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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 2008 Open to Public Inspection

	A	For the 2008 c	alendar year, or tax year beginning 7/01/08, and ending 6/30/09										
	В	Check if applicable	Please C Name of organization SUN VALLEY SKI EDUCATION FOUNDATION	D Empl	loyer identification number								
	\equiv	Address change	label or Dougle Assessment	82	-0264946								
	$\overline{}$	Name change	type. Number and street (or P O box if mail is not delivered to street address) Room/suite	-	hone number								
	\exists	nital return	See PO BOX 203	20	8-726-4129								
		Termination	Specific Instruc- City or town, state or country, and ZIP + 4	G Gross rec	eipts \$ 3,007,404								
	<u></u>	Amended return	tions SUN VALLEY ID 83353-0203										
	∐ /	Application pending	F Name and address of principal officer GARY BLACK, JR.	H(a) Is this	s a group return for tes? Yes X No								
			H(b) Are a	Il affiliates									
			P.O. BOX 33 SUN VALLEY ID 83353		a," attach a list (see instructions)								
		Tax-exempt sta											
			SVSEF.ORG		m State of legal domicile ID								
	K Type of organization X Corporation Trust Association Other ▶ L Year of formation 1966 M State of legal Part I Summary												
			describe the organization's mission or most significant activities	····									
			SUN VALLEY SKI EDUCATION FOUNDATION, INC. IS DEDICATED										
	Governance		PROVIDING WINTER SPORTS PROGRAMS FOR THE YOUTH OF THE										
	/ern		D RIVER VALLEY, TO INCLUDE ALL ABILITY AND INTEREST										
	<u>်</u>		this box If the organization discontinued its operations or disposed of more than 25% of its assets rof voting members of the governing body (Part VI, line 1a)	3	12								
0	රේ ගු		r of independent voting members of the governing body (Part VI, line 1b)	4	12								
2010	Activities		umber of employees (Part V, line 2a)	5	94								
00	Acti		umber of volunteers (estimate if necessary)	6	525								
	`	•	ross unrelated business revenue from Part VIII, line 12, column (C)	_7a									
JUL		b Net unr	elated business taxable income from Form 990-T, line 34 Prior Yea	7b	Current Year								
		8 Contrib	703	809,255									
Ш	en u			2,890	1,445,861								
Z	Revenue	10 Investm	, , , , , , , , , , , , , , , , , , , ,	,161	-306,684								
AN	nz.			,690									
SCANNED	_		evenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 1,944 and similar amounts paid (Part IX, column (A), lines 1-3)	,444	2,032,470								
43													
	"		s paid to or for members (Part IX, column (A), line 4) s, other compensation, employee benefits (Part IX, column (A), lines 5–10) 1,027	,611	1,114,627								
	sesued	16a Profess	sional fundraising fees (Part IX, column (A), line 11e)										
	Ехре	b Total fu	indraising expenses (Part IX, column (D), line 25) 121,095										
	ш	17 Other e	Expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	894	1,396,942								
		18 Total ex	kpenses Add lines 13-17 (must equal Part IX column A): me25VED 2,003	,061	2,511,569 -479,099								
	- se	19 Revenu			End of Year								
	sets	20 Total as	Sects (Part X, line 16) Abilities (Part X, line 26) MAY 1 8 2010 Beginning of 2, 186		1,593,304								
	Net Assets or Fund Balances		abilities (Part X, line 26)	.,485	5,142								
			sets or fund balances Subtract line 21 from line 20 OGDEN, UT	, 106	1,588,162								
	<u>P</u>		Signature Block UGUSIN, UI Inder penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and t	n the hest o	of my knowledge								
		a	nd belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which prep	arer has an	y knowledge								
	Sig	n h	- Corlos Marios		5/14/10								
	Her	e /	Signature of officer	Date	, , ,								
			Type or print name and title										
				Preparer's identifying number									
	Pai	d P		(see instructions)									
		parer's 💳	BECKER, CHAMBERS & CO., P.A.	EIN	<u>' </u>								
	Use	- Cilly	irm's name (or yours self-employed).	Phone	<u>-</u>								
			ddress, and ZIP + 4 HAILEY, ID 83333-0909	no ▶	208-788-9595								
	<u></u>		iss this return with the preparer shown above? (see instructions)		Yes No								
	DAA	For Privacy	Act and Paperwork Reduction Act Notice, see the separate instructions.	/\	Form 990 (2008)								

substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III

Pi	art IV Checklist of Required Schedules			
	•		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	X	<u> </u>
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,	ŀ		
	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 described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
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		X
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		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	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete	İ		
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions			
	24b–24d and complete Schedule K If "No," go to question 25	24a		_X_
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified			
	person from a pnor year? If "Yes," complete Schedule L, Part I	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or		Ţ	
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
7	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or			

Checklist of Required Schedules (continued)

	1		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 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
C	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		X
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		X
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		<u> </u>
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		<u>X</u>
		r	gan.	(0000)

Form **990** (2008)

Statements Regarding Other IRS Filings and Tax Compliance Yes No Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of 9 US Information Returns Enter -0- if not applicable Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b Did the organization comply with backup withholding rules for reportable payments to vendors and reportable X gaming (gambling) winnings to prize winners? 1c 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax 94 Statements, filed for the calendar year ending with or within the year covered by this return X If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see Did the organization have unrelated business gross income of \$1,000 or more during the year covered by 3a X this return? 3a If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O b 3b 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, secunties account, or other financial X account)? 4a 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 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b c If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? 5c X 6a Did the organization solicit any contributions that were not tax deductible? 6a b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b Organizations that may receive deductible contributions under section 170(c). Did the organization provide goods or services in exchange for any quid pro quo contribution of more than X 7a X 7b If "Yes," did the organization notify the donor 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 X required to file Form 8282? 7с If "Yes," indicate the number of Forms 8282 filed during the year 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, on a personal benefit contract? 7f For all contributions of qualified intellectual property, did the organization file Form 8899 as required? 7g For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as X required? 7h 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 X organization, have excess business holdings at any time during the year? R Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds. X Did the organization make any taxable distributions under section 4966? 9a X Did the organization make a distribution to a donor, donor advisor, or related person? 9b 10 Section 501(c)(7) organizations. Enter Initiation fees and capital contributions included on Part VIII, line 12 10a а 10b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Section 501(c)(12) organizations. Enter 11 Gross income from members or shareholders 11a Gross income from other sources (Do not net amounts due or paid to other sources against 11b amounts due or received from them) Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a b If "Yes," enter the amount of tax-exempt interest received or accrued during the year

Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Sec	tion A. Governing Body and Management	 			т
	Formula MV III and the Control of the law and form MN-7 and the law of the law described the		F	Yes	No
	For each "Yes" response to lines 2–7b below, and for a "No" response to lines 8 or 9b below, describe the				
10	circumstances, processes, or changes in Schedule O See instructions Enter the number of voting members of the governing body 1a	12			
1a b	Enter the number of voting members of the governing body Enter the number of voting members that are independent 1b	12			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with				
_	any other officer, director, trustee, or key employee?		2		x
3	Did the organization delegate control over management duties customarily performed by or under the direct		-		
J	supervision of officers, directors or trustees, or key employees to a management company or other person?		3		x
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		Х
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		X
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:				
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?		<u>9a</u>		<u> </u>
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,		l		
	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		ı		
	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				7.7
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	<u> </u>	11		<u> </u>
Sec	tion B. Policies				•••
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13		12a	Yes	No X
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give		124		
-	rise to conflicts?		12b		
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"		725		
•	describe in Schedule O how this is done		12c		
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			1	
а	The organization's CEO, Executive Director, or top management official?		15a		<u> </u>
b	Other officers or key employees of the organization?		15b		X
	Describe the process in Schedule O (see instructions)			1	
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			1	
	with a taxable entity during the year?		16a		X
b	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			1	
	the organization's exempt status with respect to such arrangements?		16b		
Sec	tion C. Disclosure				
17	List the states with which a copy of this Form 990 is required to be filed ID				
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s	only)			
	available for public inspection. Indicate how you make these available. Check all that apply				
	Own website Another's website X Upon request				
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of int	erest			
	policy, and financial statements available to the public	f tha			
20	State the name, physical address, and telephone number of the person who possesses the books and records o	ı ine			
e i	organization > SUN VALLEY SKI EDUCATION FOUNDATION P.O. BOX 233 IN VALLEY ID 83	2353	208-72	6-4	120
	JN VALLEY ID 83	,,,,	200 12	- 3 .	3

