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## Form 990-EZ (2008)

<b>Part III</b>	<b>Statement of Program Service Accomplishments</b> (See the instructions for Part III.)
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**Expenses**  
(Required for 501(c)(3)  
and (4) organizations and  
4947(a)(1) trusts; optional  
for others.)

(Grants \$ ) If this amount includes foreign grants, check here

28a

(Grants \$ ) If this amount includes foreign grants, check here

29a

(Grants \$ ) If this amount includes foreign grants, check here

30a

(Grants \$ ) If this amount includes foreign grants, check here

31a

32 Total program service expenses (add lines 28a through 31a)

32

**Part IV List of Officers, Directors, Trustees, and Key Employees.** List each one even if not compensated. (See the instructions for Part IV.)

832172  
12-17-08

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SOUTHERN ARIZONA LEADERSHIP  
COUNCIL, INC.

86-0879845

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**Part V Other Information** (Note the statement requirements in the instructions for Part VI.)

	Yes	No
33 Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	33	X
34 Were any changes made to the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes	34	X
35 If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining your reason for not reporting the income on Form 990-T.		
a Did the organization have unrelated business gross income of \$1,000 or more or section 6033(e) notice, reporting, and proxy tax requirements?	35a	X
b If "Yes," has it filed a tax return on Form 990-T for this year?	35b	N/A
36 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," complete applicable parts of Sch. N	36	X
37a Enter amount of political expenditures, direct or indirect, as described in the instructions	37a	0.
b Did the organization file Form 1120-POL for this year?	37b	X
38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still unpaid at the start of the period covered by this return?	38a	X
b If "Yes," complete Schedule L, Part II and enter the total amount involved	38b	N/A
39 Section 501(c)(7) organizations. Enter:		
a Initiation fees and capital contributions included on line 9	39a	N/A
b Gross receipts, included on line 9, for public use of club facilities	39b	N/A
40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under section 4911	N/A	
section 4912	N/A	
section 4955	N/A	
b Section 501(c)(3) and (4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," complete Schedule L, Part I	40b	N/A
c Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		0.
d Enter amount of tax on line 40c reimbursed by the organization		0.
e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e	X
41 List the states with which a copy of this return is filed	AZ	
42a The books are in care of	RON SHOOPMAN	
Located at	4400 E. BROADWAY, SUITE 307, TUCSON, AZ	
Telephone no.	(520) 327-7619	
ZIP + 4	85711	
b 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)?	42b	X
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		
c At any time during the calendar year, did the organization maintain an office outside of the U.S.?	42c	X
If "Yes," enter the name of the foreign country:		
43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year	43	N/A
44 Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ	44	X
45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ	45	X

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**Part VI** Section 501(c)(3) organizations only. All section 501(c)(3) organizations must answer questions 46-49 and complete the tables for lines 50 and 51

- 46 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
- 47 Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II
- 48 Is the organization operating a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E
- 49a Did the organization make any transfers to an exempt non-charitable related organization?
- b If "Yes," was the related organization(s) a section 527 organization?
- 50 Complete this table for the five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

	Yes	No
46		
47		
48		
49a		
49b		

(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
N/A				
Total number of other employees paid over \$100,000				

- 51 Complete this table for the five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation
N/A		
Total number of other independent contractors each receiving over \$100,000		

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

Sign Here: Signature of officer: *[Signature]* Date: 3/26/09

Type or print name and title: PRESIDENT

Paid Preparer's Use Only: Preparer's signature: *[Signature]* Date: 3-23-09 Check if self-employed: ☐ Preparer's Identifying Number (See instr.):

Firm's name (or yours if self-employed), address, and ZIP + 4: BEACHFLEISCHMAN PC  
P.O. BOX 64130  
TUCSON, ARIZONA 85728-4130

EIN: Phone no. (520) 321-4600

May the IRS discuss this return with the preparer shown above? See instructions ☒ Yes ☐ No

Form 990-EZ (2008)

FORM 990-EZ	OTHER EXPENSES	STATEMENT	1
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DESCRIPTION	AMOUNT
ADVERTISING	8,845.
BANK CHARGES	24.
CONFERENCE AND MEETINGS EXPENSE	30,285.
DUES AND SUBSCRIPTIONS	2,012.
EQUIPMENT AND RENTAL MAINTENANCE	7,295.
OFFICE EXPENSE	10,616.
GIFTS	369.
INSURANCE	2,118.
PAYROLL TAXES	18,053.
INTEREST EXPENSE	505.
TRAVEL EXPENSE	3,520.
TELEPHONE	8,786.
DEPRECIATION	5,568.
TOTAL TO FORM 990-EZ, LINE 16	97,996.

FORM 990-EZ	OTHER ASSETS	STATEMENT	2
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DESCRIPTION	BEG. OF YEAR	END OF YEAR
DEPOSITS	295.	295.
OTHER DEPRECIABLE ASSETS	20,990.	15,422.
TOTAL TO FORM 990-EZ, LINE 24	21,285.	15,717.

FORM 990-EZ	OTHER LIABILITIES	STATEMENT	3
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DESCRIPTION	BEG. OF YEAR	END OF YEAR
NOTES PAYABLE	5,406.	2,351.
UNCLAIMED PROPERTY	75.	75.
TOTAL TO FORM 990-EZ, LINE 26	5,481.	2,426.

