Form 990

Return of Organization Exempt From Income Tax

2015

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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.

▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

Open to Public Inspection

A	For	the :	2015 calend	lar year, or ta	ax year begi	nning		10-01	, 2015, and e	nding		09	-30 ,20 16	
В	Check	k ifaup	oplicable:	C Name of orga	anization Ver	de Valley Ar	chaeology	Center					D Employer Identification no.	
	Addre	es ch	nange	Doing busine	ess as							\neg	27-3436708	
	Name	chan	nge	Number and	street (or P.O. b	ox if mail is not delivered	to street address)			Room/s			E Telephone number	
	Initial		_		Main Str								(928) 567-0066	
Ħ			/terminated			e, country, and ZIP or for	eign postal code			'			260,405	
H	Amen				erde, Az		aigii poata: code							
H			pending	F Name and ad			Graceffa						G Gross receipts\$	
	Oppiid	2001	i penung		us Cabov		Gracerra			H(a)	Is this a gr	oup ret	um for 🖼	
_	T						T 4247/1/22				subordina		∐ Yes X No	
<u>'</u>) (insert no.)	4947(a)(1) or	<u></u> 527		— Н(Б)	Are all sub	ordinati o," attac	tes included? Yes No th a list. (see instructions) number	
<u>J</u>	Webs					aeology.org	<u>-</u>			H(c)				
	ert I		Summar	Corporation	Irust As	sociation Other	<u> </u>	L Ye	ear of formation: 2	010	M State	of lega	al domicile: AZ	
8.86	**********				inationia mia	nian ay maat alaaliis	ant nativities.	mh - O					<u> </u>	
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8		-											to make them	
Activities & Governance		-				nd education				With	Americ	an 1	indians,	
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Se S				_	_	erning body (Part V						3		
ies	1.					rs of the governing	-					4	11	
Ž	- -					n calendar year 20	15 (Part V, line)	2a)				_5	3	
Ace	- 1			r of volunteers		•						6	30	
	1					Part VIII, column (7a		
	\perp	b 1	Net unrelated	d business tax	xable income	from Form 990-T,	line 34	. <i></i>	<u> </u>	<u></u>		7b		
	-									F	rior Year		Current Year	
	8	B (Contributions	s and grants (Part VIII, line	1h)					1,105	,50!	214,595	
Revenue	{		_			e 2g)			-		9	,682	15,590	
2	10	0	Investment ir	ncome (Part V	/III, column (A), fines 3, 4, and 7	d)					(54	
R	1	1 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)								4	,148	6,641		
	12	2]	Total revenue	e - add lines 8	3 through 11	(must equal Part V	II, column (A),	line 12) .			1,119	,34	236,880	
	1:	3 (Grants and s	similar amount	ts paid (Part	IX, column (A), line	s 1-3)						C	
	14	4 E	Benefits paid	to or for men	nbers (Part I	X, column (A), line	4)		[0	
	19	5 5	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)					11,7		,723	29,324			
Expenses	10				_	column (A), line 11			-			-	0	
Den				•		olumn (D), line 25)			8,485					
Ä	13					ines 11a-11d, 11f-2				200000000000000000000000000000000000000	52	, 308	112,222	
	18		•			t equal Part IX, colu)				,03		
	19					18 from line 12 .			_		1,055			
34.5	_			,						Beginning	g of Current		End of Year	
820	20	0 1	Total assets	(Part X, line 1	(6)						1,374			
Net Aggets or	2			s (Part X, line				<i>.</i>				,733		
2	E 22	2 1	Net assets o	r fund balance	es. Subtract	line 21 from line 20					1,109			
				re Block					<u> </u>			,		
Unde	r pena	alties o	of perjury, I decl	are that I have ex		rn, including accompany				cnowledge	and belief,	it is		
true,	соптес	t, and	complete. Deci	aration of prepare	er (other than off	icer) is based on all infor	nation of which prep	parer has any i	knowledge.					
			Kenn	eth Zoll		7	WCC.						1-27-2017	
Sig	ın		Signatur	e of officer		0 //)			_		Date	,	
He	re		Kenn	eth Zoll,	Execut	ive Director								
			Type or p	print name and titl	le									
			Print/Type pre	parer's name		Preparer's signature	C* a	Da	1 4		Çheck	if F	PTIN	
Pai	d		Alyx Co	han		Alyx Cohan	(chir (o	han	1/24/17		self-employe	ed	P01229713	
Рге	par	er	Firm's name	_	Alyx Col	nan, CPA PC				Firm's E				
	e Or		Firm's address			State Route	59 Ste 102			Phone r				
		Ī			Prescot	t Valley AZ 8	36314				9:	28-7	71-1950	
May	the I	IRS (discuss this			hown above? (see i								

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

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

19

X

Х 18

19

Checklist of Required Schedules (continued)

