Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

OMB No. 1545-0047

2002

A For the 2002 calendar year, or tax year beginning 7/1/2002 **and ending** 6/30/2003

B Check if applicable:
☐ Address change
☐ Name change
☐ Initial return
☐ Final return
☐ Amended return
☐ Application pending

Please use IRS label or print or type. See Specific Instructions.

C Name of organization: Yavapai College Foundation
Number and street (or P O box if mail is not delivered to street address): 1100 East Sheldon Street
Room/suite:
City or town: Prescott
State or country: AZ
ZIP + 4: 86301

D Employer identification number 23-7232985
E Telephone number 776-2603
F Accounting method: ☒ Cash ☐ Accrual ☐ Other (specify) ▶

• **Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).**

G Web site: ▶

H and I are not applicable to section 527 organizations
H(a) Is this a group return for affiliates? ☐ Yes ☒ No
H(b) If "Yes," enter number of affiliates ▶
H(c) Are all affiliates included? ☐ Yes ☐ No
(If "No," attach a list. See instructions.)
H(d) Is this a separate return filed by an organization covered by a group ruling? ☐ Yes ☒ No
I Enter 4-digit GEN ▶ NA

J ORGANIZATION TYPE (check only one) ▶ ☒ 501(c) (3) ◀ (insert no) ☐ 4947(a)(1) OR ☐ 527

K Check here ▶ ☐ if the organization's gross receipts are normally not more than $25,000 The organization need not file a return with the IRS; but if the organization received a Form 990 Package in the mail, it should file a return without financial data. SOME STATES REQUIRE A COMPLETE RETURN

M Check ▶ ☐ if the organization is NOT required to attach Sch B (Form 990, 990-EZ, or 990-PF)

L Gross receipts. Add lines 6b, 8b, 9b, and 10b to line 12 ▶ 1,620,368

Revenue, Expenses, and Changes in Net Assets or Fund Balances (See page 17 of the instructions.)

Revenue

1	Contributions, gifts, grants, and similar amounts received:					
a	Direct public support		1a	1,023,251		
b	Indirect public support		1b			
c	Government contributions (grants)		1c			
d	TOTAL (add lines 1a through 1c) (cash $ 888,145 noncash $ 65,997)				1d	1,023,251
2	Program service revenue including government fees and contracts (from Part VII, line 93)				2	
3	Membership dues and assessments				3	
4	Interest on savings and temporary cash investments				4	12,211
5	Dividends and interest from securities				5	152,633
6 a	Gross rents		6a	113,737		
b	Less: rental expenses		6b	19,414		
c	Net rental income or (loss) (subtract line 6b from line 6a)				6c	94,323
7	Other investment income (describe ▶)				7	
8 a	Gross amount from sales of assets other than inventory	(A) Securities	8a	(B) Other 250,000		
b	Less: cost or other basis and sales expenses		8b	228,156		
c	Gain or (loss) (attach schedule)	0	8c	21,844		
d	Net gain or (loss) (combine line 8c, columns (A) and (B))				8d	21,844
9	Special events and activities (attach schedule)					
a	Gross revenue (not including $ 0 of contributions reported on line 1a)		9a	68,536		
b	Less: direct expenses other than fundraising expenses		9b	31,300		
c	Net income or (loss) from special events (subtract line 9b from line 9a)				9c	37,236
10 a	Gross sales of inventory, less returns and allowances		10a			
b	Less: cost of goods sold		10b			
c	Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)				10c	0
11	Other revenue (from Part VII, line 103)				11	
12	TOTAL REVENUE (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)				12	1,341,498

Expenses

13	Program services (from line 44, column (B))	13	380,210
14	Management and general (from line 44, column (C))	14	139,249
15	Fundraising (from line 44, column (D))	15	0
16	Payments to affiliates (attach schedule)	16	
17	TOTAL EXPENSES (add lines 16 and 44, column (A))	17	519,459

Net Assets

18	Excess or (deficit) for the year (subtract line 17 from line 12)	18	822,038
19	Net assets or fund balances at beginning of year (from line 73, column (A))	19	4,702,112
20	Other changes in net assets or fund balances (attach explanation)	20	79,137
21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21	5,603,287

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-ITA) **For Paperwork Reduction Act Notice, see the separate instructions.**

