Return of Organization Exempt From Income Tax

OMB No 1545-0047 2018

Department of the Treasury

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) ▶ Do not enter social security numbers on this form as it may be made public.

Open to Public

	nal Revenu	ue Service	► Go to www.irs.gov/Form990 for instructions and the latest in	nformation.		Inspection
A	For the	2018 cale	ndar year, or tax year beginning July 1 , 2018, and ending	9 Jur	ie 30	, 20 19
В	Check if a	applicable	C Name of organization/Yuma's Education Scholarship Fund for Kids, Inc.		D Employ	er identification number
	Address	change	Doing business as			47-0896753
	Name ch	ange	Number and street (or P O box if mail is not delivered to street address) Room/sur	te	E Telepho	ne number
	initial retu	ım .	340 West 32nd Street PM	B 403		(928) 314-0033
	Final return	n/terminated	City or town, state or province, country, and ZIP or foreign postal code			
	Amended	d return	Yuma, Arizona 85364		G Gross re	eceipts \$ 1,818,924
	Application		F Name and address of principal officer Angela Poels-Hunt	H(a) Is this a gi	roup return for	subordinates? Yes V No
	••	1	4027 South Navel Avenue, Yuma, AZ 85365	<i>3</i> 1		s included? Yes No
	Tax-exen	npt status	✓ 501(c)(3) ☐ 501(c) () ✓ (insert no) ☐ 4947(a)(1) or ☐ 527			list (see instructions)
J	Website:		v.yesfundforklds.org	H(c) Group	exemption	number ▶
ĸ			✓ Corporation ☐ Trust ☐ Association ☐ Other ► L Year of formati			of legal domicile AZ
_	art I	Summa				
	1		scribe the organization's mission or most significant activities: To Impl	lement the A	rizona Pr	Ivate School Tuition
ø		-	t. We are dedicated to increasing the educational opportunities for "School			
auc	1		ivate school tultion by means of scholarships.			L
E			s box ▶☐ if the organization discontinued its operations or disposed o	f more than	25% of	its net assets.
Activities & Governance	l .		of voting members of the governing body (Part VI, line 1a)		3	6
8	l .		of independent voting members of the governing body (Part VI, line 1b)		4	0
ies			nber of individuals employed in calendar year 2018 (Part V, line 2a)		5	0
<u>₹</u>	l .		nber of volunteers (estimate if necessary)		6	0
Ą	l .		elated business revenue from Part VIII, column (C), line 12		7a	0
	l .		ated business taxable income from 999 T. line 38		7b	0
_	<u> </u>		RECEIVED	Pnor Ye	ar	Current Year
•	8	Contribut	ions and grants (Part VIII, line 1h)	•	,604,814	1,818,698
ě	9	Program :	200 in a marine (Part) (III line 0a) [6]		0	0
Revenue	10	Investmer	nt income (Part VIII, column (A), lines 3, 4 and 72, 3, 2019		118	226
č	11	Other reve	enue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) .	-	0	0
			nue – add lines 8 through 11 (must equal Part VIII columni(A), line 12)	•	,604,932	1,818,924
_			nd similar amounts paid (Part IX, column (A), ines 3)		,503,715	1,549,978
	1		paid to or for members (Part IX, column (A), line 4)	_	0:	0
w	1	•	other compensation, employee benefits (Part IX, column (A), lines 5–10)		0	0
Expenses	1		nal fundraising fees (Part IX, column (A), line 11e)		0	0
per			draising expenses (Part IX, column (D), line 25) ▶ 32,025			
ă	1		penses (Part IX, column (A), lines 11a-11d, 11f-24e)	· · · · · · · · · · · · · · · · · · ·	90,960	98,168
	1		enses. Add lines 13–17 (must equal Part IX, column (A), line 25)	•	,594,676	1,648,146
	1	-	less expenses. Subtract line 18 from line 12		10,256	170,778
- S				Beginning of Cu		End of Year
Assets or Balances	20	Total asse	ets (Part X, line 16)		566,194	736,972
Ass	21		lities (Part X, line 26)		0	0
Fund /			s or fund balances. Subtract line 21 from line 20		566,194	736,972
Pá	art II		ure Block			
Un	der penali	ties of perjur	y, I declare that I have examined this promising accompanying schedules and staten	nents, and to the	ne best of r	ny knowledge and belief, it is
tru	e, correct,	and comple	ete, Declaration of preparer (other than officer) is based on ally information of which preparer	has any knowl	edge	
			MIN HOO HUL		No	v 15, 2015
Sig	jn	Signa	etage of office	Da	te	7
He	re		Ancola K roels-Hunt Exect	Directo	_	
		Type	or print name and title			
Pa		Print/Typ	pe preparer's name Preparer's signature Date	te	Check [T of PTIN
	ııu eparei	_			self-emp	
	eparer e Only	1	ame >	Firm	ı's EIN ▶	
US		Firm's ac			ne no	
Ma	y the IR		this return with the preparer shown above? (see instructions)			Yes No
_				0 11282Y		Form 990 (2018)

For Paperwork Reduction Act Notice, see the separate instructions.

