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# SCANNED MAR 3 0 2000

Department of the Treasury Internal Revenue Service

# **Return of Organization Exempt From Income Tax**

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

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

OMB No 1545-0047 Open to Public Inspection

A	For the	e 2008 calendar year, or tax year beginning and end	ling		
В	Check if applicable	Please use IRS		D Employer identifi	cation number
Г	Addre	ss   label or   UNIVERSAL TECHNICAL INSTITUTE FOUNDAT	ION		
Ē	Name	type		59-3	828402
	Initial		m/suite	E Telephone numbe	
Ē	Termir	Casaria		•	)445-9396
2	Ameno	ded tions Character and TID 4		G Gross receipts \$	1,479,060.
	Applic	PHOENIX, AZ 85027		H(a) Is this a group re	
	pendir	F Name and address of principal officer: VERONICA K. MEURY		for affiliates?	Yes X No
		SAME AS C ABOVE		H(b) Are all affiliates inc	luded? Yes No
<u> I</u>	Tax-ex	empt status. X 501(c) ( 3 ) ◀ (insert no.)		If "No," attach a	list. (see instructions)
J	Webs <u>i</u> t	te: WWW.UTIFOUNDATION.NET		H(c) Group exemptio	n number >
K	Type of	organization: X Corporation Trust Association Other	L Year	of formation: 2005	A State of legal domicile: AZ
P	art I	Summary			
0	1	Briefly describe the organization's mission or most significant activities: ORGANI	ZED	AND OPERATE	D
Governance		EXCLUSIVELY FOR RELIGIOUS, CHARITABLE, SCI	<u>ENTI</u>	FIC AND/OR	EDUCATIONAL
ž	2	Check this box	of more	than 25% of its asset	s.
ŏ	3	Number of voting members of the governing body (Part VI, line 1a)		. 3	6
	4	Number of independent voting members of the governing body (Part VI, line 1b)		<b>4</b>	6
es	5	Total number of employees (Part V, line 2a)		5	0
Activities &		Total number of volunteers (estimate if necessary)		6	0
Ą	7a	Total gross unrelated business revenue from Part VIII, line 12, column (C)		<u>7a</u>	0.*
	b	Net unrelated business taxable income from Form 990-T, line 34	<del>.</del>	7b	0.
			<u> </u>	Prior Year	Current Year
e		Contributions and grants (Part VIII, line 1h)	<u> </u>	451,168.	1,473,938.
Revenue	1	Program service revenue (Part VIII, line 2g)		200	
Æ	1	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	·	903	5,122.
	1	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		450 054	4 450 060
	1	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	_	452,071.	1,479,060.
	1	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		72,750.	608,292.
	l	Benefits paid to or for members (Part IX, column (A), line 4)	·		
Expenses	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	·		
Ë	16a	Professional fundraising fees (Part IX, column (A), line 11e)	-		
ă	_b	Total fundraising expenses (Part IX, column (D), line 25)	_	077 000	226 426
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	.	277,822.	326,426.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)  Revenue less expenses. Subtract line 18 from line 12 RECEIVED		350,572. 101,499.	934,718.
<u></u>	19	Revenue less expenses. Subtract line 18 from line 12 11 CTV CTV CTV			544,342.
sts		Total assets (Part X, line 16)		Beginning of Year 278,800.	End of Year
Net Assets or	20 21	Total assets (Part X, line 16) MAR 9 2010		7,200.	820,638. 4,695.
let.	22	Net assets or fund balances Subtract line 21 from line 20		271,600.	815,943.
	art II	Signature Block OGDEN LIT	1	2/1,000.	013,343.
		Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and sta	atements, a	and to the best of my knowled	ge and belief, it is true, correct,
		and complete Declaration of preparer (other than officer) is based on all information of which preparer has any kr	nowledge		
Sig	n	range & When		1 23/	15/10
He		Signature of officer		Date	~//~
		► VERONICA K. MEURY, EXECUTIVE DIRECTOR			
		Type or print name and title			
_		Preparer's Date			er's identifying number
Pai			/ seli / o em	ployed   [see in:	structions) -
	parer's	Firm's name (or JOHNSON, HARRIS & GOFF, PLLC	<u> </u>	EIN ▶	
USE	Only	self-employed). 8777 F VIA DE VENTURA SUITTE 245			
		address, and ZIP+4 SCOTTSDALE, AZ 85258		Phone no. ▶ (	480)948-0060
Ma	y the If	RS discuss this return with the preparer shown above? (see instructions)			X Yes No
	001 12-1		ate ins	tructions.	Form <b>990</b> (2008)
	_	EE SCHEDULE O FOR ORGANIZATION MISSION STA			

	990 (2008)		CHNICAL INSTITUTE FOUN	<b>DATION</b> 59-3828	402 Page 2
Par	t III   Staten	nent of Program Service Acc	complishments (see instructions)		- <del></del>
1		e the organization's mission:			
•	PROMOTE	TECHNICAL TRAINING	AND AUTOMOTIVE SAFET	Y, PROVIDE EXPER	T
			ORMATION TO NEW DRIVE		AND
	SUPPORT	TECHNICAL TRAINING	IN SECONDARY EDUCATI	ON.	- · · · · · · · · · · · · · · · · · · ·
2	_		am services during the year which were no		
		990 or 990-EZ?		L	Yes X No
		ibe these new services on Schedule (		_	
3			nificant changes in how it conducts, any pi	ogram services?	Yes X No
		be these changes on Schedule O.			
4			h of the organization's three largest progra		
			ection 4947(a)(1) trusts are required to repo	~	
	allocations to o	others, the total expenses, and reven	ue, if any, for each program service reporte	d.	
4-	(Code:	) (Cyronos & 93)	, 718. including grants of \$ 60	8,292.)(Revenue \$ 1,	470 061 >
4a	PROMOTE		S AND AUTOMOTIVE SAFET		
			CORMATION TO NEW DRIVE		
			IN SECONDARY EDUCATI		AND
	BOLLOKI	TECHNICAL TRAINING	IN BECOMPANI EDUCATI	OIV:	<del></del>
					<del></del>
					_
	-		<del></del>		
	-				
					<del>-</del>
4b	(Code:	) (Expenses \$	including grants of \$	) (Revenue \$	)
		<del></del>			
	<del></del>				
	<u> </u>				<del></del>
4c	(Code:	) (Expenses \$	including grants of \$	) (Revenue \$	)
	<del></del>				
			·		
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4d	Other program	services. (Describe in Schedule O.)			
-	(Expenses \$	including gran	s of \$ ) (Revenue \$	1	
 4e		service expenses >\$	934,718. (Must equal Part IX. Line	25. column (B) )	

			Yes	No
1 '	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1_1_	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3_		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		_X
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and			
	reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice			
	on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		_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	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide	:		
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25?			
	If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11	_X_	
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was			
	prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12		X
13	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	and program service activities outside the U.S ? If "Yes," complete Schedule F, Part I	14b		<u> </u>
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity			
	located outside the United States? If "Yes," complete Schedule F, Part II	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Part III	16		X
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20	- <del>-</del>	X
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	
22 ~~	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23 24 a	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J  Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the	23		^
∡-Td	last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K.			
	If "No", go to question 25	24a		X
ь	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	270		
·	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a		270	_	
LVu	disquisition powers duming the year of "Yea" complete Cabadula I. Dont I.	25a		х
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a			
	prior year? If "Yes," complete Schedule L, Part I	25b		х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial			
	contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		х
			~~	

Part IV Checklist of Required Schedules (continued)

			Yes	No
28 `	During the tax year, did any person who is a current or former officer, director, trustee, or key employee:			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an			ļ
	indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other		_	
	person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV	28a		X
b	Have a family member who had a direct or indirect business relationship with the organization?			
	If "Yes," complete Schedule L, Part IV	28b		X
С	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional			
	corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	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	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X_
34	Was the organization related to any tax-exempt or taxable entity?			
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		Х
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?			
	If "Yes," complete Schedule R, Part V, line 2	35		Х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X

Form 990 (2008)

008) UNIVERSAL TECHNICAL INSTITUTE FOUNDATION
Statements Regarding Other IRS Filings and Tax Compliance Part V

