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ENVELOPE DEC 2 0 2009 |POSTMARK DATE



Form **990-PF**

Return of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation

Note: The foundation may be able to use a copy of this return to satisfy state reporting requirements

2008

OMB No 1545-0052

Internal	Reven	ue Service (//)				reporting	requ	irements							
For c	alenda	ar year 2008, or t	ax year beginnir	ng		,	2008	3, and ending	g		•				
						Add	lres	change	Nai	ne ch	ange				
Use				1 1						A Employer identification number					
IRS I		The Surply	ıs Line As:	socia	tion o	of Ariz	zona	a		86-6320000					
	Otherwise, Foundation Trust						В	Telephone nu		instruc	tions)				
	print 4041 N Central Avenue Suite 515							•							
or t	/pe.	Phoenix, A		iuc,	Julio	010				<u> </u>	<u>800-83</u>				
See Sp		1110011111, 1								С	If exemption			g, check hei	re 🏲 📙
										D	1 Foreign organ	izations, ched	k here		▶ 📗
н		type of organiza						oundation			2 Foreign organ			85% test, (check
	Se	ection 4947(a)(1)	nonexempt chair	ritable t	rust (Other taxa	able p	orivate found	dation		here and atta	•			
$\overline{}$	Fair ma	rket value of all asset	ts at end of year	J Ac	counting r	nethod	ХC	ash A	ccrual	E	If private four	idation status	was te	rminated	\sim
	(from P	Part II, column (c), line	e 16)	1 [Other (spec		ٔ لیا	الميا		_	under section				
▶.	Ś	3,887	149	Part I			he on	cash basis	71	F	If the foundat under section				` ▶ □
Part		Inalysis of Re		I V Cart	1			I			411407 30011011	307 (0)(1)(0)	I	11010	
rait		xpenses (The		c (n		evenue an		(b) Net in		٦t	(c) Adjus			Disburse	
		olumns (b), (c), a			expens	es per bo	oks	inco	ome		incoi	ne		for charit	
	S	arily equal the an	nounts ın columi	n (a)	ŀ								purposes (cash basis only)		
	(5	see the instruction	ns))		<u> </u>									2011 20010	
	1	Contributions, gifts,	grants, etc, received	(att sch)	<u></u>	528,3	<u>75.</u>		-	` '					
	2	Ck ►if the fo	oundn is not req to at	t Sch B	., ⊳, ′	,	٠, ١		′ -	,				, st	-
	3		ings and tempor	ary						,		/-	Ů,	7.0	
		cash investmer			ļ	7,7	86.		7,78	6.		N/A	٠, ٠		
	4		rest from securities												
		a Gross rents			ļ								<u> </u>	<u>, , , , , , , , , , , , , , , , , , , </u>	· (*) ~
		b Net rental income or (loss)			4711	. '.	1.				·				
_	6	a Net gain/(loss) from	sale of assets not on	line 10				•	,				<u>, </u>		
R	1	b Gross sales price for assets on line 6a	r all		W.	\$3	29%	, 1885 s	.À.		Jan 1	· 5/4	بْھر		_ \
E	7		ome (from Part IV, lin	e 2)	¹		·				`	,			- 1
E N U	8	Net short-term	capital gain	•	```										
N	9	Income modific			19/2		` ^.		.4				×		
Ĕ	10	a Gross sales less	1									-			<u> </u>
-		returns and	1					_		1	•				!
	Ι.	allowances			7 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5		3 3046		, S.	(r			475		
	,	b Less: Cost of goods sold	Į		3	• •	2. 1.24		\$	ı.) %./r.	7.7	400		- C\$
	١.	c Gross profit/(loss)	(att cab)			î		············							
	111				<u> </u>			1		-			-		
	''	Other income (a	attach schedule)		1									`	
	122	Total Add Issa	1 through 11		<u> </u>	E2C 10			7,78						
	12	Total. Add lines				536,16	0.1		1,16	<u> </u>					
	13	•	icers, directors, truste	es, etc			-0.								
	14	Other employee sala								-	· · · · ·				
	1	Pension plans,		its											
A	16a	Legal fees (attach so	chedule)												
D M	t	Accounting fees (att	ach sch).			_				_					
I N	0	Other prof fees (atta	ach sch)							[
δī	17	Interest								_7					
ETR	18	Taxes (attach sched	ule) See St	mt 1		11	15.		•	ヿ					
E TRAT	19	Depreciation (at	ttach				$\neg \uparrow$			\neg					
A A		sch) and deplet	ion												
N V	20	Occupancy		[\prod					
G E	21	Travel, conferen		ngs [[
A E	22	Printing and put													
ĎĚ	23	Other expenses	(attach schedule	e) [_ [_	
AND ENSES		Other expenses Solution Total operating expenses. Add	<u>ee Stateme</u>	nt_2	CEM/	[16, 92]	22.		132	2.				16	<u>,790.</u>
Š.	24	Total operating	and administrat	tive ^{[[]]}	7 ا كا كا كا ه	ら し	_								
ร		expenses. Add	lines 13 through	23		17,03	<u> </u>		132	<u> </u>					,790.
	25	Contributions, gifts,	grants paid Pater	. Ay [7 9 7	259,50	10.			_				<u>253</u>	<u>,500.</u>
	26	Total expenses	and disburseme	ents."	- C U -		=								
		Add lines 24 and	d 25			<u>270,53</u>	57.		132	<u>د را</u>				270	,290.
	27	Subtract line 26 Excess of reven	from line 12:	의리	ESMO	CA-						1			1
	а	Excess of reven	ue over expens	es" "		265, <u>62</u>	,					1			1
					 	205,02	·*·		7 (5	-					
		Net investment incom	· -	· h					7,654	*					
	С	Adjusted net income	(if negative, enter 0	-)											