Form 99	0 (2018) Page 2
Part	Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	We are dedicated to increasing the opportunities for children to receive a quality education through the efficient implementation
	of the provisions of the Arizona Private School Tultion Tax Credit A.R.S. 43-1089.
	Did the organization undertake any significant program services during the year which were not listed on the
_	prior Form 990 or 990-EZ?
	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
	services?
	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 measured by
	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 761,155. including grants of \$ 728,745) (Revenue \$ 810,254)
	Individual Original Tax Credit tuition scholarships awarded to students attending qualified private schools in Arizona including:
	Emmanuel Christian Academy (Kingman), Grace Fellowship Academy (Buckeye),
	Saint Jerome School (Phoenix),
	Freedom Baptist Academy (Yuma), Hand in Hand Christian School (Yuma),
	Immaculate Conception School (Yuma), Saint Francis of Assisi (Yuma),
	Southwestern Christian School (Yuma), Yuma Adventist Christian School (Yuma),
	Yuma Catholic High School (Yuma), Yuma Christian Academy (Yuma),
	Yuma Lutheran School (Yuma)
4b	(Code:) (Expenses \$ 431,329 including grants of \$ 410,337) (Revenue \$ 524,795)
	Individual Switcher(Overflow) Tax Credit tuition scholarships awarded to students attending qualified private schools in Arizona
	including:
	Emmanuel Christian Academy (Kingman),
	Freedom Baptist Academy (Yuma), Hand in Hand Christian School (Yuma),
	Immaculate Conception School (Yuma), Saint Francis of Assisi (Yuma),
	Saint Jerome School (Phoenix), Saint John Bosco Catholic High School (Phoenix),
	Southwestern Christian School (Yuma), Yuma Adventist Christian School (Yuma),
	Yuma Catholic High School (Yuma), Yuma Christian Academy (Yuma), Yuma Lutheran School (Yuma)
4c	(Code:) (Expenses \$ 437,124 including grants of \$ 392,959) (Revenue \$ 468,650)
	Low Income Corporate Tax Credit tuition scholarships awarded to students attending qualified private schools in Arizona including:
	Freedom Baptist Academy (Yuma), Hand in Hand Christian School (Yuma),
	Immaculate Conception School (Yuma), Saint Francis of Assisi (Yuma),
	Southwestern Christian School (Yuma), Yuma Catholic High School (Yuma),
	Yuma Christian Academy (Yuma), Yuma Lutheran School (Yuma)
	4d- Disabled/Displaced Corporate Tax Credit tuition scholarships awarded to students attending qualified private schools in
	Arizona including:
	Immaculate Conception School (Yuma), Southwestern Christian School (Yuma),
	Yuma Catholic High School (Yuma), Yuma Christian Academy (Yuma), Yuma Lutheran School (Yuma)
4d	Other program services (Describe in Schedule O)
	(Expenses \$ 18,538 including grants of \$ 17,938) (Revenue \$ 15,000)
4e	Total program service expenses ▶ 1,648,146

nm	aan	/201	R)

Form 99	0 (2018)	<i>\</i>	-	Page 3
Part l	V Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes, complete Schedule A	"	1	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	1	1
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition t candidates for public office? If "Yes," complete Schedule C, Part I	3		✓
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(f election in effect during the tax year? If "Yes," complete Schedule C, Part II	1) 4		✓
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership due assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part I	s, // 5		✓
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donor have the right to provide advice on the distribution or investment of amounts in such funds or accounts? "Yes," complete Schedule D, Part I			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		1
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, of debt negotiation services? If "Yes," complete Schedule D, Part IV	a or 		1
10	Did the organization, directly or through a related organization, hold assets in temporarily restricte endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		1
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts V VII, VIII, IX, or X as applicable	I,		
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 mor of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	e 11b		1
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or mor of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	e 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 asset reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	s 11d		1
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part	X 11e		/
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresse the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	s 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? "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional.	/ 12b	+	1
13	is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	-	1
14a	Did the organization maintain an office, employees, or agents outside of the United States?	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.	e 14b	,	/
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to of for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	or 15		1
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.	er 16		1
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services of Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	n 17		1
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions of Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	n 18		✓
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	19		1
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		✓
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	1	1
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization of domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		1
			<u>aar</u>	10040

Part	Checklist of Required Schedules (continued)			
			Yes	No
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	✓	
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		✓
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		<u>✓</u>
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		√
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	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		✓
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		✓
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27	✓	
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		✓_
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		✓_
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	31		<u> </u>
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		✓
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		✓
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	<u> </u>	✓_
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		1
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		✓
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	
Part				_
	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	}		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	4		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	 	
	reportable garning (garnoling) withings to prize withers:		n 99 0	(2018)
				/

Part '	V Statements Regarding Other IRS Filings and Tax Compliance (continued)			
			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b		ļ
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		✓
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		✓
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).			لبا
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			,
	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		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	 7a		√
	and services provided to the payor?	7b		-
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	70	-	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	7c		1
	required to file Form 8282?	70		,
d	If "Yes," indicate the number of Forms 8282 filed during the year		—	
e	Did the organization, during the year, pay premiums, directly or indirectly, no a personal benefit contract? .	7f		7
f	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		1
g h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		1
	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			Ť
8	sponsoring organization have excess business holdings at any time during the year?	8		V
9	Sponsoring organizations maintaining donor advised funds.			<u> </u>
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a	_	1
	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			
b	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		
b	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.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		L.
	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		✓
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O .	14b		<u> </u>
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	ا ء د		,
	excess parachute payment(s) during the year?	15		/
	If "Yes," see instructions and file Form 4720, Schedule N	46		
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		✓
	If "Yes," complete Form 4720, Schedule O.	ــــــــــــــــــــــــــــــــــــــ		1 .

Part	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O.			
	Check if Schedule O contains a response or note to any line in this Part VI			
Sacti	on A. Governing Body and Management	· · ·		<u>. Ľ.</u>
Secu	on A. doverning body and Management		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a	6	1	1
	If there are material differences in voting rights among members of the governing body, or	Ť		
	if the governing body delegated broad authority to an executive committee or similar			1
	committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent . 1b			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2		✓
3	Did the organization delegate control over management duties customarily performed by or under the direct	i		
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3	<u> </u>	√
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		✓
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5	 	/
6	Did the organization have members or stockholders?	6	 	✓
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		1
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		/
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
_	the year by the following:		<u></u>	
а	The governing body?	8a	1	
b	Each committee with authority to act on behalf of the governing body?	8b	ļ	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			_
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	<u></u>	1
Secu	on B. Policies (This Section B requests information about policies not required by the Internal Reve	nue C	Yes	No
100	Did the organization have local chapters, branches, or affiliates?	10a		1
10a	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			+
b	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	 	ļ
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	 	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	12a		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13		 	-
b	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"		\vdash	
С	describe in Schedule O how this was done	12c		1
13	Did the organization have a written whistleblower policy?	13		1
14	Did the organization have a written document retention and destruction policy?	14	1	1
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	-	
	Other officers or key employees of the organization	15b	Ė	1
-	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	. I <u> </u>		.
	with a taxable entity during the year?	16a		1
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its	1		
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Secti	on C. Disclosure			•
17	List the states with which a copy of this Form 990 is required to be filed ▶			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990	-T (Sec	tion !	501(c)
	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. ☐ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of in	nterest	polic	v. and
	financial statements available to the public during the tax year			,,
20	State the name, address, and telephone number of the person who possesses the organization's books and r	ecords		
	Angela Hunt. 4027 South Navel Avenue, Yuma AZ 85365 (928)314-0033			