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

Check this box if the or	rganization did not compei	nsate	any	office	er, d	recto	or, tru	ustee, or key employee		
(A)	(B)				C)			(D)	(E)	(F)
Name and Title	Average hours per week	Individual trustee or director	,	Officer	Key employee	hat at Highest	Former	Reportable compensation from the organization	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the
		or or	Institutional trustee		oloyee	Highest compensated employee		(W-2/1099-MISC)	,	organization and related organizations
CHELLE GOURI	AY	+	<u> </u>			1				
DIRECTOR	2	X	ļ					0	0	0
PAUL FREMONT	-SMITH JR									
DIRECTOR	2	X	<u> </u>				<u> </u>	0	0	0
NICK MARICIO	H									
DIRECTOR	2	X						0	0	0
KIPP NELSON										
DIRECTOR	2	X						0	0	0
ERIN RHEINSC										
DIRECTOR	2	X					L_	0	0	0
LESLIE BENZ					İ					
DIRECTOR	2	X		_		ļ	<u> </u>	0	0	0
HERB THOMAS		1	ł							
DIRECTOR	2	X	<u> </u>	<u> </u>		ļ	<u> </u>	0	0	0
JONATHAN NEE	Ti control of the con									
DIRECTOR	2	X				ļ		0	0	0
JOHN SEILLEF	1							_	_	_
DIRECTOR	2	X		X	<u> </u>		 	0	0	0
GARY BLACK J										_
PRESIDENT	2	↓	<u> </u>	X	<u> </u>	<u> </u>		0	0	0
LORI JOHNSTO				l						•
TREAS/SECR	2	—		X	ļ	 	<u> </u>	0	0	0
RUFUS M BROW		Ì								•
VICE PRES	2	↓		X	_		\vdash	0	0	0
					ł	l				
		-		<u> </u>		<u> </u>				
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		+		_	<u> </u>	\vdash	$\vdash \vdash$			
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	l	L	L			1	ш			

Form 990 (2008)	SUN	VALLEY	SKI	EDUCATION	FOUNDATION	82-0264946

Pai	rt VII Section A	. Officers, Directors, Trus	tees	, Ke	y En	nplo	yees	, an	d Highest Compensated E	Employees (continued)				
	(A) 、 Name and title	(B) Average	\vdash	$\overline{}$	chec		nat ap		(D) Reportable	(E) Reportable		(F) Estimat		
		hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	co or a	amount other ompens from the rganiza and rela rganizate	r ation ne ition ited	
														
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	-													
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	······································					<u> </u>								
											<u></u>			
		-												
1b	Total						<u> </u>							
2	Total number of indivorganization ▶ 0	viduals (including those in 1	a) wh	no re	ceive	ed m	ore t	han	\$100,000 in reportable com	pensation from the			··· •	
3		list any former officer, direc							e, or highest compensated				Yes	No
4	For any individual list	? If "Yes," complete Schedu ted on line 1a, is the sum of related organizations great	repo	ortab	le co	mpe	nsati	ion a	and other compensation from	n uch		3		X
5	individual Did any person listed	d on line 1a receive or accru	е со	mpe	nsati	on fr	om a	any u	unrelated organization for	~ 1		4		<u>x</u>
	services rendered to tion B. Independent	the organization? If "Yes," (comp	olete	Sch	edule	e J fo	or su	ch person			5		<u> </u>
1		for your five highest compen	sate	d inc	lepe	nden	t con	ntrac	tors that received more than	n \$100,000 of			-	
		(A) Name and business address							Descript	(B) ion of services		Com	(C) pensatio	on
		<u> </u>												
											\dashv			-
	_													
		. ,												
2	Total number of inde	pendent contractors (includ	ing t	nose	ın 1) who	rec	eive	d more than \$100,000 in					
DAA	compensation from t	he organization ▶										O Form S	990 (2008)

	rt V	III .Statement of Revenue					
*******	4			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
इ इ	1a	Federated campaigns 1a					012, 010, 01 014
Contributions, gifts, grants and other similar amounts	b	Membership dues 1b					-
s, g	С	Fundraising events 1c 389,	025				Į.
gift; ar	d	Related organizations 1d					1
is, c	e	Government grants (contributions) 1e					
tior	f	All other contributions, grits, grants,					I .
the		and similar amounts not included above 1f 420,	230				
d tr	g		810				
S E	h	Total. Add lines 1a-1f	•	809,255			
ue		Bus	n. Code				
ven	2a	TUITION		689,509	689,509		
Re	b	TRAVEL/TRAINING		581,399	581,399		
vice	С	SKI PASSES		107,465	107,465		
Ser	đ	RACES/EVENTS		65,688	65,688		
am	е	USAA LICENSE/BILLED INC		1,800	1,800		
Program Service Revenue	f	All other program service revenue					
P.	9	Total. Add lines 2a-2f		1,445,861			
	3	Investment income (including dividends, interest, and	I				
		other similar amounts)	>	34,957			34,957
	4	Income from investment of tax-exempt bond proceed	s 🕨				
	5	Royalties	<u> </u>	1,545	1,545	·····	
		(i) Real (ii) Person	al				
		Gross Rents					
	b	Less rental exps					
	C	Rental inc or (loss)			1		1
		Net rental income or (loss) Gross amount from (1) Securities (1) Other					
		sales of assets					
	L	other than inventory 460,104					1
	D	Less cost or other basis & sales exps 801,745					
	_	Basis & sales exps 801, 745 Gain or (loss) -341, 641					
		Net gain or (loss)	•	-341,641	-341,641		1
		Gross income from fundraising events		341,041	341,041		
0	0a	(not including \$ 389,025					
nue		of contributions reported on line 1c)					•
ě		· · · · · · · · · · · · · · · · · · ·	,644				
Other Revenue	ь		,545				
g		Net income or (loss) from fundraising events	•	48,099	48,099		
		Gross income from gaming activities					
			,329				
	b		,644				
	С	Net income or (loss) from gaming activities	•	18,685	18,685		
	10a	Gross sales of inventory, less	_				
		returns and allowances a					
	b	Less cost of goods sold b					
	С	Net income or (loss) from sales of inventory	•				
		Miscellaneous Revenue Bus	n. Code		ĺ		
	11a	INSURANCE CLAIM ON VEHICLE		13,348			13,348
	b	MISC		7,741			7,741
	С	VARIOUS PARTNERSHIPS		-5,380	-5,380		
	d	All other revenue				····	
	е	Total. Add lines 11a-11d	•	15,709			
	12	Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c,					
		9c, 10c, and 11e	>	2,032,470	1,167,169		
							E 990 (2000)