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Attached schedules and amounts in the description column should be for end of year amounts only (See instructions.) End of year Beginning of year Part II Balance Sheets (a) Book Value (b) Book Value (c) Fair Market Value Cash - non-interest-bearing 170,236 185,860 185,860. 2 Savings and temporary cash investments 3 Accounts receivable Less allowance for doubtful accounts 4 Pledges receivable Less allowance for doubtful accounts 5 Grants receivable Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see the instructions) Other notes and loans receivable (attach sch) Less: allowance for doubtful accounts 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Investments — U.S and state government obligations (attach schedule) **b** Investments — corporate stock (attach schedule) c Investments - corporate bonds (attach schedule) Investments - land, buildings, and equipment basis Less: accumulated depreciation (attach schedule) 12 Investments - mortgage loans 3,250,000 3,000,000. 13 Investments — other (attach schedule) Statement 3 14 Land, buildings, and equipment. basis Less accumulated depreciation (attach schedule) 15 Other assets (describe ► Total assets (to be completed by all filers see instructions Also, see page 1, item I 3,170,236 3,435,860 3,887,149. 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Loans from officers, directors, trustees, & other disqualified persons Mortgages and other notes payable (attach schedule) 21 22 Other liabilities (describe 0 23 Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. N F E U T N D 24 Unrestricted 25 Temporarily restricted 26 Permanently restricted A S S E ► X Foundations that do not follow SFAS 117, check here В and complete lines 27 through 31. 27 Capital stock, trust principal, or current funds T A 28 Paid-in or capital surplus, or land, building, and equipment fund 3,170,236 3,435,860 Retained earnings, accumulated income, endowment, or other funds 0 Ε Total net assets or fund balances (see the instructions) 3,170,236 3,435,860 30 Total liabilities and net assets/fund balances 3,170,236 3,435,860 (see the instructions) Part III | Analysis of Changes in Net Assets or Fund Balances 1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with 3,170,236. end-of-year figure reported on prior year's return) 2 265,624. 2 Enter amount from Part I, line 27a 3 3 Other increases not included in line 2 (itemize) 3,435,860 4 Add lines 1, 2, and 3 5 5 Decreases not included in line 2 (itemize) 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 6 3,435,860.

Form 990-PF (2008) The Surplus Line Association of Arizona

86-6320000

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If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the

Enter 1% of net investment income (1% of Part I, line 27b)

8 Enter qualifying distributions from Part XII, line 4

Add lines 5 and 6

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77.

119,697.

270,290.

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		32000			Page 4
	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948— see the	ne instru	ctions)		
	1 a Exempt operating foundations described in section 4940(d)(2), check here and enter 'N/A' on line 1.	ļ		_	-
	Date of ruling letter (attach copy of ruling letter if necessary – see instructions)	_			~~
	b Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1% of Part I, line 27b	1			<u>77.</u>
	c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, column (b)				
	c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part 1, line 12, column (b)				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable	_			
	foundations only Others enter -0-) Add lines 1 and 2	2			<u>0.</u>
•	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	3			77.
•		4			<u>0.</u> 77.
		5			//.
•		l			
	a 2008 estimated tax pmts and 2007 overpayment credited to 2008 b Exempt foreign organizations — tax withheld at source 6b				
	c Tax paid with application for extension of time to file (Form 8868) 6c				
	d Backup withholding erroneously withheld 6d	- 1			
-	Total credits and payments. Add lines 6a through 6d	7			100.
8		8			100.
9		9			0.
10		10			23.
11		11	_		0.
	rt VII-A Statements Regarding Activities	,			
			Т	Yes	No
1	a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		1a	1.05	X
			- · ·	 	† * * * * *
	b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?		16	1	X
	If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any materials publish	hod			
	or distributed by the foundation in connection with the activities	neu			
	c Did the foundation file Form 1120-POL for this year?		1c		X
	d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year	_			
	(1) On the foundation S 0. (2) On foundation managers S	0	-		
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers . ► \$ 0.		i		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		X
_	If 'Yes,' attach a detailed description of the activities			 -	 ^
_					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes		3		X
4:	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a	_	X
	of Yes,' has it filed a tax return on Form 990-T for this year?		4b	N	/A
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5		X
Ī	If 'Yes,' attach the statement required by General Instruction T				1
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:				
•	By language in the governing instrument, or				
			1		
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	ct	6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV		7	X	\vdash
	Enter the states to which the foundation reports or with which it is registered (see the instructions)				
	AZ				
b	If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General				
	(or designate) of each state as required by General Instruction 6? If 'No,' attach explanation		8b	X	ļ
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 494	2()(5)			ليبا
	for calendar year 2008 or the taxable year beginning in 2008 (see instructions for Part XIV)? If 'Yes,' complete Pa	art XIV	9		X
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their name	es	, ,		,
ΔΑ	and addresses		10 orm 90	N PF	(2000)
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	n 990-PF (2008) The Surplus Line Association of Arizona	86-	632000	0	F	age 5
Par	t VII-A Statements Regarding Activities Continued					
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes', attach schedule (see instructions)			11		X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?			12		х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption Website address None	application	on?	_13	Х	1
14	Website address None The books are in care of ► Foundation Source Telephor		800-8	39-1	754	
14	Located at > 501 Silverside Road, Ste 123 Wilmington DE ZIP + 4	198	09-137	2		
15		120	05 157	Ń/A		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here	_1	15	IN/ A		NI/A
D	and enter the amount of tax-exempt interest received or accrued during the year		15			N/A
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required		· · ·			T
	File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.				Yes	No
1 a	During the year did the foundation (either directly or indirectly):					
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes	XNo			İ
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	Yes	XNo			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes	X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes	X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	Yes	XNo			
			_		,	*<
	(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days)	Yes	X No			-2.5
					Š	
D	If any answer is 'Yes' to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see the instruction	ns)?		1 b	N	/A
	Organizations relying on a current notice regarding disaster assistance check here	, >				7: 1
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2008?			1 c	***********	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)).			÷	<u>.</u>	3
а	At the end of tax year 2008, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2008?	Yes	XNo		,	* ,
	If 'Yes,' list the years 20, 20, 20, 20			,	,	á
	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942((relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a all years listed, answer 'No' and attach statement — see the instructions.)		į	2b	N	/A
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years h	ere]		
	► 20, 20, 20					
	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	Yes	X No			
	If 'Yes,' did it have excess business holdings in 2008 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2008.)	i		3 b	N.	/A
4a .	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?			4a		х
				1		
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could eopardize its charitable purpose that had not been removed from jeopardy before the first day of					Y