No 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H X If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? Ь 20b Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or 21 domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II 21 X Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on 22 Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III X 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 23 X 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 24a X **b** Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 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 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 X 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? Χ Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any 26 current or former officers, directors, trustees, key employees, highest compensated employees, or X 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 X 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): X A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete X 28b c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) X was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV 28c 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified X 30 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, 31 X 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II X 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 X Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, Iff, 34 X 34 Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a 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 Χ Did the organization conduct more than 5% of its activities through an entity that is not a related organization 37 and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, X 37 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 38 X

		-3436708	Р	age t
	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	d		
ь	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	d		
C	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c	Х	
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	3		
ь	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х
ь	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O			
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		- 1	
	account)?	4a		X
ь	If "Yes," enter the name of the foreign country: ▶			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts			
	(FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	**********	Χ
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the		1	
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		X
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).			
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7с		X
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		X
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		X
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
0	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			
1	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.)			
2a	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		100102022
	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			
C	Enter the amount of reserves on hand			

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

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

14a

14b

X

Form 990 (2015) Verde Valley Archaeology Center 27-3436708 Page 6 27.47 Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No Enter the number of voting members of the governing body at the end of the tax year 11 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. Enter the number of voting members included in line 1a, above, who are independent 11 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? X 2 Did the organization delegate control over management duties customarily performed by or under the direct 3 supervision of officers, directors, or trustees, or key employees to a management company or other person? X 3 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? 6 Did the organization have members or stockholders? X 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 Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 7b X 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: X Each committee with authority to act on behalf of the governing body? X 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 X Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No Did the organization have local chapters, branches, or affiliates? 10a X If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 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 Did the organization have a written conflict of interest policy? If "No," go to line 13 X 12a 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c 13 Did the organization have a written whistleblower policy? X 13 X 14 Did the organization have a written document retention and destruction policy? 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? 15a Other officers or key employees of the organization 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 X with a taxable entity during the year? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its 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 Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed > AZ Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. ☑ Upon request X Own website Another's website Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and

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financial statements available to the public during the tax year.

State the name, address, and telephone number of the person who possesses the organization's books and records: Kenneth Zoll (928)593-0364, 1155 Bell Rock Blvd, Sedona, AZ 86351

Form 990 (2015) Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and **Independent Contractors**

Check if Schedule O contains a response or note to any line in this Part VII Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

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

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

Check this box if neither the organization nor any rel	lated organization	omr	ens	ated	any	curre	nt of	fficer, director, or tr	rustee.	
(A) Name and Title	(B) Average hours per week (list any	(do n	ot ch	Pos eck m ss per	C) sition sore the	nain one s both a /trustee)	n	(D) Reportable compensation from the	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
•	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(1) Kimberly Spurr	5.00									
Vice President		X							0	0
(2) Lynette Kovacovich Secretary	5.00	х						C	0	0
(3) Craig Sigler	15.00				\neg					
Treasurer resigned May 2016		X			1			C	0	0
(4) Kate Compton-Gore	5.00	Х						(0	0
(5) Keith Greiner Director	5.00	Х							0	0
(6) Richard Henderson Director	5.00	Х							0	0
(7) Lee Silver Director	5.00	Х							0	0
(8) R.J. Smith Director	5.00	Х							0	0
(9) John Ward	5.00	Х	_						0	0
(10)Bob Whiting Director	5.00	Х							0	0
(11)Thomas Burris Director	5.00	Х							0	0
(12)James Graceffa President	20.00			Х					0	0
(13)Kenneth Zoll Executive Director	40.00			X				(0	0
(14)Todd Bostwick Executive Director	40.00			Х				8,405	0	0
										Form 990 (2015)

EEA

Section A.

Form 990 (2015)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	box, i	ot checuniess or and a	perso	on re than o n is both tor/truste	an	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(15)									
(16)				+		-	_		
(17)				+					
(18)									
(19)									
(20)									
(21)									
(22)									
(23)									
(24)				1		-			
(25)			+	\dagger	+				
1b Sub-total c Total from continuation sheets to Part VII, 5 d Total (add lines 1b and 1c)						• •	8,405	0	0
Total number of individuals (including but not li reportable compensation from the organization	limited to those liste								<u> </u>
 3 Did the organization list any former officer, diremployee on line 1a? If "Yes," complete Schee 4 For any individual listed on line 1a, is the sum organization and related organizations greater individual. 5 Did any person listed on line 1a receive or according for services rendered to the organization? If "Yes," 	rector, or trustee, kedule J for such indirection of reportable comporthan \$150,000? If	vidual ensation "Yes," from a	on an comp	d oth plete	ner con Sched	npensa lule J 1 anizat	ation from the		Yes No 3 X 4 X 5 X
Section B. Independent Contractors 1 Complete this table for your five highest complete.	ensated independe	nt con	tracto	rs th	at rece	eived r	nore than \$100,000	O of	
compensation from the organization. Report or year.	ompensation for the	e calen	ndar y	ear e	ending	with o	r within the organiz	tation's tax	
(A) Name and business ad	ddress						Description of (services	(C) Compensation
Total number of independent contractors (inclured received more than \$100,000 of compensation)			se lis	ted a	above)	who			

