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Form **990**

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

2008

Open to Public Inspection

			r yea	r, or tax year beginning 07-01-2008 C Name of organization	3 and ending 06-30-20	009	D Employer ide	ntification number		
_		oplicable Pleas		Community Foundation for						
_	dress ch	label	or	Southern Arizona Doing Business As	94-2681765 E Telephone number					
_	me char	type.	See				(520) 770-0	800		
_	tıal retur	Instr		Number and street (or P O box if mail 2250 East Broadway Blvd	is not delivered to street add	ress) Room/suite	G Gross receipt			
_	mınatıo			,			_			
_	nended r			City or town, state or country, and ZIP Tucson, AZ 85719	+ 4					
Ар	plication	pending								
				ne and address of Principal Officer n Marriott			ıs a group return			
				E Broadway		affilia	ates?	ΓYes Γ Nο		
		•		n, AZ 85719	H(b) Are a	II affiliates include	d?			
) (3) ◀ (insert no)	52/			See instructions)		
W	eb site	≅: ► www.cfso	az or	g		H(c) Grou	up Exemption Nur	nber 🟲		
∢ Тур	e of org	anization 🔽 Co	rporat	tion trust association other		L Year of Fo	ormation 1980 M s	State of legal domicile AZ		
Da	rt I	Summary	,							
- 3	_			e organization's mission or most si	gnificant activities					
ų.				ritable giving to needy organization						
≌ ₹										
Governance	_									
5- 0 K			,	if the organization discontinued its						
			-	members of the governing body (Pa	, ,			22		
<u> </u>				ndent voting members of the goverr mployees (Part V , line 2a)		10)		22		
Acumines &				olunteers (estimate if necessary)			5 <u> </u>	22		
ş				ted business revenue from Part VI			7a	0		
				iness taxable income from Form 99						
0.					Pri	or Year	Current Year			
	8	Contribution	ıs and	d grants (Part VIII, line 1h)			6,630,141	4,943,855		
ā	9	Program ser	vice	revenue (Part VIII, line 2g)		255,087	195,009			
Ravenue	10			me (Part VIII, column (A), lines 3,		7,255,180	501,390			
_	11		•	art VIII, column (A), lines 5, 6d, 8		3,381	43,952			
	12	Total revent 12)	ıe — a	dd lines 8 through 11 (must equal	Part VIII, column (A), I	ine	14,143,789	5,684,206		
	13	Grants and	sımıla	ar amounts paid (Part IX, column (A	A), lines 1-3)		3,249,002	2,292,255		
	14	Benefits pai	d to c	or for members (Part IX, column (A), line 4)			0		
ø	15		nerco	ompensation, employee benefits (P	art IX, column (A), lines	5 5 –	1,046,177	1,301,332		
Expenses	16a	10)	l fund	Iraising fees (Part IX, column (A), l	ıne 11e)		1,040,177	1,301,332		
Φ ⊕	ь			penses, Part IX, column (D), line 25 102,0						
Ω	17	•	_	(Part IX, column (A), lines 11a-11	<u>'</u>		3,718,686	2,876,793		
	18	•		-add lines 13-17 (must equal Part	•)	8,013,865	6,470,380		
	19			penses Subtract line 18 from line 1		,	6,129,924	-786,174		
<u>8</u> 8						Beginn	ing of Year	End of Year		
ทอน Assets ดร Fund Bałances	20	Total assets	(Par	rt X, line 16)			47,861,341	37,636,947		
4B.	21	Total liabilit	ıes (F	Part X, line 26)			4,691,533	3,210,105		
5 E	22	Net assets	or fun	nd balances Subtract line 21 from l	ine 20		43,169,808	34,426,842		
Pa	rt II	Signatur	e Bl	ock						
				erjury, I declare that I have examined this						
Plea	ise	and belief, it is	uue,	correct, and complete Declaration of preparation	arer (ouner unam onncer) is ba	1		a nas any кномівиде		
Sigr	1	Signature o	f office	er	0-05-07 :					
Her	е	Gerald Miro	n_Trea	asurer						
		Type or prii								
		Preparer's	Male	2-1/	Date	Check if	Preparer's PTIN (See Gen Inst)		
Paid		signature	Mike [DeVnes	self- empolyed 🕨 🦵					
	arer's	Firm's name (o		s DeVries CPAs of Arizona PC		· · ·	<u>'</u>			
Jse (Only	if self-employed address, and ZI		4349 East Fifth Street			EIN 🕨			
				Tucson, AZ 857112025			Phone no 🕨 (52	20) 298-6200		
May.	the IDS	S discuss this	ratu	rn with the preparer shown above?	(Saa instructions)		•	Eves ENe		

Part III Statement of Program Service Accomplishments (See the instructions.)

Total program service expense:	s \$ 5,429,493 <i>Mu</i> s	st equal Part IX, Line 25, colum	n (B)	
(Expenses \$	including grants of \$) (Revenue	\$)	
Other program services (Desc	ribe in Schedule O)			
(Code) (Expe	nses \$ including	g grants of \$) (Revenue \$)
(Code) (Expe	nses \$ including	g grants of \$) (Revenue \$)
mission by aiding or administering fund	rizona (CFSA) promotes the work of civ d raising drives, accepting and holding n rit entities for use in the general interest	nonies or other property that may b	e acquired by will, gift or otherwi	plishes this se, and by
(Code) (Expe	nses \$ 5,429,493 includir	ng grants of \$ 2,292,255	5) (Revenue \$ 199	5,009)
Describe the exempt purpose ac Section 501(c)(3) and (4) organ others, the total expenses, and r	ızatıons and 4947(a)(1) trusts a	re required to report the amo		s to
services? If "Yes," describe these changes	on Schedule O		□Yes ▽ N	lo
If "Yes," describe these new servent of the organization cease condi-		es in how it conducts any pro	gram	
the prior Form 990 or 990-EZ?		· · · · · · · · ·		lo
Did the organization undertake a			t listed on	
To encourage charitable giving to needy	organizations of Southern Arizona			
Briefly describe the organization's mission				
Briefly	describe the organization's mission	describe the organization's mission	describe the organization's mission	describe the organization's mission

Part IV	Checklist of	Required	Schedules
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			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	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors? 🔁	2	Yes	
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		No
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		No
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		No
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	Yes	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
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		No
10	Did the organization hold assets in term, permanent,or quasi-endowments? If "Yes," complete Schedule D, Part $\sqrt[4]{4}$	10	Yes	
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	Yes	
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	Yes	
13	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		No
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		Νο
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? <i>If "Yes," complete Schedule F, Part II</i>	15		No
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? <i>If</i> "Yes," complete Schedule F, Part III	16		No
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17		No
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	Yes	
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		No
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	Yes	
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		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J	23		No
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		No
ь	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
c	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		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
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			No
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No

Part VI . . .