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Part VII-B Statements Regarding Activi	··	m 4720 May Be Re	quired (continued	<u>1) </u>		T
 During the year did the foundation pay or incu. Carry on propaganda, or otherwise attems 		n (coetion 4045(c)) 2	☐ Yes [2	X No		
(2) Influence the outcome of any specific pub	lic election (see section			_		
on, directly or indirectly, any voter registra (3) Provide a grant to an individual for travel,		purposes?	— <u> </u>	X No X No		
(4) Provide a grant to an organization other the in section 509(a)(1), (2), or (3), or section				X No		
(5) Provide for any purpose other than religio educational purposes, or for the preventio	us, charitable, scientific n of cruelty to children (, literary, or or animals?	Yes [2	X No		
b If any answer is 'Yes' to 5a(1)-(5), did any of the described in Regulations section 53.4945 or in (see instructions)?	the transactions fail to d a current notice regard	qualify under the excepti ling disaster assistance	ons		56 N	/A
Organizations relying on a current notice rega	rding disaster assistanc	e check here	· • [1
c If the answer is 'Yes' to question 5a(4), does t tax because it maintained expenditure response	he foundation claim exe sibility for the grant?	emption from the	N/A Yes] No ,		
If 'Yes,' attach the statement required by Regu	ılatıons section 53 4945	i-5(d)			'	
6a Did the foundation, during the year, receive an on a personal benefit contract?			∐Yes [ː			
b Did the foundation, during the year, pay premi If you answered 'Yes' to 6b, also file Form 887	•	iy, on a personal benefi	t contract?	-	6Ь	X
7a At any time during the tax year, was the found		bited tax shelter transac	tion? Yes	X No		<u> </u>
b If yes, did the foundation receive any proceeds						/A
Part VIII Information About Officers, Dand Contractors	irectors, Trustees	, Foundation Mana	igers, Highly Paid	I Employ	/ees,	
1 List all officers, directors, trustees, foundation	n managers and their c	ompensation (see instr	uctions).			
(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation		ense acc allowand	
See Statement 4			·			
		0.	0			0.
2 Compensation of five highest-paid employees	s (other than those incl	uded on line 1- see inst	ructions). If none. ent	er 'NONE.'		
(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expe		
None						
						_
			· -·- · · · · ·			
Total number of other employees paid over \$50,000				<u> </u>		0
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Part VIII Information About Officers, Directors, Trustees, Formand Contractors (continued)		
3 Five highest-paid independent contractors for professional services— (see enter 'NONE.'	instructions). If none,	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
None	(7) 1) 50 1100	(у сотрановион
Total number of others receiving over \$50,000 for professional services		0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistic organizations and other beneficiaries served, conferences convened, research papers produced, etc.	al information such as the number of	Expenses
1 <u>N/A</u>		
2		
3		
4		
Part IX-B Summary of Program-Related Investments (see Instr	uctions)	
Describe the two largest program-related investments made by the foundation dur	ing the tax year on lines 1 and 2.	Amount
1 <u>N/A</u>		
2		
All other program-related investments. See instructions.		
otal. Add lines 1 through 3		0.
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Part X Minimum Investment Return (All domestic foundations must complete this p see instructions.)	art. Foreign t	foundations,
1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes a Average monthly fair market value of securities	1a	
b Average of monthly cash balances	1b	256,731.
c Fair market value of all other assets (see instructions)	1c	3,670,757.
d Total (add lines 1a, b, and c)	1d	3,927,488.
e Reduction claimed for blockage or other factors reported on lines 1a and 1c		
(attach detailed explanation) .	0.	
2 Acquisition indebtedness applicable to line 1 assets	2	0.
3 Subtract line 2 from line 1d	3	3,927,488.
4 Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	58,912.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	3,868,576.
6 Minimum investment return. Enter 5% of line 5	6	193,429.
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private and certain foreign organizations check here ► and do not complete the		
1 Minimum investment return from Part X, line 6	1	193,429.
2a Tax on investment income for 2008 from Part VI, line 5	77.	
b Income tax for 2008 (This does not include the tax from Part VI.)		
c Add lines 2a and 2b	2c	77.
3 Distributable amount before adjustments Subtract line 2c from line 1	3	193,352.
4 Recoveries of amounts treated as qualifying distributions	4	
5 Add lines 3 and 4	5	193,352.
6 Deduction from distributable amount (see instructions)	6	
7 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	193,352.
Part XII Qualifying Distributions (see instructions)		
1 Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes a Expenses, contributions, gifts, etc — total from Part I, column (d), line 26	1a	270,290.
b Program-related investments — total from Part IX-B	1b	
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc. purposes	2	
		· · · · · · · · · · · · · · · · · · ·
3 Amounts set aside for specific charitable projects that satisfy the. a Suitability test (prior IRS approval required).	3a	
b Cash distribution test (attach the required schedule)	3ь	
4 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	270,290.
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions)	5	77.
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	270,213.
Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating v qualifies for the section 4940(e) reduction of tax in those years	whether the foun	dation