14

Statement of Functional Expenses All organizations must complete column (A) Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others (See page 21 of the instructions)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22 Grants and allocations (attach schedule) (cash $ ____ noncash $ ____)	22	0			
23 Specific assistance to individuals (attach schedule)	23	0			
24 Benefits paid to or for members (attach schedule)	24	0			
25 Compensation of officers, directors, etc.	25	0			
26 Other salaries and wages	26	73,344		73,344	
27 Pension plan contributions	27	0			
28 Other employee benefits	28	0			
29 Payroll taxes	29	12,844		12,844	
30 Professional fundraising fees	30	0			
31 Accounting fees	31	12,919		12,919	
32 Legal fees	32	0			
33 Supplies	33	1,413		1,413	
34 Telephone	34	0			
35 Postage and shipping	35	0			
36 Occupancy	36	0			
37 Equipment rental and maintenance	37	0			
38 Printing and publications	38	2,940		2,940	
39 Travel	39	135		135	
40 Conferences, conventions, and meetings	40	0			
41 Interest	41	0			
42 Depreciation, depletion, etc. (attach schedule)	42	0			
43 Other expenses not covered above (itemize) a	43a	0			
b See Functional Expense Schedule	43b	397,848	380,210	17,638	0
c Professional services	43c	2,884		2,884	
d Loss on disposal of asset	43d	15,132		15,132	
e	43e	0			
f	43f	0			
44 TOTAL FUNCTIONAL EXPENSES (add lines 22 through 43) ORGANIZATIONS COMPLETING COLUMNS (B)-(D), CARRY THESE TOTALS TO LINES 13-15	44	519,459	380,210	139,249	0

JOINT COSTS. Check ▶ ☐ if you are following SOP 98-2.

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? ▶ ☐ Yes ☐ No

If "Yes," enter (i) the aggregate amount of these joint costs $ ____ ; (ii) the amount allocated to Program services $ ____ ;

(iii) the amount allocated to Management and general $ ____ , and (iv) the amount allocated to Fundraising $

Statement of Program Service Accomplishments (See page 24 of the instructions.)

What is the organization's primary exempt purpose? ▶ Support Yavapai College Objectives and Activities

All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)

	Program Service Expenses (Required for 501(c)(3) and (4) orgs , and 4947(a)(1) trusts, but optional for others.)
a PROVIDED SCHOLARSHIPS TO YAVAPAI COLLEGE STUDENTS FOR THE 2001-2002 ACADEMIC YEAR (Grants and allocations $)	112,391
b ASSISTANCE TO YAVAPAI COLLEGE PERFORMANCE HALL (Grants and allocations $)	22,245
c ASSISTANCE TO THE YAVAPAI COLLEGE ATHLETIC DEPARTMENT (Grants and allocations $)	21,606
d ASSISTANCE TO THE YAVAPAI COLLEGE ART DEPARTMENT AND PROGRAMS (Grants and allocations $)	22,742
e Other program services (attach schedule) (Grants and allocations $)	201,226
f TOTAL OF PROGRAM SERVICE EXPENSES (should equal line 44, column (B), Program services) ▶	380,210

Balance Sheets (See page 24 of the instructions.)