Part IV Checklist of Required Schedules (Continued)

			res	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		Νo
b	Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV	28b		Νo
С	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? <i>If "Yes," complete Schedule L, Part IV</i> .	28c		Νo
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 🕏	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		Νο
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Νo
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		Νo
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations section 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		Νo
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	Yes	
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		Νο
36	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		Νο
37	Did the organization conduct more than 5 percent of its activities through an entity that is not a related	37		Νο

Pai	t V Statements Regarding Other IRS Filings and Tax Compliance			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal			
	of U.S. Information Returns. Enter -0- if not applicable			
	1a 0			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			
	1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		Νο
22	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
Za	Statements filed for the calendar year ending with or within the year covered by this			
	return			
b	If at least one is reported in 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return.	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		No
ь	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		Νο
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
b	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		Νο
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νο
c	If "Yes," to 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited			N o
	Tax Shelter Transaction?	5c		
6a	Did the organization solicit any contributions that were not tax deductible?	6a		No
Ь	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		Νο
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization provide goods or services in exchange for any quid pro quo contribution of \$75 or more?	7a		Νο
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		Νo
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to			
	file Form 8282?	7с		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal			
	benefit contract?	7e		Νo
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Νo
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		Νo
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as	_		
_	required?	7h		No
8	Section $501(c)(3)$ and other sponsoring organizations maintaining donor advised funds and section $509(a)(3)$ supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have			
	excess business holdings at any time during the	8		No
	year?			
9	Section $501(c)(3)$ and other sponsoring organizations maintaining donor advised funds.			
_	Did the organization make any taxable distributions under section 4966?	9a		No
Ь	Did the organization make a distribution to a donor, donor advisor, or related person?	9Ь		No
10	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
	agamst amounts ade of received nomittlein /			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		No
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.)

Section A	. Governing	Body and	Management
		Doug and	I la lia gollioni

					_		Yes	NO
	For each "Yes" response to lines 2-7 below, and for a "No" response to lines 8 or 9b below, processes, or changes in Schedule O. See instructions.	, desc	ribe the	cırcumst	ances,			
1a	Enter the number of voting members of the governing body	1a			22			
ь	Enter the number of voting members that are independent	1b			22			
2	Did any officer, director, trustee, or key employee have a family relationship or a bus other officer, director, trustee, or key employee?					2		Νο
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?.							Νο
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?							
5	Did the organization become aware during the year of a material diversion of the organization	nızat	ıon's as	sets? .	. [5		Νo
6	Does the organization have members or stockholders?							
7a	a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?							Νο
Ь	Are any decisions of the governing body subject to approval by members, stockholde	ers, o	rotherp	oersons?		7b		Νo
8	Did the organization contemporaneously document the meetings held or written action year by the following	ns ur	ndertake	en during	the			
а	the governing body?					8a	Yes	
ь	each committee with authority to act on behalf of the governing body?					8Ь	Yes	
9a	Does the organization have local chapters, branches, or affiliates?				. [9a		Νο
b	If "Yes," does the organization have written policies and procedures governing the adaffiliates, and branches to ensure their operations are consistent with those of the or			•	,	9b		Νο
10	Was a copy of the Form 990 provided to the organization's governing body before it v must describe in Schedule O the process, if any, the organization uses to review the			-		10		Νο
11	11 Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O							Νο

Section B. Policies

			Yes	No
12a	Does the organization have a written conflict of interest policy? If "No", go to line 13 \cdot .	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
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			
а	The organization's CEO, Executive Director, or top management official?	15a	Yes	
b	Other officers or key employees of the organization?	15b		Νο
	Describe the process in Schedule O			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		Νο
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 the organization's exempt status with respect to such arrangements?	16b		Νο
		TOD		14 0

Section C. Disclosure

- 17 List the States with which a copy of this Form 990 is required to be filed AZ
- 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.

 upon request
- 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public See Additional Data Table
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization

The Foundation 2250 E Broadway Blvd Tucson, AZ 85719 (520) 770-0800

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

Check this box if the organization did not compensate any officer, director, trustee or key employee

- * List all of the organization's **current** officers, directors, trustees (whether individuals or organizations) and key employees 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, or 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

The check this box in the organization and i	(B) Average hours per week	Posit	(C) chec	:k al				(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F)	
(A) Name and Title		Individual Trustee or Chrector	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)		Estimated amount of other compensation from the organization and related organizations	
							_				

Part VII Continued

			(C) Position (check all that apply)							(E)		(F)	
	(A) Name and Title	(B) Average hours per week	Individual Trustee or Director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	Reportable compensation from related organizations (W- 2/1099- MISC)	0	Estima mount o compens from t rganizati relati organiza	f other sation :he on and ed
1h	Total							▶	211,2	34			33,612
2	Total number of individuals (includin	g those ın 1						ı \$1	<u>'</u>				
	compensation from the organization											T	
3	Did the organization list any former	officer. direc	tor or t	ruste	e. k	ev e	emplov	/ee.	or highest compe	nsated emplovee		Yes	No
	on line 1a? If "Yes," complete Schedu										3		Νο
4	For any individual listed online 1a, is organization and related organization												
	ındıvıdual			•		•		•			4		No
5	Did any person listed on line 1a rece rendered to the organization? If "Yes						-		_		5		No
	ction B. Independent Contra Complete this table for your five high	nest comper		ndep	ende	ent	contra	ctor	rs that received m	ore than			
	\$100,000 of compensation from the	(A)								(B)		(C	·)
	Name ar	nd business add	dress						De	scription of services		Comper	nsation