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines Bb. 7(b), Bb, Sb, and 160 of Part VIII. 1 Girls and other assistance to opportments and organizations in the U.S see Part VI, the 21 2 Girls and other assistance to environments and organizations and thoris assistance to environments organizations, and individuals or the U.S see Part VIII. 2 Girls and other assistance to governments and organizations and individuals or the U.S see Part VIII. 3 Girls and other assistance to governments organization, and individuals organization, and individuals organizations, and individuals organizations, and individuals organizations, and individuals organizations, and individuals organizations and values governments. 5 Compensation of current officers, directores, trustees, and they employees permits (see find under section 6458(K)(R)) and permits secretical misercoin 6458(K)(R)) and permits secretical misercoin 6458(K)(R)) and section 640(K) employer contributions; 6 Compensation of current officers, directores, trustees, and the employees permits. 7 Other salties and wages and secretical for expression of the current officers and wages and secretical for expression and wages and secretical for expression and secretical for expression and secretical for expression and secretical for expression and secretical for expression and secretical for expression and secretical for expression and secretical for expression and for		, All other organizations must o				
1 Graits and other assistance to molycomenists and organizations in the US See Part IV, Iven 22 2 Graits and other assistance to endividuals in the US See Part IV, Iven 22 3 Graits and other assistance to governments, organizations, and individuals cutside the US See Part IV, Iven 25 and 16 4 Benefits paid to of for members 5 Compensation of current officient, directions, trustees, and key employees 6 Compensation of current officient, directions, trustees, and key employees 6 Compensation of current officient, directions, trustees, and key employees 7 Compensation of current officient, directions, trustees, and key employees 8 Compensation of current officient, directions, trustees, and key employees 9 Compensation in rectuded above, to dequalified persons, (as defined under section 458(f)(f)) and persons (described in section 458(f)(f)) and persons (described in section 458(f)(f)) and persons (described in section 458(f)(f)) and persons (described in section 458(f)(f)) and persons (described in section 458(f)(f)) and persons (described in section 458(f)(f)) and persons (described in section 458(f)(f)) and persons (described in section 458(f)(f)) and persons (described in section 458(f)(f)) and persons (described in section 458(f)(f)) and persons (described in section 458(f)(f)) and persons (described in section 458(f)(f)) and persons (described in section 458(f)(f)) and persons (described in section 458(f)(f)) and persons (described in section 458(f)(f)) and persons (described in section 458(f)(f)) and persons (described in section 458(f)(f)) and persons (described in section 458(f)(f)) and persons (described in section 458(f)(f) and persons (described in section 458(f) and persons (described in section 458(f)(f) and persons (described in section 45		· · · · · · · · · · · · · · · · · · ·		Program service	Management and	Fundraising
Comparison of the U.S. See Part IV, Ime 21 Contract and the U.S. See Part IV, Ime 22 Contract and the U.S. See Part IV, Ime 23 Contract and the U.S. See Part IV, Ime 24 Contract Con				охроново	ganerar expenses	схрензез
2 Grants and other assistance to midvoduals in the U.S. See Part IV, line 2 is a content of the Company and midvoduals in the U.S. See Part IV, line 15 and 16 4 Bernflis pad to for for members Compansation of current officiens, directions, trustees, and key employees Compansation of current officiens, directions, trustees, and key employees Compansation of midvode above, to disqualified persons (escribed under section 4980f(f)) and persons described in section 4980f(f) and section 4910f(f) and 5910f(f) and 5910f	•					
the U.S. See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 U.S. See Part IV, lines 15 and 16 Bernefits paid to rife members Compensation of current officers, directors, trustees, and key employees 6 Compensation not included above, to desqualfied persons (as defined under section 458(x)(x)) persons described in section 458(x)(x)(x) Payroll taxes 8 Person plan contributions (include section 401(x)) and section 403(y) employer contributions) 11, 310 7, 752 3, 098 460 9 Other employee benefits Payroll taxes 11, 310 7, 752 3, 098 460 10, 823 11, 310 7, 752 3, 098 460 11, 310 11, 310 7, 752 3, 098 460 11, 305 10, 863 6, 451 11, 310 17, 752 10, 863 6, 451 11, 310 17, 752 10, 863 10, 863 11, 965 11, 965 11, 965 11, 965 11, 965 11, 965 12, 967 12, 978 11, 965	2					······
3 Grafts and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 4 Benefits past to or for members 5 Compensation of current officers, directors, trustees, and key employees 6 Compensation of retured sideous, disqualified persons (as defined under section 4956/(1/1) and persons (section of undered sideous, disqualified persons (as defined under section 4956/(1/1) and persons (section directions) and section 402(i) employer contributions) 7 Chief employee benefits 8 Pesson plan contributions (funds section 401(i) and section 402(i) employer contributions) 1 1, 310 7 , 752 3 , 098 460 1 1, 020 , 898 805 , 038 138 , 493 77 , 367 8 Pesson plan contributions (funds section 401(i) and section 402(i) employer contributions) 1 11, 310 7 , 752 3 , 098 460 1 11, 310 7 , 752 3 , 098 460 1 12, 965 1 10, 863 6 , 451 1 Fess for services (pon-employees) 8 2, 419 6 5 , 105 1 10, 863 6 , 451 1 5 , 014 1 1, 965	2			İ		
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U.S. See Part IV, Incs 15 and 16 Benefits pad to or for members Compensation of current officers, directors, trustees, and key employees Compensation of current officers, directors, trustees, and key employees Compensation of current officers, directors, trustees, and key employees Compensation of current officers, directors, trustees, and key employees developing and persons described in section 4958(ff(i)) and persons described in section 4958(ff(i)) and persons described in section 4958(ff(i)) and section 403(i) employer contributions (finde section 401(i)) and section 403(i) employer contributions (include section 401(i)) and section 403(i) employer contributions (include section 401(ii)) and section 403(ii) employer contributions (include section 401(ii)) and section 403(ii) employer contributions (include section 401(ii)) and section 403(iii) employer contributions (include section 401(iii)) and section 403(iiii) and section 403(iiii) and section 403(iiii) and section 403(iiiiiii) and section 403(iiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii	3	· ·				
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6 Compensation not included above, to disqualified persons (as defined under section 498(f(1)) and persons described in section 498(f(1)) and persons described in section 498(f(1)) and persons described in section 498(f(1)) and section 40(t) and section 40(t) employer contributions) 7 Other salaries and wages 8 Pensons plain contributions (include section 401(t) and section 40(t) employer contributions) 9 Clither employee benefits 10 Payroll taxes 8 2, 419 65, 105 10, 863 6, 451 11 Fees for services (non-employees) 8 Management 1 Legal 5, 014 5, 014 1 Legal 5, 014 5, 014 1 Legal 5, 014 5, 014 1 Legal 7, 965 1, 965 1 Lobbying 9 Professional fundraising services See Part IV, line 17 investiment management flees 9, 581 9, 581 9 Other 2 Advertising and promotion 13 Office expenses 28, 342 2, 595 14, 556 11, 191 14 Information technology 15 Royalties 16 Occupancy 8, 9,19 720 8, 118 81 17 Travel 1 Information technology 18 Payments of travel or entertainment expenses for any federal, state, or local public officials or for all public of	Ð	· · · · · · · · · · · · · · · · · · ·				
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and section 403(b) employer contributions) 9 Other employee benefits 10 Payroll taxes 82,419 65,105 10,863 6,451 11 Fees for services (non-employees) a Management b Legal 5,014 5,014 1,965 1,			1,020,898	803,038	130,493	11,301
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22 Depreciation, depletion, and amortization 49,050 25,793 23,257 23 Insurance 53,779 53,779 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) 119,077 119,077 a USE OF RESTRICTED FUNDS 117,564 117,564 117,564 c SKI PASSES 115,800 111,278 2,572 1,950 d PROGRAM EQUIP/SUPPLIES 91,853 90,975 239 639 e HOST COMPETITION 53,856 50,649 1,426 1,781 f All other expenses 167,483 122,897 25,838 18,748 25 Total functional expenses.Add lines 1 through 24f 2,511,569 2,145,448 245,026 121,095 26 Joint Costs. Check here If following SOP 98-2 Complete this line only if the 25,511,569 2,145,448 245,026 121,095		T T T T T T T T T T T T T T T T T T T				
23 Insurance		· · · · · · · · · · · · · · · · · · ·	40.050	05 703	02 057	
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) a USE OF RESTRICTED FUNDS 119,077 119,077 b SCHOLARSHIPS 117,564 117,564 c SKI PASSES 115,800 111,278 2,572 1,950 d PROGRAM EQUIP/SUPPLIES 91,853 90,975 239 639 e HOST COMPETITION 53,856 50,649 1,426 1,781 f All other expenses 167,483 122,897 25,838 18,748 25 Total functional expenses.Add lines 1 through 24f 2,511,569 2,145,448 245,026 121,095 26 Joint Costs. Check here ▶ ☐ if following SOP 98-2 Complete this line only if the		' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '			23,251	
covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below) a USE OF RESTRICTED FUNDS b SCHOLARSHIPS c SKI PASSES d PROGRAM EQUIP/SUPPLIES e HOST COMPETITION f All other expenses Total functional expenses.Add lines 1 through 24f 25 Joint Costs. Check here □ if following SOP 98-2 Complete this line only if the	23	Insurance	23,119	55,119		
covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below) a USE OF RESTRICTED FUNDS b SCHOLARSHIPS c SKI PASSES d PROGRAM EQUIP/SUPPLIES e HOST COMPETITION f All other expenses Total functional expenses.Add lines 1 through 24f 25 Joint Costs. Check here □ if following SOP 98-2 Complete this line only if the			!		1	
and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below) a USE OF RESTRICTED FUNDS b SCHOLARSHIPS c SKI PASSES d PROGRAM EQUIP/SUPPLIES e HOST COMPETITION f All other expenses 25 Total functional expenses. Add lines 1 through 24f 26 Joint Costs. Check here interval in the process of the process	24	· · · · · · · · · · · · · · · · · · ·	1		•	
5% of total expenses shown on line 25 below) a USE OF RESTRICTED FUNDS b SCHOLARSHIPS c SKI PASSES d PROGRAM EQUIP/SUPPLIES e HOST COMPETITION f All other expenses 25 Total functional expenses. Add lines 1 through 24f 26 Joint Costs. Check here □ if following SOP 98-2 Complete this line only if the		ı			1	
a USE OF RESTRICTED FUNDS 119,077 119,077 1 b SCHOLARSHIPS 117,564 117,564 1 c SKI PASSES 115,800 111,278 2,572 1,950 d PROGRAM EQUIP/SUPPLIES 91,853 90,975 239 639 e HOST COMPETITION 53,856 50,649 1,426 1,781 f All other expenses 167,483 122,897 25,838 18,748 25 Total functional expenses.Add lines 1 through 24f 2,511,569 2,145,448 245,026 121,095 26 Joint Costs. Check here □ if following SOP 98-2 Complete this line only if the		·	1		1	
b SCHOLARSHIPS c SKI PASSES d PROGRAM EQUIP/SUPPLIES e HOST COMPETITION f All other expenses 25 Total functional expenses. Add lines 1 through 24f 26 Joint Costs. Check here □ if following SOP 98-2 Complete this line only if the		· · ·	110 077	110 077		
c SKI PASSES 115,800 111,278 2,572 1,950 d PROGRAM EQUIP/SUPPLIES 91,853 90,975 239 639 e HOST COMPETITION 53,856 50,649 1,426 1,781 f All other expenses 167,483 122,897 25,838 18,748 25 Total functional expenses.Add lines 1 through 24f 2,511,569 2,145,448 245,026 121,095 26 Joint Costs. Check here		F				
d PROGRAM EQUIP/SUPPLIES 91,853 90,975 239 639 e HOST COMPETITION 53,856 50,649 1,426 1,781 f All other expenses 167,483 122,897 25,838 18,748 25 Total functional expenses.Add lines 1 through 24f 2,511,569 2,145,448 245,026 121,095 26 Joint Costs. Check here ▶ ☐ If following SOP 98-2 Complete this line only if the	b	<u>-</u>			0 570	1 050
e HOST COMPETITION 53,856 50,649 1,426 1,781 f All other expenses 167,483 122,897 25,838 18,748 25 Total functional expenses.Add lines 1 through 24f 2,511,569 2,145,448 245,026 121,095 26 Joint Costs. Check here	_					
f All other expenses 167,483 122,897 25,838 18,748 25 Total functional expenses.Add lines 1 through 24f 2,511,569 2,145,448 245,026 121,095 26 Joint Costs. Check here SOP 98-2 Complete this line only if the If following solve this line only if the 167,483 122,897 25,838 18,748	d	· · · · · · · · · · · · · · · · · · ·				
25 Total functional expenses. Add lines 1 through 24f 2,511,569 2,145,448 245,026 121,095 26 Joint Costs. Check here ▶ ☐ if following SOP 98-2 Complete this line only if the	0	<u>†</u>				
26 Joint Costs. Check here ▶ ☐ If following SOP 98-2 Complete this line only if the	f	·				
SOP 98-2 Complete this line only if the	<u>25</u>		2,511,569	2,145,448	245,026	121,095
from a combined educational campaign and	26	SOP 98-2 Complete this line only if the organization reported in column (B) joint costs				
fundraising solicitation		fundraising solicitation			<u> </u>	