16 Enter the number reported in Box 3 of Form 1098, Annual Summary and Transmittal of U.S. Information Returns Enter 0-I find applicable Quartholing Warnings to prize winners?  22 Enter the number of employees reported on Form W.3, Transmittal of Wage and Tax Statements, filed for the celendary year ending with or within the year covered by this return  10 If at least one is reported on line 2.a, did the organization file all required federal employment tax returns?  10 If we least one is reported on line 2.a, did the organization file all required federal employment tax returns?  11 If we sum of lines 1 and 2 is greater than 250, you may be required to e-five this return. See instructions  12 If we sum of lines 1 and 2 is greater than 250, you may be required to e-five this return. See instructions  13 Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?  14 If west, and the unrelated of the organization in the search of the state of the service of the search of the service of the search of the service of the search of the se				Yes	No
b Enter the number of Forms W 20 included in line 1a. Enter-0 if not applicable  □ Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?  1c	1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			
Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?  2 Enter the number of employees reported on Form W3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return  1 It a leaf or the calendar year ending with or within the year covered by this return?  Note, if the sum of lines 1a and 2a is greater than 250, you may be required to e-rife this return. (see instructions)  3 Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?  3 If "Yes," has it filed a Form 990.1 for this year? If "No," provide an explanation in Schedule O  4 A at any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account it is foreign country; low as a bank account, securities account, or other financial account?  4 If "Yes," enter the name of the foreign country; low as a bank account, securities account, or other financial account?  5 By If "Yes," other the part of the foreign country; low as a bank account, securities account, or other financial account?  5 By If "Yes," other the part of the organization that it was or is a party to a prohibited tax shelter transaction?  5 If "Yes," to question 5 aor 5b, did the organization file form 8886.7, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?  5 If "Yes," to question 5 aor 5b, did the organization file form 8886.7, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?  6 If "Yes," did the organization notify the donor of the value of the goods or services provided?  7 Organizations that may receive deductible contributions under section 170(c).  8 If "Yes," did the organization notify the donor of the value of the goods or services provided?  9 If If yes, "In the part of the part of the very part of the part of the part of the part of the		U.S. Information Returns Enter -0- if not applicable <u>1a</u> 0			
Gambing) winnings to pizze winners?  2a Enter the number of employees reported on Form W3, Transmittal of Wage and Tax Statements.  7b If at least one is reported on line 2a, did the organization file all required (dedral employment tax returns?)  8b If at least one is reported on line 2a, did the organization file all required (dedral employment tax returns?)  8c Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)  8c Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?  8c Different and 2a is greater than 250, you may be required to e-file this return. (see instructions)  8c Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?  8c Different and 2a is greater than 250, you may be required to e-file this return. (see instructions)  8c Different and 2a is greater than 250, you may be required to e-file this return.  8c Different and 2a is greater than 250, you may be required to e-file this return.  8c Different and 2a is greater than 250, you may be required to e-file this return.  8c Different and 2a is greater than 250, you may be required to e-file this return.  8c Different and 2a is greater than 250, you may be required to e-file this return.  8c Different and 2a is greater than 250, you may be required to e-file this return.  8c Different and 2a is greater than 250, you may be required to e-file this return.  8c Different and 2a is greater than 250, you may be required to e-file this return.  8c Different and 2a is greater than 250, you may be required to e-file this return.  8c Different and 2a is greater than 250, you may be required to e-file this return.  8c Different and 2a is greater than 250, you may be required to e-file this return.  9c Different and 2a is greater than 2a in this return.  9c Different and 2a is greater than 2a in the deal of the post of this problem 2a.  9c Different and 2a is greater than	b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
2a Enter the number of employees reported on Form W3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return.  b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)  3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?  4b If "Yes," has it filed a Form 990-T for this year? If "No." provide an explanation in Schedule O  4c At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account??  5b If "Yes," enter the name of the foreign country. See the instructions for exceptions and filing requirements for Form TD F90-22.1, Report of Foreign Bank and Financial Accounts.  5c Was the organization a party to a prohibited tax shelter transaction?  5c Was the organization solicit any contributions that it was or is a party to a prohibited tax shelter transaction?  5c If "Yes," to question include with every solicitation and express statement that such contributions or gifts were not tax deductible?  6c Did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  6c Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?  7a X  7b If "Yes," indicate that may receive deductible contributions under section 170(c).  7c Did the organization full may be any to the organization and expressed or services provided?  7c If Yes, indicate the number of Forms 8262 files quing my year good or services provided?  7c If Yes, indicate the number of Forms 8262 files quing my year good or services provided?  7d Did the organization. Author of	С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	,	-	
filed for the calendar year ending with or within the year covered by this return.  If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note, if the sum of lines 1 and 2a is greater than 250, you may be required to e-file this return, (see instructions)  3a Dd the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?  b if "Yes," sat filled a Form 990 To for this year?" If "No," provide an explanation in Schedule O  the "Yes," sat filled a Form 990 To for this year?" If "No," provide an explanation in Schedule O  the "Yes," enter the name of the foreign country: ▶  See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.  Was the organization of the free firm of Form 70 F 90-22.1, Report of Foreign Bank and Financial Accounts.  Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  b If "Yes," did the organization of the firm of the 888-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?  b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  Organizations that may receive deductible contributions under section 170(e).  The production of the value of the goods or services provided?  Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  If "Yes," and the organization only the donor of the value of the goods or services provided?  To be the organization of qualified intellectual property, did the organization file Form 109C as required?  To be office form \$282?  If "Yes a contributions of qualified intellectual property, did the organization file Form 109C as required?  To be office form \$282?  Did the organization of qualified intellectual property, did the organization file Form 109C		(gambling) winnings to prize winners?	1c		X
b if at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note, if the sum of lines 1 a and 2a as greater than 250, you may be required to e-file this return. (see instructions)  3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by the return?  3b If "Yes," has it filed a form 990-T for this year? If "No." provide an explanation in Schedule O  3a At any time during the calendary year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country; less the interest of the foreign country. See the instructions for exceptions and filing requirements for Form TD F 90.22.1, Report of Foreign Bank and Financial Accounts.  See the instructions for exceptions and filing requirements for Form TD F 90.22.1, Report of Foreign Bank and Financial Accounts.  Was the organization aptry to a prohibited tax shefter transaction?  If "Yes," to question 5 a or 5b, did the organization that it was or is a party to a prohibited tax shefter transaction?  If "Yes," to question 5 a or 5b, did the organization file Form 886F. T, Disclosure by Tax Exempt Entity Regarding Prohibited Tax Shefter Transaction?  5c If "Yes," to question 5 a or 5b, did the organization file Form 886F. T) Disclosure by Tax Exempt Entity Regarding Prohibited Tax Shefter Transaction?  5c If "Yes," to did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  5c If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  5c If "Yes," did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?  7a If "Yes," did the organization notity the donor of the value of the goods or services provided?  5c Did the organization of qualified intellectual property, did the organization file Form 8089 as requ	2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? 3b If Yes, 'has if filed a Form 990-T for this year? If 'No,' 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 account)?  5b If Yes, 'enter the name of the foreign country: See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.  5c Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  5c Was the organization a party to a prohibited tax shelter transaction?  5c If "Yes," to question 5a or 5b, did the organization file Form 886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?  5c Did the organization solicit any contributions that were not tax deductible?  5c Did the organization solicit any contributions that were not tax deductible?  5c Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?  7d Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8822?  6 Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  7e Did the organization during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract?  7f Did the organization during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract?  7f Did the organization during the year, pay premiums, directly or indirectly, on a personal benefit contract?  7g Section 501(c)(3) and other sponosorin		filed for the calendar year ending with or within the year covered by this return . 2a 2			
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b if "Yes," did the organization notify the donor of the value of the goods or services provided?  c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?  d if yes, indicate the number of Forms \$\tilde{c}	a	• • • • • • • • • • • • • • • • • • • •	7a	-	X
to file Form 8282?  d if Yes, indicate the number of Forms 8282 filed during the year  e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  f) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  f) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  g) For all contributions of qualified intellectual property, did the organization file Form 8899 as required?  h) For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?  h) For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?  h) For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?  h) For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?  h) For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?  h) For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?  h) For contributions of cars, boats, airplanes, and other vehicles, did the organization file form 1098-C as required?  h) For contributions of cars, boats, airplanes, directly or indirectly, on a personal benefit contract?  f) X  X  To X  X  Yh X  Yh X  Yh X  Yh X  X  Yh X  X  Yh X  Yh X  Yh X  Yh X  X	b		7b		
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benefit contract?  1 Did the organization, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract?  1 Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  2 For all contributions of qualified intellectual property, did the organization file Form 8899 as required?  3 For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?  4 For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?  5 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?  9 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.  a Did the organization make any taxable distributions under section 4966?  b Did the organization make a distribution to a donor, donor advisor, or related person?  9 Section 501(c)(7) organizations. Enter: N/A  a 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  10		to file Form 8282?	7c		X
benefit contract?  7e	đ	If Yes, indicate the number of Forms 8282 filed during the year			İ
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b If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A 12b		· · · · · · · · · · · · · · · · · · ·			
			12a	<u> </u>	L
	b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A 12b	Ļ	000	

Form 990 (2008) UNIVERSAL TECHNICAL INSTITUTE FOUNDATION 59-3828402 Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

<u>Sec</u>	tion A. Governing Body and Management			
			Yes	No_
	For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances,			
	processes, or changes in Schedule O. See instructions.			
1a	Enter the number of voting members of the governing body			,
b	Enter the number of voting members that are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other		<b></b>	
	officer, director, trustee, or key employee?	2		<u>X</u>
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors or trustees, or key employees to a management company or other person?	3		<u>X</u>
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4	_X_	
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		_X_
6	Does the organization have members or stockholders?	6		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the			
	governing body?	7a		<u> X</u>
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year			
	by the following:			1
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9a	Does the organization have local chapters, branches, or affiliates?	9a		X
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with those of the organization?	9b		
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must			
	describe in Schedule O the process, if any, the organization uses to review the Form 990	10	X	
11	Is there any officer, director or 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	11		X
Sec	tion B. Policies			
			Yes	No
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
ь	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise			
	to conflicts?	12b	X	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this is done	12c	X	
13	Does the organization have a written whistleblower policy?	13		X
14	Does the organization have a written document retention and destruction policy?	14		X
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:	l _		
а	The organization's CEO, Executive Director, or top management official?	15a	X	
b	Other officers or key employees of the organization?	15b	X	
	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 with a		-	
	taxable entity during the year?	16a		x
h	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b	Aman .	
Sec	tion C. Disclosure		•	
17	List the states with which a copy of this Form 990 is required to be filed ▶AZ			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available	for		
.0	public inspection. Indicate how you make these available. Check all that apply.			
	Own website Another's website X Upon request			
10	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, a	nd fine	ancial	
19	statements available to the public.	11110	ioiai	
~	State the name, physical address, and telephone number of the person who possesses the books and records of the organization.	ition: •		
20	UNIVERSAL TECHNICAL INSTITUTE FOUNDATION - (623)445-0933	LIOII J		
	20410 N. 19TH AVENUE, PHOENIX, AZ 85027			
	ZUBLU IN LETTE BYRINIE FOURINES BA DOULL			

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- 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.

