

Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047 2017

Department of the Treasury Internal Revenue Service

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

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

Ā	For the	2017 cale	ndar year, or tax year beginning , 2017, and endi	ng		, 20
В	Check if	applicable.	C Name of organization Rio Ricp Property Owners Assn.		D Employ	er Identification number
	Address		Doing business as Residents of Rio Rico			86-0417407
$\bar{\sqcap}$	Name ch		Number and street (or P O. box if mail is not delivered to street address) Room/si	urte	E Telepho	ne number
一	Initial reti	·	P.O. Box 4052			520-281-7880
$\overline{\sqcap}$		n/terminated	City or town, state or province, country, and ZIP or foreign postal code			
$\overline{\sqcap}$	Amende		Rio Rico, AZ 85648		G Gross re	eceipts \$
\exists			F Name and address of principal officer:	H(a) is this a c		subordinates? Yes No
		p	·	1	•	s included? Yes No
	Tax-exer	mpt status	□ 501(c)(3)	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		a list (see instructions)
<u>:-</u>	Website		200,000	'''	exemption	number ▶ 1
ĸ			✓ Corporation Trust Association Other ► L Year of forma			of legal domicile AZ
P	art I	Summ			1	or regulations / =
-	1		escribe the organization's mission or most significant activities: Rents	facility to Rio	Rico Com	munity Center for
0	ļ .	-	lly, award Schotarships to Rio Rico High School Students			
Governance	İ	····	, , and o or out on po to , the , th			
Ĕ	2	Check th	is box ▶☐ if the organization discontinued its operations or disposed	of more than	25% of	its net assets
Š	3		of voting members of the governing body (Part VI, line 1a).	or more than	3	9
<u>ფ</u>	4		of independent voting members of the governing body (Part VI, line 1b)		4	9
98	5		mber of individuals employed in calendar year 2017 (Part V), line 20	,	5	0
Activities	6		and the state of t	· · · · ·	6	9
5	7a		related business revenue from Part VIII, column (2)-line 12	<u></u>	7a	
٩	1		related business revenue from Part VIII, column (C)-life 12	>		
	b	Net unre	lated business taxable income from Form 990 Tipe 34 9	Prior Ye	7b	Current Year
	1	On makes by	lated business taxable income from Form 990 Mine 34 9			
9	8		tions and grants (Part VIII, line 1h)		812	1636
Ē	9	_	service revenue (Part VIII, line 2g)		7750	0000
Revenue	10		ent income (Part VIII, column (A), lines 3, 4, and (6)		7752	6639
_	11		venue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		2906	
	12		enue-add lines 8 through 11 (must equal Part VIII, còlumn (A), line 12)		11470	8275
	13		nd sımilar amounts paıd (Part IX, column (A), lines 1-3)		3000	4000
	14		paid to or for members (Part IX, column (A), line 4) [
8	15	Salanes,	other compensation, employee benefits (Part IX, column (A), lines 5-10)			
Expenses	16a	Profession	onal fundraising fees (Part IX, column (A), line 11e)			
ă	b		draising expenses (Part IX, column (D), line 25) ▶			
ш	17	Other ex	penses (Part IX, column (A), lines 11a-11d, 11f-24e)		21411	11600
	18	Total exp	penses. Add lines 13-17 (must equal Part IX, column (A), line 25)		24411	15600
	19	Revenue	less expenses. Subtract line 18 from line 12		-12941	-7325
5 8	3			Beginning of Cu	rrent Year	End of Year
sets or	20	Total ass	ets (Part X, line 16)		645485	637860
Net Asse	21	Total liab	vilities (Part X, line 26)			
ž	22	Net asse	ts or fund balances. Subtract line 21 from line 20		645485	637860
P	art II	Signat	ture Block			
Ur	nder pernal	lties of perju	ry, I declare that I have examined this return, including accompanying schedules and state	ements, and to t	he best of r	my knowledge and belief, it is
tru	ie, correct	t, and compl	ete Declaration of preparer (other than officer) is based on all information of which prepare	r has any knowl	edge	
		ΔZ	apex w father		5/	10/18
Si	gn	Sign	ature of officer	Da	te	
He	ere	IN R	PODERIW. PAILISON			
		Туре	or print name and title			
D:	id.	Print/Ty	pe preparer's name Preparer's signature D	ate	Check	PΠN
	aid	_			self-em	ployed
	epare		ame ▶	Firm	n's EIN ▶	
US	se Onl	y	ddress ▶		ne no.	
Ma	y the IR		s this return with the preparer shown above? (see instructions)			· · Yes No
				No. 11282Y		Form 990 (2017)