	-
Dage	- 7
raue	- 4

Form 990 (2018)

Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Hi	ighest C	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

compensated employees; and former such pers	ons										
☐ Check this box if neither the organization no	r any relate	d org	aniz	atio	n c	ompe	nsa	ated any curren	t officer, director	r, or trustee.	
(A) Name and Title	(B) Average hours per week (list any	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other	_
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations	_
(1) Angela Poels-Hunt	30										
Executive Director		✓			<u> </u>			54,841	0		_0
(2) Rodney Reed	0										
President		✓			ļ		<u> </u>	0	0		_0
(3) Gregory Perry Vice President	0	1						0	0		0
(4) Robin Laughlin	1										
Secretary		1						0	0		0
(5) Teresa Waters	0										
Board Member		✓						0	0		0
(6) Kristina Hughes	1				İ						
Board Member		✓			<u> </u>			0	0		0
(8)										·	
(9)											
(10)											_
(11)											_
(12)											_
(13)											
(14)											

Part	Section A. Officers, Directors, Trust (A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(do n box, office or directo	ot ch	Pos neck ss pe	ition more rson irect	tha both significant Highest compensated	one an	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation fror related organizations (W-2/1099-MISC)	(F) able Estimated on from amount of other tions compensations		of Jon. Jon Jon
(15)				6			ted.						
(16)			<u>. </u>					\vdash			 		
(4.7)													
								_					
(19)				-	_	-							
												-	
(22)								<u> </u>					
(23)				-									
(24)			ļ										
(25)						-							
1b c d	Sub-total	VII, Section	n A				·	> >	54,841 54,841		0		0
2	Total number of individuals (including but reportable compensation from the organization)		to th	ose	list	ted	above	e) w	ho received m	ore than \$100,0	000 of		.,
3	Did the organization list any former of employee on line 1a? If "Yes," complete	ficer, direc Schedule J	tor, o	or tr uch	rusto indi	ee, ıvıdı	key e <i>Jal</i>	emp	oloyee, or high	est compensa	ted	Yes	No V
4	For any individual listed on line 1a, is the organization and related organizations individual												✓
5	Did any person listed on line 1a receive of for services rendered to the organization										lual . 5		/
	on B. Independent Contractors								are that recent	ad more than ¢	100.000		
1	Complete this table for your five highest compensation from the organization. Repyear.	compensation compe	nsatio	on fo	or th	ent ne c	alend	acti lar y	year ending wit	h or within the	organiza	tion's	tax
	(A) Name and business add	lress	_			_			(B) Description of s	ervices	Compe		
						-							
								-					
2	Total number of independent contractor	ors (includii	ng bi	ut n	ot	lımıt	ed to	tr	nose listed ab	ove) who			
	received more than \$100,000 of compens	ation from	the or	gan	izat	ion	<u> </u>		0	,			

Pan	VIII	Statement of Revenue				_
		Check if Schedule O contains a response or no	te to any line in thi	s Part VIII		<u></u>
		Check if Schedule O contains a response or no	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
ts st	1a	Federated campaigns 1a	0			
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues 1b	0			1
, Š	С	Fundraising events 1c	0			
ar /	d	Related organizations 1d	0			
S, E	е	Government grants (contributions) 1e	0			
io io	f	All other contributions, gifts, grants,		1		
きを	İ	and similar amounts not included above 1f 1,818	,698		•	
i o	g	Noncash contributions included in lines 1a–1f: \$ 1,818				
Contributions, Gifts, Grants and Other Similar Amounts	h	Total. Add lines 1a-1f	1,818,69	B		
		Business Co	de			
Ven	2a					[
æ	b				- "	
<u>Ş</u> .	С					
Sen	d					
Ē	e					ļ
Program Service Revenue	f	All other program service revenue .				
<u>~</u>	g	101211111111111111111111111111111111111		0		
	3	Investment income (including dividends, intere	∠			
	_	and other similar amounts)				
	4	Income from investment of tax-exempt bond proceeds		0		
	5	Royalties		0	 	
	_		<u>"</u>			1
	6a	Gross rents				
	b	Less: rental expenses	 			
	C	Rental income or (loss) Net rental income or (loss)	•	0		
	d	70	-	<u> </u>	-	
	7a	Gross amount from sales of assets other than inventory	 			
	[-				
	b	Less cost or other basis and sales expenses				
	С	Gain or (loss)				
	d	Net gain or (loss)	<u> </u>	0		
		rver gain or (loss)	· · · · · · · · · · · · · · · · · · ·	<u> </u>		
Revenue	8a	Gross income from fundraising events (not including \$				
Other Re		of contributions reported on line 1c). See Part IV, line 18 a				
₹	ь	Less: direct expenses b				ļ
		- 1131 III. 30	>	0		
	9a	Gross income from gaming activities		1		
		See Part IV, line 19 a				
	1	Less direct expenses b				
			>	0	·	
	10a	Gross sales of inventory, less				
		returns and allowances a				
		Less: cost of goods sold b			-	
	<u>c</u>	Net income or (loss) from sales of inventory		0	 	
		Miscellaneous Revenue Business Co	900	 	 	
	11a			 		
	b			 	 	
	6	All other revenue		+	+	†
	d	Total. Add lines 11a–11d	•	0	 	
	12	Total revenue. See instructions	1 818 92	4	<u> </u>	