X Check this box if the organization did not co		y of	ficer			r, trı	uste	· ·		
(A)	(B)				C)			(D)	(E)	(F)
Name and Title	Average			Posi				Reportable	Reportable	Estimated
	hours per	<u> </u>	neci	( all )	tnat	hat apply)		compensation from	compensation from related	amount of other
	week	cto						the	organizations	compensation
	woon	or dir	يو ا			ated		organization	(W-2/1099-MISC)	from the
		stee	truste		بو	bens		(W-2/1099-MISC)	,	organization
		투	le noi		ploye	t com				and related
		Individual trustee or director	Institutional trustee	Officer	(ey err	Highest compensated employee	e di me			organizations
DONALD W. ABLESON		F	F	ŀ	<u> </u>	<u> </u>				
PRESIDENT AND CHAIRMAN	1.00	x		x				ο.	0.	0.
WILLIAM T. BIRGE										
BOARD MEMBER	1.00	X						0.	0.	0.
SEAN W. HOLLEY										
BOARD MEMBER	1.00	X						0.	0.	0.
WILLIAM R. KRAUS	1 00		İ	i	İ	i		_	_	•
TREASURER	1.00	X	$\vdash$	X	-			0.	0.	0.
VERONICA K. MEURY	40.00	v		x				0.	0.	0.
VICE PRESIDENT AND SECRE FRANK PLACENTI	40.00	Λ		^				0.	0.	<u> </u>
BOARD MEMBER	1.00	x	ł					0.	0.	0.
DOING HUMBER	1.00		1					0 •		
		$\vdash$			-	_				
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			<u> </u>							
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	990 (2008) <b>UNIV</b>	ERSAL TECHN	IIC.	AL	I	NS'	TI'	ru'	TE FOUNDATIO	N 59-3	<u>828</u>	<u>402</u>	P	age 8
Par	T VII Section A. Officers, Direction (A)  Name and title	tors, Trustees, Key E (B) Average			(e Pos	C) ition	1		(D) Reportable	rees (continued) (E) Reportable		E:	(F)	ed
		hours per week	Individual frustee or director	Institutional trustee			Highest compensated employee		compensation from the organization (W-2/1099-MISC)	compensation from related organization (W-2/1099-Mis	j s	com fr org	nount other opensa rom the janizat d relate anizate	ation e ion ed
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			$\perp$				ļ							
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			$\perp$											
1b 2	Total  Total number of individuals (includ		eceiv	od r	nore	tha	P 91	00	OOO in reportable		0.			0.
	compensation from the organization	•			11010	uia	ψı	00,	·	<u> </u>	.▶		Yes	0 No
3	Did the organization list any forme line 1a? If "Yes," complete Schedu For any individual listed on line 1a,	ile J for such individue	a/				•					3		X
5	and related organizations greater t Did any person listed on line 1a re	ceive or accrue comp	ensat	tion						nces rendered to		4_		X
Sec	the organization? If "Yes," completed in B. Independent Contractors				·-							5		X
1	Complete this table for your five hit the organization.	ghest compensated in	ndep	ende	ent c	ont	racto	ors 1	that received more than	\$100,000 of con	npens			
	Name and I	(A) pusiness address							(B) Description of s	services		ompe	C) insatio	n
	·-													
											_			
		<u>-</u>							· · · · · · · · · · · · · · · · · · ·					
2	Total number of independent cont	ractors (including the	se in	1) w	ho r	ecei	ved	moi	re than \$100,000 in com	pensation				
	nom the organization	<u> </u>			-	-						Form	990 (	2008)

Form 990 (2008)

Comparison of the control of the c		1 990 (	UNIVERSAL TECHNICAL	THOTITUTE F	OUNDATION	<u> </u>	4UZ Page €
Business Code    Business Code	,	. Ail	Cutomont of Hovellus		Related or exempt function	Unrelated business	excluded from tax under
Business Code    Business Code	ributions, gifts, grants other similar amounts	b c d	Membership dues Fundraising events Related organizations Government grants (contributions) All other contributions, gifts, grants, and similar amounts not included above  1b 1c 1d 1e 1e 1473938.				
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Section 501(c)(3) and 501(c)(4) organizations must complete all columns. on (A) but are not required to complete columns (B) (C) and (D)

	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in			· · · · · · · · · · · · · · · · · · ·	
	the U.S. See Part IV, line 22	608,292.	608,292.		
3	Grants and other assistance to governments,	•	•		
	organizations, and individuals outside the U.S.				
	See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
-	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan contributions (include section 401(k)				
-	and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees):				
·· a	Management	105,416.	105,416.		
b	Legal .				
c	Accounting	7,500.	7,500.		
d	Lobbying				
- -	Professional fundraising services. See Part IV, line 17			····· ,···· , . <del> · ····· ···· · ·</del>	
f	Investment management fees				
g	Other	75,019.	75,019.		
12	Advertising and promotion		,,		
13	Office expenses	15,620.	15,620.		
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel	18,343.	18,343.		
 18	Payments of travel or entertainment expenses	20,0100	20,0203		
.0	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	32,024.	32,024.		
23	Insurance	2,528.	2,528.		<u> </u>
24	Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)	=,3=0,	_,		
а	VOITELL DEEL TITE TO	63,750.	63,750.		
b	V=3.7.0	6,226.	6,226.		
C					
d					
e					
f	All other expenses				
25_	Total functional expenses. Add lines 1 through 24f	934,718.	934,718.	0.	
<u></u> 26	Joint Costs. Check here I If following				
	SOP 98-2. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation				

1	Accounting method used to prepare the Form 990: X Cash Cash Other			İ					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X					
b	Were the organization's financial statements audited by an independent accountant?								
С	If "Yes" to lines 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							
За	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?	За		X					
b	If "Yes," did the organization undergo the required audit or audits?	3b							

# **SCHEDULE A**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

# **Public Charity Status and Public Support**

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

2008
Open to Public

inspection

Schedule A (Form 990 or 990-EZ) 2008

Nam	e of t	the organizat	ion						E	mployer i	dentificati	on nu	mber	
			UNIVERS	AL TECHNICAL	INST	ITUTE	FOUN	DATIC	N	59	3828	402		
Pa	rt I	Reason	for Public Char	ity Status (All organi	zations mu	st comple	te this par	t.) (see ins	tructions)					
The	organ	ization is not a	a private foundation	because it is: (Please ch	neck only o	ne organi	zation.)							
1		A church, co	nvention of churches	s, or association of chur	ches desc	nbed in se	ection 170	(b)(1)(A)(i	).					
2		A school des	cribed in section 17	'0(b)(1)(A)(ii). (Attach So	hedule E.)	1								
3		A hospital or	a cooperative hospi	tal service organization	described	n section	170(b)(1)	( <b>A)(</b> iii). (At	tach Sche	edule H.)				
4		A medical re	search organization	operated in conjunction	with a hos	prtal desc	nbed in se	ction 170	(b)(1)(A)(i	ii). Enter tl	ne hospital	's nam	10,	
		city, and stat												
5		_	•	benefit of a college or u	niversity o	wned or of	perated by	a govern	mental un	it describe	ed in			
			( <b>b)(1)(A)(iv).</b> (Comple											
6	닏		_	ent or governmental uni										
7				erves a substantial part	of its supp	ort from a	governme	ental unit o	or from the	general p	oublic desc	nbed i	n	
_		section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)												
8								L. A						
9	لما	_	•	eives: (1) more than 33		• •				•	•	•		
			ctivities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment ncome and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975.											
			509(a)(2). (Complete	· ·	ווטווטווונ	ix) irom bu	311162262	acquired L	y trie orga	anization a	iiter Jurie S	0, 197	5.	
10	$\Box$			perated exclusively to te	et for nubi	lic safety S	See cectic	n 500/a\/	1) (see ins	etri ictione)				
11	一			perated exclusively for the								f one	or	
• •		-	•	ations described in secti							•		<b>.</b> ,	
				organization and compl				,		(-)(-),				
		a Type		<b>¬</b> -		e III - Func		tegrated		d $\square$	Type III - C	Other		
e		By checking	this box, I certify tha	nt the organization is not			•	-	r more dis	qualified p	ersons oth	er tha	n	
				han one or more publicl										
f		If the organiz	ation received a writ	ten determination from	the IRS th	at it is a Ty	pe I, Type	II, or Type	e III					
		supporting o	rganization, check th	nis box		•	•							
9		Since Augus	t 17, 2006, has the c	organization accepted a	ny gift or c	ontribution	from any	of the foll	owing per	sons?				
		(i) A perso	n who directly or ind	irectly controls, either a	lone or tog	ether with	persons o	lescribed	ın (ii) and	(ııi) below,		Yes	No	
		the gov	erning body of the s	upported organization?							11g(i)			
			•	n described in (i) above?			•		•	•	11g(ii)	_		
		• •	•	person described in (i)							11g(iii)			
h		Provide the f	ollowing information	about the organizations	the organ	ization su	pports.							
			<u> </u>	/III) Type of	<u> </u>	<del></del>			<del></del>					
(i)		of supported	(ii) EIN	(iii) Type of organization	in col. (i) li	organization sted in your	(v) Did you	inotity the	(vi) la organizati	s the on in col.	(vii) Am		f	
	orga	anization		(described on lines 1-9	governing	document?	(i) of you	support?	(i) organi U.S	red in the l	sup	port		
				(see instructions)	Yes	No	Yes	No	Yes	No				
				(000)						<del>†                                    </del>	·			
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Tota	ı									1				

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

	assets (Explain in Part IV.)							
11	Total support. Add lines 7 through 10							
12	Gross receipts from related activities	, etc. (see instructi	ions)			12		
13	First five years. If the Form 990 is fo	r the organization'	s first, second, third	d, fourth, or fifth to	ax year as a sectio	on 501(c)(3)		
	organization, check this box and sto					·	<u> </u>	
Se	ction C. Computation of Publ	ic Support Pe	rcentage					
14	Public support percentage for 2008 (	(line 6, column (f) d	livided by line 11, c	olumn (f))		14		<u>%</u>
15	Public support percentage from 2007	7 Schedule A, Part	IV-A, line 26f			15		<u>%</u>
16	a 33 1/3% support test - 2008. If the	organization did no	ot check the box or	line 13, and line	14 is 33 1/3% or r	nore, check t	this box and	
	stop here. The organization qualifies	as a publicly supp	oorted organization					ightharpoons
ı	33 1/3% support test - 2007. If the	organization did no	ot check a box on li	ne 13 or 16a, and	line 15 is 33 1/3%	6 or more, ch	neck this box	
	and stop here. The organization qua	lifies as a publicly	supported organiza	ation			)	
178	10% -facts-and-circumstances tes	t - 2008. If the org	ganization did not c	heck a box on line	9 13, 16a, or 16b,	and line 14 is	3 10% or more,	
	and if the organization meets the "fac	cts-and-circumstar	nces" test, check th	ns box and stop h	i <mark>ere.</mark> Explain in Pa	rt IV how the	organization	
	meets the "facts-and-circumstances"	test. The organiza	ation qualifies as a	publicly supported	d organization		1	▶□
ı	10% -facts-and-circumstances tes	at - 2007. If the org	ganization did not c	heck a box on line	9 13, 16a, 16b, or	17a, and line	15 is 10% or	
	more, and if the organization meets t	he "facts-and-circi	umstances" test, ch	neck this box and	stop here. Explaii	n in Part IV h	ow the	
	organization meets the "facts-and-cir	cumstances" test.	The organization of	jualifies as a publi	cly supported org	anization		▶□
18	Private foundation. If the organization	on did not check a	box on line 13, 16	a, 16b, 17a, or 17	b, check this box a	and see instr	uctions	<b>▶</b> □
		· ·			Scho	edule A (For	m 990 or 990-E2	Z) 2008

Schedule A (Form 990 or 990-EZ) 2008 UNIVERSAL TECHNICAL INSTITUTE FOUNDATION59-3828402 Page 3

Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I.)

