - total from Part IX-B	1b	0.
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3 Amounts set aside for specific charitable projects that satisfy the		
a Suitability test (prior IRS approval required)	3a	
b Cash distribution test (attach the required schedule)	3b	
4 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8; and Part XIII, line 4	4	9,479.
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
income Enter 1% of Part I, line 27b	5	0.
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	9,479.
Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the four	dation qualifies for the s	ection

Form **990-PF** (2017)

Part XIII Undistributed Income (see instructions)

•	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
4 Distributable amount for 2017 from Bort VI	Corpus	Tears prior to 2010	2010	2017
1 Distributable amount for 2017 from Part XI,				10,974.
line 7				10,374.
2 Undistributed income, if any, as of the end of 2017			-	
a Enter amount for 2016 only			V •	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2017:		0.		
1 1 1 1				
a From 2012				
b From 2013				
c From 2014				
d From 2015		•		
e From 2016				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2017 from				
Part XII, line $4^{-} \triangleright \$$ 9, 479.				
a Applied to 2016, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2017 distributable amount			•	9,479.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2017	0.			0.
(If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below:		-	.;	
& Corpus Add lines 3f 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years'		ı		
undistributed income for which a notice of				
deficiency has been issued, or on which the section 4942(a) tax has been previously				
assessed		0.		
d Subtract line 6c from line 6b. Taxable	······································			
amount - see instructions		0.		
e Undistributed income for 2016. Subtract line				
4a from line 2a. Taxable amount - see instr			0.	·
f Undistributed income for 2017. Subtract				
lines 4d and 5 from line 1. This amount must			,	
be distributed in 2018			,	1,495.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2012				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2018.		·····		
Subtract lines 7 and 8 from line 6a	0.			
O Analysis of line 9:				
a Excess from 2013				
b Excess from 2014				
c Excess from 2015				
d Excess from 2016				
e Excess from 2017				

	RY & HORNE			81-51	L92556 Page
Part XIV Private Operating For	oundations (see in	structions and Part VI	I-A, question 9)	N/A	
1 a If the foundation has received a ruling or	determination letter tha	t it is a private operating			
foundation, and the ruling is effective for	2017, enter the date of	the ruling	▶		
b Check box to indicate whether the found	ation is a private operati	ng foundation described	in section	4942(j)(3) or 49	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2017	(b) 2016	(c) 2015	(d) 2014	(e).Tótal
investment return from Part X for					
each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not		,			
used directly for active conduct of	,		/		
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c	L				
3 Complete 3a, b, or c for the alternative test relied upon:		X			
a "Assets" alternative test - enter					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter				+	
2/3 of minimum investment return					
shown in Part X, line 6 for each year listed			`		
c "Support" alternative test - enter:					1
(1) Total support other than gross					
investment income (interest,					ľ
dividends, rents, payments on securities loans (section					
512(a)(5)), or royalties)					
(2) Support from general public					
and 5 or more exempt organizations as provided in					
section 4942(j)(3)(B)(III)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income			<u> </u>	<u> </u>	
Part XV Supplementary Info			if the foundation	n had \$5,000 or m	ore in assets
at any time during the		ructions.)			
1 Information Regarding Foundation	-				
a List any managers of the foundation who year (but only if they have contributed m			ributions received by the	e foundation before the clo	se of any tax
, , , ,	ore than \$0,000). (Occ 3	0000011 307 (0)(2).)			
NONE	own 100/ or more of th	a stack of a corporation	/or an aqually large ports	on of the ownership of a n	artaerehin er
b List any managers of the foundation who other entity) of which the foundation has			(or an equally large porti	on of the ownership of a p	armership or
NONE	- · · · · · · · · · · · · · · · · · · ·				
2 Information Regarding Contribution	on Grant Gift Loan	Scholarchin etc. Pr	rograms		
Check here ► X if the foundation or				not accept unsolicited regi	uests for funds. If
the foundation makes gifts, grants, etc., i					,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
a The name, address, and telephone numb	per or email address of th	ne person to whom applic	cations should be addres	sed-	
, , ,		, ,,			
b The form in which applications should be	submitted and information	tion and materials they s	hould include.		<u>.</u>
c Any submission deadlines:					
d Any restrictions or limitations on awards	, such as by geographica	al areas, charitable fields,	kinds of institutions, or	other factors.	
		,			