2 Total number of independent contractors (including those in 1) who received more than \$100,000 in compensation

0

Part VIII

Statement of Revenue

				1			
				(A)	(B)	(C)	(D)
				Total Revenue	Related or Exempt	Unrelated Business	Revenue Excluded from
					Function	Revenue	Tax under IRC
					Revenue		512, 513, or 514
in a	1a	Federated campaigns	la				
Contributions, gifts, grants and other similar amounts	b	Membership dues					
띭콩			.b				
ું ≣	С	Fundraising events	lc				
推開	d	Related organizations					
<u>%</u> ≝			2,283,808				
쭚	е						
美士	f	All other contributions, gifts, grants, and similar amounts not included above	2,650,047				
·春春		:	lf				
뒫출	g	Noncash contributions included					
ည်း		lines 1a-1f \$ 399,20	_				
	h	Total (Add lines 1a-1f)		4,943,855			
			Business Code				
an	2a	Program income		195,009	195,009		
Je J	ь			155,005	133,003		_
æ	"		_				
<u>.</u>	С						
Program Serwce Revenue	d						
B.	e						
all	f	All other program service revent	ie –				
ğ	1						
Ě	g	Total. Add lines 2a-2f					
		\$ 195,009					
	3	Investment income (including di	vıdends, ınterest				
		other similar amounts)		1,334,755			1,334,755
	4	Income from investment of tax-exemp	bond proceeds	0			
	-		· ·				
	5	Royalties		0			
		(ı) Real	(II) Personal				
	6a	Gross Rents					
	ь	Less rental expenses					
	С	Rental income		1			
	_	or (loss)					
	d	Net rental income or (loss) .		0			
		(ı) Securities	(II) O ther				
	7a	Gross amount 4,096,24	9	1			
		from sales of assets other					
	_	than inventory					
	ь	Less cost or 4,929,61 other basis and	4				
		sales expenses	-				
	С	Gain or (loss) -833,36	5				
	d	Net gaın or (loss)	▶	-833,365			-833,365
	8a	Gross income from fundraising	İ				
		events (not including					
άs		\$64,627					
ž		of contributions reported on line					
क >		1c) See Part IV, line 18 Attach Schedule G if total exceeds					
Other Revenue		\$15,000	a 10,000				
一	ь	Less direct expenses	10,000	1			
Ě	С	Net income or (loss) from fundra		43,952			43,952
0			<u> </u>	·			
	9a	Gross income from gaming					
		activities See part IV, line 19 Complete Schedule G if total					
		exceeds \$15,000					
			а				
	b	Less direct expenses	b				
	с	Net income or (loss) from gamin		0			
			<u> </u>				
	10a	Gross sales of inventory, less returns and allowances					
		returns and anowances .	a				
	ь	Less cost of goods sold	ь	1			
		Net income or (loss) from sales		0			
	С	Miscellaneous Revenue	Business Code	 			
	11-	enacenaneous Revenue	Dusiness Code	1			
	11a		_				
	b		_				
	С						
	d	All other revenue					
	e	Total. Add lines 11a-11d	-				†
			0				
	12	Total Revenue. Add lines 1h, 2g	, 3, 4, 5, 6d, 7d,	5,684,206	195,009		545,342
		8c, 9c, 10c, and 11e	▶				
	J	-,,	•				i .

Part IX Statement of Functional Expenses

A	Section 501(c)(3) and 501(c)(4) orgall other organizations must complete column (A) but are not re		plete columns		
Do ı	not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	2,292,255	2,292,255		
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	0	2,252,255		
3	Grants and other assistance to governments, organizations and individuals outside the U.S. See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	151,772	74,368	69,815	7,589
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	0			
7	Other salaries and wages	985,999	483,140		49,300
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	0			
9	Other employee benefits	81,651	40,009	37,559	4,083
10	Payroll taxes	81,910	40,136	37,679	4,095
11	Fees for services (non-employees)				
а	Management	0			
b	Legal	7,146	3,502	3,287	357
c	Accounting	43,591	21,360	20,051	2,180
d	Lobbying	0			
e	Professional fundraising See Part IV, line 17	0			
f	Investment management fees	101,452	49,711	46,668	5,073
g	Other	190,518	93,354	87,638	9,526
12	Advertising and promotion	107,490	52,670	49,445	5,375
13	Office expenses	109,269	53,542	50,264	5,463
14	Information technology	0			
15	Royalties	0			_
16	Occupancy	44,433	21,772	20,439	2,222
17	Travel	0			
18	Payments of travel or entertainment expenses for any Federal, state or local public officials	0			
19	Conferences, conventions and meetings	0			
20	Interest	0			
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	27,837	13,640	12,805	1,392
23	Insurance	8,889	4,356	4,089	444
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)				
а	Program subcontracts	2,137,168	2,137,168		
	Printing and Publications	16,646	8,157	7,657	832
c	Postage and Shipping	8,303	4,068	3,820	415
d	Licenses and fees	49,863	24,433	22,937	2,493
e	In-kind expenses	24,188	11,852	11,127	1,209
f	All other expenses	0			
25	Total functional expenses. Add lines 1 through 24f	6,470,380	5,429,493	938,839	102,048
26	Joint Costs. Check if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation			-	·