	90 (2017)	raye 🚣
Part		_
	Check if Schedule O contains a response or note to any line in this Part III	<u> Ц</u>
1	Holds civic meetings for community, makes charitable donations, awards scholarships to Rio Rico High School Students, hosts comm	u mila a camb
	and rents the community to non-profit 501C3 Community Center for \$1 per year to benefit the community.	iurity everi
	and terms are continuously to not position to continuously center to \$1 per year to benefit the continuously.	
2	Did the organization undertake any significant program services during the year which were not listed on the	
	prior Form 990 or 990-EZ?	☑ No
	If "Yes," describe these new services on Schedule O.	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program	
		✓ No
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as mea	
	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations the total expenses, and revenue, if any, for each program service reported.	to otners,
	the total expenses, and revenue, if any, for each program solvior reported.	
4a	(Code:) (Expenses \$ 4000 including grants of \$ 1,000) (Revenue \$	1
44	Scholarships provided to Four Rio Rico High School Seniors to attend college	,
41-	(Code) \(\(\sum_{\text{code}} \) \(\sum_{\te	
4b	Control Eggilly to Disc Community Control to benefit community non-profits	
		
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	,	
	,	
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
4d		
	(Expenses \$ including grants of \$) (Revenue \$)	
4e		
_	Form '	990 (2017)

Form 99				Page 3
Part	V Checklist of Required Schedules		1	r
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		1
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		1
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		-
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		1
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		1
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		✓
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		*
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		✓
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	1	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		1
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	1	
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		1
e f	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	11e		1
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X. Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	11f		1
	Schedule D, Parts XI and XII	12a		1
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		✓
13 14 a	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13 14a		✓
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV.	14b		✓
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		√
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16		<u>·</u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		√
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	-		
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	18 19		√ √
			000	

Form 99	Q (2017)			Page 4
Part	Checklist of Required Schedules (continued)			
	Did the agreement an analysis on a group beautified 16 files 7 complete Cabadula II	-	Yes	No
20 a	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a	 -	-
ь 21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	20b		ļ
21	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		1
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	 	<u> </u>
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		1
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	04-		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24c 24d	 	
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		1
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		✓
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		J
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
_,	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled emitty or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		J
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		1
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		/
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		1
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		1
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I			1
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"	31		•
UL.	complete Schedule N, Part II	32		✓
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		1
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	>	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		1
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		1
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O.	38	1	

Form 99	90, (2017)			Page (
Part	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
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable)		7
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	<u>기</u>		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and	L		
_	reportable gaming (gambling) winnings to prize winners?	1c	1	<u> </u>
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	1	1	
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 0		ļ	_
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	<u> </u>	
0-	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		ļ	-
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	ļ	!
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	ļ —	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			1
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	١.		1
_	·	<u>4a</u>	-	—
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		✓
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		√
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	ļ		
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		-
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or		}	
_	gifts were not tax deductible?	6b	ļ	├
7 a	Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
u	and services provided to the payor?	- <u>-</u> -		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7a 7b		/
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	76		├
·	required to file Form 8282?	7c	}	}
d	If "Yes," indicate the number of Forms 8282 filed during the year	10		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		1
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?.	7f		1
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		1
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		1
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			H
	sponsoring organization have excess business holdings at any time during the year?	8		1
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		1
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		1
10	Section 501(c)(7) organizations. Enter:]
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
Ь	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		<u> </u>
Ь	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			<u> </u>
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		<u> </u>
4	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 which			[
b	the associantion in linear and to leave available the atti-			
_	TOD			!
С	Enter the amount of reserves on hand		1	į !

