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Form 990-PF

Department of the Treasury

Internal Revenue Service

As Filed Data -

DLN: 93491219002137

OMB No 1545-0052

2016

Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation ▶ Do not enter social security numbers on this form as it may be made public.
 ▶ Information about Form 990-PF and its instructions is at www.irs.gov/form990pf.

Open to Public
Inspection

For	caler	ndar year 2016, or tax year beginning 01-01-	·2016 , aı	nd ending 12-3	1-2016		·
		undation RECOVERY HOMES		A Employe	dentification	numbe	r
				46-3225513			
		d street (or P O box number if mail is not delivered to street addre AKS VIEW DR	ess) Room/suite	'	number (see II	nstructio	ns)
City	or town	n, state or province, country, and ZIP or foreign postal code		(928) 821-3	526		
		, AZ 863243511		C If exempt	ion application i	ıs pendın	g, check here
G Cł	neck al		f a former public charity	D 1. Foreign	n organizations,	check h	ere 🕨 🗍
		Final return Amended retu			n organizations heck here and a		
		☐ Address change ☐ Name change		E If private	foundation sta	tus was 1	erminated
_	•	pe of organization		under se	ction 507(b)(1)	(A), chec	k here ► L
		ket value of all assets at end J Accounting method	✓ Cash ☐ Accru	al F If the fou	ındatıon ıs ın a ı	60-montl	n termination
		from Part II, col (c), ◆\$ 27,745 CPart I, column (d) m	ust be on cash basıs)	under se	ction 507(b)(1)	(B), chec	k here 🕨 🗀
Pa	rt I	Analysis of Revenue and Expenses (The total	(a) Revenue and				(d) Disbursements
		of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))	(a) Revenue and expenses per books	(b) Net investmen income	1, ,	ted net ome	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc , received (attach schedule)	58,830				
	2	Check ► ✓ If the foundation is not required to attach					
	3	Sch B			2		
	4	Dividends and interest from securities					
	5a	Gross rents					
	ь	Net rental income or (loss)	_[
KIE	6a	Net gain or (loss) from sale of assets not on line 10					
Revenue	b	Gross sales price for all assets on line 6a					
æ	7	Capital gain net income (from Part IV, line 2)	•				
	8	Net short-term capital gain	•				
	9 10a	Gross sales less returns and allowances	•				
	b	Less Cost of goods sold					
	c	Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule)	. 9 187,198			187,198	
	12	Total. Add lines 1 through 11			2	187,200	
	13 14	Compensation of officers, directors, trustees, etc Other employee salaries and wages	28,400				28,400 55,813
Š	15	Pension plans, employee benefits					7,243
Expenses	16a	Legal fees (attach schedule)					
xpe	ь	Accounting fees (attach schedule)	. % 456				456
re E	С	Other professional fees (attach schedule)	1,125				1,125
and Administrative	17	Interest	398				398
ılstı	18 19	Taxes (attach schedule) (see instructions) Depreciation (attach schedule) and depletion	. 9 175				175
<u>=</u>	20	Occupancy	64,813				64,813
i Ad	21	Travel, conferences, and meetings					3.,313
anc	22	Printing and publications					
	23	Other expenses (attach schedule)	86,147				86,147
Operating	24	Total operating and administrative expenses.	247				2// 5
ď	25	Add lines 13 through 23	245,378		U		244,570
	26	Total expenses and disbursements. Add lines 24 an	d				
	27	Subtract line 26 from line 12	245,378		0		244,570
	a	Excess of revenue over expenses and	652				
	ь	disbursements Net investment income (if negative, enter -0-)			2		
	C	Adjusted net income(if negative, enter -0-)			-	187,200	
For	ı Paper	work Reduction Act Notice, see instructions.	l	Cat No 112	 39X	For	m 990-PF (2016)

Investments—corporate stock (attach schedule)

Loans from officers, directors, trustees, and other disqualified persons Mortgages and other notes payable (attach schedule).