		Note: *Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.*			(A) Beginning of year		(B) End of year
Assets	45	Cash - non-interest-bearing			21,746	45	14,391
	46	Savings and temporary cash investments			581,696	46	1,040,155
	47 a	Accounts receivable	47a	0			
	b	Less: allowance for doubtful accounts	47b	0	0	47c	0
	48 a	Pledges receivable	48a	0			
	b	Less: allowance for doubtful accounts	48b	0	0	48c	0
	49	Grants receivable				49	
	50	Receivables from officers, directors, trustees, and key employees (attach schedule)			0	50	0
	51 a	Other notes and loans receivable (attach schedule)	51a	0			
	b	Less: allowance for doubtful accounts	51b	0	0	51c	0
	52	Inventories for sale or use				52	
	53	Prepaid expenses and deferred charges			3,194	53	1,400
	54	Investments - securities (attach schedule) ▶ ☐ Cost ☒ FMV			3,108,025	54	3,554,929
	55 a	Investments - land, buildings, and equipment: basis	55a	861,470			
	b	Less: accumulated depreciation (attach schedule)	55b	254,042	626,289	55c	607,428
	56	Investments - other (attach schedule)			0	56	0
	57 a	Land, buildings, and equipment: basis	57a	0			
	b	Less: accumulated depreciation (attach schedule)	57b	0	0	57c	0
	58	Other assets (describe ▶ See attached statement)			556,190	58	530,061
	59	TOTAL ASSETS (add lines 45 through 58) (must equal line 74)			4,897,140	59	5,748,364
Liabilities	60	Accounts payable and accrued expenses			45,152	60	54,619
	61	Grants payable				61	
	62	Deferred revenue				62	
	63	Loans from officers, directors, trustees, and key employees (attach schedule)			0	63	0
	64 a	Tax-exempt bond liabilities (attach schedule)			0	64a	0
	b	Mortgages and other notes payable (attach schedule)			0	64b	0
	65	Other liabilities (describe ▶ Scholarships Payable)			149,876	65	90,458
	66	TOTAL LIABILITIES (add lines 60 through 65)			195,028	66	145,077
Net Assets or Fund Balances		**Organizations that follow SFAS 117, check here** ▶ ☒ and complete lines 67 through 69 and lines 73 and 74					
	67	Unrestricted			1,435,100	67	1,458,108
	68	Temporarily restricted			1,023,281	68	1,723,966
	69	Permanently restricted			2,243,731	69	2,421,213
		Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 70 through 74.					
	70	Capital stock, trust principal, or current funds				70	
	71	Paid-in or capital surplus, or land, building, and equipment fund				71	
	72	Retained earnings, endowment, accumulated income, or other funds				72	
	73	TOTAL NET ASSETS OR FUND BALANCES (add lines 67 through 69 OR lines 70 through 72; column (A) MUST equal line 19; column (B) MUST equal line 21)			4,702,112	73	5,603,287
	74	TOTAL LIABILITIES AND NET ASSETS / FUND BALANCES (add lines 66 and 73)			4,897,140	74	5,748,364

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

Reconciliation of Revenue per Audited Financial Statements with Revenue per Return (See page 26 of the instructions.)

a	Total revenue, gains, and other support per audited financial statements . . . . ▶	a	1,699,506
b	Amounts included on line a but not on line 12, Form 990:		
(1)	Net unrealized gains on investments . . $ 79,137		
(2)	Donated services and use of facilities . . $		
(3)	Recoveries of prior year grants . . . . $		
(4)	Other (specify): ________ $		
	Add amounts on lines (1) through (4) . . ▶	b	79,137
c	Line a minus line b . . . . ▶	c	1,620,369
d	Amounts included on line 12, Form 990 but not on line a:		
(1)	Investment expenses not included on line 6b, Form 990 . . . $		
(2)	Other (specify): Expenses netted against revenues $ -278,871		
	Add amounts on lines (1) and (2) . ▶	d	-278,871
e	Total revenue per line 12, Form 990 (line c plus line d) . . . . ▶	e	1,341,498

Reconciliation of Expenses per Audited Financial Statements with Expenses per Return

a	Total expenses and losses per audited financial statements . . . ▶	a	798,332
b	Amounts included on line a but not on line 17, Form 990:		
(1)	Donated services and use of facilities . . $		
(2)	Prior year adjustments reported on line 20, Form 990 . . . . . . $		
(3)	Losses reported on line 20, Form 990 . . $		
(4)	Other (specify): ________ $		
	Add amounts on lines (1) through (4) . . ▶	b	0
c	Line a minus line b . . . . ▶	c	798,332
d	Amounts included on line 17, Form 990 but not on line a:		
(1)	Investment expenses not included on line 6b, Form 990 . . . . $		
(2)	Other (specify): Expenses netted against revenues $ -278,873		
	Add amounts on lines (1) and (2) . ▶	d	-278,873
e	Total expenses per line 17, Form 990 (line c plus line d) . . . . ▶	e	519,459

List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated; see page 26 of the instructions.)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (IF NOT PAID, ENTER -0-.)	(D) Contributions to employee benefit plans & deferred compensation	(E) Expense account and other allowances
See Statement				

75 Did any officer, director, trustee, or key employee receive aggregate compensation of more than $100,000 from your organization and all related organizations, of which more than $10,000 was provided by the related organizations? ▶ ☐ Yes ☒ No

If "Yes," attach schedule-see page 26 of the instructions.