Part X	Balance	Sheet

					(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing			1,150	1	1,755,499
	2	Savings and temporary cash investments			1,946,284	2	4,480,615
	3	Pledges and grants receivable, net		924,411	3	575,911	
	4	Accounts receivable, net			225,688	4	11,389
	5	Receivables from current and former officers, directors, trustees other related parties Complete Part II of Schedule L				5	0
	6	Receivables from other disqualified persons (as defined under se persons described in section 4958(c)(3)(B) Complete Part II of S	958(f)(1)) and		6	0	
	7	Notes and loans receivable, net			7	0	
	8	Inventories for sale or use				8	0
2	9	Prepaid expenses and deferred charges			2,317	9	5,469
Assets	10a	Land, buildings, and equipment cost basis	10a	221,507			
	b	Less accumulated depreciation Complete Part VI of Schedule D	10Ь	98,859	79,166	10c	122,648
	11	Investments—publicly traded securities			11	719,846	
	12	Investments—other securities See Part IV, line 11 Complete Part Schedule D	of .	44,535,391	12	28,475,986	
	13	Investments—program-related See Part IV, line 11 Complete Part IV, line IV,			13	0	
	14	Intangible assets		14	0		
	15	Other assets See Part IV, line 11 Complete Part IX of Schedule D	146,934	15	1,489,584		
	16	Total assets. Add lines 1 through 15 (must equal line 34)			47,861,341	16	37,636,947
	17	Accounts payable and accrued expenses .	845,141	17	53,005		
	18	Grants payable	586,031	18	809,706		
	19	Deferred revenue			19		
	20	Tax-exempt bond liabilities			20		
<u>.</u>	21	Escrow account liability				21	
Liabilities	22	Payable to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			•		
ä		persons Complete Part II of Schedule L	•		22		
	23	Secured mortgages and notes payable to unrelated third parties				23	
	24	Unsecured notes and loans payable				24	
	25	Other liabilities Complete Part X of Schedule D		3,260,361	25	2,347,394	
	26	Total liabilities. Add lines 17 through 25			4,691,533	26	3,210,105
У		Organizations that follow SFAS 117, check here ▶ ↓ and complethrough 29, and lines 33 and 34.	ete lin	es 27			
Balance	27	Unrestricted net assets			31,515,513	27	23,098,942
න ග	28	Temporarily restricted net assets			2,533,333	28	993,125
귤	29	Permanently restricted net assets		9,120,962	29	10,334,775	
or Fund		Organizations that do not follow SFAS 117, check here ► and lines 30 through 34.	l comp	let e			
	30	Capital stock or trust principal, or current funds				30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund .		31			
AS	32	Retained earnings, endowment, accumulated income, or other fur		32			
Met	33	Total net assets or fund balances		43,169,808	33	34,426,842	
_	34	Total liabilities and net assets/fund balances			47,861,341	34	37,636,947
Pa	rt XI	Financial Statements and Reporting					
T T	- 7AT						

Dowl VI	Financial	Ctatamanta	and Reporting
7.11.5	l Financiai	Statements	and Reporting

			Yes	No
1	Accounting method used to prepare the Form 990			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		No
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
c	If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	Yes	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits?	3b	Yes	

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As Filed Data -

DLN: 93493130018530

Employer identification number

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Name of the organization

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

To be completed by all section 501(c)(3) organizations and section 4947(a)(1)nonexempt charitable trusts. Attach to Form 990 or Form 990-EZ. See separate instructions.

Open to Public Inspection

	unity F :rn Arizo	oundation for ona						94	-268176	5			
Par	τI	Reason	for Public C	harity Status (to be co	mpleted	by all or	ganizatio						
				ation because it is (Please					21100.000				
1		A church, d	onvention of ch	nurches, or association of ch	urches de	scribed in	Section 1	170(b)(1)((A)(i).				
2		A school d	escribed in Sec i	t ion 170(b)(1)(A)(ii). (Attac	ch Schedu	ıle E)							
3	Γ			e hospital service organizati			t ion 170(l	b)(1)(A)(i	ii). (Attac	h Schedu	le H)		
4	Γ	A medical	research organi	zation operated in conjuncti	on with a l	hospital d	escribed i	n Section	170(b)(1)	(A)(iii). E	nter the		
		hospital's i	name, city, and	state									
5	\vdash	An organiza	atıon operated f	or the benefit of a college or	universit	y owned o	r operated	by a gove	rnmental	unıt desc	rıbed ın		
		Section 17	0(b)(1)(A)(iv).	(Complete Part II)									
6	Γ	A federal, s	state, or local g	overnment or governmental	unıt descr	rıbed ın Se	ction 170	(b)(1)(A)	(v).				
7	<u>~</u>	An organization that normally receives a substantial part of its support from a governmental unit or from the general public											
		described i	n Section 170(l	o)(1)(A)(vi) (Complete Par	tII)								
8	Γ	A commun	ıty trust describ	oed in Section 170(b)(1)(A)	(vi) (Com	nplete Par	tII)						
9	Γ	An organiza	ation that norm	ally receives (1) more than	331/3% 0	fits supp	ort from c	ontributior	ıs, membe	rship fees	s, and gro	ss	
		receipts fro	om activities re	ated to its exempt functions	s—subject	to certair	n exceptio	ns, and (2) no more	than 331/	/3% of		
		ıts support	from gross inve	estment income and unrelate	ed busines	ss taxable	ıncome (l	ess sectio	on 511 tax	x) from bu	sınesses		
		acquired by	y the organizati	on after June 30, 1975 See	Section 5	09(a)(2).	(Complete	e Part III)				
10		An organiz	atıon organızed	and operated exclusively to	test for p	ublic safe	ty See Se	ct ion 509	(a)(4). (S	ee instruc	tions)		
11		_	=	and operated exclusively fo					•	•			
					ped in section 509(a)(1) or section 509(a)(2) See Section 509(a)(3). Check zation and complete lines 11e through 11h								
			ype I b				nally Integ		d	Гтуре	— Type III - Other		
e	Γ	By checkin	g this box, I ce	rtıfy that the organızatıon ıs	not contr	olled direc	tly or ındı	rectly by o	ne or moi	re disqual	ıfıed pers	ons	
				agers and other than one or	more publ	licly suppo	orted orga	nızatıons (described	ın sectior	1 509(a)(1) or	
f		section 50		d a written determination fro	m the IDS	S that it is	a Tuna I	Tung II o	r Typa III	cupportu	a oranni	.ation	
•		check this		d a written determination no	in the 110	o tilat it is	атурет,	Type II O	i Type III	supportin	ig Organiz		
g		Since Augi	ıst 17, 2006, h	as the organization accepted	d any gift	or contrib	utıon from	any of the	!			·	
		following pe											
			•	r indirectly controls, either a		-	tn persons	aescribe	a in (ii)	44	Yes	No	
				ng body of the the supported	_	tion				11g		<u> </u>	
			•	erson described in (i) above ty of a person described in (haua?				11g(11g(_	
h				nation about the organizatio			cupports			119(/	<u> </u>	
"		i iovide tile	i lollowing illion	nation about the organization	iis the org	garrization	supports						
	(i) Na	ame of	(ii) EIN	(iii) Type of organization	(iv) I	s the	(v) Did v	ou notify	(vi) I	s the	(vii) An	nount of	
		orted	(,	(described on lines 1-9		ation in		nızatıon		ation in	supp		
(Organ	nızatıon		above or IRC section		listed in		i) of your		rganized			
				(See Instructions))		verning ment?	supp	oort?	in the	US?			
					Yes	No	Yes	No	Yes	No	1		
					103	1,10	1.63	110	1.03	110			
						 							