14a Did the organization receive any payments for indoor tanning services during the tax year?

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

14a

14b

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Part	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes it	n Schedule O.	See ins	struct	ions.
Saction	Check if Schedule O contains a response or note to any line in this Part VI	 -			<u> </u>
Secu	Off 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 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.	la	9		
ь 2	Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relarny other officer, director, trustee, or key employee?		2		1
3	Did the organization delegate control over management duties customarily performed by or ur supervision of officers, directors, or trustees, or key employees to a management company or other		3		1
4 5 6 7a	Did the organization make any significant changes to its governing documents since the prior Form 990 Did the organization become aware during the year of a significant diversion of the organization Did the organization have members or stockholders?	's assets? .	4 5 6	Y >	\ <u>\</u>
b	Are any governance decisions of the organization reserved to (or subject to approval stockholders, or persons other than the governing body?		7b	1	
8	Did the organization contemporaneously document the meetings held or written actions under the year by the following:	ertaken dunng			
a b 9	The governing body?	 he reached at	8a 8b	1	
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O. on B. Policies (This Section B requests information about policies not required by the	· · · ·	9 nue Ce	ode.)	✓
				Yes	No
10a b	Did the organization have local chapters, branches, or affiliates?		10a	y	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before		11a	1	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		1	<u> </u>	
12a b	Did the organization have a written conflict of interest policy? If "No," go to line 13	ise to conflicts?	12a 12b	1	
С	Did the organization regularly and consistently monitor and enforce compliance with the podescribe in Schedule O how this was done	licy? If "Yes,"	12c	√	
13 14 15	Did the organization have a written whistleblower policy?		13	1	
a b 16a	The organization's CEO, Executive Director, or top management official		15a 15b		1
	with a taxable entity during the year?		16a		<u> </u>
	participation in joint venture arrangements under applicable federal tax law, and take steps to organization's exempt status with respect to such arrangements?	safeguard the	16b		
	on C. Disclosure				
17 18	List the states with which a copy of this Form 990 is required to be filed AZ Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and available for public inspection. Indicate how you made these available. Check all that apply.	·	n 501(c)(3)s	only)
19	Own website Another's website Upon request Other (explain in Sche Describe in Schedule O whether (and if so, how) the organization made its governing document financial statements available to the public during the tax year.	s, conflict of in		•	, and
20	State the name, address, and telephone number of the person who possesses the organization' Robert Pattison 520-281-7880, PO Box 4052, AZ 85648	s books and re	cords:	•	

Form	$\alpha \alpha \alpha$	/20	17

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Form 990 (2017)

Part VII	Compensation of Officers, Dire	ctors, Trustees, Key	y Employees, Highest	Compensated Employees,	and
	Independent Contractors				

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

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

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Check this box if neither the organization no		d org	aniz	atic	n c	ompe	nsa	ated any currer	t officer, directo	r, or trustee.
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	box, office or directs	unles	Pos neck is pe	rson	than of the state	an	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) Adolfo Marlinez	6			-						
President	†			1				0	o	0
(2) Robert Pattison	3	_			_		ļ —			
Treasurer	†	1		✓				0	o	0
(3) Norma Martinez	4			1				o	O	0
(4) Erasmo Rascon	1			1				0	0	0
(5) Ana Holman	2			1				0	0	0
(6) David Alvarez	1	1						0	0	0
(7) John Harvey	2	1						0	0	0
(8) William Tomczyk	2	1						0	0	0
(9) Ginger Washburn	2	1						0	0	0
(10)										
(11)										
(12)										
(13)										
(14)										