81-5192556 Form 990-PF (2017) Page 11 Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to Recipient Purpose of grant or contribution Foundation **Amount** status of any foundation manager or substantial contributor Name and address (home or business) recipient a Paid during the year PHOENIX DREAM CENTER NONE 501(C)(3) GENERAL FUND 3210 GRAND AVE PHOENIX, AZ 85017 5,263. 5,263. Total ▶ 3a **b** Approved for future payment NONE

Total

	Amabiair	a af Imaan	ne-Producin	a Astivition
Parl Avi-A	Anaiysia	s or micor	ne-Producin	u Acuviues

F. A. Carrier and C.	I Ilnrelate	d business income	Evel	ided by section 512, 513, or 514	
Enter gross amounts unless otherwise indicated	(a) Business	(b)	(C) Exclu-	(d)	(e) Related or exempt
1 Program service revenue:	code	Amount	sion	Amount	function income
a			<u> </u>		
b			 		
·			ļ	·	-
d		.	-		
e	 		-		
g Fees and contracts from government agencies					
g Fees and contracts from government agencies 2 Membership dues and assessments	 	<u> </u>	-		
3 Interest on savings and temporary cash	h		 		
investments			i		
4 Dividends and interest from securities			14	4,975.	
5 Net rental income or (loss) from real estate:	t				
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal					**
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory			18	400,053.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory	ļ				
11 Other revenue:					
a			ļ		
b			ļ		
C			ļ <u>.</u>		
d					
e		0.		405,028.	0.
12 Subtotal Add columns (b), (d), and (e)	<u></u>	U •			405,028.
13 Total. Add line 12, columns (b), (d), and (e)				13	403,020.
(See worksheet in line 13 instructions to verify calculations.)					
Part XVI-B Relationship of Activities to	o the Acco	mplishment of Ex	emp	t Purposes	
Line No. Explain below how each activity for which incor	ne is reported ii	n column (e) of Part XVI-A	contrib	outed importantly to the accom	nolishment of
the foundation's exempt purposes (other than t			0011111	nation importantly to the decem	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
SUPPORT EXEMPT PURPOSE	- ALL]	LINES			
				•	
				•	· · · · · · · · · · · · · · · · · · ·
					
		<u>_</u>			

CAMISA FOUNDATION

Form 99	0-PF (2	017) C/O H	IENRY & HC	RNE LI	ıP		81-5	192556	Page 13
.Part	XVII	Information R Exempt Organ		sfers to a	and Transactions a	and Relation	ships With None	charitable	
1 Did	d the or	ganization directly or indi	rectly engage in any	of the following	ng with any other organizati	on described in se	ection 501(c)	Y	es No
(01	ther tha	n section 501(c)(3) orgai	nizations) or in sectio	on 527, relatın	g to political organizations?		()		
) Cash	from the reporting found	ation to a noncharita	bie exempt of	gamzation of			1a(1)	X
•	, Other	assets						1a(2)	Х
		sactions:							
` '	,	of assets to a noncharita						1b(1)	X
		iases of assets from a no I of facilities, equipment,	<u>.</u>	organization				1b(2) 1b(3)	X
٠,	•	oursement arrangements						1b(4)	X
٠.		or loan guarantees						1b(5)	Х
(6)	Perfo	rmance of services or me	embership or fundrai	sing solicitatio	ons			1b(6)	Х
c Sh	aring of	facilities, equipment, ma	uling lists, other asse	ts, or paid em	ployees			1c	X
or col	service: lumn (d	s given by the reporting f) the value of the goods,	oundation. If the foul other assets, or serv	ndation receiv	edule. Column (b) should all ed less than fair market val	ue in any transact	ion or sharing arrangem	ient, show in	
(a)Line n	10	(b) Amount involved	(c) Name of	N/A	e exempt organization	(0) Descrip	tion of transfers transaction	s, and sharing arran	gements
			-	N/A					
	\dashv					+			
				_					
									. <u> </u>
	_			<u></u>					
	+-						····		
	┿								
							 	.	
ın s	section	501(c) (other than section mplete the following sch	n 501(c)(3)) or in se edule.		or more tax-exempt organ	zations described		Yes	X No
		(a) Name of org	janization		(b) Type of organization		(c) Description of rela	itionship	
		N/A				<u> </u>		-	
	_								
						 			-
		·							
Sign Here	and be		mplete Declaration of pro		ng accompanying schedules and n taxpayer) is based on all inform	mation of which prepa	arer has any knowledge	May the IRS discreturn with the p shown below? S	reparer
	J Gright	Print/Type preparer's na		Preparer's S		Date	Check if F	PTIN	
D-· ·		PAMELA D.	WHEELER,				self- employed		
Paid Prepa	3505	EA			D. WHEELER	10/29/18		P000381	
Use (Firm's name ► HEN	KI & HUKN	E, LLP			Firm's EIN ► 86	-013388	T