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (B) (C) (D) Related or exempt function Unrelated business Revenue excluded from tax Total revenue revenue under sections 512-514 Federated campaigns 1a Contributions, Gifts, Grants and Other Similar Amounts 16 20,412 11,500 Fundraising events 1c 1d e Government grants (contributions) . . 1e 8,175 All other contributions, gifts, grants, and similar amounts not included above 1f 174,508 g Noncash contributions included in lines 1a-1f: \$ 1,964 **** . P 214,595 **Business Code** Program Service Revenue 2a Education 611600 15,590 15,590 b f All other program service revenue 15,590 Investment income (including dividends, interest, 54 54 Income from investment of tax-exempt bond proceeds 5 (i) Real (ii) Personal 6a Gross rents b Less: rental expenses c Rental income or (loss) . . . (i) Securities (ii) Other 7a Gross amount from sales of assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) Other Revenue 8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 11,591 10,881 c Net income or (loss) from fundraising events 710 710 9a Gross income from gaming activities. See Part IV, line 19 a b Less: direct expenses b c Net income or (loss) from gaming activities . . . 10a Gross sales of inventory, less returns and allowances a 18,575 b Less: cost of goods sold b 12,644 c Net income or (loss) from sales of inventory 5,93 5,931 Miscellaneous Revenue **Business Code** 11a b e Total. Add lines 11a-11d

236,880

21,521

764

Form 990 (2015) Verde Valley Archaeology Center Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. A	All other organizations must complete column (A).

Secti	on 501(c)(3) and 501(c)(4) organizations must complete all co Check if Schedule O contains a response or note to ar				
Doo	ot include amounts reported on lines 6b, 7b,	(A)	(B)	(C)	(D)
	b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations		experises	general expenses	exherises
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				•
_	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
Ū	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
•	trustees, and key employees	10,330	9,290	1,040	
6	Compensation not included above, to disqualified				·
Ū	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	17,066	9,153	7,913	
8	Pension plan accruals and contributions (include	,	2,103	.,,,,,	
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes	1,928	1,227	701	
11	Fees for services (non-employees):				
 a	Management				
b	Legal				
С	Accounting	1,820		1,820	
d	Lobbying	<u> </u>		-	
е	Professional fundraising services. See Part IV, line 17 .	·			
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column				<u></u>
Ŭ	(A) amount, list line 11g expenses on Schedule O.)	11,068	9,848		1,220
12	Advertising and promotion	11,011	3,702	22	7,287
13	Office expenses	44,619	29,456	7,085	8,078
14	Information technology				
15	Royalties				
16	Occupancy	15,825	13,238	2,587	
17	Travel	7,036	5,334	1,135	567
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	2,752	2,075		677
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	2,763		2,763	
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	convservation	4,938	4,938		
þ	education costs	7,040	6,540		500
c					
d					
е	All other expenses	3,350	1,613	1,581	156
25	Total functional expenses. Add lines 1 through 24e .	141,546	96,414	26,647	18,485
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				
	following SOP 98-2 (ASC 958-720)				
EEA					Form 990 (2015)

Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 56,476 1 169,886 1 2 2 3 35 4 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. 5 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 6 7 Assets 6,758 8 9,245 3,690 3,089 Land, buildings, and equipment: cost or 10a other basis. Complete Part VI of Schedule D 10a 1,316,358 ь Less: accumulated depreciation 10b 9,480 1,307,449 10c 1,306,878 11 11 12 12 13 13 14 14 2,015 15 15 16 Total assets. Add lines 1 through 15 (must equal line 34) 1,374,373 16 1,491,148 17 1,250 17 5,861 18 18 11,400 19 15,185 19 20 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 Loans and other payables to current and former officers, directors, iabilities trustees, key employees, highest compensated employees, and 22 262,084 252,083 23 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X 25 264,733 283,130 26 Organizations that follow SFAS 117 (ASC 958), check here 🕒 🔲 and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 27 27 28 28 29 Organizations that do not follow SFAS 117 (ASC 958), check here complete lines 30 through 34. 30 30 31 Paid-in or capital surplus, or land, building, or equipment fund 31 1,109,640 32 1,208,018 32 Retained earnings, endowment, accumulated income, or other funds 1,109,640 33 33 1,208,018 1,374,373 34 1,491,148 34