Form 99 Part	0 (2017) VII Section A. Officers, Directors, Trus	toos Kov F	mplo	/009		nd k	liabe	st C	Compensated F	mnlovees (conti	Page 8
	(A) Name and title	(B) Average hours per	(do n	ot ch	Pos neck s pe	c) ition more	e than o	one n an	(D) Reportable compensation	(E) Reportable compensation from	(F) Estimated amount of
		week (list any hours for related organizations below dotted line)		institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(15)											
(16)											
(17)											
(18)		 						-			
(19)											
(20)											
(21)								-			
(22)								-			
(23)							· · · · ·				·
(24)											<u> </u>
(25)											<u> </u>
1b	Sub-total						L	<u> </u>	0	0	0
c	Total from continuation sheets to Part Total (add lines 1b and 1c)	VII, Sectio			•		•	>	0	0	0
2	Total number of individuals (including bu reportable compensation from the organ	t not limited					above	e) w	ho received mo	ore than \$100,00	00 of
3	Did the organization list any former of employee on line 1a? If "Yes," complete	fficer, direc						-	loyee, or high	<u> </u>	Yes No
4	For any individual listed on line 1a, is the organization and related organizations individual	e sum of re	portal	ole d	com	per	nsatio				ne
5	Did any person listed on line 1a receive of for services rendered to the organization										
Section	on B. Independent Contractors	777 763, 0							uch person	· · · · · · · · · · · · · · · · · · ·	
1	Complete this table for your five highest compensation from the organization. Rel year.										
	(A) Name and business add	iress							(B) Description of se	ervices	(C) Compensation
	Total number of independent contractor							th	ose listed abo	ove) who	1
	received more than \$100,000 of compens	sation from 1	the or	gani	izati	on I					Form 990 (2017)

Part VIII										
		Check if Schedule O contain	s a res	ponse or note to				<u>.</u>		
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514		
ts t	1a	Federated campaigns	1a							
Grants	b	Membership dues	1b	636	ł					
s, Grants Amounts	С	Fundraising events			j					
를 를	d	Related organizations								
Contributions, Gifts, and Other Similar Ar	е	Government grants (contributions								
된	f	All other contributions, gifts, grants	1					ļ		
혈		and similar amounts not included abov		1000	į					
ont nd (g	Noncash contributions included in lines								
	<u>h</u>	Total. Add lines 1a-1f	<u>· · · · </u>	Business Code	1636		! 	+		
Program Service Revenue	2-			Busiless Code						
leve	2a b			 				···		
F	_									
e, vi	c d			 						
٦.	e									
grar	f	All other program service reve	nue .					 		
Pro	g	Total. Add lines 2a-2f		· •			<u> </u>	<u></u>		
	3	Investment income (including								
		and other similar amounts) .		▶	7291	7291		1		
	4	Income from investment of tax-ex	empt be	ond proceeds ▶						
	5	Royalties		▶						
		(i) Ro	al	(ii) Personal		·				
	6a	Gross rents	1		J]		
	b	Less: rental expenses	0							
	С	Rental income or (loss)	1	l						
	_d	Net rental income or (loss) .			1	1		 		
	7a	Gross amount from sales of (i) Secu		(ii) Other						
		assets other than inventory	8000							
	b	Less: cost or other basis and sales expenses .	0052							
		Gain or (loss)	8653 -653							
	d	Net gain or (loss)	-000	•	-653	-653				
	"	rvet gain or (ioss)				-000		 		
9	8a	Gross income from fundraising	ı			1				
je j		events (not including \$,							
ě		of contributions reported on line	1c).	(
9r -		See Part IV, line 18								
Other Reven	b	Less: direct expenses	. b				ı			
•	С	Net income or (loss) from fund	raising	events . >						
	9 a	Gross income from gaming act								
		See Part IV, line 19	· a							
		Less: direct expenses					- 			
		Net income or (loss) from gam		vities >						
	10a	Gross sales of inventory,								
			· a		Ì			1		
	I	Less: cost of goods sold						ļ		
	<u>c</u> _	Net income or (loss) from sales	ot inve							
	-	Miscellaneous Revenue		Business Code				<u> </u>		
	11a			}				 		
	b									
	d	All other revenue		 				 		
	e	Total. Add lines 11a–11d		· · · · · · · · · · · · · · · · · · ·						
	12	Total revenue. See instruction		F	8275	6639				