Part IX Statement of Functional Expenses

Sectio	n 501(c)(3) and 501(c)(4) organizations must con	nplete all columns. A	ll other organization	s must complete co	lumn (A).
	Check if Schedule O contains a respon	se or note to any lir	ne in this Part IX .		🗆
	t 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	o	0		
2	Grants and other assistance to domestic individuals. See Part IV, line 22	1,549,978	1,549,978		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	0	0		
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	0	0		
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0	0	0	0
_		0	0	0	0
7 8	Other salaries and wages	0	0	0	0
9	Other employee benefits	0	0	0	0
10 11	Payroll taxes	0	0	0	0
а	Management	54,841	24,679	5,484	24,678
b	Legal	0	0	0	0
C	Accounting	6,735	. 0	6,735	0
d	Lobbying		0	0	0
е	Professional fundraising services. See Part IV, line 17	0			0
f	Investment management fees	0	0	0	0
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)				
40	- '	0	0	0	0
12 13	Advertising and promotion	5,367	2,415	537	2,415
14	Information technology	1,727	777	173	777
15	Royalties	0	. 0	0	0
16	Occupancy	9,232	4,154	923	4,155
17	Travel	0	0	0	
18	Payments of travel or entertainment expenses			7	
	for any federal, state, or local public officials	o	o	o	0
19	Conferences, conventions, and meetings .	287	0	287	0
20	Interest	0		0	0
21	Payments to affiliates	0	0	0	0
22	Depreciation, depletion, and amortization .	0	0	0	0
23	Insurance	1,217	0	1,217	<u>0</u>
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
а	Marchant Condes Food	18,762	0	18,762	<u>-</u> <u>-</u>
b	merchant Service Fees	10,702		10,702	
c			·		· · · · · · · · · · · · · · · · · · ·
d					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	1,648,146	1,582,003	34,118	32,025
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ☐ if following SOP 98-2 (ASC 958-720)				
	10110Willig OOF 30"2 (MOC 300"120)	1,648,146	1,582,003	34,118	32,025 Form 990 (2018)
					1 01111 3 3 4 (2010)

	Check if Schedule O contains a response or note to any line in this Par	t X	· —	<u> </u>
		(A)		
		Beginning of year		(B) End of year
1	Cash—non-interest-bearing	473,546	1	644,277
2	Savings and temporary cash investments	92,648		92,694
3	Pledges and grants receivable, net	0	3	0
4	Accounts receivable, net	0	4	0
5	Loans and other receivables from current and former officers, directors,			
	trustees, key employees, and highest compensated employees.			
	Complete Part II of Schedule L	0	5	0
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 organizations (see instructions). Complete Part II of Schedule L			
_ et	<u> </u>	0	$\overline{}$	0
Assets 2 2	Notes and loans receivable, net	0	\longrightarrow	0
` 0	Inventories for sale or use	0		0
9	Prepaid expenses and deferred charges	• 0	9	0
10a				
Ι.			10c	
a t	<u> </u>		-	0
11	Investments—publicly traded securities	0		0
12	Investments – other securities. See Part IV, line 11	<u>U</u>	-	. 0
13	· ·	<u>U</u>	$\overline{}$	0
14	Intangible assets	0	\longrightarrow	0
16	Total assets. Add lines 1 through 15 (must equal line 34)	566,194	$\overline{}$	
17	Accounts payable and accrued expenses	0.00,194		736,972 0
18	Grants payable	<u>U</u>		0
19	Deferred revenue	. 0		0
20	Tax-exempt bond liabilities	0		
21	Escrow or custodial account liability. Complete Part IV of Schedule D.	0		0
I	Loans and other payables to current and former officers, directors,			
Liabilities	trustees, key employees, highest compensated employees, and		ļ	
<u>=</u>	disqualified persons. Complete Part II of Schedule L	0	22	0
చ్ది 23	Secured mortgages and notes payable to unrelated third parties			0
24	Unsecured notes and loans payable to unrelated third parties	0	24	0
25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17–24). Complete Part X			
	of Schedule D	o	25	0
26	Total liabilities. Add lines 17 through 25	0	26	0
ses	Organizations that follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 27 through 29, and lines 33 and 34.			
ğ 27	Unrestricted net assets	555,938	27	566,194
g 28	Temporarily restricted net assets	0		0
2 29	Permanently restricted net assets	0	29	0
or Fund Balances	Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.			
इ 30	Capital stock or trust principal, or current funds	0	30	0
Net Assets 33 33 33	Paid-in or capital surplus, or land, building, or equipment fund	0	31	0
4 32	Retained earnings, endowment, accumulated income, or other funds	10,256	32	170,778
₹ 33	Total net assets or fund balances	566,194		736,972
Z		566.194		

_	4	•
Page	- 1	4

	Check if Schedule O contains a response or note to any line in this Part XI				
			<u> </u>		
1 1	Total revenue (must equal Part VIII, column (A), line 12)	1			18,924
2	Total expenses (must equal Part IX, column (A), line 25)	2		1,64	18,146
3	Revenue less expenses. Subtract line 2 from line 1	3		17	70,778
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		5€	6,194
	Net unrealized gains (losses) on investments	5			0
6	Donated services and use of facilities	6			0
	Investment expenses	7			0
	Prior period adjustments	8			0
	Other changes in net assets or fund balances (explain in Schedule O)	9			0
	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10		73	36 <u>,972</u>
Part 2	Financial Statements and Reporting				_
	Check if Schedule O contains a response or note to any line in this Part XII	<u></u>	<u> </u>		
				Yes	No
	Accounting method used to prepare the Form 990: 🗹 Cash 🔲 Accrual 🔲 Other		.		
	If the organization changed its method of accounting from a prior year or checked "Other," ex Schedule O.	plain in			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		✓
	if "Yes," check a box below to indicate whether the financial statements for the year were compreviewed on a separate basis, consolidated basis, or both:	oiled or			
	Separate basis Consolidated basis Both consolidated and separate basis				
Ь	Were the organization's financial statements audited by an independent accountant?		2b	1	
	if "Yes," check a box below to indicate whether the financial statements for the year were audite separate basis, consolidated basis, or both:	ed on a			
	Separate basis, consolidated basis, or both. ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for or	orniaht			
	of the audit, review, or compilation of its financial statements and selection of an independent accou	ntant?	2c	1	
	if the organization changed either its oversight process or selection process during the tax year, ex Schedule O.	plaın ın			
	As a result of a federal award, was the organization required to undergo an audit or audits as set the Single Audit Act and OMB Circular A-133?	forth in	3a		1
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not unde required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a		3b		
				ո 990	(2018)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Public Charity Status and Public Support