Celendary year (or fiscal year bipponning in) Ciffus, grants, contributions, and membership fees received. (Co not include any "unusual grants". )  170 , 101 . 406 , 170 . 1473939 . 2050210 . 1473939 . 2050	Sec	ction A. Public Support						
membershup fees received. (Do not include any urusual grants.)  2 Gress receipts from admissions, mechanicises sold or services per formed, or facilities furnished in any activity that is related to the organization's tax exempt purpose 3 Gress receipts from admissions, mechanicises sold or services per formed, or facilities furnished to the organization's tax exempt purpose 3 Gress receipts from admissions and a manufacture of the organization's benefit and either part to or expended on its behalf 5 The value of services or facilities furnished by a governmental unit to the organization's health and the organization's health and the organization without change 6 Total. Add ines 1-5. The value of services or facilities furnished by a governmental unit to the organization without change 6 Total. Add ines 1-5. The value of from disqualified persons be form disqualified persons be formally a form disqualified persons be formally a form disqualified persons be formally a formally	Cal	endar year (or fiscal year beginning in)	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
include any 'unusual grants.')  Grass receipts from admissions, marchandles sold or services per formed, 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 lewed 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's benefit and either paid to or expended on its behalf  5 The value of services or facilities furnished by a governmental unit to the organization without charge  6 Total. Add lines 1 - 5  170 , 101 . 406 , 170 . 1473939 . 2050210 .  7 A Amounts included on lines 1, 2, and 3 received from disqualified persons but exceed the greated to lines 2 of 3 received from disqualified persons but exceed the greated of lines 2 of 3 received from disqualified persons but exceed the greated of 10 to	1	Gifts, grants, contributions, and		,				
2 Gross receipts from admissions, merchands sold or services performed, or facilities furnished in any activity that is related to the organization's tax exempt purpose in any activity that is related to the organization's tax exempt purpose in the period of the organization's tax exempts and the part of or expended on its behalf.  4 Tax revenues lewed for the organization's benefit and either part to or expended on its behalf.  5 The value of services or facilities furnished by a governmental unit to the organization's benefit and either part to or expended on its behalf.  6 Total. Add lines 1 - 5  7 a Anounts included on lines 1, 2, and 3 received from disqualified persons.  9 b mental included on lines 1, 2, and 3 received from disqualified persons.  9 b mental included on lines 1, 2, and 3 received from disqualified persons.  9 b mental included on lines 1, 2, and 3 received from disqualified persons.  9 b mental included on lines 1, 2, and 3 received from disqualified persons.  9 calculated the person of the fact of the second in the part of the organization's the person of the fact of the second lines 1, 2, and 3 received from the second lines 1, 2, and 3 received from lines 1, 2, and 3 received lines 1, 3, and 3 received lines 1, 3, and 3 received lines 1, 3, and 3 received lines 1, 3, and 3 received lines 1, 3, and 3 received lines 1, 3, and 3 received lines 1, 3, and 3 received lines 1, 3, and 3 received l		membership fees received. (Do not						
merchandise sold or services performed, or facilities furnished in any activity that is related to the organization state-exempt purpose 3 Gross recepts from activities that are not an unrelated trade or business under section 613 4 Tax revenues leved for the organization's benefit and either paid to or expended on its behalf 5 The value of sences or facilities furnished by a governmental unit to the organization's benefit and either paid to or expended on its behalf 5 The value of sences or facilities furnished by a governmental unit to the organization without charge 6 Total. Add lines 1 - 5 The value of sences or facilities furnished by a governmental unit to the organization without charge 8 Total. Add lines 1 - 5 The value of sences or facilities for the organization without charge 9 The value of sences of the sences of the sence of the sentence		include any "unusual grants.")			170,101.	406,170.	1473939.	2050210.
are not an unrelated trade or business under section 513  1 Tax revenues leved for the organization's benefit and either paid to or expended on its behalf  5 The value of services or facilities furnished by a governmental unit to the organization without charge  6 Total. Add lines 1-5 7 A Princuts included on lines 1 at 3 received from disqualified persons b Annualra fulluded on lines 1 at 3 received from disqualified persons b Annualra fulluded on lines 1 at 3 received from disqualified persons between the context of the second by a received from disqualified persons but received from other than disqualified persons but received from other than disqualified persons but received from other than disqualified persons but received from other than disqualified persons but received from other than disqualified persons but received from other than disqualified persons but received from other than disqualified persons but received from other than disqualified persons but received from the second by a received from the second by a received from the second person of the se	2	merchandise sold or services per- formed, or facilities furnished in any activity that is related to the						
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4 Tax revenues leved for the organization's benefit and either paid to or expended on its behalf at the paid to or expended on the behalf at the state of services or facilities turnshed by a governmental unt to the organization without charge 6 Total. Add lines 1 - 5.    7 Amounts included on lines 1 - 2, and 3 received from disqualified persons be Amounts eluded on lines 1 - 2, and 3 received from disqualified persons be Amounts eluded on lines 2 at 3 received from disqualified persons have seen to the organization of the three disqualified persons have seen to the organization of the three disqualified persons have seen to the organization of the three disqualified persons have seen to the organization of the three disqualified persons have seen to the organization of the three disqualified persons have seen to the organization of the three disqualified persons have seen to the organization of the three disqualified persons have seen to the organization of the three disqualified persons have seen to the organization of the three disqualified persons have seen to the organization of the three disqualified persons have seen to the organization of the three disqualified persons have seen the organization of the three disqualified persons have seen to the organization of the disqualified persons have seen the organization of the disqualified persons have seen the organization of the disqualified persons have seen the organization of the disqualified persons have seen the organization of the disqualified persons have seen the organization of the disqualified persons have seen the organization of the disqualified persons have seen the organization of the disqualified persons have seen the organization of the disqualified persons have seen the organization of the disqualified persons have seen the organization of the disqualified persons have seen the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organization of the organiz		are not an unrelated trade or bus-						
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or expended on its behalf  5 The value of services or facilities furnished by a governmental unit to the organization without charge  6 Total. Add lines 1 - 5  7a Amounts included on lines 1, 2, and 3 received from disqualified persons b Amounts educated inside a fail a received from other than disqualified persons that exceed the gaste of the of the last of time 9; 10-11, and 16 for the year 45,000  Add lines 7a and 7b  8 Public support (sithetia for testing)  9 Amounts from line 6  170,101, 406,170, 1473939, 2050210.  Calendar year (or fiscal year beginning in) 9 Amounts from line 6  170,101, 406,170, 1473939, 2050210.  Use Guosa micromis from increas, dividends, payments received on securities losins, rents, royalbies and income from similar sources b Unrelated Journal from increas, dividends, payments received on securities losins, rents, royalbies and income from similar sources (less section 511 taxes) from businesses acquired after June 30, 1975  c Add lines 109 and 10b  Net income from unrelated business acquired after June 30, 1975  c Add lines 109 and 10b  Net income from unrelated business acquired after June 30, 1975  c Add lines 109 and 10b  Net income from unrelated business acquired after June 30, 1975  c Add lines 109 and 10b  18 Total support percentage from 2007 Schedule A Part IV-A, line 27g  18 Public support percentage from 2007 Schedule A Part IV-A, line 27g  19 Agas 31 1/3% support tests – 2007. If the organization of line 14 or line 15 is more than 33 1/3%, and line 16 is more than 33 1/3%, and line 16 is more than 33 1/3%, and line 16 is more than 33 1/3%, and line 16 is more than 33 1/3%, and line 16 is more than 33 1/3%, and line 16 is more than 33 1/3%, and line 16 is more than 33 1/3%, and line 16 is more than 33 1/3%, and line 16 is more than 33 1/3%, and line 16 is more than 33 1/3%, and line 16 is more than 33 1/3%, and line 16 is more than 33 1/3%, and line 16 is more than 33 1/3%, and line 16 is more than 33 1/3%, and line 16 is more than 33 1/3%, and line 16 is more than 33 1/	4	Tax revenues levied for the organ-						
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the organization without charge  8 Total. Add lines 1 - 5 7 a Amounts included on lines 1, 2, and 3 received from disqualified persons b Amounts included on lines 1 and 1 eleviery b Amounts included on lines 1 and 1 eleviery consider their disqualified persons that exceed the greater of 1% of the stand of lines 9, 100-11, and 12 for the year of \$5.000 to 100 organization.  C Add lines 7 a and 7 b  8 Public support (setted line 7 to 100 organization)  9 Amounts from line 6 103 Gloss income from interest, dividends, payments received on securities (loans, rents, royalties and income from situres), dividends, payments received on securities (loans, rents, royalties and income from situres).  6 dividends payments received on securities (loans, rents, royalties and income from situres).  7 and 10 organization (loans and 100 organization)  10 organization (loans and 100 organization)  11 Not income from unrelated business acquired after June 30, 1975  C Add lines 10 a and 10b  12 Other income not included in line 10b, regulations or loans from the sale of capital assets (Explain in Part IV).  13 Total support percentage for 2008 (line 10c. column (f) divided by line 13, column (f))  15 Public support percentage from 2007 Schedule A, Part IV-A, line 27g  16 Public support percentage from 2007 Schedule A, Part IV-A, line 27g  17 Investment income percentage from 2007 Schedule A, Part IV-A, line 27g  18 and 13 1/3% support tests - 2008. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization.  15 and 15 and 15 and 15 and 15 and 15 and 15 is more than 33 1/3%, and line 18 is more than 33 1/3%, and line 18 is more than 33 1/3%, and line 18 is more than 33 1/3%, and line 18 is more than 33 1/3%, and line 18 is more than 33 1/3%, and line 18 is more than 33 1/3%, and line 18 is more than 33 1/3%, and line 18 is more than 33 1/3%, and line 18 is more than 33 1/3%,	5	The value of services or facilities						
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7a Amounts included on lines 1, 2, and 3 received from disqualified persons by Amounts included on lines 2 and 3 received from disqualified persons but exceed the greater of the of the total of ines 9, 10c, 11, and 12 for the year 0 \$5,000 c Add lines 7 and 7 b	6	Total. Add lines 1 · 5			170,101.	406,170.	1473939.	2050210.
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b Amounts included on lines 2 and 3 received from other time disqualified persons that exceed the graiter of 1% of the total of lines 9, 10c, 11, and 12 for they year or \$5,000 c Add lines 7a and 7b		• •						
c Add lines 7a and 7b 8. Public support [sibility carried on check this box and stop here  Section C. Computation of Public Support Percentage  17 Investment income percentage for 2008 (in 10c, column (f)) 18 Public support tests - 2008. If the organization qualifies as a publicly support tests - 2008. If the organization qualifies as a publicly supported organization  18 Public support tests - 2008. If the organization qualifies as a publicly supported organization  19 Amounts from line 6  10 2004 (b) 2005 (c) 2006 (d) 2007 (e) 2008 (f) Total  170 1.01 1. 406 1.70 1. 1473939 2. 2050210 1.  17 1.70 1.01 1. 406 1.70 1. 1473939 2. 2050210 1.  18 1.70 1.01 1. 406 1.70 1. 1473939 2. 2050210 1.  19 2004 (b) 2005 (e) 2006 (d) 2007 (e) 2008 (f) Total  17 1.70 1.01 1. 406 1.70 1. 1473939 2. 2050210 1.  18 1.70 1.10 1. 406 1.70 1. 1473939 2. 2050210 1.  19 203 1. 5 1.12 2. 6 1.02 5.  19 203 1. 5 1.12 2. 6 1.02 5.  19 203 1. 5 1.12 2. 6 1.02 5.  19 203 1. 5 1.12 2. 6 1.02 5.  10 205 1. 14 5 1.00 1. 14 5 1.00 1. 14 5 1.00 1. 14 5 1.00 1. 14 5 1.00 1. 14 5 1.00 1. 14 5 1.00 1. 14 5 1.00 1. 14 5 1.00 1. 14 5 1.00 1. 14 5 1.00 1. 14 5 1.00 1. 14 5 1.00 1. 14 5 1.00 1. 14 5 1.00 1. 14 5 1.00 1. 14 5 1.00 1. 15 1.00 1	t	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9,						
8 Public support (Sebtectline 7c ben links)  Section B. Total Support  Calendar year (or fiscal year beginning in)	,					-		
Section B. Total Support  Calendar year (or fiscal year beginning in) (a) 2004 (b) 2005 (c) 2006 (d) 2007 (e) 2008 (f) Total  9	_				+			2050210
Calendar year (or fiscal year beginning in) (a) 2004 (b) 2005 (c) 2006 (d) 2007 (e) 2008 (f) Total 9 Amounts from line 6 10a Gruss incurie 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 c 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 IV) 13 Total support (Add lines) 0,00, 11, and 12) 14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here  Section C. Computation of Public Support Percentage 15 Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f)) 16 Public support percentage for 2008 (line 10c, column (f) divided by line 13, column (f)) 17 Section D. Computation of Investment Income Percentage 19 Investment income percentage from 2007 Schedule A, Part IV-A, line 27h 18 Investment income percentage from 2007 Schedule A, Part IV-A, line 27h 19a 33 1/3% support tests - 2008. (if the organization did not check the box on line 14 or line 19a, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization			1			<u> </u>	l	2030210.
9 Amounts from line 6 10a Gross incurre from innerest, dividends, payments received on securities loans, rents, royalities and income from similar sources  b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975  c Add lines 10a and 10b 11 Net income from unrelated business activities in the business is activities in the business is regularly carried on regularly carried on 12 Other income, Do not include gain or loss from the sale of capital assets (Explain in Part IV.) 13 Total support (Add lines 9, 10c, 11, and 12) 14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here  Section C. Computation of Public Support Percentage  15 Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f)) 16 Public support percentage from 2007 Schedule A, Part IV-A, line 27g 17 Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f)) 18 Investment income percentage from 2007 Schedule A, Part IV-A, line 27h 19a 33 1/3% support tests - 2008. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization			(a) 2004	(h) 2005	(a) 2006	(d) 2007	(a) 2008	/f) Total
To a Gross incurie 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  c Add lines 10a and 10b  903. 5,122. 6,025.  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 IV).  13 Total support (add lines 0, 10c, 11, and 12)  14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here  Section C. Computation of Public Support Percentage  15 Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f))  16 Public support percentage from 2007 Schedule A, Part IV-A, line 27p  17 Investment income percentage from 2007 Schedule A, Part IV-A, line 27h  18 Investment income percentage from 2007 Schedule A, Part IV-A, line 27h  19a 33 1/3% support tests - 2008. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization  b 33 1/3% support tests - 2007. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization		• • • • • • • • • • • • • • • • • • • •	\u)	(6) 2000				
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13 Total support (Add lines 9, 10c, 11, and 12)  14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here  Section C. Computation of Public Support Percentage  15 Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f))  16 Public support percentage from 2007 Schedule A, Part IV-A, line 27g  Section D. Computation of Investment Income Percentage  17 Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f))  18 Investment income percentage from 2007 Schedule A, Part IV-A, line 27h  19a 33 1/3% support tests - 2008. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization  b 33 1/3% support tests - 2007. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization  19 June 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization	12	or loss from the sale of capital						
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Check this box and stop here  Section C. Computation of Public Support Percentage  15 Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f))  16 Public support percentage from 2007 Schedule A, Part IV-A, line 27g  Section D. Computation of Investment Income Percentage  17 Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f))  18 Investment income percentage from 2007 Schedule A, Part IV-A, line 27h  19 a 33 1/3% support tests - 2008. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization  b 33 1/3% support tests - 2007. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization  Incomplete the support tests - 2007. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization			r the ergonization's	first second th	ird fourth or fifth to	V V007 00 0 000tio	n 501(a)(3) arrania	
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18 Investment income percentage from 2007 Schedule A, Part IV-A, line 27h  19a 33 1/3% support tests - 2008. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization  b 33 1/3% support tests - 2007. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization			•				47	0/
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line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization						- · ·		<b>▶</b> ∟
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions	t		_					arid •
	<u>20</u>	Private foundation. If the organization	on did not check a	box on line 14, 1	9a, or 19b, check th	nis box and see ins	structions	