Form 99	0 (2017)				Page 10
Part					
Section	n 501(c)(3) and 501(c)(4) organizations must com				
	Check if Schedule O contains a respons	se or note to any lin	e in this Part IX .	 	
	include amounts reported on lines 6b, 7b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic individuals. See Part IV, line 22	4000	4000		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign inclividuals. See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members 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 8	Other salaries and wages				· · · · · · · · · · · · · · · · · · ·
9 10	Other employee benefits				
11 a	Fees for services (non-employees): Management]		
b	Legal				
c	Accounting				
d	Lobbying				
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				····
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)				
12	Advertising and promotion				
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy				
17 18	Payments of travel or entertainment expenses for any federal, state, or local public officials			12	
19	Conferences, conventions, and meetings				
20	Interest				. <u>.</u>
21	Payments to affiliates				
22	Depreciation, depletion, and amortization .	11600		11600	
23	Insurance				
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If Irre 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
	` <u> </u>				

b

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26

P	art X	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Par	tX		
			(A) Beginning of year		(B) End of year
\neg	1	Cash—non-interest-bearing	7438	1	1039
	2	Savings and temporary cash investments	6582	2	2494
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	150	4	
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees.			:
		Complete Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under section			
		4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and			,
		sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary		1	
S		organizations (see instructions). Complete Part II of Schedule L		6	
Assets	7	Notes and loans receivable, net		7	
As	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or			1
		other basis. Complete Part VI of Schedule D 10a 561035			ı
	b	Less: accumulated depreciation 10b 275320	292825	10c	285715
	11	Investments—publicly traded securities		11	
	12	Investments—other securities. See Part IV, line 11		12	
	13	Investments—program-related. See Part IV, line 11	338490	13	339644
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	8968
	16	Total assets. Add lines 1 through 15 (must equal line 34)	648485	16	637860
_	17	Accounts payable and accrued expenses		17	
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D .		21	
ŵ	22	Loans and other payables to current and former officers, directors,			
Liabilities	_	trustees, key employees, highest compensated employees, and			
ق		disqualified persons. Complete Part II of Schedule L		22	
Ë	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X			
	i	of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25		26	
		Organizations that follow SFAS 117 (ASC 958), check here ▶ ☐ and			
Ses	l	complete lines 27 through 29, and lines 33 and 34.			
ä	27	Unrestricted net assets		27	
3af	28	Temporarily restricted net assets		28	
ō	29	Permanently restricted net assets		29	
ڃ	{	Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and □			
Net Assets or Fund Balances		complete lines 30 through 34.			
ş	30	Capital stock or trust principal, or current funds		30	
98	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
As	32	Retained earnings, endowment, accumulated income, or other funds .	645485	32	637860
ě	33	Total net assets or fund balances	645485		637860
	34 _	Total liabilities and net assets/fund balances	645485	34	637860

-		Pa	ge 12	
<u></u>				
			8275	
			15600	
			-7325	
		6-	15485	
			-300	
Ш		63	37860	
	<u> </u>	Yes	No	
	Γ	163	140	
in	}	'		
•••				
	2a			
or	20			
VI.				
	2b			
			•	

Reconciliation of Net Assets Part XI Check if Schedule O contains a response or note to any line in this Part XI 1 Total expenses (must equal Part IX, column (A), line 25) 2 2 3 3 4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) . . . 4 5 5 6 Donated services and use of facilities . . 6 7 8 8 9 Other changes in net assets or fund balances (explain in Schedule O) Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 10 Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII Accounting method used to prepare the Form 990: Cash Accrual 1 If the organization changed its method of accounting from a prior year or checked "Other," explain Schedule O. Were the organization's financial statements compiled or reviewed by an independent accountant? . If "Yes," check a box below to indicate whether the financial statements for the year were compiled reviewed on a separate basis, consolidated basis, or both: ☐ Consolidated basis ☐ Both consolidated and separate basis Separate basis Were the organization's financial statements audited by an independent accountant? If "Yes." check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: ☐ Consolidated basis ☐ Both consolidated and separate basis Separate basis 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 Schedule O. As a result of a federal award, was the organization required to undergo an audit or audits as set forth in 3a 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. Form 990 (2017)

SCHEDULE D (Form 990)