Total

Part II Support Schedule for Organizations Described in IRC 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I.)

	(Complete only if you chec	kea the box o	n line 5, 7, or	8 OF Part 1.)				
	ublic Support	T						
	endar 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")	6,398,253	12,904,261	7,107,871	6,630,141		4,943,855	37,984,381
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							0
3	The value of services or facilities furnished by a governmental unit to the organization without charge							0
4	Total. Add line 1-3	6,398,253	12,904,261	7,107,871	6,630,141		4,943,855	37,984,381
5	The portion of total contribution by each							
	person (other than a government unit or publicly supported organization) included on line 1 that exceed 2% of the amount shown on line 11, column							3,230,597
6	(f) Public Support subtract line 5 from line 4							34,753,784
Т	otal Support							
	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e)	2008	(f) Total
7	A mounts from line 4	6,398,253	1,061,950	7,107,871	6,630,141		4,943,855	37,984,381
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar	806,617	1,061,950	3,546,569	1,563,108		1,334,755	8,312,999
	sources Net income from unrelated business activities, whether or not the business is regularly carried on							0
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)							0
11	Total Support (Add lines 7 through 10)							46,297,380
12	Gross receipts from related activities, etc	(See instruction	ns)			12		2,297,662
13 C	First Five Years. If the Form 990 is for the organization, check this box and stop here omputation of Public Support Perc		rst, second, thire	d, fourth, or fifth	tax year as a 5	01(c)(▶ ┌
14	Public Support Percentage for 2008 (line 6	column (f) dıvıc	led by line 11 co	lumn (f))		14		75.070 %
15	Public Support Percentage for 2007 Sched	ule A, Part IV-A	, line 26f			15		74.540 %
	a 33 1/3% Test - 2008. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% Test - 2007. If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this							
	box and stop here. The organization qualifies as a publicly supported organization 10% Facts and Circumstances Test - 2008. If the organization did not check a box on line 13, 16a, or 16b and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test. The organization qualifies as a publicly supported organization							
ь 18	10% Facts and Circumstances Test - 2007. more, and if the organization meets the "fact the organization meets the "facts and circu Private Foundation. If the organization did unstructions	cts and circumst imstances" test	tances" test, che The organization	eck this box and on qualifies as a	l stop here. Exp publicly suppor	laın ın ted or	Part IV ho ganızatıon	

Pa	Support Schedule for On (Complete only if you ched				(2)		
	ction A. Public Support		_	,			
Cale	ndar 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						
2	include any "unusual grants ") Gross receipts from admissions,						
2	merchandise sold or services performed,						
	or facilities furnished in any activity that						
	is related to the organization's tax-						
	exempt purpose						
3	Gross receipts from activities that are						
	not an unrelated trade or business under						
	section 513						
4	Tax revenues 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						
7a	A mounts included on lines 1, 2, and 3						
	received from disqualified persons Amounts included on lines 2 and 3						
D	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						
c	Total of lines 7a and 7b						
8	Public Support (Substract line 7c from						
_	line 6)						
То	tal Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9	A mounts from line 6						
10a	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties and income from similar						
	sources						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after 30 June, 1975		+				
С	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b, whether or not the business is regularly						
	carried on						
12	Other income Do not include gain or loss						
	from the sale of capital assets						
	(Explain in Part IV)						
13	Total Support (Add lines 9, 10c, 11 and						
	12)						
14	First Five Years If the Form 990 is for the	organızatıon's fı	rst, second, thir	d, fourth, or fifth	ntax year as a 5	01(c)(3) organı	zation,
	check this box and stop here						▶ □
	manufaction of Dublic Compact Days						
15	mputation of Public Support Perc Public Support Percentage for 2008 (line		dod by line 12 o	olumn (fl)		T 4= T	
			•	.orumin (1))		15	
16	Public Support Percentage for 2007 Sche	dule A , Part IV -	A, line 27g			16	
		D					
Co	mputation of Investment Income Investment Income Percentage for 2008 (ne 13 column /f	<u> </u>	17	
				-	"	17	
ΤQ	Investment Income Percentage from 2007	ocnequie A , Pa	TLIV-A, IINE 2/	H		18	

19a 33 1/3% Tests - 2008. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line

17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization **33 1/3% Tests - 2007.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

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

▶□

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

Schedule A (Form 990 or 990-EZ) 2008

DLN: 93493130018530

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury

Internal Revenue Service

► 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.