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

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047 2019

Open to Public Inspection

Employer identification number

Yuma	a's Education Scholarship Fund for K						96753	
Pai	Tt Reason for Public Char	rity Status (All	organizations must	comple	te this p	art.) See instruction	ons.	
1	organization is not a private founda	hes, or associati	on of churches descr	ibed in s e	ection 17	'O(b)(1)(A)(i).	MA	
2								
3	A nospital or a cooperative nos						(iii) Enter the	
4	hospital's name, city, and state	•	onjunction with a nos	Jilai desc	inbed in s	section 170(b)(1)(A)	(iii). Enter the 1	
5	An organization operated for t		college or upwerett	owned c	r operate	nd by a government	al unit described in	
	section 170(b)(1)(A)(iv). (Comp	olete Part II)			•		ai unit described ii	
6 7	☐ A federal, state, or local govern ☐ An organization that normally described in section 170(b)(1)	receives a subs	tantial part of its sup				n the general public	
8	☐ A community trust described in	n section 170(b)	(1)(A)(vi). (Complete	Part II.)				
9	An agricultural research organi or university or a non-land-grai university:	nt college of agr	iculture (see instruction	ons). Ente	er the nan	ne, city, and state of	the college or	
10	An organization that normally r receipts from activities related support from gross investment acquired by the organization at	to its exempt fur income and un	nctions—subject to c related business taxa	ertain exc ble incom	ceptions, ne (less si	and (2) no more tha ection 511 tax) from	n 331/3% of its	
11	☐ An organization organized and	operated exclus	sively to test for public	safety.	See sect i	ion 509(a)(4).		
12	An organization organized and of one or more publicly support Check the box in lines 12a thro	orted organizatio	ns described in sect i	on 509(a)(1) or se	ection 509(a)(2). Se	e section 509(a)(3)	
а		-			•	•	_	
_	the supported organization supporting organization.	(s) the power to	regularly appoint or e	lect a ma	gority of t	• , ,,	,, ,,,	
b	Type II. A supporting organ control or management of to organization(s). You must organization(s).	the supporting o	rganızation vested in	the same				
С	Type III functionally integrits supported organization(ally integrated with,	
d	Type III non-functionally integrated that is not functionally integrequirement (see instruction	grated. The orga	nızation generally mu	st satisfy	a distribu	ution requirement an		
е	Check this box if the organ functionally integrated, or T						e II, Type III 	
f	Enter the number of supported of	_						
g	Provide the following information	about the supp	orted organization(s).					
	(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	listed in you	organization ur governing ment?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)	
				Yes	No			
(A)								
(B)								
(C)		i					<u> </u>	
(D)								
(E)								
Takal								

Part	Support Schedule for Organiza	tions Descr	ibed in Sect	ions 170(b)(1)(A)(iv) and	170(b)(1)(A)(v	ri)
	(Complete only if you checked the						alify under
	Part III. If the organization fails to	qualify unde	er the tests lis	sted below, p	lease comple	ete Part III.)	
-	on A. Public Support			1 () 0047	1 0 0040	1 1 2010	
	idar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)					, ,	
6	Public support. Subtract line 5 from line 4						
Secti	on B. Total Support						
	dar year (or fiscal year beginning in) 🕨	(a) 2015	(b) 2016	/(c) 2017	(d) 2018	(e) 2019	(f) Total
7	Amounts from line 4			Ĭ		ļ	
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on	/					
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						_
11 12 13	Total support. Add lines 7 through 10 Gross receipts from related activities, etc. First five years. If the Form 990 is for the organization, check this box and stop her	ie organization				12 ear as a section	
Secti	on C. Computation of Public Suppor			· · · · · ·	<u> </u>	<u> </u>	· · · <u>· </u> - <u>·</u>
14	Public support percentage for 2019 (line 6			1. column (fl)		14	%
15 16a	Public support percentage from 2018 Sch 3312% support test—2019 If the organi	nedule A, Part zation did not	II, line 14 check the box		 nd line 14 is 33	15 31/3% or more,	% check this
Ь	box and stop here . The organization qual 331/3% support test—2018. If the organization this box and stop here . The organization	zation did not	check a box o	on line 13 or 16	a, and line 15	ıs 331/3% or m	
17a							
b	10%-facts-and-circumstances test—20 15 is 10% or more, and if the organiza Explain in Part VI how the organization in supported organization	tion meets th	e "facts-and-o	circumstances' stances" test.	test, check	this box and	stop here.
18	Private foundation. If the organization disinstructions	d not check a	box on line 13	, 16a, 16b, 17a			see