	Reconciliation of Net Assets			
	Check if Schedule O contains a response or note to any line in this Part XI			🗆
1	Total revenue (must equal Part VIII, column (A), line 12)	1	23	6,880
2	Total expenses (must equal Part IX, column (A), line 25)	2	14	1,546
3	Revenue less expenses. Subtract line 2 from line 1	3	9	5,334
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,10	9,640
5	Net unrealized gains (losses) on investments	5		
6	Donated services and use of facilities	6		
7	Investment expenses	7		
8	Prior period adjustments	8		3,044
9	Other changes in net assets or fund balances (explain in Schedule O)	9		0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line			
	33, column (B))	10	1,20	08,018
Pai	rt XII Financial Statements and Reporting			
	Check if Schedule O contains a response or note to any line in this Part XII			🗆
			1	res No
1	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," explain in			
	Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or			
	reviewed on a separate basis, consolidated basis, or both:			
	Separate basis Consolidated basis Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?		2b	X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a			
	separate basis, consolidated basis, or both:			
	Separate basis Consolidated basis Both consolidated and separate basis			
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight			
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	
	If the organization changed either its oversight process or selection process during the tax year, explain in			
	Schedule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in			
	the Single Audit Act and OMB Circular A-133?		3a	X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b	
FA			Form 9	90 (2015)

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Tressury

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.

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2015

Open to Public Inspection

Employer identification number Verde Valley Archaeology Center 27-3436708 Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 7 🖾 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 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 exempt 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). (Complete Part III.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of 11 one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. d Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type II, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (i) Name of supported organization (ii) EIN (iii) Type of organization (lv) is the organization (v) Amount of monetary (vI) Amount of (described on lines 1-9 listed in your governing support (see other support (see above (see instructions)) instructions) instructions) Yes No (A) (B) (C) (D) (E) Total

27-3436708 Pa

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

_	ndar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	34,590	50,968	32,688	67,898	214,595	400,739
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	34,590	50,968	32,688	67,898	214,595	400,739
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)						73,815
•							326,924
Sec	Public support. Subtract line 5 from line 4 ition B. Total Support						320,929
	ndar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
7	Amounts from line 4	34,590	50,968	32,688	67,898	214,595	400,739
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources					54	54
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10 .						400,793
12	Gross receipts from related activities, etc. (s	ee instructions) .				12	172
13	First five years. If the Form 990 is for the or organization, check this box and stop here	********					▶ 🏻
Sec	tion C. Computation of Public Su						
14	Public support percentage for 2015 (line 6, o				-	14	0.00 %
15	Public support percentage from 2014 Sched				_	15	%
16a	33 1/3% support test - 2015. If the organiza						. п
	box and stop here. The organization qualified		-				▶ ⊔
Ь	33 1/3% support test - 2014. If the organization check this box and stop here. The organization						× 17
170	10%-facts-and-circumstances test - 2015.						🗀
17a	10% or more, and if the organization meets the "fact	the "facts-and-circur	nstances" test, che	ck this box and ste	op here. Explain in		
	organization					·	• П
b	10%-facts-and-circumstances test - 2014. 15 is 10% or more, and if the organization m	If the organization of	did not check a box	on line 13, 16a, 16	6b, or 17a, and line		
	Explain in Part VI how the organization meet	ts the "facts-and-circ	cumstances" test. T	he organization qu	ualifies as a publicly	/	
18	supported organization	not check a box on li					▶□
	instructions						▶ □

27-3436708

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

(Complete only if you checked the box on line 9 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.)

Sec	ction A. Public Support						
Cal	endar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise		 		-		<u></u>
_	sold or services performed, or facilities						
	furnished in any activity that is related to the organization's tax-exempt purpose						
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			i			
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
h	Amounts included on lines 2 and 3						
J	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
8	Public support. (Subtract line 7c from line 6.)						
Sec	ction B. Total Support		<u> </u>				81
	endar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
9	Amounts from line 6		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(4), 411	(-,	(0)	(,, , , , , , , , , , , , , , , , , , ,
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether						
	or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11, and 12.)						
	First five years. If the Form 990 is for the org organization, check this box and stop here	<u>_,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	<u> </u>	•		(3)	▶ □
	ction C. Computation of Public Su					I an I	
15	Public support percentage for 2015 (line 8, co		•			1	<u>%</u>
16	Public support percentage from 2014 Schedu			<u> </u>	<u></u>	16	<u>%</u>
	ction D. Computation of Investme			luma (A)		147	
17 18	Investment income percentage for 2015 (line Investment income percentage from 2014 Sc		•				<u>%</u> %
	33 1/3% support tests - 2015. If the organization is not more than 33 1/3%, check this box at	ation did not check	the box on line 14	, and line 15 is mo	re than 33 1/3%, a	nd line	▶ □
b	33 1/3% support tests - 2014. If the organization 18 is not more than 33 1/3%, check this b	ation did not check	a box on line 14 o	r line 19a, and line	16 is more than 3	3 1/3%, and	• 🖟
20	Private foundation. If the organization did no		-		- · · · · · · · · · · · · · · · · · · ·		▶ 🗍