	Other Information (See page 27 of the instructions.)		Yes	No
76	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	76		X
77	Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes.	77		X
78 a	Did the organization have unrelated business gross income of $1,000 or more during the year covered by this return?	78a	X	
b	If "Yes," has it filed a tax return on FORM 990-T for this year?	78b		X
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	79		X
80 a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	80a		X
b	If "Yes," enter the name of the organization ▶ NA and check whether it is ☐ exempt OR ☐ nonexempt.			
81 a	Enter direct or indirect political expenditures. See line 81 instructions	81a		
b	Did the organization file FORM 1120-POL for this year?	81b		X
82 a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	82a		X
b	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.)	82b		
83 a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X	
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	X	
84 a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84b		
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?	85a		
b	Did the organization make only in-house lobbying expenditures of $2,000 or less?	85b		
	If "Yes" was answered to either 85a or 85b, DO NOT complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.			
c	Dues, assessments, and similar amounts from members	85c		
d	Section 162(e) lobbying and political expenditures	85d		
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e		
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f 0		
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g		
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85h		
86	501(c)(7) orgs. Enter: a Initiation fees and capital contributions included on line 12	86a		
b	Gross receipts, included on line 12, for public use of club facilities	86b		
87	501(c)(12) orgs. Enter: a Gross income from members or shareholders	87a		
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	87b		
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX	88		X
89 a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 ▶ ; section 4912 ▶ ; section 4955 ▶			
b	501(c)(3) and 501(c)(4) orgs. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction	89b		X
c	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶ 0			
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization ▶			
90 a	List the states with which a copy of this return is filed ▶ Arizona			
b	Number of employees employed in the pay period that includes March 12, 2002 (See instructions.)	90b		

91 The books are in care of ▶ Corporation Telephone no. ▶ (928) 776-2063
Located at ▶ 1100 East Sheldon Street, Prescott, AZ ZIP + 4 ▶ 86301

92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of FORM 1041 - Check here ▶ ☐
and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 92

Analysis of Income-Producing Activities (See page 31 of the instructions.)

Note: Enter gross amounts unless otherwise indicated.	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93 Program service revenue:					
a					
b					
c					
d					
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments			14	12,211	
96 Dividends and interest from securities			14	152,633	
97 Net rental income or (loss) from real estate:					
a debt-financed property					
b not debt-financed property			16	94,323	
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory			02	21,844	
101 Net income or (loss) from special events			01	37,236	
102 Gross profit or (loss) from sales of inventory					
103 Other revenue: a					
b					
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))		0		318,247	0

105 TOTAL (add line 104, columns (B), (D), and (E)) ▶ 318,247

Note: *Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I.*

Relationship of Activities to the Accomplishment of Exempt Purposes (See page 32 of the instructions.)

Line No. ▼	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
	NA

Information Regarding Taxable Subsidiaries and Disregarded Entities (See page 32 of the instructions.)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
NA	%			
	%			
	%			
	%			

Information Regarding Transfers Associated with Personal Benefit Contracts (See page 33 of the instructions.)

(a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☒ No

(b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ☐ Yes ☒ No

Note: *If "Yes" to (b), file Form 8870 AND Form 4720 (see instructions).*

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

[redacted]

Feb. 13, 2004

Date

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n), or Section 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information - (See separate instructions.)

MUST be completed by the above organizations and attached to their Form 990 or 990-EZ

OMB No 1545-0047

2002

Name of the organization
Yavapai College Foundation

Employer identification number
23-7232985

Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees

(See page 1 of the instructions. List each one. If there are none, enter "None.")

(a) Name and address of each employee paid more than $50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
None				
Total number of other employees paid over $50,000				

Compensation of the Five Highest Paid Independent Contractors for Professional Services

(See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None.")

(a) Name and address of each independent contractor paid more than $50,000	(b) Type of service	(c) Compensation
None		
otal number of others receiving over 50,000 for professional services 0		

ITA) **For Paperwork Reduction Act Notice, see the Instructions for Form 990 and Form 990-EZ.**

Statements About Activities (See page 2 of the instructions.)