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Part XIII Undistributed Income (see instructions)

, · ·

	(a) Corpus	(b) Years prior to 2007	(c) 2007	(d) 2008
Distributable amount for 2008 from Part XI, line 7				102 252
2 Undistributed income, if any, as of the end of 2007 a Enter amount for 2007 only			120 042	193,352
b Total for prior years 20 , 20 , 20		0.	120,942.	
3 Excess distributions carryover, if any, to 2008		0.		
a From 2003	,			
b From 2004	-			
c From 2005				
d From 2006				,
e From 2007	-			
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2008 from Part	ļ			
XII, line 4. ► \$270, 290.	•			
a Applied to 2007, but not more than line 2a		1	120,942.	,
	, ,		120, 742.	· · · · · · · · · · · · · · · · · · ·
 Applied to undistributed income of prior yea (Election required — see instructions) 	rs	0.		
 Treated as distributions out of corpus (Election required — see instructions) 	0.	\$.		,
d Applied to 2008 distributable amount		<u>.</u>	,	149,348.
e Remaining amount distributed out of corpus	0.			1 1970 101
5 Excess distributions carryover applied to 2008	0.		,	0.
(If an amount appears in column (d), the	1 (2)			<u> </u>
same amount must be shown in column (a)		,		, •
6 Enter the net total of each column as indicated below:	ř.	* *	,	
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.	-		₹3
b Prior years' undistributed income Subtract line 4b from line 2b				
	5% , , , , ,	0.		4 3
c Enter the amount of prior years' undistribut- ed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		*
d Subtract line 6c from line 6b. Taxable amount — see instructions	-	0		-
		0.		
e Undistributed income for 2007 Subtract line 4a from line 2a. Taxable amount — see instructions	•		0.	·
inio 2a. Takabie amount — 3ce mstructions	"c .			
f Undistributed income for 2008 Subtract lines	;			
4d and 5 from line 1. This amount must be distributed in 2009				44,004.
7 Amounts treated as distributions out of	<u> </u>			44,004.
corpus to satisfy requirements imposed				
by section 170(b)(1)(F) or 4942(g)(3) (see instructions)	0.	1		
,				
8 Excess distributions carryover from 2003 not applied on line 5 or line 7 (see instructions)	0.			
9 Excess distributions carryover to 2009. Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9.	· ·			
a Excess from 2004		1		
b Excess from 2005	7			
c Excess from 2006.	7			
d Excess from 2007	7		•	-
e Excess from 2008.				

Form 990-PF (2008) The Surplus Line Association of Arizona 86-6320000 Pag								
Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9) N/A								
1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2008, enter the date of the ruling b Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)								
b Check box to indicate whether the foundati		4942(j)(5)						
2a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year							
investment return from Part X for each year listed	(a) 2008	(b) 2007	(c) 2006	(d) 2005	(e) Total			
b 85% of line 2a								
c Qualifying distributions from Part XII, line 4 for each year listed								
d Amounts included in line 2c not used directly for active conduct of exempt activities								
 Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c 								
3 Complete 3a, b, or c for the alternative test relied upon								
a 'Assets' alternative test — enter:		l						
(1) Value of all assets								
(2) Value of assets qualifying under section 4942(j)(3)(B)(i).	·							
b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed								
c 'Support' alternative test - enter			1					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)								
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(jX3XBXIII)								
(3) Largest amount of support from an exempt organization								
(4) Gross investment income			L					
Part XV Supplementary Information (assets at any time during the	Complete this e <u>year – see in</u>	part only if the structions.)	organization ha	ad \$5,000 or mor	e in 			
1 Information Regarding Foundation Manage a List any managers of the foundation who ha close of any tax year (but only if they have only in the property).	ve contributed mor	e than 2% of the tot an \$5,000) (See se	tal contributions rece ection 507(d)(2))	eived by the foundation	n before the			
None								
b List any managers of the foundation who ow a partnership or other entity) of which the fo None	n 10% or more of tundation has a 10%	the stock of a corpo % or greater interest	pration (or an equally t	large portion of the o	ownership of			
2 Information Regarding Contribution, Grant, Check here X if the foundation only ma requests for funds if the foundation makes of	kes contributions t	o preselected charit	table organizations a	and does not accept u zations under other c	insolicited onditions,			
a The name, address, and telephone number	of the person to wh	nom annlications she	ould be addressed					
a The Hame, address, and telephone number	or the person to will	от аррисанопо зак	ould be addressed					
b The form in which applications should be submitted and information and materials they should include								
c Any submission deadlines.								
d Any restrictions or limitations on awards, such	d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors							

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)	substantial contributor	recipient	CONTINUENT	
a Paid during the year		}		
See attachment	N/A	Public	See attachment	253,500
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		}		
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	<u> </u>	1		
Total			<u>▶</u> 3a	253,500.
b Approved for future payment				
		l		
		Ì		
		}		
		ļ		
	1	İ		1
				1
	1			
	1			
	1			
	1			
Total	<u> </u>		► 3b	
I VIdi			- 3D	'i