<u> P</u>	art)	C Balance Sheet							
		•		(A) Beginning of year		(B) End of			
	1	Cash—non-interest bearing		100	1		13'		
	2	Savings and temporary cash investments		118,286	2	Ş	96,93		
	3	Pledges and grants receivable, net			_3				
	4	Accounts receivable, net		61,176	4		32,790		
	5	Receivables from current and former officers, directors, tru	istees, key						
		employees, or other related parties. Complete Part II of Sc	hedule L		5				
	6	Receivables from other disqualified persons (as defined ur	nder section						
		4958(f)(1)) and persons described in section 4958(c)(3)(B)	E .						
		Part II of Schedule L	·		6	ļ			
S	7	Notes and loans receivable, net			7				
set	8	Inventories for sale or use	Γ		8				
Assets	9	Prepaid expenses and deferred charges			9				
	10a	Land, buildings, and equipment cost basis	10a 1,414,883						
	Ь	Less accumulated depreciation Complete							
		Part VI of Schedule D	10b - 785,885	678,048	10c	62	28,998		
	11	Investments—publicly traded securities		1,328,981	11		34,448		
	12	Investments—other securities See Part IV, line 11			12				
	13	Investments—program-related See Part IV, line 11			13				
	14	Intangible assets	Γ		14				
	15	Other assets See Part IV, line 11			15				
	16	Total assets. Add lines 1 through 15 (must equal line 34)		2,186,591	16	1,59	3,304		
	17	Accounts payable and accrued expenses		1,485	17		5,142		
	18	Grants payable			18				
	19	Deferred revenue			19				
	20 Tax-exempt bond liabilities 20								
es	21	Escrow account liability Complete Part IV of Schedule D			21				
Liabilities	22	Payables to current and former officers, directors, trustees	, key						
abi		employees, highest compensated employees, and disquali	fied		1				
Ï		persons Complete Part II of Schedule L			22				
	23	Secured mortgages and notes payable to unrelated third pa	arties		23				
	24	Unsecured notes and loans payable			24				
	25	Other liabilities Complete Part X of Schedule D			25				
	26	Total liabilities. Add lines 17 through 25		1,485	26		5,142		
ces		Organizations that follow SFAS 117, check here ▶	and		I				
ဋ		complete lines 27 through 29, and lines 33 and 34.			1				
Balan	27	Unrestricted net assets	L		27				
ã	28	Temporanly restricted net assets	<u>_</u>		28				
Fund	29	Permanently restricted net assets			29	·····			
Ē		Organizations that do not follow SFAS 117, check here	▶ 🗷		I				
ō		and complete lines 30 through 34.			I				
Š	30	Capital stock or trust principal, or current funds			30				
Net Assets	31	Paid-in or capital surplus, or land, building, or equipment fu	ind		31				
As	32	Retained earnings, endowment, accumulated income, or of	ther funds	2,185,106	32		8,162		
et	33	Total net assets or fund balances	_	2,185,106	33		8,162		
z	34	Total liabilities and net assets/fund balances		2,186,591	34	1,59	3,304		
P	art >	Financial Statements and Reporting		·					
						<u></u>	Yes No		
1	Ac	counting method used to prepare the Form 990 🔃 Ca	esh 🗶 Accrual 📗 Othe	er					
28		ere the organization's financial statements compiled or review	· ·	•		2a	X		
b		ere the organization's financial statements audited by an inde				2b	X		
C		Yes" to lines 2a or 2b, does the organization have a committ							
		e audit, review, or compilation of its financial statements and	•			2c			
32		a result of a federal award, was the organization required to	undergo an audit or audits as set for	orth in			ĺ		
		Single Audit Act and OMB Circular A-133?				3a			
<u>t</u>	lf"	Yes," did the organization undergo the required audit or audi	ts?			3b	l		

SCHEDULE A (Form 990 or 990-EZ)

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.