27-3436708

Supporting Organizations

(Complete only if you checked a box in line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 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).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- 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.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 11a or 11b in Part I, answer (b) and (c) below.
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? 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.
- 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).
- b 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?
- c 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.
- Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (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).
- 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).
- 9a 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.
- 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.
- c 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.
- 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.
 - b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
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8 9a 9b		
9a 9b		
9a 9b 9c		

	Supporting Organizations (continued)			
	Has the organization accepted a gift or contribution from any of the following persons?		Yes	No
a	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) 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		
Sec	tion B. Type I Supporting Organizations	-	Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to		res	140
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
	The second secon	•		
2	and the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.			
Sec	tion C. Type II Supporting Organizations	2		
-			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
Sec	the supported organization(s). tion D. All Type III Supporting Organizations	1		
	and street the street that the street the st		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			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
		1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
2				
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		2002200000
Sec	tion 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	instru	ction	ıs):
a b	☐ The organization satisfied the Activities Test. Complete line 2 below. ☐ The organization is the parent of each of its supported organizations. Complete line 3 below.			
c	The state of the s	(see	instru	ctions
2	Activities Test. Answer (a) and (b) below.		Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	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, how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		7000000000
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these	26		
3	activities but for the organization's involvement. Parent of Supported Organizations. Answer (a) and (b) below.	2b		
	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? Provide details in Part VI.	За		pycecs60000;
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	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 Organical Part V Type III Non-Functionally Integrated 509(a)(3)			
1 Check here if the organization satisfied the Integral Part Test as a qualifying	trus	st on Nov. 20, 1970. See	instructions. All
other Type III non-functionally integrated supporting organizations must com	plet	e Sections A through E.	
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)
Aggregate fair market value of all non-exempt-use assets (see			
instructions for short tax year or assets held for part of year):			
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).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035	6	<u> </u>	
7 Recoveries of prior-year distributions	7		<u> </u>
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-functionally	-inte	egrated Type III supportin	g organization (see
instructions).		7,	•

	Type III Non-Functionally Integrated 509(a)(<u>3) Supporting Organ</u>	izations (continued)	
Sec	tion D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exe		_	
2	Amounts paid to perform activity that directly furthers exemp	pt purposes of supported	i	
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpos	es of supported organiza	ations	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	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 the	ne organization is respor	nsive	
	(provide details in Part VI). See instructions.	3		
9	Distributable amount for 2015 from Section C, line 6		<u> </u>	
10	Line 8 amount divided by Line 9 amount			
	Ento a difficult difficulty Ento a difficult	<u> </u>	(ii)	(iii)
5	Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	Underdistributions Pre-2015	Distributable Amount for 2015
1	Distributable amount for 2015 from Section C, line 6			
	Underdistributions, if any, for years prior to 2015			
	(reasonable cause required-see instructions)			
3	Excess distributions carryover, if any, to 2015:			
a				
b				
С				
ď	From 2013			
	From 2014			
	Total of lines 3a through e			
	Applied to underdistributions of prior years			
	Applied to 2015 distributable amount			
	Carryover from 2010 not applied (see instructions)			
<u>'</u>	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2015 from Section			
7	D, line 7:			
_				
	Applied to underdistributions of prior years			
	Applied to 2015 distributable amount			
	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2015, if			
	any. Subtract lines 3g and 4a from line 2 (if amount			
	greater than zero, see instructions).			
8	Remaining underdistributions for 2015. Subtract lines 3h			
	and 4b from line 1 (if amount greater than zero, see			
	instructions).			~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
7	Excess distributions carryover to 2016. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
a				
b				
С	Excess from 2013			
þ	Excess from 2014			
е	Excess from 2015			

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.)

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

2015

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

▶ Information about Schedule D (Form 990) and its Instructions is at www.irs.gov/form990.