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Secti	on A. Public Support	unaci the tes	sta fiated beig	w, picase co	impiete i ait i		
	idar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and membership fees	(4) 2010	(2) 20.0	(0) 20	(2) 20.0	(0) 20 10	(i) rota
	received. (Do not include any "unusual grants")	1,336,735	1,373,410	1,462,538	1,604,814	1,818,698	7,596,195
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose.	1,330,733	1,373,410	1,402,558	1,004,014	1,010,050	7,530,133
3	Gross receipts from activities that are not an unrelated trade or business under section 513		_				
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						_
6 7a	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons .	1,336,735	1,373,410	1,462,538	1,604,814	1,818,698	7,596,195
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)	8				é	7,596,195
Secti	on B. Total Support						
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9	Amounts from line 6	1,336,735	1,373,410	1,462,538	1,604,814	1,818,698	7,596,195
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources.		440	404		222	
b		125	142	124	118	226	735
С	Add lines 10a and 10b	125	142	124	118	226	735
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carned on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)	1,336,860	1,373,552	1,462,662	1,604,932	1,818,924	7,596,930
14	First five years. If the Form 990 is for the organization, check this box and stop he	-	s first, second		or fifth tax ye		501(c)(3) ▶ □
Secti	on C. Computation of Public Suppor						
15	Public support percentage for 2019 (line 8	3, column (f), di	vided by line 1	3, column (f))		15	99.99 %
16	Public support percentage from 2018 Sch			<u></u>	<u> </u>	16	99.99 %
Secti	on D. Computation of Investment In						
17	Investment income percentage for 2019 (-	• • •	•		17	.0001 %
18	Investment income percentage from 2018					18	.0001 %
19a	331/3% support tests—2019. If the organi						
-	17 is not more than 33½%, check this box				-		_
b	331/3% support tests – 2018. If the organize line 18 is not more than 331/3%, check this be						
20	Private foundation. If the organization di		-			-	

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Socti	Sections A, D, and E. II you checked 12d of Part I, complete Sections A and D, and complete i	an v	· <u>) </u>	
Secu	on A. All Supporting Organizations		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation of this tone and continuing relationship, explain.	1	Sart.	
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2	Ser Sir	K
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	3a		NED W
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination	3b	ireis La	ara i
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3c	1	4
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.	4a	No.	
ь	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b	15 mg	. ".
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	40	是一	でを開
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).	58	18.35	
þ	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b	教教	
6	Substitutions only. Was the substitution the result of an event beyond the organization's control? Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.	5		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)	7	医	
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)	8	10.00	6 4
	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .	9a	A. C. P.	
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.	9b	104AE	7783
С	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9c	- A	MA
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.	10a	***	15.74 15.74
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to	17.5	學影響	經濟。

determine whether the organization had excess business holdings.)

)

10b

Part	IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?	20 150	4 Th. 5'	13/4
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)	27	200	. ne
	below, the governing body of a supported organization?	11a		
	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c	l .	<u> </u>
Secti	on B. Type I Supporting Organizations			
_	Dalli I. I. I. I. I. I. I. I. I. I. I. I. I.	84 1	Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the	436		2
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or	3. 4	417	
	controlled the organization's activities. If the organization had more than one supported organization,	* *		_ ~\f
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported	1		14
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1	مست	E TE
2	Did the organization operate for the benefit of any supported organization other than the supported			· 3
_	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part	7.7.1		1. 3
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,	8	7 9 K	先
	supervised, or controlled the supporting organization.	2		
Secti	on C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors		40 5.0 ·	3.3
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control	. ;		, G
	or management of the supporting organization was vested in the same persons that controlled or managed	اعجدا	*	
	the supported organization(s).	_1_		
Secti	on D. All Type III Supporting Organizations		14	
		ليب	Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax	A42.	3	
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the	200	100	100
	organization's governing documents in effect on the date of notification, to the extent not previously provided?			أسنف
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	****	- ئى -	g Day
_	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how	· · · · · · · · · · · · · · · · · · ·	~ 14	4.
	the organization maintained a close and continuous working relationship with the supported organization(s).	2	<u></u> -	
3	By reason of the relationship described in (2), did the organization's supported organizations have a	19, 3, 4	THE AL	o code
	significant voice in the organization's investment policies and in directing the use of the organization's	2.3	10	7
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's	5		***
	supported organizations played in this regard.	3		
Se <u>cti</u>	on E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see i	nstru	ctions	s).
а	☐ The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
C	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see ins		
2	Activities Test. Answer (a) and (b) below.	25.00	Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of	ST.	1	
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes,	1.55		4.6
	how the organization was responsive to those supported organizations, and how the organization determined	1	\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.	161
	that these activities constituted substantially all of its activities	2a		النسينك
, p	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more		2008	ANTES
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the		100	
	reasons for the organization's position that its supported organization(s) would have engaged in these		E STEEL	31.7 TO
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.	5	p"\1.	· Will
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	1	أممت	X
	trustees of each of the supported organizations? Provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	100	12 A 3	歌剧
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Or	gani	zations	
1 Check here if the organization satisfied the Integral Part Test as a qualifying	_		•
instructions. All other Type III non-functionally integrated supporting orga	nızat	ions must complete Sec	
Section A—Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or			
maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B—Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			No.
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).			
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C—Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions).	6		
7 Check here if the current year is the organization's first as a non-functional instructions).	lly int	egrated Type III support	ing organization (see

Sect	iype III Non-runctionally integrated 509(a)(a)	s) Supporting Organi	zations (continued)	Current Year	
	Amounts paid to supported organizations to accomplish				
2	Amounts paid to perform activity that directly furthers exe organizations, in excess of income from activity	empt purposes of suppo	опеа		
3	Administrative expenses paid to accomplish exempt purp	sonos of supported orga	Inizations		
$\frac{3}{4}$	Amounts paid to acquire exempt-use assets	oses of supported orga	u iizatioris	 -	
	Qualified set-aside amounts (prior IRS approval required)				
	Other distributions (describe in Part VI). See instructions.				
 7	Total annual distributions. Add lines 1 through 6.				
8	Distributions to attentive supported organizations to which	h the organization is res	sponsive		
	(provide details in Part VI). See instructions.				
9	Distributable amount for 2019 from Section C, line 6				
<u>10</u>	Line 8 amount divided by line 9 amount	-			
Sect	ion E—Distribution Allocations (see Instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019	
1	Distributable amount for 2019 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2019 (reasonable cause required—explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2019				
a	From 2014				
b	From 2015		`		
c	From 2016				
d	From 2017		· · · · · · · · · · · · · · · · · · ·		
	From 2018				
f	Total of lines 3a through e				
<u>g</u>	Applied to underdistributions of prior years	<u> </u>			
	Applied to 2019 distributable amount			·	
_ <u>i</u>	Carryover from 2014 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f. Distributions for 2019 from				
-	Section D, line 7:				
а	Applied to underdistributions of prior years				
b	Applied to 2019 distributable amount				
С	Remainder. Subtract lines 4a and 4b from 4.				
5	Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.				
7	Excess distributions carryover to 2020. Add lines 3 _j and 4c.				
8	Breakdown of line 7:				
a	Excess from 2015				
b	Excess from 2016				
····	Excess from 2017			···	
d	Excess from 2018	·			
e	Excess from 2019				

Schedule A (F	Form 990 or 990-EZ) 2019 Page 8
Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)
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SCHEDULE (Form 990)

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

► Attach to Form 990.