OMB No 1545-0047

2008

Open to Public-Inspection

Employer Identification number

Department of the Treasury Internal Revenue Service

Name of the organization

1 2

3

SUN VALLEY SKI EDUCATION FOUNDATION

A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). (Attach Schedule H)

A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).

The organization is not a private foundation because it is (Please check only one organization)

A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)

INC 82-0264946
Reason for Public Charity Status (All organizations must complete this part.) (see instructions)

4	Ш		· ·	in conjunction with a nospital de	scribea in	section	170(0)(1)(A)(III).	Entert	ne nosp	iitai's name,		
-	\Box	city, and state		fo college or unwersely surped o		l bu o oou		ما سمنا ما	oo or bo	d in			
5	Ш	•	on operated for the benefit of b)(1)(A)(iv). (Complete Part I	f a college or university owned or II)	operated	i by a gov	emment	ai uriit oi	escriber	u 111			
6	\Box			vernmental unit described in sec	tion 170	(b)(1)(A)(/).						
7	П		=	ubstantial part of its support from				n the ae	neral p	ublic			
	ш	•	section 170(b)(1)(A)(vi). (Co		.								
8	\Box			70(b)(1)(A)(vi). (Complete Part II)								
9	X	,		more than 33 1/3 % of its suppo	•	ontribution	s memb	ershin f	ees an	d aross			
,	الت	•	•	ot functions—subject to certain e						-			
		•	·	d unrelated business taxable inco	•								
		• •	•	, 1975 See section 509(a)(2). (•			0.11 000					
10	\Box		· ·	xclusively to test for public safety	•	•	a)(4) (s	ee instri	ictions)				
11	H	•	•	xclusively for the benefit of, to pe		-			-				
• •		•	•	d organizations described in sec				•		ction			
				e type of supporting organization	•								
		a Type		c Type III–Functions			d d		 e III–Oi	ther			
е	\Box		L. ,,	inization is not controlled directly						ario.			
•		, ,	•	and other than one or more public				•		ction			
		•	ection 509(a)(2)	ma carer aran erre er mere pas.	or, capper	tou organ							
f			` ` ` `	mination from the IRS that it is a	Tyne I Ty	vne II or	Type III s	upportir	าต				
•		•	check this box		1,400 1, 1	, po, o.	, ypo c	орроги	.9				
~		_		on accepted any gift or contributi	on from a	ny of the							Ш
g		following pen	. ,	on accepted any girt of continuati	on nom a	ily or the							
		٠.		ntrols, either alone or together wi	th nerson	e deecmbe	ed in (ii)					Yes	No
			pelow, the governing body of	· · ·	tii personi	3 00301100	()				11g(ı)	163	140
		• •	member of a person describe	• • •							11g(ii)		
			ontrolled entity of a person de	• •							11g(iii)		
h			• •	e organizations the organization	eunnorte						(1.19(1.1)		
					,	 	T 7.27		1				
(i)		e of supported anization	(ii) EIN	(iii) Type of organization (described on lines 1–9	1 ' '	organization sted in your	, , ,	ou notify nzation in	. , ,	Is the tion in col	(viı) Amo supp		
	Uig	a neaton		above or IRC section		document?	col (i)			ized in the	5426	.	
				(see instructions))				oort?		S?			
					Yes	No	Yes	No	Yes	No			
					<u> </u>				 				
				· · · · · · · · · · · · · · · · · · ·	 			_	1-				
				L	L				L	I			

Schedule A (Form 990 or 990-EZ) 2008

Pa	Itt II Support Schedule for Or (Complete only if you cho				1)(A)(iv) and 1	70(b)(1)(A)(vi	i)
Sec	tion A. Public Support		<u> </u>		 		
	lendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1-3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4		<u> </u>			<u> </u>	
Sec	tion B. Total Support						
Ca	lendar year (or fiscal year beginning in)▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11	Total support. Add lines 7 through 10	L	I			L	
12	Gross receipts from related activities, etc (
13	First five years. If the Form 990 is for the o	-	second, third, fourt	h, or fifth tax year a	s a section 501(c)(3)	. □
<u> </u>	organization, check this box and stop here						<u> </u>
	tion C. Computation of Public Su						.
14	Public support percentage for 2008 (line 6,		=	(f))		14	
15	Public support percentage from 2007 Sche					15	5 %
16a	33 1/3 % support test—2008. If the organi			3, and line 14 is 33	1/3 % or more, che	ck this box	. ┌
	and stop here. The organization qualifies a		•				▶
b	33 1/3 % support test—2007. If the organi				s 33 1/3 % or more	e, check this	, г
	box and stop here. The organization qualif	· · ·					▶ [
17a	10%-facts-and-circumstances test—200	8. If the organizatio	n did not check a b	ox on line 13, 16a,	or 16b, and line 14	ıs 10% or	
	more, and if the organization meets the "fac	cts-and-circumstan	ces" test, check this	s box and stop her	e. Explain in Part I\	/ how the	
	organization meets the "facts-and-circumst	ances" test. The or	ganızatıon qualıfies	as a publicly suppo	orted organization		▶ [
b	10%-facts-and-circumstances test-200						
	more, and if the organization meets the "fac					/ how the	
	organization meets the "facts-and-circumst	ances" test. The or	ganızatıon qualıfies	as a publicly suppo	orted organization		▶
18	Private foundation. If the organization did	not check a box or	line 13, 16a, 16b,	17a, or 17b, check	this box and see in	structions	▶ L

SUN VALLEY SKI EDUCATION FOUNDATION 82-0264946

Schedule A (Form 990 or 990-EZ) 2008

Page 2

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.)

	tion A. Public Support	T T					
Ca	lendar year (or fiscal year beginning in)►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	727,108	1,129,299	949,068	853,203	772,445	4,431,123
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	907,043	1,020,571	1,007,316	1,074,947	1,685,834	5,695,711
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1-5	1,634,151	2,149,870	1,956,384	1,928,150	2,458,279	10,126,834
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons	245,799	118,078	102,627	114,875	96,328	677,707
b	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, 10c, 11, and 12 for the year or \$5,000						
С	Add lines 7a and 7b	245,799	118,078	102,627	114,875	96,328	677,707
8	Public support (Subtract line 7c from	1,388,352	2,031,792	1,853,757	1,813,275	2,361,951	
	line 6)	<u> </u>				1	9,449,127
	tion B. Total Support lendar year (or fiscal year beginning in)▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9	Amounts from line 6	1,634,151	2,149,870	1,956,384	1,928,150	2,458,279	10,126,834
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	34,335	59,933	71,724	63,274	34,957	264,223
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b	34,335	59,933	71,724	63,274	34,957	264,223
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)					17,254	17,254
13	Total support. (Add lines 9, 10c, 11,	1,668,486	2,209,803	2,028,108	1,991,424	2,510,490	
	and 12)	<u> </u>					10,408,311
14	First five years. If the Form 990 is for the c	-	econd, third, fourth	, or fifth tax year as	s a section 501(c)(3	3)	. □
500	organization, check this box and stop here tion C. Computation of Public Su		70				▶
	Public support percentage for 2008 (line 8,			<u> </u>		15	90.7844 %
15 16	Public support percentage from 2007 Scher			"		16	89.8771 %
	tion D. Computation of Investmen					, 19	03.07,1 /0
17	Investment income percentage for 2008 (lin			olumn (f))	 -	17	2.5386 %
18	Investment income percentage from 2007 S					18	2.6522 %
19a	33 1/3 % support tests—2008. If the organ			4, and line 15 is mo	ore than 33 1/3 %, a	and line	
	17 is not more than 33 1/3 %, check this bo						► X
b	33 1/3 % support tests—2007. If the organ	nization did not check	k a box on line 14 o	or line 19a, and line	16 is more than 3	3 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