Department of the Treasury

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. OMB No 1545-0047

► Attach to Form 990. Open to Public ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Inspection Internal Revenue Service Employer identification number Name of the organization ASSN Rico YRODERIY OWNERS Rio 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 Total number at end of year Aggregate value of contributions to (during year) 2 Aggregate value of grants from (during year) 3 Aggregate value at end of year 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 ☐ No 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? ☐ Yes ☐ No 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 a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space 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 Tax Year Total number of conservation easements . 2a 2b b Total acreage restricted by conservation easements Number of conservation easements on a certified historic structure included in (a) C Number of conservation easements included in (c) acquired after 7/25/06, and not on a 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 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 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 7 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) 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. Part III 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. b 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 following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

Assets included in Form 990, Part X

Schedul	e D (Form 990) 2017									Page 2
_	Organizations Maintaining									
3	Using the organization's acquisition, collection items (check all that apply):		sion, and ot	her reco	rds, che	eck any of th	ne follo	wing that are a	significant u	use of its
а	Public exhibition			d	☐ Loa	ın or exchan	ge prog	grams		
b	Scholarly research			е	□ Oth	er				
C	Preservation for future generations									
4	Provide a description of the organiza XIII.	tíon's	collections a	and expl	ain how	they further	the or	ganization's ex	empt purpos	e in Part
5	During the year, did the organization assets to be sold to raise funds rather									□ No
Part		_								
	Complete if the organization	n ansv	vered "Yes'	on For	m 990,	, Part IV, lin	e 9, or	reported an a	mount on f	orm
	990, Part X, line 21.									
1a	Is the organization an agent, trustee included on Form 990, Part X?									□ No
b	If "Yes," explain the arrangement in P	art XII	and comple	ete the fo	llowing	table:			_	_
			•		_				Amount	
С	Beginning balance						10	c		
đ	Additions during the year						10	d _		
e	Distributions during the year						10	e		
f	Ending balance						1			
2a	Did the organization include an amou									
b_	If "Yes," explain the arrangement in P	art XII	I. Check here	e if the e	xplanati	ion has been	provid	ed on Part XIII	<u> </u>	
Par	Endowment Funds.									
	Complete if the organization									-
		(a) (Current year	(b) Pri	or year	(c) Two yea	rs back	(d) Three years ba	ck (e) Four ye	ears back
1a	Beginning of year balance	<u> </u>								
b	Contributions	<u></u>								
C	Net investment earnings, gains, and losses									
d	Grants or scholarships									
е	Other expenditures for facilities and programs							!		
f	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of the	the cu	rrent year en	d balanc	e (line 1	lg, column (a	a)) held	as:		
а	Board designated or quasi-endowme	nt 🕨		_%						
b	Permanent endowment >	%								
C	Temporarily restricted endowment ▶		<u>"</u> %							
	The percentages on lines 2a, 2b, and									
3a	Are there endowment funds not in the	e pos	session of th	e organi	zation t	hat are held	and ac	iministered for	the	
	organization by:								_ Y	es No
	(i) unrelated organizations		· · · · ·						. 3a(i)	<u> </u>
	(ii) related organizations								. 3a(ii)	
þ	If "Yes" on line 3a(ii), are the related of								. 3b	
4	Describe in Part XIII the intended uses			n's end	wment	tunds.			<u>.</u>	
Part	Land, Buildings, and Equip				000	Double 197 III-	. 44 -	0 004) Doct V II-	- 10
	Complete if the organization	ansv								
	Description of property		(a) Cost or oti			t or other basis (other)		Accumulated lepreciation	(d) Book	alue
1a	Land	. [88000	 		<u> </u>			88000
b	Buildings			467326	<u> </u>		ļ	270497		197829
C	Leasehold improvements	.								
d	Equipment	.		3332				3269		63
<u>e</u>	Other	ــــــــــــــــــــــــــــــــــــــ		2377		(D) ! 1:	2-1	1554		823
Total.	Add lines 1a through 1e. (Column (d) n	nust e	quai Form 99	JU, Part	t, colun	nn (B), IINE 10	JC.) .	. ▶		285715