# **Schedule D**

(Form 990)

Department of the Treasury Internal Revenue Service

# **Supplemental Financial Statements**

Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

2008
Open to Public Inspection

Name of the organization

Employer identification number

Schedule D (Form 990) 2008

Das	<del></del>	L INSTITUTE FOUNDATIO	
Par	<del></del>		s or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line	e 6. (a) Donor advised funds	(b) Funds and other accounts
_		(a) polici devised idilas	(b) I dilds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year  Did the organization inform all donors and donor advisors in value.	i	and funds
5			Yes No
	are the organization's property, subject to the organization's Did the organization inform all grantees, donors, and donor a		• •
6	for charitable purposes and not for the benefit of the donor of	• •	· — —
Pai			
1	Purpose(s) of conservation easements held by the organizati		
•	Preservation of land for public use (e.g., recreation or p		storically important land area
	Protection of natural habitat	Preservation of certif	-
	Preservation of open space		
2	Complete lines 2a-2d if the organization held a qualified cons	ervation contribution in the form of a con	servation easement on the last day
	of the tax year.		
			Held at the End of the Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
c	Number of conservation easements on a certified historic str	ucture included in (a)	2c
d	Number of conservation easements included in (c) acquired a	after 8/17/06	2d
3	Number of conservation easements modified, transferred, rel	leased, extinguished, or terminated by th	e organization during the taxable
	year ▶		
4	Number of states where property subject to conservation ea	sement is located	
5	Does the organization have a written policy regarding the per	riodic monitoring, inspection, violations, a	
	enforcement of the conservation easements it holds?		L Yes No
6	Staff or volunteer hours devoted to monitoring, inspecting, a		
7	Amount of expenses incurred in monitoring, inspecting, and		· · · · · · · · · · · · · · · · · · ·
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirements of section 170	
	and section 170(h)(4)(B)(ii)?	:	. L Yes L No
9	In Part XIV, describe how the organization reports conservati		
	include, if applicable, the text of the footnote to the organization	tion's financial statements that describes	the organization's accounting for
Pai	t III Organizations Maintaining Collections o	f Art Historical Treasures or C	Other Similar Assets
1 41	Complete if the organization answered "Yes" to Form	-	And Girman Addots.
	Complete if the diguinzation and world if the tell of the	000, 1 411, 11, 1110 0.	
12	If the organization elected, as permitted under SFAS 116, no	at to report in its revenue statement and h	palance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, ed	·	
	the footnote to its financial statements that describes these		
b	If the organization elected, as permitted under SFAS 116, to		nce sheet works of art. historical treasures.
_	or other similar assets held for public exhibition, education, o		
	these items:		,, p
	(i) Revenues included in Form 990, Part VIII, line 1		<b>&gt;</b> \$
	(ii) Assets included in Form 990, Part X	 	► \$ . ► \$
2	If the organization received or held works of art, historical tre	asures, or other similar assets for financi	
	the following amounts required to be reported under SFAS 1		
а	Revenues included in Form 990, Part VIII, line 1		. \$
b	Assets included in Form 990, Part X		. <b>&gt;</b> \$