Private foundation. If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2008 SUN VALLEY SKI EDUCATION FOUNDATION 82-0264946

Page 4

Supplemental Information. Complete this part to provide the explanation required by Part II, line 10, Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. (see instructions)

PART III, LINE 12 - OTHER INCOME DETAIL

\$

17,254

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. OMB No 1545-0047

Open to Public Inspection

	of the organization	Employer identification number					
	UN VALLEY SKI EDUCATION FOUNDATION NC		82-0	26494	6		
Pa	rt I Organizations Maintaining Donor Advised Fun the organization answered "Yes" to Form 990, I	ds or Other Similar Funds or Acc Part IV, line 6.	ounts	. Comp	lete if		
		(a) Donor advised funds	(t) Funds and	other ac	count	s
1	Total number at end of year						
2	Aggregate contributions to (during year)						
3	Aggregate grants from (dunng year)						
4	Aggregate value at end of year						
5	Did the organization inform all donors and donor advisors in writing that	the assets held in donor advised					_
	funds are the organization's property, subject to the organization's exclu	sive legal control?			Yes	L	No
6	Did the organization inform all grantees, donors, and donor advisors in w	riting that grant funds may be					
	used only for charitable purposes and not for the benefit of the donor or	donor advisor or other				_	_
	ımpermissible private benefit?				Yes		No
Pa	rt II Conservation Easements. Complete if the organic	anization answered "Yes" to Form	990, F	Part IV, lir	ne 7.		
1	Purpose(s) of conservation easements held by the organization (check a	ill tha <u>t a</u> pply)					
	Preservation of land for public use (e.g., recreation or pleasure)	Preservation of an historically impor	tant lan	d area			
	Protection of natural habitat	Preservation of certified historic stru	cture				
	Preservation of open space						
2	Complete lines 2a-2d if the organization held a qualified conservation co	ntribution in the form of a conservation easer	nent				
	on the last day of the tax year		·····	,	_		
				Held at ti	ne End	of th	e Year
а	Total number of conservation easements		2a	<u> </u>			
b	Total acreage restricted by conservation easements		2b				
C	Number of conservation easements on a certified historic structure include	ded in (a)	2c	ļ			
d	Number of conservation easements included in (c) acquired after 8/17/00		2d			_	
3	Number of conservation easements modified, transferred, released, extil	nguished, or terminated by the organization d	unng				
	the taxable year						
4	Number of states where property subject to conservation easement is lo	cated					
5	Does the organization have a written policy regarding the periodic monitor	oring, inspection, violations, and				_	1
	enforcement of the conservation easements it holds?	_		□,	Yes	L	No
6	Staff or volunteer hours devoted to monitoring, inspecting, and enforcing						
7	Amount of expenses incurred in monitoring, inspecting, and enforcing ea	· · · · · · · · · · · · · · · · · · ·					
8	Does each conservation easement reported on line 2(d) above satisfy the	e requirements of section		П.		Г	1
	170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?			` ∪ '	Yes		No
9	In Part XIV, describe how the organization reports conservation easeme	•					
	balance sheet, and include, if applicable, the text of the footnote to the or	ganization's financial statements that describ	es				
	the organization's accounting for conservation easements In the Organizations Maintaining Collections of Art, I	Historical Tracquires, or Other Sim	ilor A				
P a	rt III Organizations Maintaining Collections of Art, I Complete if the organization answered "Yes" to		iiai A				
	If the organization elected, as permitted under SFAS 116, not to report in	ute revenue etatement and halance cheet	rke of				
ıd	art, historical treasures, or other similar assets held for public exhibition,			e.			
	provide, in Part XIV, the text of the footnote to its financial statements that	·		- ,			
	provide, in a larger, the text of the rectified to the inflation determine the						
h	If the organization elected, as permitted under SFAS 116, to report in its	revenue statement and balance sheet works	of art				
~	historical treasures, or other similar assets held for public exhibition, edu						
	provide the following amounts relating to these items	control of public of	,				
	(i) Revenues included in Form 990, Part VIII, line 1		•	· \$			
	(ii) Assets included in Form 990, Part X		•	· •			
2	If the organization received or held works of art, historical treasures, or o	ther similar assets for financial gain, provide t	he	- -			
-	following amounts required to be reported under SFAS 116 relating to the						
а	Revenues included in Form 990, Part VIII, line 1	soc north	•	· \$			
a h	Assets included in Form 990, Part X		_	· s — —			

		Y SKI EDUCATI				64946			Page 2				
Pa	rt III .Organizations Maintaining	Collections of Art, H	istorical Treas	ıres, or	Other Si	<u>imilar Asset</u>	ts (cor	tinuec	<u>l) </u>				
3	Using the organization's accession and other items (check all that apply)	records, check any of the fo	llowing that are a sig	inificant us	e of its coll	ection							
а	Public exhibition	d 🗌 Loan o	r exchange program	ıs									
b	Scholarly research	e Other	• • •										
C	Preservation for future generations	_				· ·	_						
4	Provide a description of the organization's coll Part XIV	ections and explain how the	y further the organiz	ation's ex	empt purpo	se in							
5	During the year, did the organization solicit or assets to be sold to raise funds rather than to				ar		Yes	Γ	No				
Pa	rt IV Trust, Escrow and Custodi				answere	d "Yes" to F							
	Part IV, line 9, or reported a	-			41.01.010		0	,					
12	Is the organization an agent, trustee, custodial				 t								
Ia	-	To other intermediary for c	ontributions of other	a33613 110	•		Yes	Г	No				
h	— — — — — — — — — — — — — — — — — — —												
D	b If "Yes," explain the arrangement in Part XIV and complete the following table Amount												
_	December helenes					10	7 4 7	iouni					
	Beginning balance					1c							
	Additions during the year					1d							
е	Distributions during the year					1e							
f	Ending balance					[1f]_	$\overline{}$		т				
	a Did the organization include an amount on Form 990, Part X, line 21?												
	b If "Yes," explain the arrangement in Part XIV Part V Endowment Funds. Complete if organization answered "Yes" to Form 990, Part IV, line 10.												
Pa	rt V Endowment Funds. Comp												
		(a) Current year	(b) Pnor year	(c) Two y	ears back	(d) Three years	back (e)	Four yea	ars back				
1a	Beginning of year balance	1,328,981											
b	Contributions												
C	Investment earnings or losses	-441,433	**************************************			····			.,				
d	Grants or scholarships	53,100											
е	Other expenditures for facilities						- 1						
	and programs												
f	Administrative expenses												
g	End of year balance	834,448											
2	Provide the estimated percentage of the year	end balance held as											
а	Board designated or quasi-endowment _	%											
	Permanent endowment ▶ 100.00 %												
С	Term endowment ▶%												
3a	Are there endowment funds not in the possess	sion of the organization that	are held and admini	stered for t	he								
	organization by						_	Ye	s No				
	(i) unrelated organizations						3	a(i)	X				
	(ii) related organizations							ı(ii)	X				
b	If "Yes" to 3a(ii), are the related organizations	listed as required on Schedi	ıle R?					ВЬ	1				
4	Describe in Part XIV the intended uses of the	·					<u> </u>						
Pa	rt VI Investments—Land, Buildi			. Part X	line 10.								
	Description of investment	(a) Cost or other basis (investment)	(b) Cost or oth	er		preciation	(d)	Book valu	e				
		(massinent)						2 E	000				
	Land			,000		200 040			,000				
	Buildings		549	<u>, 435</u>	<u>-</u>	290,049		229	<u>,386</u>				
	Leasehold improvements		F00	440		40E 036		2.4	616				
	Equipment		530	,448		495,836			<u>,612</u>				
	Other	<u> </u>	1				_	<u> </u>	000				
otal	. Add lines 1a-1e (Column (d) should equal Fo	rm 990, Part X, column (B),	line 10(c))			<u> </u>		<u>6∠8</u>	<u>,998</u>				