		Line	Yes	No
1	During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities $ 0 **(Must equal amounts on line 38,** Part VI-A, or line i of Part VI-B.)	1		X
	Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes," must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.			
2	During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)			
a	Sale, exchange, or leasing of property?	2a		X
b	Lending of money or other extension of credit?	2b		X
c	Furnishing of goods, services, or facilities?	2c		X
d	Payment of compensation (or payment or reimbursement of expenses if more than $1,000)?	2d		X
e	Transfer of any part of its income or assets?	2e		X
3	Does the organization make grants for scholarships, fellowships, student loans, etc.? (See NOTE below.)	3	X	
4	Do you have a section 403(b) annuity plan for your employees?	4		X

Note: *Attach a statement to explain how the organization determines that individuals or organizations receiving grants or loans from it in furtherance of its charitable programs "qualify" to receive payments.*

Reason for Non-Private Foundation Status (See pages 3 through 5 of the instructions.)

The organization is not a private foundation because it is: (Please check only ONE applicable box.)

5 ☐ A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).

6 ☐ A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)

7 ☐ A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).

8 ☐ A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).

9 ☐ A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). ENTER THE HOSPITAL'S NAME, CITY, AND STATE

10 ☒ An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the SUPPORT SCHEDULE in Part IV-A.)

11 a ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete the SUPPORT SCHEDULE in Part IV-A.)

11 b ☐ A community trust. Section 170(b)(1)(A)(vi). (Also complete the SUPPORT SCHEDULE in Part IV-A.)

12 ☐ An organization that normally receives: (1) MORE THAN 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions - subject to certain exceptions, and (2) NO MORE THAN 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Also complete the SUPPORT SCHEDULE in Part IV-A.)

13 ☐ An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in: (1) lines 5 through 12 above; or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2). (See section 509(a)(3).)

Provide the following information about the supported organizations. (See page 5 of the instructions.)

(a) Name(s) of supported organization(s)	(b) Line number from above

14 ☐ An organization organized and operated to test for public safety. Section 509(a)(4). (See page 5 of the instructions.)

[redacted] **Support Schedule** (Complete only if you checked a box on line 10, 11, or 12.) USE CASH METHOD OF ACCOUNTING.

Note: *You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.*

	Calendar year (or fiscal year beginning in)	(a) 2001	(b) 2000	(c) 1999	(d) 1998	(e) Total
15	Gifts, grants, and contributions received (Do not include unusual grants. See line 28.)	272,229	674,881	259,757	168,943	1,375,810
16	Membership fees received					0
17	Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose					0
18	Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	125,015	258,510	241,895	474,109	1,099,529
19	Net income from unrelated business activities not included in line 18					0
20	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					0
21	The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge					0
22	Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets					0
23	Total of lines 15 through 22	397,244	933,391	501,652	643,052	2,475,339
24	Line 23 minus line 17	397,244	933,391	501,652	643,052	2,475,339
25	Enter 1% of line 23	3,972	9,334	5,017	6,431	

26 ORGANIZATIONS DESCRIBED ON LINES 10 OR 11: **a** Enter 2% of amount in column (e), line 24 . . . **26a** 49,507

b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1998 through 2001 exceeded the amount shown in line 26a. DO NOT FILE THIS LIST WITH YOUR RETURN. Enter the total of all these excess amounts . . . **26b**

c Total support for section 509(a)(1) test: Enter line 24, column (e) . . . **26c** 2,475,339

d Add: Amounts from column (e) for lines: 18 1,099,529 19 0
22 0 26b 0 . . . **26d** 1,099,529

e Public support (line 26c minus line 26d total) . . . **26e** 1,375,810

f PUBLIC SUPPORT PERCENTAGE (LINE 26E (NUMERATOR) DIVIDED BY LINE 26C (DENOMINATOR)) . . . **26f** 55.58%

27 ORGANIZATIONS DESCRIBED ON LINE 12: **a** For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." DO NOT FILE THIS LIST WITH YOUR RETURN. Enter the sum of such amounts for each year:

(2001) ________ (2000) ________ (1999) ________ (1998) ________

b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the LARGER of (1) the amount on line 25 for the year or (2) $5,000. (Include in the list organizations described in lines 5 through 11, as well as individuals.) DO NOT FILE THIS LIST WITH YOUR RETURN. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year:

(2001) ________ (2000) ________ (1999) ________ (1998) ________

c Add: Amounts from column (e) for lines: 15 0 16 0
17 0 20 0 21 0 . . . **27c** 0

d Add: Line 27a total . . 0 and line 27b total . . 0 . . . **27d** 0

e Public support (line 27c total minus line 27d total) . . . **27e** 0

f Total support for section 509(a)(2) test: Enter amount from line 23, column (e) . . . **27f** 0

g PUBLIC SUPPORT PERCENTAGE (LINE 27E (NUMERATOR) DIVIDED BY LINE 27F (DENOMINATOR)) . . . **27g** 0.00%

h INVESTMENT INCOME PERCENTAGE (LINE 18, COLUMN (E) (NUMERATOR) DIVIDED BY LINE 27F (DENOMINATOR)) **27h** 0.00%

28 UNUSUAL GRANTS: For an organization described in line 10, 11, or 12 that received any unusual grants during 1998 through 2001, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. DO NOT FILE THIS LIST WITH YOUR RETURN. Do not include these grants in line 15.