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

	dule D (Form 990) 2008 UNIVERSA t III Organizations Maintaining Co	L TECHNIC								ge <b>2</b>
3	Using the organization's accession and other									
٠,	that apply):	,		g				(00		
а	Public exhibition	d	Loan or ex	change progra	ams					
b	Scholarly research	-								
c	Preservation for future generations	J			•	-				
4	Provide a description of the organization's coll	lections and explain	n how they further	the organizati	ion's exe	mnt numo	se in Par	+ XIV		
5	During the year, did the organization solicit or						30 1111 41			
·	to be sold to raise funds rather than to be mai				or omma	400010		Yes		No
Par	t IV Trust, Escrow and Custodial				ered "Yes	s" to Form	990 Par			
	reported an amount on Form 990, Part							,	,,	
1a	Is the organization an agent, trustee, custodia		diary for contribution	ns or other as	sets not	included	-			
	on Form 990, Part X?		,					Yes		No
b	If "Yes," explain the arrangement in Part XIV a	nd complete the fo	illowing table:	••	-		_			
_								Amount		
c	Beginning balance					1c		7 - 1 - 1 - 1 - 1		
ď	Additions during the year			•	• • • • •	1d				
-	Distributions during the year				• • ••	1e				
f	Ending balance				• •	11				
2a	Did the organization include an amount on Foi	 m 990. Part X. line	21?		••	<u></u>		Yes	$\Box$	No
	If "Yes," explain the arrangement in Part XIV.					•	—	00		•••
Par		organization answe	ered "Yes" to Form	990, Part IV,	line 10.					
		(a) Current year	(b) Pnor year	(c) Two yea		(d) Three y	ears back	(e) Four	vears b	ack
1a	Beginning of year balance			1					2	
b	Contributions					<del></del>				$\overline{}$
c	Investment earnings or losses									1
ď	Grants or scholarships									
-	Other expenditures for facilities							<del></del>		
•	and programs									:
f	Administrative expenses									$\overline{}$
g	End of year balance			1				1		
2	Provide the estimated percentage of the year	end balance held a	19.	·			··	h	<del></del>	<del>'</del>
_ _a	Board designated or quasi-endowment		%							
b	Permanent endowment	%								
c	Term endowment ▶ %	<del></del>								
3a	Are there endowment funds not in the posses	sion of the organiza	ation that are held	and administe	ered for ti	he organiz	ation			
	by:							Γ	Yes	No
	(i) unrelated organizations							3a(i)		
	(ii) related organizations		•			•	•	3a(ii)		
b	If "Yes" to 3a(ii), are the related organizations	 listed as required o	on Schedule R?		•	•	•	3b	$\neg \uparrow$	
4	Describe in Part XIV the intended uses of the			•	•	• •	•			
Par	t VI  Investments - Land, Building:	s, and Equipme	ent. See Form 99	0, Part X, line	10.					
	Description of investment	(a) Cost or o	ther (b) Cos	st or other		epreciatio	n	(d) Book	value	1
		basis (investr	nem) Dasis	s (other)						
	Land									
	Buildings			-						
	Leasehold improvements									
	Equipment			CO 100		40.0	<del>.  </del>			<del>-</del>
	Other			60,122.	L	48,0	56.		2,08	
Total	. Add lines 1a-1e. (Column (d) should equal For	m 990, Part X, colu	<u>ımn (B), lıne 10(c) )</u>					<u> 117</u>	2,08	<u> 36.</u>

Schedule D (Form 990) 2008 UNIVERSAL	TECHNICAL IN	ISTITUTE FOUN	<u>DATION 59-</u>	3828402 F	Page 3
Part VII Investments - Other Securities.	See Form 990, Part X, Iir	e 12			
(a) Description of security or category (including name of security)	(b) Book value	Cos	(c) Method of valuati st or end-of-year mark		
Financial derivatives and other financial products					
Closely-held equity interests					
Other					
			_ •		
	<u> </u>				
	-				
	<del></del>				
		<del>-   </del>	<del></del>		
Table (Oal (b) about desiral Form COO Book V and (B) lane 40 \					
Total. (Col (b) should equal Form 990, Part X, col (B) line 12.)  Part VIII Investments - Program Related.	000 Farm 000 Bart V II	10		··· · · · · · · · · · · · · · · · · ·	
		ne 13.	(c) Method of valuati	on:	
(a) Description of investment type	(b) Book value	Cos	st or end-of-year mark		
			· · · · · · · · · · · · · · · · · · ·		
	<u> </u>				
	-				
				,	
Total. (Col (b) should equal Form 990, Part X, col (B) line 13.)	<b>&gt;</b>	`			
Part IX Other Assets. See Form 990, Part A, III	10 15			(1) Daali	
	a) Description			(b) Book value	
NON-CURRENT PORTION - PENSKE	PLEDGE			50,0	000.
		······································			
<del></del>		<del></del>			
	<del></del>				
	·-·········	· · · · · · · · · · · · · · · · · · ·	-		
Total. (Column (b) should equal Form 990, Part X, col (B)	line 15.)			50,0	000.
Part X Other Liabilities. See Form 990, Part )	K, line 25.				
(a) Description of liability		(b) Amount			
Federal income taxes					
ACCRUED EXPENSES		4,695.			
		- "			
Tatal (Column (b) about a surel Face 200 Bart V	(Inc. 05.)	4,695.			
Total. (Column (b) should equal Form 990, Part X, col (B)	iirie 25.)	4,070.			

under FIN 48. 832053 12-23-08

In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions

	dule D (Form 990) 2008	UNIVERSAL	TECHNICAL	INSTITU	<u>JTE</u>	FOUNDA	TION	<u> 59-38</u>	828402	Page 4
Pai	t XI Reconciliation o	f Change in Net	Assets from F	orm 990 to	Fina	ncial Stat	ements			
1	Total revenue (Form 990, Par	rt VIII, column (A), line	e 12)				1			
2.	Total expenses (Form 990, P	art IX, column (A), lin	e 25)				2			
3	Excess or (deficit) for the year						3			
4	Net unrealized gains (losses)	on investments					4			
5	Donated services and use of	facilities .					5			
6	Investment expenses						6			
7	Prior period adjustments						7			
8	Other (Describe in Part XIV)						8			
9	Total adjustments (net). Add	lines 4-8					9			
10	Excess or (deficit) for the year	ır per financıal staten	nents. Combine line:	3 and 9 .		<u> </u>	10			
Par	t XII Reconciliation o	f Revenue per A	<u> Audited Financi</u>	al Stateme	nts V	Vith Reve	nue per l	Return		
1	Total revenue, gains, and oth	ner support per audit	ed financial stateme	nts				1		
2	Amounts included on line 1 to	out not on Form 990,	Part VIII, line 12:			1				
а	Net unrealized gains on inves	stments .			2a			<b>↓</b>		
b	Donated services and use of	facilities			2b	ļ		<b>.</b>		
С	Recovenes of pnor year gran	nts			2c	ļ		4		
d	Other (Describe in Part XIV)				2d			<b></b>		
е	Add lines 2a through 2d	•						2e		
3	Subtract line 2e from line 1							3		
4	Amounts included on Form 9	990, Part VIII, line 12,	but not on line 1:			1				
а	Investment expenses not inc	cluded on Form 990,	Part VIII, line 7b		4a			<b>.</b>		
b	Other (Describe in Part XIV)				4b	<u> </u>				
C	Add lines 4a and 4b		••					4c		
_5_	Total revenue. Add lines 3 ar									
Pa	rt XIII Reconciliation o			ial Stateme	ents	With Exp	enses pe	r Heturr	<u> </u>	<del></del>
1	Total expenses and losses p			-				1		
2	Amounts included on line 1 to		Part IX, line 25:		ŀ	1				
а	Donated services and use of	facilities		• •	2a			-l		
þ	Prior year adjustments		•		2b			-		
C	Losses reported on Form 99	0, Part IX, line 25			20	1		-i i		
d	Other (Describe in Part XIV)			-	2d		<del></del>	┦_ ┃		
е	Add lines 2a through 2d		•					2e		
3	Subtract line 2e from line 1						•	3		
4	Amounts included on Form 9				١.	1				
a	Investment expenses not inc	cluded on Form 990,	Part VIII, line /b		4a			-		
b	Other (Describe in Part XIV)				4b	<u> </u>				
	Add lines 4a and 4b					• • • • •		4c		
Pa	Total expenses. Add lines 3 rt XIV Supplemental In		equal Form 990, Fa	rt i, iiile 10.)				5		
	plete this part to provide the		for Part II tines 2 5	and 0: Part III	Lines	1a and 4· D	art IV linee	1h and 2h	· Part V line	4. Part
	art XI, line 8; Part XII, lines 2d a			, and 5, 1 are in	1, 111103	ria and 4, i	arriv, mios	TO GITO ZE	,, , air v,	7, 1 ait
Λ, ι ς	art 70, 1810 0, 1 dat 70, 18100 20 t	and 40, and rait /mi,	mios za ana 45.							
							·	_		
							-			
			<del></del>	<del></del>						
	<del></del>		-							