Form **990-PF** (2017)

Phone no. (480)483-1170

Firm's address ▶ 7098 E. COCHISE SUITE 100

SCOTTSDALE, AZ 85253-4517

Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF. ► Go to www.irs.gov/Form990 for the latest information. OMB No 1545-0047

Employer identification number

2017

	AMISA FOUNDATION O HENRY & HORNE LLP	81-5192556	
rganization type (check one) Illers of: Section: orm 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization orm 990-PF X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation beck if your organization is covered by the General Rule or a Special Rule. ote: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions property) from any one contributor. Complete Parts I and II. See instructions for determining a contribution of the contributor.			
Filers of:	Section:		
Form 990 or 990-EZ	501(c)() (enter number) organization		
	4947(a)(1) nonexempt charitable trust not treated as a private foundation		
	527 political organization		
Form 990-PF	S01(c)(3) exempt private foundation		
	4947(a)(1) nonexempt charitable trust treated as a private foundation		
	501(c)(3) taxable private foundation		
•	·	le See instructions	
Check if your organization is covered by the General Rule or a Special Rule . Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions General Rule			
Special Rules			
sections 509(a)(1 any one contribu) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, tor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amout	or 16b, and that received from	
year, total contrib	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from a outions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educa- cruelty to children or animals. Complete Parts I, II, and III	•	
year, contribution is checked, enter purpose Don't co	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from a section	ore than \$1,000 If this box , charitable, etc ,	
but it must answer "No" o	that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Fi in Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Fo the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)	•	

Name of organization
CAMISA FOUNDATION
C/O HENRY & HORNE LLP

Employer identification number

81-5192556

Part I	Contributors (see instructions) Use duplicate copies of Part I	ıf addıtıonal space ıs needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	CLIFTON AND DEEANN SCHERTZ 7098 E COCHISE ROAD, #100 SCOTTSDALE, AZ 85253	\$\$	Person X Payroll X Noncash X (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Omnicash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
723452 11-01		Schedule B /Form	Person Payroll Noncash (Complete Part II for noncash contributions) 990, 990-EZ, or 990-PF) (2017)

Name of organization

CAMISA FOUNDATION

C/O HENRY & HORNE LLP

Employer identification number

81-5192556

Part II N	oncash Property (see instructions) Use duplicate copies of Part	II if additional space is needed	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
1 65	,000 SHARES OF TIEMPO,INC STOCK	_	
		 ss38,509.	02/03/17
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
- =		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
$-\begin{vmatrix} - \\ - \end{vmatrix}$		 	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
$-\begin{vmatrix} - \\ - \end{vmatrix}$			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
-=		 	
3453 11-01-17		'	90, 990-EZ, or 990-PF) (2

Schedule B (Form 990, 990-EZ, or 990-PF) (2017) Name of organization Employer identification number CAMISA FOUNDATION C/O HENRY'& HORNE LLP 81-5192556 Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for Part III the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious charitable, etc., contributions of \$1,000 or less for the year (Enter this info once) Use duplicate copies of Part III if additional space is needed (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (c) Use of gift (b) Purpose of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