Enter gross amounts unless otherwise indicated	Unrelate	ed business income	Excluded by	section 512, 513, or 514	
Program service revenue	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	(e) Related or exempt function income (see the instructions)
a		····· · · · · · · · · · · · · ·	code		(See the manachoris)
b					
с					
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments			<u> </u>		
3 Interest on savings and temporary cash investments			14	7,786.	
4 Dividends and interest from securities					
5 Net rental income or (loss) from real estate		•			
a Debt-financed property	 		 		
b Not debt-financed property	<u> </u>		 		
6 Net rental income or (loss) from personal property			 		
7 Other investment income	1	<u></u>			
8 Gain or (loss) from sales of assets other than inventory	 		 		
Net income or (loss) from special events Gross profit or (loss) from sales of inventory		 	 		
11 Other revenue	 	~ >y ~ ~ ~	/s / tv	ω , '-	*
a	<u> </u>	<u>~ >7 % % </u>	-	***	
b					
с		-			· · · · · · · · · · · · · · · · · · ·
d					
e					
Subtotal. Add columns (b), (d), and (e)				7,786.	
13 Total. Add line 12, columns (b), (d), and (e)				13	7,786.
see worksheet in the instructions for line 13 to verify cal	lculations.)				
art XVI-B Relationship of Activities to the		hmant of Evame	Burness		
ACTIVITIES TO THE		innent of Exempt	rurpose:		
Line No. Explain below how each activity for which include accomplishment of the foundation's exempt	come is reporte purposes (othei	d in column (e) of Part than by providing fund	t XVI-A contr ds for such p	ibuted importantly to urposes) (See the ii	the nstructions)
N/A					
		-			
				<u> </u>	
		 			
				<u></u> .	
					
					
					

Form 990-P			Association of		··	86-63		Page
Rart XVII	Information R Exempt Organ	egarding Tra	nsfers To and Tran	sactions an	d Relationshi	ps With No	ncharitabl	e
			<u> </u>				SPEC.	Yes N
1 Did th	e organization directly bed in section 501(c) :	or indirectly enga	age in any of the following than section 501(c)(3)	ng with any other	er organization		2000年201	^ૹ ૣૻૻૢૺઌૢ૾ૺ૽ૺ૽ૺ૽ૺૡ
relatin	g to political organiza	tions?	1 (1811 36(11011 301(0)(3)	Organizations)	or in section 527,			巡 司5
a Transf	ers from the reporting	foundation to a r	noncharitable exempt or	ganization of:			Take Call	學為其
(1) Ca							1 a (1)	
(2) 0	ther assets						1 a (2)	
• •	transactions:				-	•	200 4 25 3 7	(25-40) W
	ales of assets to a non	charitable evemn	t organization				1 b (1)	3 (1)
			e exempt organization			•	1 b (2)	
	ental of facilities, equip			•	•		1b (3)	
	eimbursement arrange		33013	•	••••	• •	1b (4)	
	ans or loan guarantee				•	•	1 b (5)	
	-		or fundraising solicitation	ne.			16 (6)	
			other assets, or paid en				10 (0)	
Conami	g or racinties, equipm	citt, maining iists,	other assets, or paid en	npioyees	•	•		<u>-</u>
the go	ods, other assets, or s	services given by	nplete the following sche the reporting foundation v in column (d) the value	If the foundati	on received less t	lhan fair marke	t value in	of
(a) Line no	(b) Amount involved	(c) Name of n	oncharitable exempl organizati	on (d)	Description of transfer	rs, transactions, ar	d sharing arrang	yements
V/A		ļ <u>.</u>						
				i				
			·····					
	······································	<u> </u>	·					
								
	· · · · · · · · · · · · · · · · · · ·							

		 	~					
		·						
2a Is the for	oundation directly or in	ndirectly affiliated	I with, or related to, one than section 501(c)(3))	or more tax-ex	empt organization	ns	——— ∏Yes	X
	complete the following			or in section 52	······································		1	(T)
	 a) Name of organization 	on	(b) Type of organi	zation	(c) D	escription of re	elationship	
/A			· <u>- · · · · · · · · · · · · · · · · · ·</u>					
_								
, -								
Under penaltie complete De	es of perjury i declare that I ha	ave examined this retuil	n, including accompanying sched ry) is based on all information o	utes and statements,	and to the best of my ki	nowledge and belief	it is true, conject	, and
6	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		,,			\mathcal{A}	. 1	
LY.)	the shape	ر و دا دا	1	18-	7-2009_	RESID	ent	
Signatu	ol officer or trustee	1000	<u> </u>	Outo				
3/9/0/0	or uniter or itosiee		A []A	Date		Title	Anara Maria	
Daid P	eparer's			Date	1 2 8 2000 Ch		eparers Identify# Se Signature in the	
Paid si Pre-	gnature	Ut wasted				ployed -		
parer's F	rm s name (or Found	lation Sour	ce		EIN	, -		
Use y	mployed) 55 Wa	lls Drive						
O'''y a	Whose and	ield, CT 0	6824		(24	oneno ► (80	0) 839-1	754
Δ					1770	mie 100 - (00	Form 90f	

Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, 990-EZ and 990-PF ► See separate instructions. OMB No 1545 0047