Part		Return.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	
1	Total revenue, gains, and other support per audited financial statements	1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	
a	Net unrealized gains (losses) on investments	
b	Donated services and use of facilities	
C	Recoveries of prior year grants	
d	——————————————————————————————————————	
e	Add lines 2a through 2d	2e 3
3	Subtract line 2e from line 1	3
4_		
a	Other (Describe in Part XIII.)	
b	Add lines 4a and 4b	4c
С 5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5
Part		
r ar c	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	77 770101111
1	Total expenses and losses per audited financial statements	1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	
~ a	Donated services and use of facilities	
b	Prior year adjustments	
c	Other losses	
d	Other (Describe in Part XIII.)	
e	Add lines 2a through 2d	2e
3	Subtract line 2e from line 1	3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	
a	Investment expenses not included on Form 990, Part VIII, line 7b 4a	
b	Other (Describe in Part XIII.)	
С	Add lines 4a and 4b	4c
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5
	XIII Supplemental Information.	
	le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b	
2; Par	t XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional in	formation.
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	

Schedule D (Fo	orm 990) 2017	Page 5
Part XIII	Supplemental Information (continued)	

*		

SCHEDUILE 0 (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

20**17**

Department of the Treasury Internal Revenue Service Name of the organization ➤ Attach to Form 990 or 990-EZ.
➤ Go to www.irs.gov/Form990 for the latest information.

Open to Public Inspection

Employer identification number

Rio Rico Property Owners Assn	88-0417407
01. Part VI Line 6 -Rio Rico Property Owners Association charges a nominal membership fee of \$12 per year	which provides the members with
voting rights.	
02. Part VI line 7a - Members elect the board members at an annual meeting at year end, the Board members	then elect officers from the Board
03. Part VI line 7b - Members have the right to pass any changes to the By-Laws and pass a budget regulating	g the Board's expenditures
04. Part VI part 11b - Board Members are presented with a copy of the tax return (form 990) and reviewed at a	Board Meeting prior to filing
05. Part VI part 12b - Board Members are presented a copy of the By-Laws and advised of the Conflict of Intel	rest Policy at their first Board Meeting
06. Part VI part 12c- Board Members are exempted on voting on maters that could involve any conflict of inter-	est
07. Part VI line 19 - RRPOA makes the Financial Statements, Meeting Minutes, and By-Laws available to the	public and publishes them on
the website www.rioricocommunitycenter.com	

SCHEDULE PR (Form 990)

Department of the Treasury Internal Revenue Service

(3) (4) (5) (6) 7

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 38, or 37. Attach to Form 990.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047 2017

Open to Public Inspection

Name of the organization RIORICO EPAERTY OWNERS ASSN. Rio Rico Community Center 81-4887903 Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33. (a)
Name, address, and EIN (if applicable) of disregarded entity (c) Legal domicile (state or foreign country) (e) End-of-year assets (f) Direct control (d) Total income entity (1) (2) (3) (4) (5) (6) Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had Part II one or more related tax-exempt organizations during the tax year. (c) Legal domicile (state or foreign country) (e) Public charity status (if section 501(c)(3)) (g) Section 512(b)(13) controlled entity? Yes No (1) Rio Rico Community Center, 391 Avenida Coatimundi, Rio Rico, AZ 85648 ;81-4887903

ΑZ

Community Center

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

Cat. No 50135Y

Schedule R (Form 990) 2017

501c3 ppliedfor 501c3 status Rio Rico Property 0

(3)

(6)

(5)

(n)