FORM 990-EZ

CASH GRANTS AND ALLOCATIONS

STATEMENT

4

CLASS OF ACTIVITY/DONEE'S NAME AND ADDRESS	DONEE'S RELATIONSHIP	AMOUNT
TRANSPORTATION SURVEY TIME COALITION PO BOX 1145 PHOENIX, AZ, 85001	NONE	10,000.
EDUCATION SCIENCE FOUNDATION ARIZONA 400 E. VAN BUREN ST, #230 PHOENIX, AZ, 85004	NONE	10,000.
EDUCATION TUCSON VALUES TEACHERS 2250 E. BROADWAY BLVD TUCSON, AZ 85719	NONE	9,043.
TOTAL INCLUDED ON FORM 990-EZ, LINE 10		29,043.

FORM 990-EZ

PART IV - LIST OF OFFICERS, DIRECTORS,  
TRUSTEES AND KEY EMPLOYEES

STATEMENT

5

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN EXPENSE CONTRIB ACCOUNT
RONALD SHOOPMAN 4400 E. BROADWAY, TUCSON, AZ 85711	PRESIDENT 60.00	136,500.	0. 0.
JOHN PEDICONE 4400 E. BROADWAY, TUCSON, AZ 85711	VICE PRESIDENT 26.50	23,175.	0. 0.
PETER LIKINS 4400 E. BROADWAY, TUCSON, AZ 85711	CHAIRMAN 0.25	0.	0. 0.
BRUCE BEACH 4400 E. BROADWAY, TUCSON, AZ 85711	VICE CHARIMAN 0.25	0.	0. 0.
HANK AMOS 4400 E. BROADWAY, TUCSON, AZ 85711	SECRETARY 0.25	0.	0. 0.
JANNIE COX 4400 E. BROADWAY, TUCSON, AZ 85711	TREASURER 0.25	0.	0. 0.

## SOUTHERN ARIZONA LEADERSHIP COUNCIL, INC

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KEN ABRAHAMS 4400 E. BROADWAY, TUCSON, AZ 85711	DIRECTOR 0.25	0.	0.	0.
STAN ABRAMS 4400 E. BROADWAY, TUCSON, AZ 85711	DIRECTOR 0.25	0.	0.	0.
LARRY ALDRICH 4400 E. BROADWAY, TUCSON, AZ 85711	DIRECTOR 0.25	0.	0.	0.
DON BOURN 4400 E. BROADWAY, TUCSON, AZ 85711	DIRECTOR 0.25	0.	0.	0.
GARY CLARK 4400 E. BROADWAY, TUCSON, AZ 85711	DIRECTOR 0.25	0.	0.	0.
JIM CLICK, JR. 4400 E. BROADWAY, TUCSON, AZ	DIRECTOR 0.25	0.	0.	0.
JOE COYLE 4400 E. BROADWAY, TUCSON, AZ	DIRECTOR 0.25	0.	0.	0.
MIKE HAMMOND 4400 E. BROADWAY, TUCSON, AZ	DIRECTOR 0.25	0.	0.	0.
DUFF HEARON 4400 E. BROADWAY, TUCSON, AZ	DIRECTOR 0.25	0.	0.	0.
DAVID MEHL 4400 E. BROADWAY, TUCSON, AZ	DIRECTOR 0.25	0.	0.	0.
CHRIS MONSON 4400 E. BROADWAY, TUCSON, AZ	DIRECTOR 0.25	0.	0.	0.
JOHN MUNGER 4400 E. BROADWAY, TUCSON, AZ	DIRECTOR 0.25	0.	0.	0.
RICK MYERS 4400 E. BROADWAY, TUCSON, AZ	DIRECTOR 0.25	0.	0.	0.
KATHLEEN PERKINS 4400 E. BROADWAY, TUCSON, AZ	DIRECTOR 0.25	0.	0.	0.
DON PITT 4400 E. BROADWAY, TUCSON, AZ	DIRECTOR 0.25	0.	0.	0.
SI SCHORR 4400 E. BROADWAY, TUCSON, AZ	DIRECTOR 0.25	0.	0.	0.
LESLIE TOLBERT 4400 E. BROADWAY, TUCSON, AZ	DIRECTOR 0.25	0.	0.	0.

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ROGER VOGEL

DIRECTOR

4400 E. BROADWAY, TUCSON, AZ

0.25

0.

0.

0.

TOTALS INCLUDED ON FORM 990-EZ, PART IV

159,675.

0.

0.



FORM 990-EZ

INFORMATION REGARDING TRANSFERS  
ASSOCIATED WITH PERSONAL BENEFIT CONTRACTS

STATEMENT 6

- A) DID THE ORGANIZATION, DURING THE YEAR, RECEIVE ANY FUNDS,  
DIRECTLY OR INDIRECTLY, TO PAY PREMIUMS ON A PERSONAL  
BENEFIT CONTRACT? . . . . . [ ] YES [X] NO
- B) DID THE ORGANIZATION, DURING THE YEAR, PAY PREMIUMS,  
DIRECTLY OR INDIRECTLY, ON A PERSONAL BENEFIT CONTRACT? . . [ ] YES [X] NO