2008

Name of the organization The Surplu	Employer identification number		
Foundation	Trust	86-6320000	
Organization type (check one)	-		
Filers of:	Section:		
Form 990 or 990-EZ	501(c)() (enter number) organization		
	4947(a)(1) nonexempt charitable trust not tr	eated as a private foundation	
	527 political organization		
Form 990-PF	X 501(c)(3) exempt private foundation		
	4947(a)(1) nonexempt charitable trust treate	d as a private foundation	
	501(c)(3) taxable private foundation		
Check if your organization is covered boxes for both the General Rule and	by the General Rule or a Special Rule (Note: Only a section a Special Rule See instructions)	on 501(c)(7), (8), or (10) organization can check	
General Rule —			
X For organizations filing Form 990 contributor. (Complete Parts I and	, 990-EZ, or 990-PF that received, during the year, \$5,000 oid $$ II $$)	r more (in money or property) from any one	
Special Rules -			
509(a)(1)/170(b)(1)(A)(vi) and red	on filing Form 990, or Form 990-EZ, that met the 33-1/3% size ived from any one contributor, during the year, a contributine 1h or 2% of the amount on Form 990-EZ, line 1. Complet	on of the greater of (1) \$5,000 or (2) 2% of the	
aggregate contributions or begues	0) organization filing Form 990, or Form 990-EZ, that receive sts of more than \$1,000 for use <i>exclusively</i> for religious, cha uelty to children or animals Complete Parts I, II, and III	ed from any one contributor, during the year, aritable, scientific, literary, or educational	
some contributions for use exclus \$1,000. (If this box is checked, en	0) organization filing Form 990, or Form 990-EZ, that receive swely for religious, charitable, etc, purposes, but these contri- iter here the total contributions that were received during the y of the Parts unless the General Rule applies to this organi	butions did not aggregate to more than	
religious, charitable, etc, contribut	tions of \$5,000 or more during the year)	► \$	
990-PF) but they must answer 'No' or	overed by the General Rule and/or the Special Rules do not a Part IV, line 2 of their Form 990, or check the box in the her do not meet the filing requirements of Schedule B (Form 99	eading of their Form 990-EZ, or on line 2 of	
BAA For Privacy Act and Paperwork for Form 990. These instructions will	k Reduction Act Notice, see the Instructions S be issued separately.	Schedule B (Form 990, 990-EZ, or 990-PF) (2008)	

	B (Form 990, 990-EZ, or 990-PF) (2008)	Page 1	of 1 of Part I
Name of org	ganization urplus Line Association of Arizona	i -	er identification number
Part I	Contributors (see instructions.)		
(a) Number	(b)	(c) Aggregate contributions	(d) Type of contribution
1	Surplus Line Association of AZ 4041 N. Central Ave, Ste 515 Phoenix, AZ 85012	\$528,375.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
	·	\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)

2008	The Surplus Line As	tatements ssociation of A tion Trust		,	Page 1 86-6320000
Statement 1 Form 990-PF, Part I, Line 18 Taxes					
Excise tax	(a) Expen <u>per Bo</u> \$ Total <u>\$</u>	ses Inves	Net stment come	(c) Adjusted Net Income	(d) Charitable Purposes \$ 0.
Statement 2 Form 990-PF, Part I, Line 23 Other Expenses					
Administrative Fees Bank Charges	Expen <u>per B</u> \$ 16,	ises Inves	Net stment scome 132.	(c) Adjusted Net Income	(d) Charitable Purposes \$ 16,790. \$ 16,790.
Statement 3 Form 990-PF, Part II, Line 13 Investments - Other					
Other Investments		Valuati <u>Method</u>		Book Value	Fair Market Value
Jackson Nat Life Contract Jackson National Life #10 Minnesota Life Annuity #1 Lincoln Benefit Life Annu Lincoln Benefit Life Annu Travelers Life #451325 Travelers Life #471256 Lincoln Benefit Life Annu NY Life Ins Annuity #5219 Jackson Nat Life Contract Lincoln Benefit Life Annu	004713750 1-349-330 uity #1136972 uity #1138271 uity #1213531 54434 t #1003556618 uity #1224569	Cost Cost Cost Cost Cost Cost Cost Cost	\$	250,000. \$ 250,000. 250,000. 225,000. 250,000. 250,000. 250,000. 250,000. 250,000. 250,000. 250,000.	289,189. 296,763. 292,759. 247,429. 249,446. 291,502. 289,454. 117,926. 270,140. 259,894. 520,006. 282,908. 293,873.
NY Life Ins Annuity #5213 NY Life Ins Annuity #5213	98773	Cost			

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2008

Federal Statements

Page 2

The Surplus Line Association of Arizona Foundation Trust

86-6320000

Statement 4
Form 990-PF, Part VIII, Line 1
List of Officers, Directors, Trustees, and Key Employees

Name and Address	Title and Average Hours <u>Per Week Devoted</u>	Compen- sation	Contri- bution to EBP & DC	Expense Account/ Other
J. Scott Wede 4041 N. Central Avenue #515 Phoenix, AZ 85012	President/Dir < 1 hr/wk	\$ 0.	\$ 0.	\$ 0.
Timothy Downey 4041 N. Central Avenue #515 Phoenix, AZ 85012	VP/Dir < 1 hr/wk	0.	0.	0.
T. Curtis Anderson 4041 N. Central Avenue #515 Phoenix, AZ 85012	Sec/Treas/Dir < 1 hr/wk	0.	0.	0.
Stephen K. Goodrich 4041 N. Central Avenue #515 Phoenix, AZ 85012	Director < 1 hr/wk	0.	0.	0.
Marc Adler 4041 N. Central Avenue #515 Phoenix, AZ 85012	Director < 1 hr/wk	0.	0.	0.
Lanny Hair 4041 N. Central Avenue #515 Phoenix, AZ 85012	Director < 1 hr/wk	0.	0.	0.
Larry Beach 4041 N. Central Avenue #515 Phoenix, AZ 85012	Director < 1 hr/wk	0.	0.	0.
	Total	\$ 0.	\$ 0.	\$ 0.