Identification of because it had on	Related Organia e or more relate	zations Taxable d organizations	e as a Partners treated as a pa	ship. Complete i artnership during	f the org	anızation an year.	swere	ed "Y	es" o	n Form 990	, Part I	/, line	34,
(a) , address, and EIN of lated organization	(b) Primary ectivit	y Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant Income (retated, unrelated, excluded from tax under sections 512-514)		otal Share of	end-of-	Disprop	orbonate	amount in box of Schedule K	I Gen 20 mar 3-1 par	eralor nagung	(ld) Percentage ownership
			 		-			Yes	No		Yes	No	
	!	A7	Pio Pion Properts	Relate		ļ			1	}	1	,	100
Small Rush, 140 1400, 742 oc	Construintly Constr		Two recorriopers	140000	1					<u> </u>		•	100
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									-				
											\top		•
	!				<u> </u>								
Identification of I	Related Organia thad one or mor	zations Taxable re related organ	e as a Corpora izations treated	tion or Trust. C	omplete n or trus	rf the organ during the	zatior tax ye	n ans ar.	were	d "Yes" on	Form 9	90, Pa	rt IV,
(a) ne, address, and EIN of relate	d organization	(b) Primary activity					Share	of tota		(g) Share of I-of-year assets			(i) tion 512(b)(13) controlled entity?
												Ye	s No
	l Avenida Coatimun	1		Si - Si S			1			_		1	
2 80040; 81-488/903		Community Center	AZ	RIO RICO P	openy C		 						+-
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Part	Transactions With Related Organizations. Complete if the organization answ	vered "Yes" on Forr	n 990, Part IV, line 3	4, 35b, or 36.			
Note	Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule				Y	es No	,
1	During the tax year, did the organization engage in any of the following transactions with one	or more related orga	nizations listed in Part	s i⊢l∨?			_
	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity			-	1a ·	7	_
	Gift, grant, or capital contribution to related organization(s)				1b ·	7	_
c	Gift, grant, or capital contribution from related organization(s)				1c	\top	_
d	Loans or loan guarantees to or for related organization(s)				1d	1	_
ē	Loans or loan guarantees by related organization(s)			F-	1e	7	_
-				·		\neg	_
f	Dividen ds from related organization(s)				11	1	_
a	Sale of assets to related organization(s)				1g	1	_
h	Purchase of assets from related organization(s)				1h	1	_
	Excharage of assets with related organization(s)			i i 📙	11	7	_
i	Lease of facilities, equipment, or other assets to related organization(s)					7	-
,	Course Co. resulting of equipment, or equipment to result of Section 1.			· · · · · · · · · · · · · · · · · · ·	-7-		-
k	Lease of facilities, equipment, or other assets from related organization(s)			<u> </u>	1k	1	
î	Performance of services or membership or fundraising solicitations for related organization(s)				11	1	_
m	Performance of services or membership or fundraising solicitations by related organization(s)				1m	1	_
n	Shanng of facilities, equipment, mailing lists, or other assets with related organization(s).			· · · · · · · · · · · · · · · · · · ·		<i>,</i>	_
	Shanng of paid employees with related organization(s)			 	10	-	-
•	Onling of pair on project minimation of garaction (c)			· · · · · · · · · · · · · · · · · · ·	-		-
р	Reimbursement paid to related organization(s) for expenses				1p		
	Reimblursement paid by related organization(s) for expenses			<u>-</u>	19	1	_
ч	7001112-0-1-0-1-0-1-0-1-0-1-0-1-0-1-0-1-0			·	-		_
r	Other transfer of cash or property to related organization(s)				1r		١
s	Other transfer of cash or property from related organization(s)			 	1s	-	-
2	If the airiswer to any of the above is "Yes," see the instructions for information on who must o					nolds	_
=	(a)	(b)	(c)	(d)			_
	Name of related organization	Transaction	Amount involved	Method of determining a	amount o	rvolved	
		type (a s)					
Ric	Rico Community Center						
(1)		18	1	Vote by membership			_
Rik	Rico Community Center	I					
(2)		1b	8968	Vote by Board			
Ric	Rico Community Center						
(3)		1j	1	Vote by membership			
R	Rico Community Center		1	1			
(4)		tn	285715	Vote by membership			
							_
(5)							_
		}	_				
(6)		L	<u></u>	<u> </u>			_
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Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

	hat was not a related on (a) ss, and EIN of entry	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded)	organizations?		Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	Disprop	h) ortionate stions?	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(i) General or managing partner?		General or managing		General or managing		(k) Percentage ownership
				Sections 512—514)	Yes	No			Yes	No		Yes	No							
(1)														Í						
(2)																				
(3)									1											
(4)																				
(5)																				
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(9)																				
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(14)																				
(15)																				
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Part VII	Supplemental Information. Provide additional information for responses to questions on Schedule R. See instructions.	
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