Private School Questionnaire (See page 7 of the instructions.)
(To be completed ONLY by schools that checked the box on line 6 in Part IV)

			Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	29		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	30		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves?	31		
	If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.)			
32	Does the organization maintain the following:			
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	32a		
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b		
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c		
d	Copies of all material used by the organization or on its behalf to solicit contributions?	32d		
	If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)			
33	Does the organization discriminate by race in any way with respect to:			
a	Students' rights or privileges?	33a		
b	Admissions policies?	33b		
c	Employment of faculty or administrative staff?	33c		
d	Scholarships or other financial assistance?	33d		
e	Educational policies?	33e		
f	Use of facilities?	33f		
g	Athletic programs?	33g		
h	Other extracurricular activities?	33h		
	If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)			
34 a	Does the organization receive any financial aid or assistance from a governmental agency?	34a		
b	Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement.	34b		
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation	35		

Lobbying Expenditures by Electing Public Charities (See page 9 of the instructions.)

(To be completed ONLY by an eligible organization that filed Form 5768)

Check a ☐ if the organization belongs to an affiliated group. Check b ☐ if you checked "a" and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
36 Total lobbying expenditures to influence public opinion (grassroots lobbying)	36		
37 Total lobbying expenditures to influence a legislative body (direct lobbying)	37		
38 Total lobbying expenditures (add lines 36 and 37)	38	0	0
39 Other exempt purpose expenditures	39		
40 Total exempt purpose expenditures (add lines 38 and 39)	40	0	0
41 Lobbying nontaxable amount. Enter the amount from the following table -	41	0	0
42 Grassroots nontaxable amount (enter 25% of line 41)	42	0	0
43 Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36	43	0	0
44 Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38	44	0	0

If the amount on line 40 is -	The lobbying nontaxable amount is -
Not over $500,000	20% of the amount on line 40
Over $500,000 but not over $1,000,000	$100,000 plus 15% of the excess over $500,000
Over $1,000,000 but not over $1,500,000	$175,000 plus 10% of the excess over $1,000,000
Over $1,500,000 but not over $17,000,000	$225,000 plus 5% of the excess over $1,500,000
Over $17,000,000	$1,000,000

Caution: *If there is an amount on either line 43 or line 44, you must file Form 4720.*

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 45 through 50 on page 11 of the instructions.)

	Lobbying Expenditures During 4-Year Averaging Period				
Calendar year (or fiscal year beginning in)	(a) 2002	(b) 2001	(c) 2000	(d) 1999	(e) Total
45 Lobbying nontaxable amount					0
46 Lobbying ceiling amount (150% of line 45(e))					0
47 Total lobbying expenditures					0
48 Grassroots nontaxable amount					0
49 Grassroots ceiling amount (150% of line 48(e))					0
50 Grassroots lobbying expenditures					0

Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A) (See page 11 of the instructions.)

uring the year, did the organization attempt to influence national, state or local legislation, including any ttempt to influence public opinion on a legislative matter or referendum, through the use of:	Yes	No	Amount
a Volunteers			
b Paid staff or management (Include compensation in expenses reported on lines c through h)			
c Media advertisements			
d Mailings to members, legislators, or the public			
e Publications, or published or broadcast statements			
f Grants to other organizations for lobbying purposes			
g Direct contact with legislators, their staffs, government officials, or a legislative body			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means			
i Total lobbying expenditures (Add lines c through h.)			0

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities.

Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See page 12 of the instructions.)