The Surplus Line Association of Arizona Foundation EIN: 86-6320000 Taxable Year Ending December 31, 2008

Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year

Recipient name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
100 CLUB OF ARIZONA	N/A	509(a)(2)	GENERAL & UNRESTRICTED	\$10,000 00
32 N STONE AVE STE 1400, TUCSON, AZ 85015	N/A	509(a)(1)	GENERAL & UNRESTRICTED	\$2,500.00
A A.M G A EDUCATION FOUNDATION 150 SOUTH WARNER ROAD, SUITE 156, KING OF PRUSSIA, PA 19406-2832	N/A	509(a)(1)	A.A M G A PROJECT	\$25,000 00
A A M G A EDUCATION FOUNDATION 150 SOUTH WARNER ROAD, SUITE 156, KING OF PRUSSIA, PA 19406-2832	NA	509(a)(1)	GEORGIA STATE A A M.G.A DISTINGUISHED CHAIR IN RISK MANAGEMENT PROJECT	\$50,000 00
AMERICAN HEART ASSOCIATION INC - PACIFIC/MOUNTAIN AFFILIATE 5325 E PIMA STREET, TUCSON, AZ 85712	₹.Z	509(a)(1)	GENERAL & UNRESTRICTED	\$3,000.00
ARIZONA COMMUNITY FOUNDATION 2201 E CAMELBACK RD 202, PHOENIX, AZ 85016-3431	N/A	509(a)(1)	GENERAL & UNRESTRICTED	\$2,500 00
ARIZONA DIABETES FOUNDATION INC GREENWAY PROFESSIONAL BUILDING, PHOENIX, AZ 85032	N/A	509(a)(2)	GENERAL & UNRESTRICTED	\$2,500 00
ARIZONA HEART FOUNDATION INC 1910 EAST THOMAS ROAD, PHOENIX, AZ 85016	N/A	509(a)(1)	GENERAL & UNRESTRICTED	\$3,000 00

Page 1 of 4

The Surplus Line Association of Arizona Foundation EIN: 86-6320000 Taxable Year Ending December 31, 2008

Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year

Recipient name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	, and a
ARIZONA STATE UNIVERSITY FOUNDATION/ASU W P. CAREY SCHOOL OF BUSINESS PO BOX 874611, TEMPE, AZ 85287-4611	N/A	509(a)(1)	EMIL BARBERICH SCHOLARSHIP	\$25,000 00
ASSISTANCE LEAGUE OF TUCSON INC 1307 N ALVERNON WAY, TUCSON, AZ 85712-3801	N/A	509(a)(2)	GENERAL & UNRESTRICTED	\$3,500.00
AUTISM SOCIETY OF AMERICA PO BOX 10543, PHOENIX, AZ 85064-0543	N/A	509(a)(1)	GENERAL & UNRESTRICTED	\$2,500 00
BOY SCOUTS OF AMERICA 2969 N GREENFIELD RD, PHOENIX, AZ 85016-7715	N/A	509(a)(1)	GRAND CANYON COUNCIL PROGRAM	\$1,500 00
CIVITAN FOUNDATION INC 3509 E SHEA BLVD STE 117, PHOENIX, AZ 85028-3339	N/A	509(a)(1)	GENERAL & UNRESTRICTED	\$2,500 00
COMMUNITY FOOD BANK INC PO BOX 26727, TUCSON, AZ 85726-6727	N/A	509(a)(1)	GENERAL & UNRESTRICTED	\$7,500 00
DEREK HUGHES NAPSLO EDUCATIONAL FOUNDATION INC 200 NE 54TH ST UNIT 200, KANSAS CITY, MO 64118-4338	N/A	509(a)(2)	GENERAL & UNRESTRICTED	\$25,000 00
DESERT SURVIVORS INC 1020 W STARR PASS BLVD, TUCSON, AZ 85713-1406	N/A	509(a)(1)	GENERAL & UNRESTRICTED	\$1,000 00

The Surplus Line Association of Arizona Foundation EIN: 86-6320000 Taxable Year Ending December 31, 2008

Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year

Recipient name and address (home or business)	If reciplent is an Individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
HACIENDA SNF INC	N/A	509(a)(1)	GENERAL & UNRESTRICTED	\$5,000 00
1402 E SOUTH MOUNTAIN AVE, PHOENIX, AZ 85042-7925				
INSURANCE TRAINING AND EDUCATION CENTER INC. CERTIFIED INSURANCE COUNSELOR EDUCATION PROGRAM	N/A	509(a)(2)	CERTIFIED INSURANCE COUNSELOR EDUCATION PROGRAM	\$25,000 00
2828 NORTH 36TH STREET, PHOENIX, AZ 85008-1303				
LURA TURNER HOMES INC	N/A	509(a)(2)	GENERAL & UNRESTRICTED	\$2,500 00
1432 N 27TH AVENUE, PHOENIX, AZ 85009-0000				
MAKE A WISH FOUNDATION OF ARIZONA INC	N/A	509(a)(1)	GENERAL & UNRESTRICTED	\$2,500 00
711 E NORTHERN AVE, PHOENIX, AZ 85020-4154				
MOUNTAIN POINTE HIGH SCHOOL PRIDES PEAK GIFTED PROGRAM	N/A	509(a)(1)	GENERAL & UNRESTRICTED	\$2,000 00
4201 EAST KNOX ROAD, PHOENIX, AZ 85044				
NEW BEGINNINGS FOR WOMEN & CHILDREN INC	A/Z	509(a)(1)	GENERAL & UNRESTRICTED	\$2,500 00
2590 N ALVERNON WAY, TUCSON, AZ 85712-2402				
ORAL EDUCATIONAL OPPORTUNITIES FOR THE HEARING IMPAIRED	N/A	509(a)(1)	GENERAL & UNRESTRICTED	\$10,000 00
3426 E SHEA BLVD, PHOENIX, AZ 85028-3327				
SILENT WITNESS INC 620 W WASHINGTON ST, PHOENIX, AZ 85003-2108	N/A	509(a)(1)	GENERAL & UNRESTRICTED	\$5,000 00