Open to Public Inspection

Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. 1 Total number at end of year	Ve:	rde Valley Archaeology Center	27-3436708
Complete if the organization answered "Yes" on Form 990, Part IV, line 6. 1 Total number at end of year 2 Aggregate value of ord of year 3 Aggregate value of end of year 4 Aggregate value of end of year 5 Did the organization from (during year) 5 Did the organization from at donors and donor advisors in writing that the assets held in donor advised funds are the organization form at grantees, donors, and donor advisor in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Conservation Easements.			
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990, Part X, line 21. organization an agent, trustee, custodian or led on Form 990, Part X? s," explain the arrangement in Part XIII and coning balance ons during the year outions during the year g balance e organization include an amount on Form 98 s," explain the arrangement in Part XIII. Chec	other intermediary omplete the following on, Part X, line 21, 100 ok here if the explar	or contributions or on the contributions or one table: for escrow or custom the contribution has been provided to the contribution of the contributions or of the contributions or of the contributions or of the contribution of	other assets not	1c 1d 1e 1f ty?	Amount	Yes	
led on Form 990, Part X? s," explain the arrangement in Part XIII and conting balance ons during the year outions during the year g balance le organization include an amount on Form 98 s," explain the arrangement in Part XIII. Chec	omplete the following the second of the second of the explanation of t	ng table: for escrow or custor eation has been provi	fial account liabili	1c 1d 1e 1f ty?	Amount	Yes	
s," explain the arrangement in Part XIII and coning balance ons during the year outions during the year g balance e organization include an amount on Form 98 s," explain the arrangement in Part XIII. Chec	omplete the following the second of the second of the second of the explanation of the ex	or escrow or custocation has been prov	fial account liabili	1c 1d 1e 1f ty?	Amount	Yes	
s," explain the arrangement in Part XIII and coning balance ons during the year outions during the year g balance e organization include an amount on Form 98 s," explain the arrangement in Part XIII. Chec	omplete the following the second of the second of the second of the explanation of the ex	or escrow or custocation has been prov	fial account liabili	1c 1d 1e 1f ty?	Amount		
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ons during the year putions during the year g balance e organization include an amount on Form 98 s," explain the arrangement in Part XIII. Chec	90, Part X, line 21, tk here if the explar	or escrow or custoo	dial account liabili	1d 1e 1f ty?			
putions during the year g balance e organization include an amount on Form 98 s," explain the arrangement in Part XIII. Chec Endowment Funds.	90, Part X, line 21, tk here if the explar	or escrow or custor	dial account liabili	1e			
g balance e organization include an amount on Form 99 s," explain the arrangement in Part XIII. Chec Endowment Funds.	90, Part X, line 21,	or escrow or custor		1f ty?			
e organization include an amount on Form 99 s," explain the arrangement in Part XIII. Chec Endowment Funds.	90, Part X, line 21, the here if the explan	or escrow or custoo ation has been prov	dial account liabili	ty?			
s," explain the arrangement in Part XIII. Chec Endowment Funds.	k here if the explar	ation has been pro-		•			
Endowment Funds.			vided on Part XIII				
	wered "Ves" on						
Complete if the organization answ	wored "Ves" on						- 1
	Welled 163 Oll	Form 990, Par	t IV, line 10.				
	(a) Current year	(b) Prior year	(c) Two years bac	k (d) Three years ba	ick (e) Fou	r years I	back
ning of year balance	2,015	1,999					
		20	2,00	00			
		1					
		5					
	2.015		2.00	00			_
-					-		
		- 191 ocionini (a), 110	na uo.				
	%						
		that are held and ad	lministered for the				
	or the organization	mar are now and ac	ministered for the	*		Voc	No
					20(1)	103	X
							X
							1
					30		
		rit iurius.					-
		Form 990 Par	t IV line 11a	See Form 990	Part Y lin	0 10	
			THE PARTY NAMED IN				_
Description of property					(a) Roc	k value	
	- (moonno			dopresidion		200	000
		1,	300,000		1,	300,	000
•		2.40					0.45
							045
		8,018		6,185		1,	833
		1 /=\					
	designated or quasi-endowment anent endowment anent endowment bercentages in lines 2a, 2b, and 2c should equatere endowment funds not in the possession of ization by: anert endowment	ibutions ivestment earnings, gains, and s is or scholarships expenditures for facilities and ams inistrative expenses of year balance de the estimated percentage of the current year end balance (line designated or quasi-endowment designated or qu	ining of year balance 2,015 1,999 ibutions 20 investment earnings, gains, and s 1 is or scholarships 2 expenditures for facilities and 2 inistrative expenses 5 if year balance 2,015 2,015 de the estimated percentage of the current year end balance (line 1g, column (a)) he designated or quasi-endowment 100.00 % anent endowment 100.00 % arenet endowment 2a, 2b, and 2c should equal 100%. Intere endowment funds not in the possession of the organization that are held and adization by: Interest and in the possession of the organization that are held and adization by: Interest XIII the intended uses of the organization's endowment funds. Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Par Description of property (a) Cost or other basis (investment) (b) Cost or (investment) (c) 1, ngs ehold improvements 8,340 ment 8,018	ining of year balance 2,015 1,999 ibutions 20 2,00 ibutions 20 2,015 2,00 ibutions 20 2,015 2,015 2,00 ibutions 20 2,015 2,015 2,00 ibutions 20 2,015 2,00 ibutions 20 2,015 2,015	ibutions 2,015 1,999 2 ibutions 20 2,000 settlement earnings, gains, and sor scholarships 20 2,000 settlement earnings, gains, and sor scholarships 20 2,015 2,000 settlement earnings, gains, and sor scholarships 20 2,015 2,015 2,000 settlement earnings, gains, and sor scholarships 20 2,015 2,015 2,000 settlement expenses 2,015 2,015 2,000 settlement estimated percentage of the current year end balance (line 1g, column (a)) held as: determent endowment 100.00 % anent endowment 100.00 % sercentages in lines 2a, 2b, and 2c should equal 100%. Here endowment funds not in the possession of the organization that are held and administered for the ization by: not should expend the organizations settlement endownent funds and in the possession of the organization that are held and administered for the ization by: not should expend on schedule R? The inequality of the related organizations listed as required on Schedule R? The inequality of the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Description of property (a) Cost or other basis (b) Cost or other basis (c) Accumulated depreciation (investment) (other) (oth	ibutions 2, 015 1,999 2 ibutions 2, 015 1,999 2 ibutions 2, 000 2,000 3 ibutions 2, 015 2,015 2,000 3 ibutions 2,000 3 ibutions 2,000 3,000 3 ibutions 2,000 3 ibutions 2,000 3,000 3 ibutions 2,000 3	ibutions 2,015 1,999 2 ibutions 20 2,000 ibution