Total liabilities(add lines 17 through 22)

Foundations that follow SFAS 117, check here 🕨 🗹

and complete lines 24 through 26 and lines 30 and 31.

Foundations that do not follow SFAS 117, check here

Paid-in or capital surplus, or land, bldg, and equipment fund

Capital stock, trust principal, or current funds

Retained earnings, accumulated income, endowment, or other funds

Total net assets or fund balances (see instructions)

Total liabilities and net assets/fund balances (see instructions) .

Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-

Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30

Analysis of Changes in Net Assets or Fund Balances

Investments—land, buildings, and equipment basis ▶

Investments—other (attach schedule)

Less accumulated depreciation (attach schedule) ▶ 1,367

Less accumulated depreciation (attach schedule) ▶

Total assets (to be completed by all filers—see the

Land, buildings, and equipment basis ▶

instructions Also, see page 1, item I)

Other assets (describe > _

Other liabilities (describe -

Unrestricted

Temporarily restricted

Permanently restricted

and complete lines 27 through 31.

of-year figure reported on prior year's return)

Decreases not included in line 2 (itemize) ▶

Enter amount from Part I, line 27a

Other increases not included in line 2 (itemize) -

Assets 10a

b

С

11

12

13 14

15

16

17

18

19

20

21

22

23

24

25

26

28 29

31 Part III

Liabilities

Balances

Fund

ŏ

Assets 27

Net 30

2

```
3,660
              23,351
9
              31,363
              31,363
              -8.012
              -8,012
              23,351
```

4.302

28,347

35,707

35,707

-7,360

-7,360

28,347

2

3

4

5

6

-8,012

-7,360

-7,360

Form 990-PF (2016)

652

1,300

3,700

1,300

27,745

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Part VIII Information About Officers, Directors, Truste and Contractors (continued)	es, Foundation Managers, Highly F	aid Employees,
3 Five highest-paid independent contractors for professional se	ervices (see instructions). If none, ente	r "NONE".
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services.		<u> </u>
Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year Include	le relevant statistical information such as the numb	er of
organizations and other beneficiaries served, conferences convened, research papers	produced, etc	Expenses
1		
2		
3		
4		
Part IX-B Summary of Program-Related Investments (s	see instructions)	
Describe the two largest program-related investments made by the foundation dur	<u> </u>	Amount
1 N/A		
2		
		
All other program-related investments See instructions		
3		
Total. Add lines 1 through 3		•
		Form 990-PF (2016)

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for

3a 3b

4

5

244.570

244.570

Form 990-PF (2016)

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Adjusted qualifying distributions. Subtract line 5 from line 4.

the section 4940(e) reduction of tax in those years

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

4

5

a From 2011. . . . **b** From 2012. . . . c From 2013. . d From 2014. . . .

e From 2015.

4 Qualifying distributions for 2016 from Part XII, line 4 🕨 \$ a Applied to 2015, but not more than line 2a **b** Applied to undistributed income of prior years

c Treated as distributions out of corpus (Election required—see instructions). **d** Applied to 2016 distributable amount. . . . e Remaining amount distributed out of corpus

5 Excess distributions carryover applied to 2016 (If an amount appears in column (d), the

a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income Subtract line 4b from line 2b c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. d Subtract line 6c from line 6b Taxable amount e Undistributed income for 2015 Subtract line 4a from line 2a Taxable amount—see instructions f Undistributed income for 2016 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2017 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) 8 Excess distributions carryover from 2011 not applied on line 5 or line 7 (see instructions) . . .

6 Enter the net total of each column as

9 Excess distributions carryover to 2017.

10 Analysis of line 9

a Excess from 2012. . . **b** Excess from 2013. . c Excess from 2014. . .

d Excess from 2015. . e Excess from 2016. .

Subtract lines 7 and 8 from line 6a

indicated below:

same amount must be shown in column (a))

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0

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•	,	
XIII	Undistributed Income (see instruction	n

P	art XIII	Undistr	ibuted Ir	icome (see instruc	tions)
						(a) Corpus
1	Distributab	le amount f	or 2016 fro	m Part XI	, line 7	
2	Undistribut	ed income,	ıf any, as o	f the end	of 2016	
а	Enter amou	unt for 2015	only			
b	Total for p	nor years	20,	20,	20	
3	Excess dist	ributions ca	rryover, if	any, to 20	16	

208,788

f Total of lines 3a through e.