SOURCE GROSS AMOUNT DIVIDENDS PER BOOKS MENT INVEST- ADJUSTED NET INVEST- ADJUSTED NET INCOME NET I	1 990-PF	DIVIDENDS	AND INTER	EST FROM SECU	JRITIES ST	PATEMENT	1
TO PART I, LINE 4 4,977. 2. 4,975. 4,975. FORM 990-PF LEGAL FEES STATEMEN (A) (B) (C) (D) EXPENSES NET INVEST- ADJUSTED CHARI PER BOOKS MENT INCOME NET INCOME PURP LEGAL FEES 4,628. 2,314. 2 TO FM 990-PF, PG 1, LN 16A 4,628. 2,314. 2 FORM 990-PF OTHER PROFESSIONAL FEES STATEMEN (A) (B) (C) (D) EXPENSES NET INVEST- ADJUSTED CHARI PER BOOKS MENT INCOME NET INCOME PURP SCHWAB INVESTMENT FEES 1,524. 1,524. TO FORM 990-PF, PG 1, LN 16C 1,524. 1,524. FORM 990-PF TAXES STATEMEN (A) (B) (C) (D) EXPENSES NET INVEST- ADJUSTED CHARI NET INCOME PURP SCHWAB INVESTMENT FEES 1,524. 1,524. FORM 990-PF TAXES STATEMEN (A) (B) (C) (D) EXPENSES NET INVEST- ADJUSTED CHARI PER BOOKS MENT INCOME NET INCOME PURP CORP. (A) (B) (C) (D) EXPENSES NET INVEST- NET INVEST- NET INCOME PURP	RCE		GAINS	REVENUE	NET INVEST-	(C) ADJUSTE NET INCO	
Ca	RLES SCHWAB	4,977.		2. 4,975	4,975.		•
(A)	PART I, LINE 4	4,977.		2. 4,975	4,975.		
DESCRIPTION EXPENSES NET INVEST- ADJUSTED CHARI PER BOOKS MENT INCOME NET INCOME PURP LEGAL FEES 4,628. 2,314. 2 TO FM 990-PF, PG 1, LN 16A 4,628. 2,314. 2 FORM 990-PF OTHER PROFESSIONAL FEES STATEMEN (A) EXPENSES NET INVEST- ADJUSTED CHARI NET INVEST- ADJUSTED CHARI NET INCOME PURP SCHWAB INVESTMENT FEES 1,524. 1,524. TO FORM 990-PF, PG 1, LN 16C 1,524. 1,524. TO FORM 990-PF TAXES STATEMEN (A) EXPENSES NET INVEST- ADJUSTED CHARI NET INCOME PURP TO FORM 990-PF, PG 1, LN 16C (A) EXPENSES NET INVEST- ADJUSTED CHARI NET INVEST- ADJUSTED CHARI NET INVEST- ADJUSTED CHARI NET INCOME PURP EXPENSES NET INVEST- ADJUSTED CHARI NET INVEST- ADJUSTED CHARI NET INCOME PURP EXPENSES NET INVEST- ADJUSTED CHARI NET INCOME PURP EXPENSES NET INVEST- ADJUSTED CHARI NET INCOME PURP	1 990-PF		LEGAL	FEES	S	FATEMENT	2
TO FM 990-PF, PG 1, LN 16A	RIPTION		EXPENSES	NET INVEST-	ADJUSTED	(D) CHARITAE PURPOSE	
FORM 990-PF OTHER PROFESSIONAL FEES STATEMEN (A) (B) (C) (D EXPENSES NET INVEST- ADJUSTED CHARI PER BOOKS MENT INCOME NET INCOME PURP SCHWAB INVESTMENT FEES 1,524. 1,524. TO FORM 990-PF, PG 1, LN 16C 1,524. (A) (B) (C) (D EXPENSES NET INVEST- ADJUSTED CHARI PER BOOKS MENT INCOME NET INCOME PURP EXPENSES NET INVEST- ADJUSTED CHARI PER BOOKS MENT INCOME NET INCOME PURP	L FEES		4,628.	2,314.		2,31	4.
TAXES (A) (B) (C) (D) (D) EXPENSES NET INVEST- ADJUSTED CHARI PER BOOKS MENT INCOME PURP 1,524. (A) (B) (C) (D) CHARI NET INCOME PURP 1,524. (A) (B) (C) (D) CHARI PURP TO FORM 990-PF, PG 1, LN 16C (A) EXPENSES NET INVEST- ADJUSTED CHARI DESCRIPTION DESCRIPTION PER BOOKS MENT INCOME PURP FOREIGN TAXES	M 990-PF, PG 1, LI	N 16A ==	4,628.	2,314.	,	2,31	4.
DESCRIPTION EXPENSES NET INVEST- ADJUSTED CHARI PER BOOKS MENT INCOME PURP SCHWAB INVESTMENT FEES 1,524. 1,524. TO FORM 990-PF, PG 1, LN 16C (A) (B) (C) (D EXPENSES NET INVEST- ADJUSTED CHARI PER BOOKS MENT INCOME PURP CAN DESCRIPTION EXPENSES NET INVEST- ADJUSTED CHARI PER BOOKS MENT INCOME PURP FOREIGN TAXES	1 990-PF	OT	HER PROFES	SIONAL FEES	Sī	FATEMENT	3
TO FORM 990-PF, PG 1, LN 16C 1,524. 1,524. FORM 990-PF TAXES STATEMEN (A) (B) (C) (D EXPENSES NET INVEST- ADJUSTED CHARI- PER BOOKS MENT INCOME NET INCOME PURP	RIPTION		EXPENSES	NET INVEST-	ADJUSTED	(D) CHARITAB PURPOSE	
FORM 990-PF TAXES (A) (B) (C) (D) EXPENSES NET INVEST- ADJUSTED CHARIT PER BOOKS MENT INCOME NET INCOME PURP	 AB INVESTMENT FEE:	 S	1,524.	1,524.			0.
(A) (B) (C) (D EXPENSES NET INVEST- ADJUSTED CHARI PER BOOKS MENT INCOME NET INCOME PURP	ORM 990-PF, PG 1,	LN 16C	1,524.	1,524.			0.
(A) (B) (C) (D EXPENSES NET INVEST- ADJUSTED CHARI DESCRIPTION PER BOOKS MENT INCOME NET INCOME PURP	1 990-PF		TAX	ES	S	TATEMENT	4
FOREIGN TAXES 32. 32.			EXPENSES	(B) NET INVEST-	ADJUSTED	(D) CHARITAB PURPOSE	
	RIPTION		L DIN DOORD	112111 11100112			S
TO FORM 990-PF, PG 1, LN 18 32. 32.							0.