	(a) Description of security or category	(b) Book value	(c) Method of valuation:
	(including name of security)	(b) Book value	Cost or end-of-year market value
Financial	derivatives		
Closely-h	eld equity interests	·	
Other		-	
(A)		-	
(B)			
(C)		-	
(D)			
(E)		- 	
(F)		- 	
(G)			
(H)			_
art VIII	must equal Form 990, Part X, col. (B) line 12.) Investments - Program Related.	<u>' </u>	
ar viii		red "Vee" on Form 990	Part IV, line 11c. See Form 990, Part X, line 13
	Complete if the organization answe		
	(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
41			Cost of end-of-year filativet value
<u>(1)</u> (2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
) must equal Form 990, Part X, col. (B) line 13.)		
art IX	Other Assets.		
***************************************	Complete if the organization answe	red "Yes" on Form 990,	Part IV, line 11d. See Form 990, Part X, line 15
	(a	Description	(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)		<u></u>	
(9)			
*****	in (b) must equal Form 990, Part X, col. (B) line	15.) <i></i>	
are).	Other Liabilities.		D 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
		red "Yes" on Form 990,	Part IV, line 11e or 11f. See Form 990, Part X,
	line 25.		
	(a) Description of liability	(b) Book value	
	income taxes		
2)			_
3)			_
4)			
(6)			
(6) (7)			
(6) (7) (8)			
(5) (6) (7) (8) (9)	must equal Form 990, Part X, col. (B) line 25.)		

	Reconciliation of Revenue per Audited Financial Stateme	•	
	Complete if the organization answered "Yes" on Form 990, P		
1	70 7	· · · · · · · · · · · · · · · · · · ·	1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	l . I	
a	Net unrealized gains (losses) on investments	2a	4 1
Ь	Donated services and use of facilities	2b	4 1
C	Recoveries of prior year grants	2c	-
d		2d	
е	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	4-	
a	Investment expenses not included on Form 990, Part VIII, line 7b		-
Ь		4b	
C	Add lines 4a and 4b		4c
5	Reconciliation of Expenses per Audited Financial State		5
	Complete if the organization answered "Yes" on Form 990, F		per neturn.
1	Total expenses and losses per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		B
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	-
c	Other losses	2c	
d	Other (Describe in Part XIII.)		-
e	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)		
C	Add lines 4a and 4b		4c
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5
	t XIII Supplemental Information.		
Provi	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, line	s 1b and 2b; Part V, line 4; Pa	rt X, line
	rt XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any a		
01.	Collections descriptions (Part III, line 4)	
The	collection items include textiles, pottery, beads, jewel	ry, ceramics, carvi	ngs and
too.	ls primarily from or representative of the Verde Valley a	nd surrounding area	of
Can	tral Arizona. Collection items are maintained for public		
		exhibition, education	on, and
		exhibition, education	on, and
	earch in the furtherance of public service rather than fir		
res	earch in the furtherance of public service rather than fin	nancial gain. The co	ollections,
res		nancial gain. The co	ollections,
res	earch in the furtherance of public service rather than fin	nancial gain. The co	ollections,
reso	earch in the furtherance of public service rather than fin	nancial gain. The co	ollections,
reso	earch in the furtherance of public service rather than find the acquired through purchase or donated, are not recogni	nancial gain. The co	ollections,
resowher	earch in the furtherance of public service rather than find the acquired through purchase or donated, are not recogni	nancial gain. The conized. During the cure	ollections,
resowher	earch in the furtherance of public service rather than first there acquired through purchase or donated, are not recognized year, there were no purchase of objects. All catalogue	nancial gain. The conized. During the cure	ollections,
whet	earch in the furtherance of public service rather than first there acquired through purchase or donated, are not recognized year, there were no purchase of objects. All catalogue	nancial gain. The control of the current of the control of the control of the U.S. Fores	ollections,
whet	earch in the furtherance of public service rather than firther acquired through purchase or donated, are not recognical year, there were no purchase of objects. All catalogue lection have either been donated or are on long-term loan	nancial gain. The control of the current of the control of the control of the U.S. Fores	ollections,
whet	earch in the furtherance of public service rather than firther acquired through purchase or donated, are not recognical year, there were no purchase of objects. All catalogue lection have either been donated or are on long-term loan	nancial gain. The control of the current of the control of the control of the U.S. Fores	ollections,
whet	earch in the furtherance of public service rather than firther acquired through purchase or donated, are not recognical year, there were no purchase of objects. All catalogue lection have either been donated or are on long-term loan	nancial gain. The control of the current of the control of the control of the U.S. Fores	ollections,
resewhet	earch in the furtherance of public service rather than firther acquired through purchase or donated, are not recognical year, there were no purchase of objects. All catalogue lection have either been donated or are on long-term loan	nancial gain. The control of the current of the control of the control of the U.S. Fores	ollections,
resewhet	earch in the furtherance of public service rather than firther acquired through purchase or donated, are not recognical year, there were no purchase of objects. All catalogue lection have either been donated or are on long-term loan	nancial gain. The control of the current of the control of the control of the U.S. Fores	ollections,