51 Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

		Yes	No
a Transfers from the reporting organization to a noncharitable exempt organization of:			
(i) Cash	51a(i)		X
(ii) Other assets	a(ii)		X
b Other transactions:			
(i) Sales or exchanges of assets with a noncharitable exempt organization	b(i)		X
(ii) Purchases of assets from a noncharitable exempt organization	b(ii)		X
(iii) Rental of facilities, equipment, or other assets	b(iii)		X
(iv) Reimbursement arrangements	b(iv)		X
(v) Loans or loan guarantees	b(v)		X
(vi) Performance of services or membership or fundraising solicitations	b(vi)		X
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees	c		X

d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting organization. If the organization received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received:

(a) Line no.	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements
	NA		

52 a Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No

b If "Yes," complete the following schedule:

(a) Name of organization	(b) Type of organization	(c) Description of relationship

YAVAPAI COLLEGE FOUNDATION **23-7232985**

STATEMENT OF FUNCTIONAL EXPENSES - Line 43 Form 990

JUNE 30 2003

DESCRIPTION	(A) TOTAL	B) PROGRAM SVCS	(C) MGT & GEN	(D) FUNDRSG
Donor Recognition	6,349		6,349	
Food Costs	2,724		2,724	
Insurance	3,736		3,736	
Other Expenses			4829	
Scholarships	112,391	112,391		
LeGate Expenses	123,818	123,818		
Gift to Yavapai College	70,962	70,962		
Support for Yavapai College Arts	12,507	12,507		
Support for Yavapai College Athle	21,606	21,606		
Support for Performing Arts	22,245	22,245		
Sunderman Foundation Expenses	10,234	10,234		
Aristotelian Logic Expenses	6,447	6,447		
	393,019	380,210	17,638	0

YAVAPAI COLLEGE FOUNDATION
OTHER PROGRAM SERVICES - FORM 990 PART IIe
30-Jun-03

23-7232985

DESCRIPTION	GRANTS AND ALLOCATIONS EXPENSES
SUPPORT FOR YAVAPAI COLLEGE NURSING PROGRAM	123,818
SUPPORT FOR COLLEGE EDUCATIONAL PROGRAMS	77,408
	201,226

Line 54 (990) - Investments securities

			Beginning		End
1	Investment Company of America	1	1,788,732		1,821,544
2	Bond Fund of America, Inc.	2	1,319,293		1,533,385
3	Equity Securitiesq	3			200,000
4		4			
5		5			
6		6			
7		7			
8		8			
9		9			
10		10			
11	Total investments securities		3,108,025		3,554,929

Line 55 (990) - Investments land, buildings, and equipment

			Invest - land, buildings, and equip				Accumulated depreciation		
			Beginning		End		Beginning		End
1	Land	1	360,877		360,877				
2	Buildings	2	423,293		373,983				
3	Improvements	3	126,610		126,610				
4	Accumulated depreciation	4					284,491		254,042
5		5							
6		6							
7		7							
8		8							
9		9							
10		10							
11	Total investment land, buildings, and equip		910,780		861,470		284,491		254,042

Line 58 (990) - Other Assets

			Beginning		End
1	Collections	1	275,000		262,900
2	Land for educational construction projects	2	106,029		119,382
3	Construction in process	3	175,161		147,779
4		4			
5		5			
6		6			
7		7			
8		8			
9		9			
10		10			
11	Total other assets		556,190		530,061

OFFICERS, DIRECTORS, TRUSTEES, ETC.