SCHEDULE I			Grants and	ants and Other Assistance to Organizations,	to Organizations	võ.		OMB No 1545-0047	
•			Governn	Governments, and Individuals in the U.S.	uals in the U.S.			5008	
Department of the Treasury Internal Revenue Service		► Compl	► Complete if the organizatio	n answered "Yes," on F.  ▶ Attiich to Form 990.	" on Form 990, Pa n 990.	ganization answered "Yes," on Form 990, Part IV, lines 21 or 22.  Attich to Form 990.		Open to Public Inspection	O
Name of the organization	UNIVERSAL	TECHNICAL	L INSTITUTE		NC			Employer identification number 59 – 38 28 4 0 2	) 2 er
Part I General Info	General Information on Grants and Assistance	d Assistance		1 1					
1 Does the organizati	Does the organization maintain records to substantiate the amount of	substantiate the		or assittance, the	grantees' eligibility	y for the grants or assi	the grants or assit tance, the grantees' eligibility for the grants or assistance, and the selection	[	
criteria used to awa	critena used to award the grants or assistance? Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States	ance?	 orno the use of grant	· · funds ir the United	States	:	:	Yes X No	2
art =	Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any	overnments and	Organizations in the	United States, C	omplete if the orga	anization answered "Y	es" on Form 990, Part	IV, line 21, for any	
recipient that	recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed	5,000. Check this	box if no one recipien	t received more tha	an \$5,000. Use Pa	Irt IV and Schedule I-1	(Form 990) if addition	al space is needed	
1 (a) Name and address of organization or government	ess of organization nment	( <b>b</b> ) EIN	(c) IRC section if applicable	(d) Arnount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
UNIVERSAL TECHNICAL INSTITUTE	. INSTITUTE						TRANSFER OF	GOODS AND PARTS DONATED TO SCHOOLS FOR THE USE BY	D BY
20410 NORTH 19TH AVENUE PHOENIX, AZ 85027	/ENUE	86-0226984		11,507	326,394	FAIR MARKET	DONATED ASSETS TO SCHOOLS	AND BENEFIT OF THE STUDENTS.	
NASCAR FOUNDATION									
ONE WACHOVIA CENTER,	A, 301 S COLLEGE				_			AMOUNTS PAID FOR	
28202		30-0337745	501(C)(3)	5,000.	0			TUITION.	
	<del></del>								
		-							
:									
	Enter total number of section 501(c)(3) and government organizations	d government orç	janizations					<b>A</b> :	
۳	Enter total number of other organizations							<b>^</b>	-
LHA For Privacy Act as	For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.	tion Act Notice,	see the Instructions f	for Form 990.				Schedule I (Form 990) 2008	8003

Schedule I (Form 990) 2008 UNIVERSAL TECHNICAL INSTITUTE FOUNDATION

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

Use Schedule I-1 (Form 990) if additional space is needed.

Page 2

59-3828402

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
CHERYL, BOND STUDENT EMERGENCY TRAVEL FUND	H	3 708	o		
AAA GAS GRANT	-	2 500	o		
PAUL G. CAMPBELL MEMORIAL SCHOLARSHIP FUND	1	1,000	0		
LIVE YOUR PASSION EXTON SCHOLARSHIP FUND	83	\$00°,727°,	0		
CENERAL SCHOLARSHID FIND	,	7 500	c		
Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.	de the information	required in Part I,	line 2, and any other	additional information.	

Schedule I (Form 990) 2008

Schedule I-1 (Form 990) 2008 UNIVERSAL TECHNICAL INSTITUT'E FOUNDATIO	IICAL INStuals in the U.S.	INSTITUTE FOUNDATION B.U.S. (Schedule) [Form 990), Part III.]	NDATION 90), Part III.)		59-3828402 Page 2
(a) Type of grant or assistance	(b) Number of recipients	(c) Arr ount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
DAIMLER TRUCKS N.A. BOB FYDA SCHOLARSHIP FUND	ú	13 000	0		
JEREMY MCGRATH SCHOLARSHIP FUND		20 000	o		
MERLYN PLUMLEE MEMORIAL SCHOLARSHIP FUND	m	000 6	0		
RYAN J. GUAY MEMORIAL TUITION FUND	-	1000	0		
JOE GIBBS SCHOLARSHIP FUND	ń	325.	0		
					Schedule I-1 (Form 990) 2008

# SCHEDULE M (Form 990)

Department of the Treasury

Name of the organization

Internal Revenue Service

# **NonCash Contributions**

To be completed by organizations that answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

OMB No 1545-0047

2008

Open to Public inspection

**Employer identification number** 

	UNIVERSAL TE	CHNICA	L INSTI	TUTE FOUNDAT	ION	59-	3828	3402	
Pa	rt I Types of Property				·				
		(a) Check if applicable	(b) Number of contributions	(c) Revenues reported or Form 990, Part VIII, line		(d) Method of det revenue		ng	
1	Art - Works of art								
2	Art - Historical treasures								
3	Art - Fractional interests								
4	Books and publications								
5	Clothing and household goods								
6	Cars and other vehicles								
7	Boats and planes			-					
8	Intellectual property								
9	Securities - Publicly traded								
10	Securities - Closely held stock								
11	Securities - Partnership, LLC, or								•
	trust interests								
12	Securities - Miscellaneous								
13	Qualified conservation contribution								
	(historic structures)			<del></del>					
14	Qualified conservation contribution (other)								
15	Real estate - Residential						_		
16	Real estate - Commercial								
17	Real estate - Other								
18	Collectibles								
19	Food inventory	<u> </u>							
20	Drugs and medical supplies								
21	Taxidermy								
22	Historical artifacts								
23	Scientific specimens								
24	Archeological artifacts		_						
25	Other (MECHANICAL PA)	X	2			T VALUE		DON	
26	Other PAYMENT OF GO)	X	1			T VALUE		DON	
27	Other (GOODS DONATED)	X	10		O.MARKE	T VALUE	OF	DON	ATE
28	Other ► (	<u> </u>							
29	Number of Forms 8283 received by the organi		•		_				
	for which the organization completed Form 82	283, Part IV,	Donee Acknov	vledgment . La	9			1	
	5							Yes	No
30a	During the year, did the organization receive b	•							
	at least three years from the date of the initial	contribution	, and which is	not required to be used t	or exempt pu	rposes for	1:_	-	7.
	the entire holding period?					•	30a	+-+	X
	If "Yes," describe the arrangement in Part II.			.:		•	1	}	•
31	Does the organization have a gift acceptance	-				· .	31	+-	X
<i>3</i> 2a	Does the organization here or use third parties	or related o	rganizations to	solicit, process, or sell n	oncas <b>n</b>				
	contributions?				•		32a	+-+	X
	If "Yes," describe in Part II.	saluma (a) f-	rotune of a	namin far mhich calime - /-	) in obselved				1
33	If the organization did not report revenues in c describe in Part II.	Joiumin (C) 10	a type of pro	perty for writen column (a	y is checked,				
LHA		Ant Nati-		wetiens for Form 000	<del></del>	Cobodula *	1 /E	~ 000°	2000
	For Privacy Act and Paperwork Reduction	I MULINOTICE	, see ine insu	uctions for Porm 990.		Schedule N	n (FOI)	וו סס∪)`	<b>4000</b>

# SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service

# **Supplemental Information to Form 990**

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

2008
Open to Public Inspection

Name of the organization

UNIVERSAL TECHNICAL INSTITUTE FOUNDATION

Employer identification number 59-3828402

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

PURPOSES FOR THE PROMOTION OF TECHNICAL TRAINING AND AUTOMOTIVE SAFETY.

ALSO TO PROVIDE EXPERT DRIVING CURRICULUM AND A SCHOLARSHIP PROGRAM FOR

INDIVIDUALS TO COMPLETE TECHNICAL TRAINING.

FORM 990, PART VI, SECTION A, LINE 4: THE FOUNDATION NOTIFIED THE IRS OF
AN EXPANSION IN ITS ACTIVITIES BY FILING WITH THE ADJUSTMENTS UNIT MAY 13,
2008 AND THE IRS ACKNOWLEDGED SUCH BY LETTER DATED SEPTEMBER 23, 2008. THE
EXPANDED ACTIVITIES CONSIST OF: (I) PROVIDING GRANTS TO UNIVERSAL TECHNICAL
INSTITUTE ("UTI") TO SUPPORT (A) STUDENT FOOD PANTRIES ON UTI CAMPUSES,
WHICH PROVIDE FREE FOOD TO STUDENTS IN NEED AND (B) EMERGENCY FINANCIAL
SUPPORT, WHICH UTI PROVIDES TO STUDENTS WHO SHOW IN AN APPLICATION (WHICH
INCLUDES SUCH STUDENTS' INCOME, ASSETS, BILLS, INSURANCE PROCEEDS, AND
OTHER REVENUE AND EXPENSES) A NEED FOR HELP WITH AN UNEXPECTED EXPENSE SUCH
AS MEDICAL CARE, CAR REPAIRS OR INCREASE COST OF UTILITIES, GAS OR RENT AND
(II) DIRECTLY PROVIDING GRANTS OR LOANS TO STUDENTS IN NEED OF FINANCIAL
SUPPORT.

(CONTINUATION OF ABOVE) IN ORDER TO ENSURE THAT SUPPORT PROVIDED BY THE FOUNDATION TO UTI OR A STUDENT IS USED TO FURTHER CHARITABLE PURPOSES, THE FOUNDATION REQUIRES UTI OR THE STUDENT TO SIGN A GRANT AGREEMENT RESTRICTING EACH GRANT FROM THE FOUNDATION TO ITS STATED EQUITABLE PURPOSES AND REQUIRES REPORTING FROM UTI OR THE STUDENT TO VERIFY THAT FUNDS ARE USED FOR SUCH PURPOSES.

# SCHEDULE O

(Form 990)

Department of the Treasury Internal Revenue Service

# **Supplemental Information to Form 990**

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

2008
Open to Public Inspection

Name of the organization

UNIVERSAL TECHNICAL INSTITUTE FOUNDATION

Employer identification number 59-3828402

COPY OF THE RETURN IS SUBMITTED TO THE BOARD OF DIRECTORS FOR REVIEW TO
ENSURE THAT THE INFORMATION PRESENTED ON THE RETURN IS AN ACCURATE
DESCRIPTION OF THE ACTIVITIES OF THE FOUNDATION.
FORM 990, PART VI, SECTION B, LINE 12C: THE FOUNDATION REVIEWS AND UPDATES
THE CONFLICT OF INTEREST POLICY ANNUALLY AND DOCUMENTS ANY CONFLICT OF
INTEREST CHANGES.
FORM 990, PART VI, SECTION B, LINE 15: THE BOARD OF DIRECTORS OF UNIVERSAL
TECHNICAL INSTITUTE SCHOOL DETERMINES AND APPROVES THE COMPENSATION FOR THE
DIRECTORS, TOP MANAGEMENT, OFFICERS, AND KEY EMPLOYEES.
FORM 990, PART VI, SECTION C, LINE 19: THE FOUNDATION MAKES ITS FORM 1023,
FORM 990 TAX RETUNS, GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND
FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC FOR INSPECTION UPON REQUEST.
AMENDED EXPLANATION - CORRECTION OF POSITIONS
CORRECTION OF THE DESCRIPTION OF THE BOARD OF DIRECTORS' POSITION TITLES.
THE POSITION TITLES ON PAGE 7, PART VII SECTION A, LINE 1A(C) FOR THE
BOARD OF DIRECTORS HAS BEEN CHANGED TO CORRECTLY REFLECT THE NUMBER OF
VOTING MEMBERS LISTED ON FORM 990, PAGE 1, PART I, LINE 2, AND ALSO ON
PAGE 6, PART VI, SECTION A, LINE 1A D.