Schedule D (Form 990) 2008 SUN VALLEY SKI EDUCAT		82-0264946	Page 3
Part VII Investments—Other Securities. See Form 990			
(a) Description of security or category	(b) Book value	(c) Method of	valuation
(including name of security)		Cost or end-of-year	r market value
Financial derivatives and other financial products		<u>-</u>	
Closely-held equity interests		· · · · · · · · · · · · · · · · · · ·	
Other			
			·
			
		·	

		. <u>.</u>	
			······································
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)			
Part VIII Investments—Program Related. See Form 990			<u> </u>
(a) Description of investment type	(b) Book value	(c) Method of	
		Cost or end-of-yea	r market value
			
		-	
		····	
	· · · · · · · · · · · · · · · · · · ·		
			
			·····
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)	<u> </u>		
Part IX Other Assets. See Form 990, Part X, line 15.		· · · · · · · · · · · · · · · · · · ·	
(a) Description			(b) Book value
			· · · · · · · · · · · · · · · · · · ·
		-	
Total. (Column (b) should equal Form 990, Part X, col (B) line 15)			
Part X Other Liabilities. See Form 990, Part X, line 25			
(a) Description of liability	(b) Amount	······································	
	(b) Amount		
Federal income taxes			
<u> </u>			
	 		
Total. (Column (b) should equal Form 990, Part X, col (B) line 25)			·
in Part XIV, provide the text of the footnote to the organization's financial statem	nents that reports the organiza	ation's liability for	
uncertain tax positions under FIN 48			

Sche	Schedule D (Form 990) 2008 SUN VALLEY SKI EDUCATION FOUNDATION 82-0264946 Page 4										
Pa	art XI · Reconciliation of Change in Net Assets from Form 990 to F	inan	cial Statements								
1	'Total revenue (Form 990, Part VIII, column (A), line 12)			1							
2	Total expenses (Form 990, Part IX, column (A), line 25)			2							
3	Excess or (deficit) for the year Subtract line 2 from line 1			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 per financial statements. Combine lines 3 and 9			10							
Pa	rt XII Reconciliation of Revenue per Audited Financial Statement	ts Wi	th Revenue per Retu	rn							
1	Total revenue, gains, and other support per audited financial statements			1							
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12										
а	Net unrealized gains on investments	2a]							
b	Donated services and use of facilities	2b									
C	Recoveries of prior year grants	2c									
d	Other (Describe in Part XIV)	2d	<u> </u>								
е	Add lines 2a through 2d			_2e							
3	Subtract line 2e from line 1		,	_3							
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	l									
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a									
b	Other (Describe in Part XIV)	4b	L								
C	Add lines 4a and 4b			4c							
5	Total revenue Add lines 3 and 4c. (This should equal Form 990, Part 1, line 12)			_5							
Pa	Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return										
1	Total expenses and losses per audited financial statements			1							
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		•								
а	Donated services and use of facilities	2a									
b	Prior year adjustments	2b									
C	Losses reported on Form 990, Part IX, line 25	2c									
d	Other (Describe in Part XIV)	2d									
e	Add lines 2a through 2d			2е							
3	Subtract line 2e from line 1	1	1	3							
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:										
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a									
þ	Other (Describe in Part XIV)	4b									
С	Add lines 4a and 4b			4c							
	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)			5							
	rt XIV Supplemental Information										
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines		4, Part IV, lines 1b								
	2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and										
	<u>PART V, LINE 4 - INTENDED USES FOR ENDOWMENT</u>	. FU	<u>мрз</u>	· <u> </u>							
	SCHOLARSHIPS				•						
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Schedule [(For	m 990)	2008		SU	1 1	IAV	LLE	Y_	SI	<u>II</u>	ED	UC	ATI	ON	F	OUI	ND	AT.	101	4	<u>82-</u>	<u>-02</u>	64	94(<u> </u>						Page 5
Schedule [Part XI	٧ .	Supp	leme	enta	<u>l In</u>	forr	nat	ion	(co	ntını	ued)																					
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				_	_	_	_	_		_					_			_	_				_	_	_			_				

SCHEDULE G (Form 990 or 990-EZ) Supplemental Information Regarding Fundraising or Gaming Activities

Attach to Form 990 or Form 990-EZ. Must be completed by organizations that answer "Yes" to Form 990, Part IV, lines 17, 18, or 19, and by organizations that enter more than \$15,000 on Form 990-EZ, line 6a.

OMB No 1545-0047

2008

Open To Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

SUN VALLEY SKI EDUCATION FOUNDATION

THE

Employer identification number 82-0264946

	7110						02 02033	7-3-0
Part I	Fundraising Activities.	Complete if the	organizatio	n ar	nswe	ered "Yes" to Form	n 990, Part IV, line	e 17.
a	Mail solicitations Email solicitations Phone solicitations In-person solicitations Ithe organization have a written or orakey employees listed in Form 990, Par Yes," list the ten highest paid individuate compensated at least \$5,000 by the	e f g l agreement with any t VII) or entity in conn ls or entities (fundrais	Solicitation of Solicitation of Special fund individual (incleation with proess) pursuant t	of nor of gov raisir uding fession	rernm og eve office onal fi	ernment grants ent grants ents ers, directors, trustees undraising services? ents under which the fur	ndraiser is ole	Yes No
	(i) Name of individual or entity (fundraiser)	(in Activity	(iii) Did raiser custo contr contrib	have dy or ol of	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
				Yes				
-								
Total					▶			

Page 2

P	art I				anization answered "Yes 6a. List events with gros				eporte	ed
		more and the	BILL J	Event #1 IANSS PRO ent type)	(b) Event #2 WILD GAME DINN (event type)	(c) (Other Events	(d) Tot (Add col	al Eventa (a) thro	
Revenue	1	Gross receipts		296,825	283,1	20	26,724		606,	669
	2	Less Chantable contributions		248,895	140,1	30			389,	025
	3	Gross revenue (line 1 minus line 2)		47,930	142,9	90	26,724		217,	644
	4	Cash prizes								
ses	5	Non-cash prizes								
Direct Expenses	6	Rent/facility costs								
Direct	7	Other direct expenses		113,263	52,6	38	3,644		169,	545
	8 9	Direct expense summary Net income summary Co	mbine lines 3	and 8 in column (d)			>			545 099
P:	art I	Gaming. Complete than \$15,000 c			swered "Yes" to Form 99	0, Part IV, li	ine 19, or repo	rted more	•	
Revenue			(a	a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) C	Other gaming	(d) Total g		
Rev	1	Gross revenue					22,329		22,	329
ses	2	Cash prizes						<u> </u>		
Direct Expenses	3	Non-cash prizes					2,237	_	2,	237
Direct	4	Rent/facility costs								
	5	Other direct expenses	1				1,407	•••••	1,	407
	6	Volunteer labor	X No	%	Yes % X No	X Yes	90.00 %			
	7	Direct expense summary	Add lines 2 th	rough 5 in column (d	1)		▶ (3,	644
	8	Net gaming income summ	nary Combine	lines 1 and 7 in colu	mn (d)		•		18,	685
9 a		ter the state(s) in which the	=	-				9a	Yes	No
b	if "	No," Explain								
10a b		ere any of the organization' Yes," Explain	s gaming licens	ses revoked, susper	ded or terminated during the tax	year?		10a		x
11		es the organization operate						11		х
12		the organization a grantor, med to administer chantab	•	rustee of a trust or a	member of a partnership or other	er entity		12		х
							Schedule G (Fo	orm 990 or	990-EZ)	2008