208.788

244.570

(Election required—see instructions).

208.788 244.570

453,358

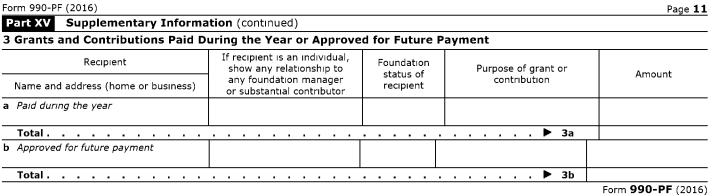
453,358

(b)

Years prior to 2015

(c)

2015



Enter gross amounts unless otherwise indicated			siness income	Excluded by section	n 512, 513, or 514	(e) Related or exemp
1 Program s	service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions
a CLIEN	T SERVICES					41,74
b MIRAC	LES HAPPEN PROCEEDS					89,99
c OTHER	RINCOME					6,15
d BED FI	EE AND RENTAL INCOME					45,37
e REFUN	DS					19
f EVENT	S					3,72
g Fees ar	nd contracts from government agencies					
. Members	thip dues and assessments					
	on savings and temporary cash			14	2	
Dividend	s and interest from securities					
Net renta	al income or (loss) from real estate					
	nanced property					
	pt-financed property.					
	tal income or (loss) from personal property					
	, , , , ,					
	restment income					
	(loss) from sales of assets other than					
	ry					
	ne or (loss) from special events					
) Gross pr	ofit or (loss) from sales of inventory					
L Other re	venue a					
b						
с						
е						
Cubtotal	Add columns (b) (d) and (o)				2	187,198
3 Total. A	dd line 12, columns (b), (d), and (e)			1	3	187,200
		\				
art XVI-	•	e Accomplish		<u> </u>	ited importantly to	
art XVI-		e Accomplishi	d ın column (e) c	of Part XVI-A contribu		
art XVI- ine No.	Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	e Accomplishi	d ın column (e) c	of Part XVI-A contribu		
art XVI- ine No.	Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	e Accomplishi	d ın column (e) c	of Part XVI-A contribu		
art XVI- ine No.	Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	e Accomplishi	d ın column (e) c	of Part XVI-A contribu		
art XVI- ine No.	Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	e Accomplishi	d ın column (e) c	of Part XVI-A contribu		
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art XVI- ine No.	Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	e Accomplishi	d ın column (e) c	of Part XVI-A contribu		
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art XVI- ine No.	Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	e Accomplishi	d ın column (e) c	of Part XVI-A contribu		