. . , .

Department of the Treasury Interrial Revenue Service (99) Name(s) shown on return

# **Depreciation and Amortization** (Including Information on Listed Property)

➤ See separate instructions.

► Attach to your tax return.

Business or activity to which this form relates

990

OMB No 1545-0172

Attachment Sequence No 67

Identifying number

Par	VERSAL TECHNICAL I						V hefore v	59-3828402
	faximum amount. See the instruction			nou prop	<u>,</u> .	ompiete i uit	1	250,000.
	otal cost of section 179 property place	•	•		•	•	2	230,000.
	hreshold cost of section 179 property	•			•		3	800,000.
	Reduction in limitation. Subtract line 3			• •		•	4	000,000.
	ollar limitation for tax year Subtract line 4 from line		,	 a inetruction			5	
6	(a) Description of pa		(b) Cost (busin			(c) Elected		
	······································	<u> </u>						
						<del></del> .		
	· · · · · · · · · · · · · · · · · · ·							
7 1	isted property. Enter the amount from	line 29			7			
	otal elected cost of section 179 prope	•	in column (a) lines 6 and	∟ .7				d
	entative deduction. Enter the smaller	•	in column (c), lines o and	,	•		8	
			 007 Form 4560			•	9	
	Carryover of disallowed deduction from Business income limitation. Enter the s	•	• •	 		-	10	
	section 179 expense deduction. Add I		•	-	, 5	٠	11	
	•	•			40	••	12	
	Carryover of disallowed deduction to 2 : Do not use Part II or Part III below fo				13			<u> </u>
Par				do listad	propo	arty A	-	
- 41	Special Depreciation Allowa	ince and Other D	epreciation (Do not inclu	de listed	prope	sity.j	<del></del>	T
44 0	to a sel de consente o ferror el fie d'orden							
	pecial depreciation for qualified properties		rea property) placea in se	rvice dur	ing the	e tax year .	14	
	roperty subject to section 168(f)(1) ele	ection					15	
	Other depreciation (including ACRS)			•			16	1
rai	LIII   MACHS Depreciation (Do no	t include listed pr		. <u>)                                    </u>				
		<del></del>	Section A				T	20.004
	MACRS deductions for assets placed you are electing to group any assets placed in ser	•		8		٠ , -	-i 17	32,024.
	2	vice during the tax year	into one or more general asset acc	ounts, chec	k here	<u> </u>		:
			e During 2008 Tax Year			eral Deprecia	ation Syst	em
					e Gen	eral Deprecia	ation Syst	(g) Depreciation deduction
	Section B - Assets	(b) Month and year placed	e During 2008 Tax Year (c) Basis for depreciation (business/investment use	Using th	e Gen			
	Section B - Assets (a) Classification of property	(b) Month and year placed	e During 2008 Tax Year (c) Basis for depreciation (business/investment use	Using th	e Gen			
19a	Section B - Assets  (a) Classification of property  3-year property	(b) Month and year placed	e During 2008 Tax Year (c) Basis for depreciation (business/investment use	Using th	e Gen			
19a b	Section B - Assets  (a) Classification of property  3-year property  5-year property	(b) Month and year placed	e During 2008 Tax Year (c) Basis for depreciation (business/investment use	Using th	e Gen			
19a b	Section B - Assets  (a) Classification of property  3-year property  5-year property  7-year property	(b) Month and year placed	e During 2008 Tax Year (c) Basis for depreciation (business/investment use	Using th	e Gen			
19a b c	Section B - Assets  (a) Classification of property  3-year property  5-year property  7-year property  10-year property	(b) Month and year placed	e During 2008 Tax Year (c) Basis for depreciation (business/investment use	Using th	e Gen			
19a b c d	Section B - Assets  (a) Classification of property  3-year property  5-year property  7-year property  10-year property  15-year property	(b) Month and year placed	e During 2008 Tax Year (c) Basis for depreciation (business/investment use	Using th	e Gen			
19a b c d e f	Section B - Assets  (a) Classification of property  3-year property  5-year property  7-year property  10-year property  15-year property  20-year property  25-year property	(b) Month and year placed	e During 2008 Tax Year (c) Basis for depreciation (business/investment use	(d) Rec	e Gen		(f) Method	
19a b c d	Section B - Assets  (a) Classification of property  3-year property  5-year property  7-year property  10-year property  15-year property  20-year property	(b) Month and year placed in service	e During 2008 Tax Year (c) Basis for depreciation (business/investment use	(d) Rec per 25 ) 27.5	e Gen	(e) Convention	(f) Method	
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Form 4562 (2008) UNIVERSAL TECHNICAL INSTITUTE FOUNDATION Part V Listed Property (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a)

(a) Type of property	o support the bu	ısıness/investme	nt use cla	ımed?		es 🗀	No	24b If "Y	es," is the	e evidei	nce writt	en?	Yes	$\Box$	
(list vehicles first )	(b) Date placed in	(c) Business/ investment	ot	(d) Cost or ner basis		(e) s for depre iness/inves use only	stment	(f) Recovery period	(g Meti Conve	nod/	Depre	h) ciation iction	Elec section		
Special depreciation a	service allowance for c	use percentar qualified listed	<u> </u>		n servic			ax year an	d d				CC	ost	
used more than 50%	ın a qualified b	ousiness use		·						25			<u> </u>		
Property used more th	nan 50% in a c	qualified busin	ess use:												
		9	6								ļ <u></u>				
		9	6												
			6								L		L		
Property used 50% or	r less in a qual	lified business	use:							-			<del> </del>		
		1	6						S/L·		<u> </u>				
			6						S/L·		ļ				
			6						S/L·				1		
Add amounts in colum		_			line 21,	page 1				28		1			
Add amounts in colum	nn (i), line 26. f			', page 1 3 - Infori								29	<u> </u>		
<del></del>	vehicles.		(a)		(b)		.,	(c)		(d) Vehicle		(e) Vehicle		r)	
Total business/investment miles driven during the year (do not include commuting miles)			Vehicle		Vehicle			Vehicle		Vehicle		Verlicie		Vehicle	
Total commuting miles	7		<u> </u>								<del></del>		<del> </del>		
Total other personal (r	noncommuting	g) miles													
Total miles driven duri Add lines 30 through 3									ļ			<del>,</del>	ļ		
Was the vehicle availaduring off-duty hours?	?		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	N	
Was the vehicle used		more													
than 5% owner or rela	•												-		
	ulable for perso	onal													
			L .				L				<u></u>				
Is another vehicle availuse?	Section C	- Questions to you meet an e	-	-								re not m	nore than	1 5%	
Is another vehicle avause?  swer these questions to hers or related persons	Section C o determine if s.	you meet an e	xception	to com	oleting S	Section I	B for v	ehicles us	ed by en	nployee	s who a	re not n	Yes		
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# Form **8868**

(Rev. April 2009)

Department of the Treasury Internal Revenue Service

# Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No. 1545-1709

• If yo	u are filing for an Automatic 3-Month Extension, complete only Part I and check this box			$\mathbf{x}$
• If yo	u are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this	form).		
Do no	t complete Part II unless you have already been granted an automatic 3-month extension on a previously fil	ed For	m 8868.	
Part	Automatic 3-Month Extension of Time. Only submit original (no copies needed).		· <del>-</del>	
A com	oration required to file Form 990-T and requesting an automatic 6-month extension - check this box and com	nlete		
Part I	·	picto		
	er corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an	- ovdon	ovan of timo	
	er corporations (including 1120-6 lilers), partnerships, HEMICS, and trusts must use Form 1004 to request an ncome tax retums.	extern	Sion or ume	
noted (not au you m	onic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronicationatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or courst submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic files. gov/efile and click on e-file for Chanties & Nonprofits.	cally if nsolida	(1) you want the ited Form 990-T	additional
Туре	Name of Exempt Organization	Empl	oyer identificat	ion number
print		_		_
File by ti	UNIVERSAL TECHNICAL INSTITUTE FOUNDATION	5	<u>9-382840</u>	2
due date	for Number, street, and room or suite no. If a P.O. box, see instructions.			
return S	20410 N 1911 AVE BIE 200			
instruction	City, town or post office, state, and ZIP code. For a foreign address, see instructions.  PHOENIX, AZ 85027			
Check	type of return to be filed (file a separate application for each return).			
$\mathbf{x}$	Form 990 Form 990-T (corporation) Form 47	200		
=	Form 990-BL Form 990-T (sec. 401(a) or 408(a) trust) Form 52			
=	Form 990-EZ Form 990-T (trust other than above) Form 60			
=	Form 990-PF			
				<del></del>
	UNIVERSAL TECHNICAL INSTITUTE FOUNDATION books are in the care of > 20410 N. 19TH AVENUE - PHOENIX, AZ 8502			
	ephone No. ► <u>(623)445-0933</u> FAX No ►		·····	. —
	ne organization does not have an office or place of business in the United States, check this box			
	nis is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)		-	•
box 🕨	. If it is for part of the group, check this box  and attach a list with the names and EINs of all	memb	ers the extensio	n will cover.
1	request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unt AUGUST 15, 2009 , to file the exempt organization return for the organization named a		The extension	
	s for the organization's return for:			
	▶ X calendar year 2008 or			
	tax year beginning, and ending		_ ·	
2	If this tax year is for less than 12 months, check reason: Initial return Final return		Change in acco	unting period
3a	f this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any			
	nonrefundable credits. See instructions.	3a	\$	
	f this application is for Form 990-PF or 990-T, enter any refundable credits and estimated			
	tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	
	Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required,			
	deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System).		_	37/3
	See instructions	3c_		N/A
Cauti	on, If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form	8879-	EO for payment	instructions.
LHA	For Privacy Act and Paperwork Reduction Act Notice, see Instructions.		Form <b>886</b>	8 (Rev. 4-2009)