FORM 990-PF	OTHER	EXPENSES			STATEMENT	5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVE MENT INC		(C) ADJUSTED NET INCOM		
ADVERTISING & PROMOTION OPEARATING EXPENSES	150		75. 4.			75. 4.
TELEPHONE & TELECOMMUNICATIONS	207	•	104.		10	03.
TO FORM 990-PF, PG 1, LN 23	365	•	183.			82.
				-		
DESCRIPTION				_	AMOUNT	
ADJUST THE CONTRIBUTION OF ST	OCK FROM F	MV TO ZERO	COST	BASIS	538,50	9.
TOTAL TO FORM 990-PF, PART II	I, LINE 5			=	538,50	9.
FORM 990-PF	OTHER IN	VESTMENTS			STATEMENT	7
DESCRIPTION		ALUATION METHOD	воо	K VALUE	FAIR MARKE	r
SECURITIES HELD AT SCHWAB		COST		386,595.	402,60	01.

TOTALS INCLUDED ON 990-PF, PAGE 6, PART VIII

	JBSTANTIAL CONTRIB	UTORS	STAT	EMENT 8
NAME OF CONTRIBUTOR	ADDRESS		~	
CLIFTON AND DEEANN SCHERTZ	7098 E COCHIS		, ,	of select
	IST OF OFFICERS, D		STATI	EMENT S
NAME AND ADDRESS	TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB	EXPENSE
DEEANN SCHERTZ 7098 E COCHISE ROAD #100 SCOTTSDALE , AZ 85253	PRESIDENT/DIRE	CTOR 0.	0.	0.
CLIFTON SCHERTZ 7098 E COCHISE ROAD #100 SCOTTSDALE, AZ 85253	VICE PRESIDENT 0.00	/SEC/TREAS/1		0.
TABITHA ANN SCHMALTZ 7098 E COCHISE ROAD #100 SCOTTSDALE, AZ 85253	ASSISTANT VICE	PRESIDENT 0.	0.	0.
HEATHER RENEE SCHERTZ 7098 E COCHISE ROAD #100	ASSISTANT VICE	PRESIDENT 0.	0.	0.
SCOTTSDALE, AZ 85253				

0.

0.

0.