Part XVI	Information Re Exempt Organi		nsfers To a	and Transaction	ns and Relatio	nships With Non	icharitable		
	organization directly or in e Code (other than section	directly engage					on 501	Yes	No
a Transfers	s from the reporting four	idation to a non-	charitable exe	empt organization	of	-			
(1) Cas	sh						. 1a(1)		No
(2) Oth	er assets						. 1a(2)		No
b Other tra	ansactions								
(1) Sale	es of assets to a nonchar	itable exempt o	rganızatıon.				. 1b(1)		No
(2) Pur	chases of assets from a r	noncharitable ex	empt organiz	zation			1b(2)		No
	ital of facilities, equipme	-					1b(3)		No
	mbursement arrangemer						. 1b(4)		No
	ns or loan guarantees.						. 1b(5)		No
	ormance of services or m								No
_	of facilities, equipment, r swer to any of the above	-	-						No
of the go	oods, other assets, or ser ansaction or sharing arra (b) Amount involved	vices given by tangement, show	he reporting in column (c	foundation If the f	foundation receive goods, other asse	d less than fair mark	ket value ved	ngemeni	ts
		-							
2a Is the fo	undation directly or indir	ectly affiliated w	ith, or relate	d to, one or more t	tax-exempt organ	ızatıons			
describe	d in section 501(c) of the	Code (other th	an section 50)1(c)(3)) or in sect	ion 527?		. □Yes	✓ N	0
b If "Yes,"	complete the following s	chedule							
	(a) Name of organizati	on	(I	b) Type of organizatio	n	(c) Description	of relationship		
of	ider penalties of perjury, my knowledge and beliet nich preparer has any kno	f, it is true, corre							
Here	*****			2017-06-13	*****		May the IRS discur		
	Signature of officer or t	rustee		Date	Title		see instr)?		
	Print/Type preparer's	s name Pr	reparer's Sıgr	nature	Date	Check if self-	PTIN		
	MARC CTERLING					employed ▶ □	P00444	1516	
Paid	MARC STERLING				2017-06-13				
Prepare		LING FINANCIA	AL SERVICES			1	Fırm's EIN ▶81	-36291	02
Use Onl	•	OCE WEST OF THE	NA CTT C				2 2117 F 01	30271	
	Firm's address ► 18	365 WEST SR 89	A SIE C				N	\ aaa -	
	SI	EDONA, AZ 863	36				Phone no (928) 282-3	5684

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation (a) Name and address Title, and average (c) Compensation (If (d) Expense account. hours per week not paid, enter Contributions to (e) other allowances -0-) (b) devoted to position employee benefit plans and deferred compensation DAMIEN BROWNING PRESIDENT & 28,400 40 00 1120 PEAKS VIEW DR CLARKDALE, AZ 863243511 ANNE BROWNING VICE PRESIDE 5 00 1120 PEAKS VIEW DR CLARKDALE, AZ 863243511 KIM WRIGHT TREASURER 2 00 1120 PEAKS VIEW DR CLARKDALE, AZ 863243511 DENNISE ROSEN DIRECTOR ٥ ٥ 1 00 1120 PEAKS VIEW DR CLARKDALE, AZ 863243511 ARNIE WRIGHT DIRECTOR 1 00 1120 PEAKS VIEW DR CLARKDALE, AZ 863243511 PHIL ROSEN DIRECTOR 0 1 00 1120 PEAKS VIEW DR CLARKDALE, AZ 863243511 PATTY MAY DIRECTOR 0 1 00 1120 PEAKS VIEW DR CLARKDALE, AZ 863243511 ANTHONY CAETANO DIRECTOR 1 00

1120 PEAKS VIEW DR CLARKDALE, AZ 863243511

efile GRAPHIC print - DO NOT P	PROCESS As Filed	Data -	Di	LN: 93491219002137
TY 2016 Accounting Fe	ees Schedule			
	Name: STEPS	TO RECOVERY HOME	:S	
	EIN: 46-322	5513		
Category	Amount	Net Investment	Adjusted Net	Disbursements
	Amount	Income	Income	for Charitable
				Purposes

INDIRECT ACCOUNTING FEES

Note: To capture the full content of this document, please select landscape mode (11" \times 8.5") when printing.

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TY 2016 Depreciation Schedule

Name: STEPS TO RECOVERY HOMES

		EIN: 4	6-3225513						
Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
DODGE VAN	2014-11-28	2,000	400	STRAIGHT LINE	5 0000	400			
FURNISHINGS	2015-07-01	2,219	159	STRAIGHT LINE	7 0000	317			
FURNISHINGS	2016-03-07	600		S/L	7 0000	71			
FURNISHINGS	2016-10-21	850		S/L	7 0000	20			

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TY 2016 Land, Etc.	•	
Schedule		

Name: STEPS TO RECOVERY HOMES

EIN: 46-3225513

Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
DODGE VAN	2,000	800	1,200	1,000
FURNISHINGS	2,219	476	1,743	1,500
FURNISHINGS	1,450	91	1,359	1,200

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Name: STEPS TO RECOVERY HOMES