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

Attach to Form 990 or Form 990-EZ.

2015

Open to Public

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

▶ Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Inspection Employer identification number

erde Valley A						27-34	
(* 6 * 1 × 60 * 60	_	•	-		swered "Yes" on	Form 990, Part IV	, line 17.
Form 98	00-EZ filers are not						
	_	ed funds through			ities. Check all that ap		
a Mail solicitation					of non-government gra	ants	
b Internet and e					of government grants		
c Phone solicita			g ∐	Special fund	raising events		
d In-person soli							
•		_	-		ng officers, directors,		П.,
		_		•	sional fundraising ser		_
	•		(Tundraisers)	pursuant to a	agreements under wh	ich the fundraiser is to b	Xe
compensated at	least \$5,000 by the o	rganization.					
(i) Name and add or entity (fu		(II) Activity		draiser have	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in	(vi) Amount paid to (or retained by)
	indialocty			outions?	- Contractive	col. (i)	organization
1			Yes	No			
2							
3			1				
4							
5							
6							
7							
8				-			
9							
10							
	t						
	-	is registered or li	icensed to so	olicit contribut	tions or has been notif	fied it is exempt from	
registration or lice	nsing.						
						<u> </u>	
-							

		(a) Event #1 Gala	(b) Event #2	(c) Other events None	(d) Total events (add col. (a) through
		(event type)	(event type)	(total number)	col. (c))
1					
1	Gross receipts	23,091			23,091
2		11,500			11,500
3	line 2)	11,591			11,591
4	Cash prizes				
5	Noncash prizes	1,735			1,735
6	Rent/facility costs	9,146			9,146
7	Food and beverages				
7 8	Entertainment ,				
9	Other direct expenses				
10	Direct expense summary. Add line	s 4 through 9 in column (d)			10,881
11					710
i,			"Yes" to Form 990, Par	t IV, line 19, or reported	I more
_	than \$15,000 on Form 99	0-EZ, line 6a.	<u></u>		
		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c)
1	Gross revenue				
2					
3	Noncash prizes				
4	Rent/facility costs				
	Other direct expenses				
5					
5	Onto disconstruction	Yes %	Yes %	Yes %	
5		☐ Yes % ☐ No	☐ Yes%	☐ Yes %	
		□ No			
6	Volunteer labor	No s 2 through 5 in column (d)	□ No	□ No	
6 7 8	Volunteer labor	No s 2 through 5 in column (d) tract line 7 from line 1, column	nn (d)	□ No	
6 7 8	Volunteer labor	No s 2 through 5 in column (d) tract line 7 from line 1, column	nn (d)	□ No	Yes
6 7 8 Eis	Volunteer labor	No s 2 through 5 in column (d) tract line 7 from line 1, column	nn (d)	□ No	Yes

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

2015

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Verde Valley Archaeology Center 27-3436708 01. Members or stockholder classes and rights (Part VI, line 6) In accordance with its bylaws. Each member is entitled to one vote at the annual membership meeting. 02. Member election for additional members (Part VI, line 7a) Members of the governing body (board of trustees) are nominated and then are voted upon by the Center's membership at the Center's annual membership meeting. 03. Form 990 governing body review (Part VI, line 11) A copy of the 990 was provided to all board members for their review and questions prior to filing with the IRS. 04. Conflict of interest policy compliance (Part VI, line 12c) The Center's operations and policy manual has a conflict of interest statement incorporated into it. The policy is reviewed with staff annually and self-reporting is relied upon. 05. Governing documents, etc, available to public (Part VI, line 19) All public documents are available for inspection by the general public upon request of the Center. 06. General explanation attachment mission continued: foster a deeper understanding of the prehistory and American Indian history of the Verde

Hopi Tribe, the Yavapai-Apache Nation, and the National Park Service.