Supplemental Financial Statements

Open to Public Inspection

	me of the organization nmunity Foundation for		Employer ident	tification numbe	er			
	thern Ánzona	94-2681765						
Pa	organizations Maintaining Donor A organization answered "Yes" to Form 99		nds or Accou	unts. Comple	te if the			
		(a) Donor advised funds	(b) Funds	and other accou	ınts			
1	Total number at end of year	139						
2	Aggregate Contributions to (during year)	1,755,869						
3	Aggregate Grants from (during year)	2,313,381						
4	Aggregate value at end of year	9,466,769						
5	Did the organization inform all donors and donor adv funds are the organization's property, subject to the		radvised	▽ Yes	┌ No			
6	Did the organization inform all grantees, donors, and used only for charitable purposes and not for the beimpermissible private benefit?		nay be	✓ Yes	┌ No			
Pa	rt II Conservation Easements. Complete	of the organization answered "Yes" to	Form 990, Pa	rt IV, line 7.				
2	Purpose(s) of conservation easements held by the of Preservation of land for public use (e.g., recreat Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a qual on the last day of the tax year	cion or pleasure)	tified historic sti	ructure	a			
			Hel	ld at the End of	the Year			
а	Total number of conservation easements		2a					
b	Total acreage restricted by conservation easement	ts	2b					
c	Number of conservation easements on a certified h	nistoric structure included in (a)	2c					
d	Number of conservation easements included in (c)	acquired after 8/17/06	2d					
3	Number of conservation easements modified, transfe the taxable year •	erred, released, extinguished, or terminated	by the organiza	ition during				
4	Number of states where property subject to conserv	ation easement is located 🕨						
5	Does the organization have a written policy regardin enforcement of the conservation easements it holds		ions, and	☐ Yes	┌ No			
6	Staff or volunteer hours devoted to monitoring, inspe	ecting and enforcing easements during the y	∕ear ►					
7	A mount of expenses incurred in monitoring, inspect	ing, and enforcing easements during the yea	ar ► \$					
8	Does each conservation easement reported on line $170(h)(4)(B)(i)$ and $170(h)(4)(B)(ii)$?	2(d) above satisfy the requirements of sect	ion	☐ Yes	┌ No			
9	In Part XIV, describe how the organization reports of balance sheet, and include, if applicable, the text of the organization's accounting for conservation ease	the footnote to the organization's financial s ments	statements that	describes				
Par	t III Organizations Maintaining Collection Complete if the organization answered		r Other Simi	lar Assets.				
1a	If the organization elected, as permitted under SFAS art, historical treasures, or other similar assets held provide, in Part XIV, the text of the footnote to its file.	5 116, not to report in its revenue statemen d for public exhibition, education or research	ın furtherance		е,			
b	If the organization elected, as permitted under SFAS historical treasures, or other similar assets held for provide the following amounts relating to these item	public exhibition, education, or research in						
	(i) Revenues included in Form 990, Part VIII, line 1	1	► \$					
	(ii) Assets included in Form 990, Part X		► \$					
,	If the organization received or held works of art, hist	torical treasures, or other similar assets for	financial gain, p	provide the				

Revenues included in Form 990, Part VIII, line 1

Assets included in Form 990, Part X

following amounts required to be reported under SFAS 116 relating to these items

Cat No 52283D

	•••• Organizations Maintaining Co	Hections of Art,	1113	COLL	cai iicasui	00/ 01 00110	Jillillai	7330	L3 (CC	ntinuea)
3	Using the organization's accession and other items (check all that apply)	records, check any	of th	e foll	owing that are	a significant u	ise of its co	llection		
а	Public exhibition		d	Γ	Loan or exch	ange programs				
b	Scholarly research		e	Γ	Other					
c	Preservation for future generations									
4	Provide a description of the organization's co	ollections and explain	ı how	the	v further the o	rganization's ex	cempt purpo	ose in		
•	Part XIV	moderono una expran			, , , , , , , , , , , , , , , , , , , ,	.gamzarion o	, ampe parp			
5	During the year, did the organization solicit						nılar	Г	,	□ No
Par	Trust, Escrow and Custodial A Part IV, line 9, or reported an an	Arrangements.	Com	plete	e if the organ		ered "Yes			,
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?					r other assets	not		es es	┌ No
b	If "Yes," explain why in Part XIV and comple	te the following table	<u>:</u>							
								A mou	nt	
С	Beginning balance					1c				
d	Additions during the year					1d				
е	Distributions during the year					1e				
f	Ending balance					1f				
2a	Did the organization include an amount on Fo	orm 990, Part X, line	21?					Γ,	es (┌ No
b	If "Yes," explain the arrangement in Part XIV									
Pai	rt V Endowment Funds. Complete									
		(a)Current Year	(b)) Prior	Year (c)Tw	o Years Back (d)	Three Years E	Back (e)	Four Y	ears Back
1a	Beginning of year balance	27,092,007								
b	Contributions	470,151								
С	Investment earnings or losses	-3,698,941								
d	Grants or scholarships									
e	Other expenditures for facilities and programs	869,274								
f	Administrative expenses									
g	End of year balance	22,993,943								
2	Provide the estimated percentage of the yea	 r end balance held as	5							
а	Board designated or quasi-endowment 🕨	49 000 %								
ь	Permanent endowment - 49 700 %									
с	Term endowment ▶ 1 300 %									
3a	Are there endowment funds not in the posses	ssion of the organizat	tion t	hata	are held and ac	dministered for	the			
	organization by						,		Yes	No
	(i) unrelated organizations			•				3a(i)		No
_	(ii) related organizations							3a(ii)		No
Ь	If "Yes" to 3a(II), are the related organization Describe in Part XIV the intended uses of th	•						3b		No
4		a organization s enut	wille	III IU						
			+ 5	99 E	arm 000 Da	rt V ling 10				
	t VI Investments—Land, Buildings		t. S							
			i t. S	(a	orm 990, Pa Ocst or other (investment)	rt X, line 10. (b)Cost or other basis (other)	(c) Depred	ciation	(d) Bo	ook value
	t VI Investments—Land, Buildings		t. S	(a) Cost or other	(b)Cost or other	(c) Depred	ciation	(d) Bo	ook value
Par 1a	Description of investment		i t. S	(a) Cost or other	(b)Cost or other	(c) Depred	ciation	(d) Bo	ook value
Par 1a b	Description of investment Land		t. S	(a) Cost or other	(b)Cost or other	(c) Depred	ciation	(d) Bo	ook value
Par 1a b	Description of investment Land		t. S	(a) Cost or other	(b)Cost or other	(c) Depred	9,971	(d) Bo	
Par 1a b c	Description of investment Land			(a) Cost or other	(b)Cost or other basis (other)	(c) Depred	-	(d) Bo	2,413 120,235