SECURITY DEPOSIT

Description

Other Assets Schedule

EIN: 46-3225513

Beginning of Year -

Book Value

End of Year - Book

DLN: 93491219002137

1,300

End of Year - Fair

Market Value

1,300

Value

	STEPS TO RECO 46-3225513	OVERY HOMES		
Other Expenses Schedule				
Description	Revenue and Expenses per	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes

4,241

5,116

3,786

5,739

-2,391

834

163

4,920

1,350

4,241

5,116

3,786

5,739

-2,391

834

163

4,920

1,350

EXPENSES

AUTO EXPENSE

BENEFIT DINNER

CLIENT ACTIVITIES

CLIENT TRANSPORT

CONTRIBUTIONS

ADVERTISING AND PROMOTION

BANK, MERCHANT, AND PAYPAL FE

CLIENT SAVINGS ADJUSTMENT

COMPUTER AND INTERNET EXPENSE

Expenses per BooksIncomeIncomeCharitable PurposesCONSIGNMENT450450CREDIT CARD EXPENSE155155

739

433

53

50

226

2,623

2,897

10,875

Net Investment

Adjusted Net

Disbursements for

739

433

53

50

226

2,897

10,875

Revenue and

Other Expenses Schedule

DUES AND SUBSCRIPTIONS

EMPLOYEE ACTIVITIES

MEALS AND ENTERTAINMENT

EVENT EXPENSE

FREIGHT

LAB FEES

MILEAGE

INSURANCE

Description

Expenses per BooksIncomeIncomeCharitable PurposesMISCELLANEOUS110110NEW STORE SUPPLIES2,7442,744OFFICE SUPPLIES8,1438,143

1,466

4,341

1,374

2,071

2,774

448

850

Net Investment

Adjusted Net

Disbursements for

1,466

4,341

448

850

1,374 2,071

2,774

Revenue and

Other Expenses Schedule

REPAIRS AND MAINTENANCE

SHIPPING & HANDLING

OUTSIDE LABOR

RIDE EXPENSES

TELEPHONE

THRIFT STORE

OTHER FEES

Description

	· · · · · · · · · · · · · · · · · · ·		i .	
Description Revenue and Net Investment Adjusted Net Disbursements it Expenses per Income Income Charitable Books Purposes	Description	 Net Investment Income	Adjusted Net Income	

	Books	Theome	Theome	Purpo
UTILITIES	19,567			

Other Expenses Schedule

Tellie GKAPHIC	print - DO NOT PROCESS	AS FIIEU Data -	DLN: 9349121900213/
		_	

TY 2016 Other Income Schedule

Name: STEPS TO RECOVERY HOMES

EIN: 46-3225513

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
CLIENT SERVICES	41,743		41,743
MIRACLES HAPPEN PROCEEDS	89,999		89,999
OTHERINCOME	6,155		6,155
BED FEE AND RENTAL INCOME	45,378		45,378
REFUNDS	198		198
EVENTS	3,725		3,725

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TY 2016 Other Liabilities Schedule							
Name:	STEPS TO REC	COVERY HOM	ES				
EIN:	46-3225513						
Description	n		Beginning of Year - Book Value	End of Year - Book Value			
CREDIT CARDS			19,149	18,930			
PAYROLL LIABILITIES			4,249	14,611			
PAYABLES			1,759				
NOTES PAYABLE			5,991				
SALES TAX PAYABLE			215	383			

CLIENT SAVINGS

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TY 2016 Other Notes/Loans Receivable Short Schedule							
Name:	STEPS TO RECOVERY HOMES						
EIN:	46-3225513						
Name of 501(c)((3) Organization	Balance Due					
OFFICER LOAN			2,762				

EIN: 46-3225513 Category Amount Net Investment Adjusted Net Disbursements						
TY 2016 Other Professional Fees Schedule Name: STEPS TO RECOVERY HOMES						
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Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
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1,125

INDIRECT OTHER PROFESSIONAL FEES

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TY 2016 Taxes Schedule							
Name: STEPS TO RECOVERY HOMES							
EIN: 46-3225513							
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes			
BUSINESS LICENSE	175			175			