% □ **Employer Identification number** √ Yes 47-0896753 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and ► Go to www.irs.gov/Form990 for the latest information. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States the selection criteria used to award the grants or assistance? General Information on Grants and Assistance ruma's Education Scholarship Fund for Kids, Inc. Department of the Treasury Internal Revenue Service Name of the organization

Partl

	,						
1 (a) Name and address of organization or government	(p) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
	-						
Enter total number of section Enter total number of other o	1501(c)(3) and gov rganizations listed	rernment organiza in the line 1 table	tions listed in the li	ine 1 table			A A
perwork Reduction Act Notice,	see the Instruction	s for Form 990.		ပိ	t No 50055P		Schedule I (Form 990) (2019)
	or government Enter total number of section Enter total number of other o	Enter total number of section 501(c)(3) and government of other organizations listed aperwork Reduction Act Notice, see the Instruction	(1) (2) (3) (4) (6) (6) (7) (7) (10) (11) (12) 2 Enter total number of section 501(c)(3) and government organiza 3 Enter total number of other organizations listed in the line 1 table For Paperwork Reduction Act Notice, see the Instructions for Form 990.	or government (frapplicable) grant grant or gran	grant grant rizations listed in the lirable rich rizations listed in the lirable rich rich rich rich rich rich rich rich	or government "If applicable" "Gash assistance of look, FMV, appraisable" Interpretation to general control of the properties of the pr	grant cash assistance (book, FMV, appraisal, other) Cash assistance (book, FMV, appraisal, other) Cash assistance (book, FMV, appraisal, other) Cash assistance (book, FMV, appraisal, other) Cash assistance (book, FMV, appraisal, other) Cash assistance (book, FMV, appraisal, other) Cash assistance (book, FMV, appraisal, other) Cash assistance (book, FMV, appraisal, other)

to the school tuition organization in a timely manner. The application is available in a PDF format on our website. dependents on the application. The student enrollment is then verified with the administration of the school by our organization. An application is only valid for one school year, and the parent must re-apply each year. The Yuma's Education Scholarship Fund board of directors reviews the applications and awards scholarships based on financial need. Upon board approval, the scholarships are issued to the qualified private school in Arizona. The school is informed by letter that they may not receive an amount per student (from all tuition organizations) in excess of the total tuition amount due for each school year. In the event an excess amount is received by the school, then they are instructed to return the excess funds Student scholarship applications are submitted by parents for tuition assistance at private schools in the state of Arizona. The parent supplies their income level and number of

scholarships to Southwestern Christian School 100 254,232 1 254,232 1 254,232 2 254,23

Part IV

Schedule I (Form 990) (2019)

SCHEDULE ! (Form 990)

Department of the Treasury nternal Revenue Service

Part

Part II

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

1545-0047		
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Open to Public Inspection 2019

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Employer identification number 47-0896753 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed ▶ Go to www.irs.gov/Form990 for the latest information. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. ► Attach to Form 990 the selection criteria used to award the grants or assistance? General Information on Grants and Assistance Yuma's Education Scholarship Fund for Klds, Inc Name of the organization

% □

✓ Yes

(h) Purpose of grant or assistance (g) Description of noncash assistance . . (f) Method of valuation (book, FMV, appraisal, other) (e) Amount of noncash assistance Enter total number of section 501(c)(3) and government organizations listed in the line 1 table (d) Amount of cash grant Enter total number of other organizations listed in the line 1 table (c) IRC section (if applicable) (p) EIN 1 (a) Name and address of organization or government (12) <u>@</u> 9 E ල € ε 9 <u>N</u> 9 9

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

Cat No 50055P

Schedule I (Form 990) (2019)

Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. Part III

r art ill call be duplicated il additional space is needed.	space is record	٦,			
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
1 scholarships to Emmanuel Christian Academy	-	3,261			
2 scholarships to Freedom Baptist Academy	16	18,862			
3 scholarships to Grace Fellowship Academy	-	422			
4 scholarships to Hand in Hand Christian School	9	7,113			
5 scholarships to Immaculate Conception School	108	160,568			
6 scholarships to Saint Francis of Assisi	85	134,901			
7 scholarships to Southwestern Christian School	100	254,232			
Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.	the information r	equired in Part I, line	e 2; Part III, columr	(b); and any other additi	onal information.

Student scholarship applications are submitted by parents for tuition assistance at private schools in the state of Arizona. The parent supplies their income level and number of board approval, the scholarships are issued to the qualified private school in Arizona. The school is informed by letter that they may not receive an amount per student (from all tuition organizations) in excess of the total tuition amount due for each school year. In the event an excess amount is received by the school, then they are instructed to return the excess funds dependents on the application. The student enrollment is then verified with the administration of the school by our organization. An application is only valid for one school year, and the parent must re-apply each year. The Yuma's Education Scholarship Fund board of directors reviews the applications and awards scholarships based on financial need. Upon to the school tuition organization in a timely manner. The application is available in a PDF format on our website.