Part VII Investments—Other Securities. See	Form 990, Part X, line 1	2	
(a) Description of security or cateory (including name of security)	(b)Book value		d of valuation year market value
Financial derivatives and other financial products			
Closely-held equity interests			
Other			
Total. (Column (b) should equal Form 990, Part X, col (B) line 12) ▶	28,475,986		
Part VIII Investments—Program Related. Se	e Form 990, Part X, line		
(a) Description of investment type	(b) Book value		d of valuation year market value
			,
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)			
Part IX Other Assets. See Form 990, Part X, II	ne 15.		
(a) Descri			(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	1		
(a) Description of Liability	(b) A mount		
Federal Income Taxes Due to other agencies	2 247 204		
Due to other agencies	2,347,394		
-			
Total. (Column (b) should equal Form 990, Part X, col (B) line 25) ▶	2,347,394		

Total revenue (Form 990, Part VIII, column (A), line 12)	1	5,084,200
Total expenses (Form 990, Part IX, column (A), line 25)	2	6,470,380
3 Excess or (deficit) for the year Subtract line 2 from line 1	3	-786,174
4 Net unrealized gains (losses) on investments	4	-8,242,19
5 Donated services and use of facilities	5	
6 Investment expenses	6	
7 Prior period adjustments	7	285,670
8 Other (Describe in Part XIV)	8	-
9 Total adjustments (net) Add lines 4 - 8	9	-7,956,52
10 Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	-8,742,69
Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per	er Return	
1 Total revenue, gains, and other support per audited financial statements	1	11,919,15
A mounts included on line 1 but not on Form 990, Part VIII, line 12		
a Net unrealized gains on investments		
b Donated services and use of facilities		
c Recoveries of prior year grants		
d Other (Describe in Part XIV)		
e Add lines 2a through 2d	2e	6,214,000
3 Subtract line 2e from line 1	3	5,705,15
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b Other (Describe in Part XIV)		
c Add lines 4a and 4b	4c	-20,94!
Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	5,684,206
Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses		
1 Total expenses and losses per audited financial statements	1	8,531,51
A mounts included on line 1 but not on Form 990, Part IX, line 25		
a Donated services and use of facilities		
b Prior year adjustments		
c Losses reported on Form 990, Part IX, line 25 2c		
d Other (Describe in Part XIV)		
e Add lines 2a through 2d	2e	2,061,13
3 Subtract line 2e from line 1	3	6,470,380
4 A mounts included on Form 990, Part IX, line 25, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b 4a		
a Investment expenses not included on Form 990, Part VIII, line 7b 4a b Other (Describe in Part XIV) 4b		
b Other (Describe in Part XIV)	4c	
b Other (Describe in Part XIV)	4c 5	6,470,380

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part XIV, lines 1b and 2b Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b

Ident if ier	Return Reference	Explanation
Part XIII, Line 2d	Part XIII, Line 2d Other expenses and losses per audited F/S	Cost of special events \$20675 Loss on disposal of assets \$270 Expenses from Consolidated entities \$2040190
Part XII, Line 2d	Part XII, Line 2d Other revenue amounts included in F/S but not included on form 990	Revenues from Consolidated entities \$6214000
Part V , Line 4	Part V, Line 4 Intended uses of the endowment fund	Endowment funds have been established for various board- designated and donor restricted purposes

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DLN: 93493130018530

OMB No 1545-0047

2008

(Form 990 or 990-EZ)

SCHEDULE G

Supplemental Information Regarding Fundraising or Gaming Activities

Open to Public Inspection

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

Name of the organization Community Foundation for					Employer ider	ntification number																
Southern Arizona					94-2681765																	
Part I Fundraising Ac	tivities. Complet	e if the oi	ganızat	ion answered "Yes" t	to Form 990, Part IV	, line 17.																
 Indicate whether the organ Mail solicitations Email solicitations Phone solicitations In-person solicitations 		through ar	ny of the	e Solicitation of r	non-government grants government grants																	
 Did the organization have or key employees listed in If "Yes," list the ten higher to be compensated at leas 	Form 990, Part VII st paid individuals or) or entity entities (f	in connec	ction with professional f rs) pursuant to agreeme	fundraising activities? ents under which the fur																	
(i) Name of individual or entity (fundraiser)	(ii) A ctivity	(iii) Did fundraiser have custody or control of		fundraiser have custody or control of		fundraiser have custody or control of		fundraiser have custody or control of		fundraiser have custody or control of		fundraiser have custody or		fundraiser have custody or control of		fundraiser have custody or control of		fundraise custod contro	er have dy or ol of	(iv) Gross receipts from activity	(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid to (or retained by) organization
		Yes	No																			
Total			<u> </u>																			