Sche	dule G (Form 990 or 990-EZ) 2008 SUN VALLEY SKI EDUCATION FOUNDAT	ION	82-026494	6	P	age 3
			•		Yes	No
13 a b 14	Indicate the percentage of gaming activity operated in The organization's facility An outside facility Provide the name and address of the person who prepares the organization's gaming/special events books and records	13a 13b	+			
	Name ► SUN VALLEY SKI EDUCATION FOUNDATION P.O. BOX 233 Address ► SUN VALLEY	ID	83353			
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?		;	15a		x
b c	If "Yes," enter the amount of gaming revenue received by the organization ▶ amount of gaming revenue retained by the third party ▶ \$ If "Yes," enter name and address	and ¹	the			
	Name ►					
	Address ►					
16	Gaming manager information					
	Name ► KATE BERMAN					
	Gaming manager compensation ▶ \$ -은					
	Description of services provided ▶ OVERSIGHT					
	Director/officer		į			
17	Mandatory distributions				Ī	
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to				Ī	
	retain the state gaming license?			17a	X	
b	Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ 16,816					

Schedule G (Form 990 or 990-EZ) 2008

SCHEDULE M (Form 990).

NonCash Contributions

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

orm 990. Open To Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

SUN VALLEY SKI EDUCATION FOUNDATION INC

Employer identification number 82-0264946

OMB No 1545-0047

P#	rt I Types of Property							
·	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(a)	(b)	(c)	(d)		-	
		Check if	Number of Contributions	Revenues reported on	Method of determini	ng		
		applicable		Form 990, Part VIII, line 1g	revenues	•		
1	Art—Works of art							
2	Art—Historical treasures							
3	Art—Fractional interests							
4	Books and publications						-	
5	Clothing and household							
Ŭ	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)							
14	Qualified conservation							
• •	contribution (other)							
15	Real estate—Residential							
16	Real estate—Commercial	-						
17	Real estate—Other							
18	Collectibles							
19	Food inventory	х	1	11,160				
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other ▶(SUNGLASSES)	х	1	18,000	,			
26	Other ► (WINE)	Х	1	7,650				
27	Other ▶ (
28	Other ►(
29	Number of Forms 8283 received by the	ne organiza	ition during the tax year fo	or contributions for				
	which the organization completed For	m 8283, Pa	art IV, Donee Acknowledg	gement	29 0			
							Yes	No
30a	During the year, did the organization i	receive by	contribution any property	reported in Part I, lines 1-28	3 that			Γ
	it must hold for at least three years from	om the date	of the initial contribution.	and which is not required to	o be			
	used for exempt purposes for the enti-	re holding	penod?			30a		X
b	If "Yes," describe the arrangement in							
31	Does the organization have a gift acc		licy that requires the revi	ew of any non-standard				ĺ
	contributions?	-		-		31	X	<u></u>
32a	Does the organization hire or use thire	d parties or	related organizations to	solicit, process, or sell non-	cash			
	contributions?	•	-			32a		X
b	If "Yes," describe in Part II							
33	If the organization did not report rever	nues in coli	ımn (c) for a type of prop	erty for which column (a) is	checked,			ĺ
	describe in Part II		<u> </u>					<u> </u>

Schedule M (Form 990) 2008

Page 2

Form 990) 2008 SUN VALLEY SKI EDUCATION FOUNDATION 82-0264946

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

SCHEDULE O

(Form 990)

Supplemental Information to Form 990

OMB No 1545-0047

Inspection

ZUUOOpen to Public

Department of the Treasury Internal Revenue Service ► 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.

Name of the organization

SUN VALLEY SKI EDUCATION FOUNDATION

INC

Employer identification number 82-0264946

FORM 990 - ORGANIZATION'S MISSION OR MOST SIGNIFICANT ACTIVITIES
LEVELS, REGARDLESS OF EACH PARTICIPANT'S ECONOMIC LEVEL.

THE PRIMARY GOAL OF THE PROGRAM IS TO ASSIST EACH

PARTICIPANT IN REACHING HIS/HER DESIRED ATHLETIC AND

ACADEMIC POTENTIAL, WHILE DEVELOPING THE LIFELONG SKILLS OF

GOAL-SETTING, SELF-DISCIPLINE, SPORTSMANSHIP, AND TIME

MANAGEMENT.

FORM 990, PART III, LINE 4D - ALL OTHER ACHIEVEMENTS
OTHER VARIOUS ACADEMIC AND OLYMPIC DEVELOPMENT PROGRAMS

FORM 990, PART VI, LINE 10 - ORGANIZATION'S PROCESS USED TO REVIEW FORM 990
THE RETURN IS REVIEWED BY THE FINANCE COMMITTEE AFTER IT IS PREPARED AND
THEN IT IS PRESENTED TO THE BOARD.

SCH G, PART III, LINE 17B - REQUIRED DISTRIBUTIONS PER STATE LAW

STATE DISTRIBUTION AMOUNT

IDAHO

\$ 16,816

Form **4562**

Department of the Treasury Internal Revenue Service

Depreciation and Amortization

(Including Information on Listed Property)

OMB No 1545-0172 2008

achment 6

Name(s) shown on return

See separate instructions. Attach to your tax return.

SUN VALLEY SKI EDUCATION FOUNDATION INC

Identifying number 82-0264946

Business or activity to which this form relates INDIRECT DEPRECIATION **Election To Expense Certain Property Under Section 179** Part I Note: If you have any listed property, complete Part V before you complete Part I. 250,000 Maximum amount. See the instructions for a higher limit for certain businesses. Total cost of section 179 property placed in service (see instructions) 2 2 800,000 3 Threshold cost of section 179 property before reduction in limitation (see instructions) 4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-Dollar limitation for tax year Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions 5 (a) Description of property (b) Cost (business use only) (c) Elected cost 6 7 7 Listed property Enter the amount from line 29 8 8 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 9 Tentative deduction Enter the smaller of line 5 or line 8 9 10 Carryover of disallowed deduction from line 13 of your 2007 Form 4562 10 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 11 12 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11 12 13 Carryover of disallowed deduction to 2009 Add lines 9 and 10, less line 12 13 Note: Do not use Part II or Part III below for listed property. Instead, use Part V Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.) Part II Special depreciation allowance for qualified property (other than listed property) placed in service 14 during the tax year (see instructions) 14 Property subject to section 168(f)(1) election 15 16,616 16 Other depreciation (including ACRS) MACRS Depreciation (Do not include listed property.) (See instructions.) Part III 32, 434 17 MACRS deductions for assets placed in service in tax years beginning before 2008 17 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B—Assets Placed in Service During 2008 Tax Year Using the General Depreciation System (b) Month and (c) Basis for depreciation d) Recovery (a) Classification of property year placed in (business/investment use (e) Convention (f) Method (q) Depreciation deduction period service only-see instructions) 19a 3-year property b 5-year property 7-year property d 10-year property 15-year property 20-year property 25-year property 25 yrs S/L S/L h Residential rental 27 5 yrs MM property MM S/L 27 5 yrs MM S/L Nonresidential real 39 yrs property MM S/L Section C—Assets Placed in Service During 2008 Tax Year Using the Alternative Depreciation System 20a Class life S/L 12 yrs b 12-year S/L 40-year 40 vrs MM Part IV Summary (See instructions.) 21 Listed property Enter amount from line 28 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 49,050 Enter here and on the appropriate lines of your return Partnerships and S corporations—see instr 23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs 23