Schedule ((Form 990) (2019)

Schedule I (Form 990) (2019)

(f) Description of noncash assistance Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information. Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. (e) Method of valuation (book, FMV, appraisal, other) (d) Amount of noncash assistance 38,081 3,224 4,224 376,997 499 547,594 (c) Amount of cash grant (b) Number of recipients 279 46 8 53 ~ scholarships to Saint John Bosco Catholic School 3 scholarships to Yuma Adventist Christian School scholarships to Yuma Catholic High School scholarships to Yuma Christian Academy 6 scholarships to Yuma Lutheran School scholarships to Saint Jerome School (a) Type of grant or assistance continuation page Part III Part IV N 4 Ŋ

Schedule I (Form 990) (2019)

SCHEDULE L (Form 990 or 990-EZ)

Transactions With Interested Persons

➤ Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

➤ Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

	of the organization	P G0 t	o www.irs.gov/F	OHHISSU	7 IOI INSUI	acuons and	uie iau		nployer ic	entificat	ion nu	mber	SIQII		
	5	hin Fund for Kir	to Inc								08967				
	a's Education Scholars Excess Bene	fit Transaction		(c)(3)	section	501(c)(4) a	nd se	ection 501(c)	(29) org						
	Complete if the	ne organization	answered "Ye	s" on l	Form 99	0, Part IV,	ine 25	5a or 25b, or	Form 9	90-EZ,	Part	V, line	40b		
			(b) Relationship be											rected?	
1	(a) Name of disqualified	person	• •	organiza	•	,		(c) Desci	ription of t	ansactio	n		Yes	No	
(1)			-				-								
(2)							 						·		
(3)							-							_	
(4)							<u> </u>				-				
(5)							1								
(6)							 								
2	Enter the amount	of tax incurred	by the organ	nizatio	n manad	ers or dis	gualif	led persons	durina	the ve	ear				
_	under section 4958		-			_					▶ §				
3	Enter the amount o		line 2 above								▶ \$				
•	Litter the amount o	i tax, ii airy, ori	mic z, above,	·CIIIID	uiseu by	r inc organ	12410	.,			•				
Par	il loons to and	/or From Inter	ented Pamer												
r ai		ne organization			Form 99	0-EZ. Part	V. lıne	e 38a or For	m 990. F	Part IV.	line 2	6: or	f the		
	organization r	eported an amo	ount on Form 9	990, P	art X, line	e 5, 6, or 2	2.		, .	,		,			
	-			Γ		T		T			1		·		
(a) f	Name of interested person	(b) Relationship with organization	(c) Purpose of loan		oan to or om the	(e) Origii principal an		(f) Balance of	tue (g) i	(g) in default?		proved oard or		(i) Written greement?	
		Willi Organization	loan		nization?	principal ai	nount					nittee?	agree	menti	
				То	From	-			Ye	s No	Yes	No	Yes	No	
/41				10			·		- 16	110	163	110	163		
(1)					+						H	 			
(3)		 			+						1	1		-	
(4)				-	+			+		-		 			
(5)					+					1		 		-	
					+	 		 		+	1	1	-		
(6)					+						1	1			
(7)				-	+						 	<u> </u>			
(8)				-	+						├	1		—	
(9)		 			+					-	├	├	<u> </u>	—	
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Par	Complete if the	sistance Bener ne organization				n Part IV I	ine 2	7							
	<u>.</u>						T			ı					
(a	Name of interested persor		ship between intere and the organization		(c) Amount	of assistance	'	(d) Type of assu	stance	(e) Purpo	ose of a	ssistan	ce	
- (4)				" "			<u> </u>								
	Tyler Hughes	Board men						larship		tuitio					
(2)	Dylan Hughes	Board men			<u>.</u>			larship		tuitio					
	Braden Hunt	Directors s			-		1	larship		tuitio					
	Andrew Perry	Vice Presid	lents son			5,075	scho	alrship		tuitio	<u>n</u>				
(5)							-		-	+					
(6)		-					-			+					
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(8)							<u> </u>			 					
(9)							1			1					

Part IV	Business Transactions Involv Complete if the organization an	ing Interested Persons. swered "Yes" on Form 99	0, Part IV, line 28a, 2	28b, or 28c.	_	
	(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	organi	anng of zation's nues?
					Yes	No
(1)						
(2)		<u> </u>			_	
(3)		-			-	-
(4) (5)			-			
(6)						
(7)		 				
(8) (9)					-	
(10)						┢
Part V	Supplemental Information. Provide additional information (for responses to questions	on Schedule L (see	instructions)		
						
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SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Name of the organization

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

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

OMB No 1545-0047

2019

Open to Public Inspection

Employer identification number

Yuma's Education Scholarship Fund for Kids, Inc.	47-0896753
Part VI Section A Line 8a and Section B Line 11a:	
Form 990 and all supporting schedules were completed by the Executive Director and the provided to the	President of the organization
for review. All financial information used to complete the form 990 is reviewed each month by the board m	embers at the monthly meeting.
Part Vi Section B Line 14:	
Documents related to schoalrship applicants, banking statements, and donations for the organization will	be retained for a minimum of
seven years, and then shredded. All financial statements, and state and federal tax related documents are	being retained since inception
of the organization.	
Part VI Section B Line 15a:	
The board established a compensation plan for the Executive Director during the monthly meeting held in A	August 2008. The conpensation
plan states that the Executive Director shall be paid a percentage of the total donations received during the	e month. This is to be paid on
a monthly basis. The Executive Director is an independent contractor and therefore Issued a Form 1099 at	the end of the calendar year.
Part VI Section C Line 19:	
The organization keeps all governing documents, policies, and financial statements at the office located at	550 E 32nd Street, Sulte 3,
Yuma, AZ 85365. Request by the public to see any of these documents would be taken by the Executive Di	rector to the board for
advisement, and then made available in paper form.	
Part XII Line 2c:	
Legislation requires that we have our financial statemnts audited by an independent Certified Public Accord	untant each year. The process
is overseen by the Executive Director and President of our organization. The auditors statements are provi	ded to the rest of the board
members for review upon completion of the audit.	

Schedule O (Form 990 or 990-EZ) (2019)	Page 2
Name of the organization	Employer identification number
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