	Total:		0
1	Chuck Walker, President, 1550 Plaza West Road, Prescott, AZ 86303 - 10 hrs/wk	1	
2	David Lund, 1st Vice President, 4 Yolo Drive, Prescott, AZ 86301 - 4 hrs/wk	2	
3	Steven Campbell, 2nd Vice President, 1375 Iron Springs Road, Prescott, AZ 86305 - 4 hrs/wk	3	
4	Patricia Bruneau-Gaber, Secretary, 6191 Nugget Patch Trail, Prescott, AZ 86303 - 4 hrs/wk	4	
5	Randy Kem, Treasurer, 1055 Iron Springs Road, Prescott, AZ 86305 - 4 hrs/wk	5	
6	Frank T Fitzgerald, Imm. Past Pres., P O Box 12938, Prescott, AZ 86304 - 2hrs/wk	6	
7	Dr. Doreen Daily, YC Pres, 1100 East Sheldon Street, Prescott, AZ 86301 - 3 hrs/wk	7	
8	Ralph J. Weiger, 79 N. French Pl, Prescott, AZ 86301 - 3 hrs/wk	8	
9	Dave Taylor, Board Development, 11 Northfield Lane, Prescott, AZ 86305 - 1 hrs/wk	9	
10	Jean N Phillips, Scholarships, 1001 Norris Road, Prescott, AZ 86305 - 2 hrs/wk	10	
11	Keith Quail, Endowment Comm., 1042 Willow Creek Road, Prescott, AZ 86301 - 1 hr/wk	11	
12	Dr. Bill Black, PACE, 2212 Aspen Acres Rd, Prescott, AZ 86303 - 1 hr/wk	12	
13	Tammy Malouff, President Roughrider Club, 1350 Copper Canyon Drive, Prescott, AZ 86303 - 5 hrs/wk	13	
14	Joanne H Berger, Pres. Friends of YC Art, 125 Overlook Lane, Prescott, AZ 86303 - 1 hr/wk	14	
15	Jacklyn Ellis, Dir., Sunderman Foundation, 997 Salt Mine Road, Camp Verde, AZ 86322 - 1 hr/wk	15	
16	Vera Stewart, Spec Events Coord, 105 Laurel Ct., Prescott, AZ 86303 - 2 hrs/wk	16	
17		17	
18		18	
19		19	
20		20	
21		21	
22		22	

Line 20 for 990

	Total:		79,137
1	Increase in Fair Value of Investments	1	79,137
2		2	
3		3	
4		4	
5		5	
6		6	
7		7	
8		8	

Line 58 for 990 - Other Assets

	Total:		0
1	Sunderman Works of Art	1	
2	Land Held for Construction	2	
3	Construction in Progress	3	
4		4	
5		5	
6		6	
7		7	
8		8	
9		9	

Line 11 for 990

	Total:		-15,132
1	Loss on Building Removal	1	-15,132
2		2	
3		3	
4		4	
5		5	

/RS.

Form **8868**
(December 2000)
Department of the Treasury
Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

▶ File a separate application for each return.

OMB No. 1545-1709

- If you are filing for an **Automatic 3-Month Extension, complete only Part I** and check this box . . . . ▶ ☑
- If you are filing for an **Additional (not automatic) 3-Month Extension, complete only Part II** (on page 2 of this form).

***Note:** Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.*

Part I Automatic 3-Month Extension of Time—Only submit original (no copies needed)

***Note:** Form 990-T corporations requesting an automatic 6-month extension—check this box and complete Part I only* . . . ▶ ☐

All other corporations (including Form 990-C filers) must use Form 7004 to request an extension of time to file income tax returns. Partnerships, REMICs and trusts must use Form 8736 to request an extension of time to file Form 1065, 1066, or 1041.

Type or print
File by the due date for filing your return. See instructions

Name of Exempt Organization
Yavapai College Foundation

Employer identification number
23 : 7232986

Number, street, and room or suite no. If a P.O. box, see instructions.
1100 East Sheldon Street

City, town or post office, state, and ZIP code. For a foreign address, see instructions.
Prescott AZ 86301-3297

Check type of return to be filed (file a separate application for each return):

☑ Form 990	☐ Form 990-T (corporation)	☐ Form 4720
☐ Form 990-BL	☐ Form 990-T (sec. 401(a) or 408(a) trust)	☐ Form 5227
☐ Form 990-EZ	☐ Form 990-T (trust other than above)	☐ Form 6069
☐ Form 990-PF	☐ Form 1041-A	☐ Form 8870

- If the organization does **not** have an office or place of business in the United States, check this box . . . . ▶ ☐
- If this is for a **Group Return**, enter the organization's four digit Group Exemption Number (GEN) ________ . If this is for the **whole** group, check this box ▶ ☐ . If it is for part of the group, check this box ▶ ☐ and attach a list with the names and EINs of all members the extension will cover.

1 I request an automatic 3-month (6-month, for **990-T corporation**) extension of time until February 15 , 20 04 , to file the exempt organization return for the organization named above. The extension is for the organization's return for:
▶ ☐ calendar year 20 ... or
▶ ☑ tax year beginning July 1 , 20 02 , and ending June 30 , 20 03 .

2 If this tax year is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☐ Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions . . . . $ ________

b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit . . . . $ ________

c **Balance Due.** Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions . . . . $ 00

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature ▶ Title ▶ CPA Date ▶ / /03

For Paperwork Reduction Act Notice, see Instruction Cat. No 27916D Form **8868** (12-2000)