The Surplus Line Association of Arizona Foundation EIN: 86-6320000 Taxable Year Ending December 31, 2008

Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year

Reciplent name and address (home or business)	If reciplent is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	
SOUTHERN ARIZONA CENTER AGAINST SEXUAL ASSAULT 1600 N COUNTRY CLUB RD, TUCSON, AZ 85716-3119	N/A	509(a)(1)	GENERAL & UNRESTRICTED	\$2,500 00
ST MARYS FOOD BANK ALLIANCE 2831 N 31ST AVE, PHOENIX, AZ 85009-1518	N/A	509(a)(1)	GENERAL & UNRESTRICTED	\$5,000 00
SUSAN G KOMEN BREAST CANCER FOUNDATION 2040 W BETHANY HOME RD STE 120, PHOENIX, AZ 85015-2445	N/A	509(a)(1)	GENERAL & UNRESTRICTED	\$5,000 00
UNITED SERVICE ORGANIZATIONS INC 2111 WILSON BLVD, ARLINGTON, VA 22201	N/A	509(a)(1)	GENERAL & UNRESTRICTED	\$5,000 00
VALLEY OF THE SUN YOUNG MENS CHRISTIAN ASSOCIATION 350 N 1ST AVE, PHOENIX, AZ 85003-1513	N/A	509(a)(2)	GENERAL & UNRESTRICTED	\$12,000 00
YES SOLUTIONS INC 549 W 123RD ST APT MF, NEW YORK, NY 10027-5037	N/A	509(a)(1)	GENERAL & UNRESTRICTED	\$2,500 00

\$253,500 TOTAL:

Form **8868**

(Rev April 2008)

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

Form 8868 (Rev 4-2008)

If you are	filing for an Automatic 3-Month	Extension, comple	te only Part land che	ck this box	_		► X
If you are	e filing for an Additional (Not Au	tomatic) 3-Month Ex	tension, complete o	nly Part II(on pa	age 2 of this f	form)	
Do not comp	lete Part II unless you have alrea	ady been granted an	automatic 3-month	extension on a	previously file	d Form 8868	
Part I	Automatic 3-Month Exten	sion of Time. O	nly submit origin	nal (no copie	es needed)		
A corporation	required to file Form 990-T and	requesting an autor	matic 6-month extens	sion - check th	is box and co	mplete Part I only	▶ []
All other corp income tax r	oorations (including 1120-C filers eturns), partnerships, REM	MICS, and trusts mus	t use Form 700	4 to request a	an extension of time i	to file
returns noted the additiona Form 990-T	ling (e-file). Generally, you can e I below (6 months for a corporat I (not automatic) 3-month extens Instead, you must submit the ful It www irs gov/efile and click on	on required to file Fi sion or (2) you file Fi ly completed and sid	orm 990-T) However orms 990-BL, 6069, o gned page 2 (Part II)	r, you cannot fil or 8870, group i	e Form 8868 eturns, or a c	electronically if (1) you composite or consolid	ou want lated
	Name of Exempt Organization					Employer identification n	umber
Type or print	The Surplus Line As Foundation Trust	sociation of	Arizona			86-6320000	
File by the due date for	Number, street, and room or suite number	r If a P O box, see instru	ections				
filing your return See	4041 N. Central Ave						
instructions City, town or post office, state, and ZIP code. For a foreign address, see instructions							
Phoenix, AZ 85012							
	of return to be filed (file a separa	— ''	· ·				
Form 990		Form 990-T (cor	'		Form 472		
Form 990		H '	tion 401(a) or 408(a)	trust)	Form 522		
Form 990		H '	st other than above)		Form 606	-	
X Form 990	J-PF	Form 1041-A			Form 887	<i>'</i> U	
The book	s are in the care of Founda	tion_Source_					
Telenhone	No. ► 800-839-1754		FAX No. ► 800-	839-1764			
	anization does not have an office						▶ □
• If this is f	or a Group Return, enter the org	anization's four digit	t Group Exemption N	umber (GEN)	if	this is for the whole	group,
check thi	s box ► If it is for part of	the group, check thi	s box ► and a	ttach a list with	the names a	nd EINs of all membe	ers
	sion will cover						
1 reque	st an automatic 3-month (6 month	hs for a corporation	required to file Form	990-T) extensi	on of time		
untıl _	8/15 , 20 _09 , to file	e the exempt organi	zation return for the	organization na	med above.		
	ension is for the organization's r						
► X	calendar year 20 <u>08</u> or tax year beginning						
►	tax year beginning	, 20 _ , a	nd ending	, 20 _			
2 If this to	ax year is for less than 12 month	s, check reason	Initial return	Final retu	ırn 🔲 C	Change in accounting	period
	pplication is for Form 990-BL, 990 indable credits. See instructions	90-PF, 990-T, 4720,	or 6069, enter the te	ntative tax, les	s any	3a \$	77.
b If this a made	pplication is for Form 990-PF or include any prior year overpayme	990-T, enter any re ent allowed as a cre	fundable credits and dit	estimated tax p	ayments	3ь\$	100.
deposit	e Due. Subtract line 3b from line with FTD coupon or, if required, tructions	3a Include your pa by using EFTPS (E	yment with this form, lectronic Federal Tax	or, if required, Payment System	em)	3c \$	0.
Caution. If yo	ou are going to make an electron	nic fund withdrawal v	vith this Form 8868,	see Form 8453-	EO and Form	* - · * · · · · · · · · · · · · · · · · 	

BAA For Privacy Act and Paperwork Reduction Act Notice, see instructions.