List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or 3 licensing

- 3	1 2 3 4 5 6	Gross receipts Less Charitable contributions Gross revenue (line 1 minus line 2)	Folklorico Event (event type) 60,142 10,000	·	(total number)	(Add col	(c))	
Expenses Reveil	2 3 4 5	Less Charitable contributions	10,000	14,485			7.	
- 3	2 3 4 5	Less Charitable contributions	10,000	·			7.	
- 3	3 4 5	contributions Gross revenue (line 1 minus line 2)						4,627
- 3	4 5	minus line 2)	50,142				1	0,000
	5	Cash Prizes		14,485			6	4,627
រា Expenses								
я Б креі -	6	Non-cash Prizes						
<u>ന</u> :		Rent/Facility costs						
\circ .	7	Other direct expenses	17,715	2,960				0,675
호 :	8	Direct expense summary Add line	es 4 through 7 in column	(d)			2	0,675
	9	Net income summary Combine lir	nes 3 and 8 ın column (d)		🕨		4	3,952
Part	100	Gaming. Complete if the or \$15,000 on Form 990-EZ, lir		'Yes" to Form 990, Pa	rt IV, line 19, or repo	orted mor	e thar	1
Revenue			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) O ther gaming	(d) Tota col (a) th	gaming rough co	(Add l (c))
_	1	Gross revenue						
ာ	2	Cash prizes						
bens	3	Non-cash prizes						
Direct Expenses	4	Rent/facility costs						
<u></u>	5	Other direct expenses						
	6	Volunteer labor	┌ Yes <u> </u>	┌ Yes	┌ Yes%_			
	7	Direct expense summary Add lines	,	<u>'</u>				
	8	Net gaming income summary Com	hine lines 1 and 7 in colu	ımn (d)				
		receganing meanic summary com	bille filles I and 7 ill cold	(d)		_	Yes	No
		er the state(s) in which the organiza						
		he organization licensed to operate No," Explain	gaming activities in each	of these states?		• 9a	-	
b .		vo, Explain						
				d - d k k - d d	Ab - 4			
		e any of the organization's gaming l 'es," Explain	icenses revoked, suspen	ded of terminated during	the tax year?	10a		
-								
L 1	Doe	s the organization operate gaming a	activities with nonmembe	rs?		11		<u> </u>

			
13	Indicate the percentage of gaming activity operated in		
а	The organization's facility		
b	An outside facility		
14	Provide the name and address of the person who prepares the organization's gaming/special events books and records		
	Name •		
	Address •		
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	15a	
Ь	If "Yes," enter the amount of gaming revenue received by the organization > \$ and the amount of gaming revenue retained by the third party > \$		
c	If "Yes," enter name and address		
	Name •		
	Address 🟲		
16	Gaming manager information		
	Name 🟲		
	Gaming manager compensation 🕨 \$		
	Description of services provided 🟲		
	Director/officer Employee Independent contractor		
17	Mandatory distributions		
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?	17a	
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 📂 💲		

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DLN: 93493130018530

OMB No 1545-0047

Schedule I (Form 990)

Grants and Other Assistance to Organizations, Governments and Individuals in the U.S.

Department of the Treasury Internal Revenue Service

Complete if the organization answered "Yes," on Form 990, Part IV, lines 21 or 22. Attach to Form 990.

Open to Public Inspect ion

Name of the organization						Employer iden	itification number
Community Foundation for						94-268176	<u>-</u>
Southern Arizona Part I General Infori	mation on Gran	nts and Assistance	<u> </u>			12. 23.2.	<u></u>
Does the organization ma the selection criteria use Describe in Part IV the o	intain records to s d to award the gran rganization's proce	ubstantiate the amount its or assistance? dures for monitoring th	of the grants or assista 				
Form 990, Part I Part IV and Sch	IV, line 21 for an edule I-1 if addit	y recipient that rece ional space is	eived more than \$5,00	00. Check this box if	f no one recipient rec	eived more than \$	
1(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistanc	
See Attached List			2,292,255	0			
2 Enter total number of sec			•	<u>. </u>	•		0
organizations							▶ 1
				C I N FOOFED			

Part III	Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Pa	art IV, line 22.
	Use Schedule I-1 (Form 990) if additional space is needed.	

(a)Type of grant or assistance	(b) Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

See Additional Data Table

Ident if ier	Return Reference	Explanation
Grantmaker's Description of How Grants are Used		Organization monitors its grants to ensure that such grants are used for proper purposes

DLN: 93493130018530

OMB No 1545-0047

Open to Public Inspection

SCHEDULE M (Form 990)

Department of the Treasury

Southern Arizona

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

Non-Cash Contributions

Internal Revenue Service Name of the organization Community Foundation for

Employer identification number

94-2681765

Pa	rt I Types of Property	1						
		(a) Check If applicable	(b) Number of Contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d) Method of de reven	etermı	nıng	
1	Art—Works of art	аррисавіс		- 9				
	Art—Historical treasures							
	Art—Fractional interests							
4	Books and publications							
	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities—Publicly traded .	Х	2	375,014				
10	Securities—Closely held stock \cdot							
11	Securities—Partnership, LLC, or trust interests							
12	Securities—Miscellaneous							
13	Qualified conservation contribution (historic structures)							
14	Q ualified conservation							
	contribution (other)							
	Real estate—Residential .							
	Real estate—Commercial							
	Real estate—Other							
	Collectibles							
	Food inventory							
	Drugs and medical supplies .							
	Taxidermy							
	Historical artifacts							
	Scientific specimens							
	Archeological artifacts		-	24.100	F MI-+ M-I			
	Other (describe In Kind)	X	5	24,188	Fair Mkt Value			
	Other (describe)							
	Other (describe)							
	Other (describe)							
29	Number of Forms 8283 received which the organization complete Acknowledgement	d Form 828	-	ar for contributions for	29			
							Yes	No
30a	During the year, did the organiza hold for at					 		
	least three years from the date of			not required to be used for e	exempt purposes			
	for the entire holding period? .					30a		No
	b If "Yes", describe the arrangement in Part II							
31	Does the organization have a gif	τacceptano	ce policy that requires the i	review of any non-standard	contributions?	31	Yes	
32a	Does the organization hire or us contributions?	e third part • • •	ies or related organizations	to solicit, process, or sell r	non-cash	32a	Yes	
ь 33	If "Yes", describe in Part II If the organization did not report	revenues i	n Column (c) for a type of p	roperty for which Column (a	ı) ıs			
	checked, describe in Part II							

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.							
Identifier	ReturnReference	Explanation					
	Notarii Notari						

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DLN: 93493130018530

SCHEDULE 0

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

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

OMB No 1545-0047
2008
Open to Public

Inspection

Name of the organization	Employer identification number
Community Foundation for	
Southern Arizona	94-2681765

ldentifier	Return Reference	Explanation
Form 990, Part VI, Line 19	Form 990, Part VI, Line 19 Other Organization Documents Publicly Available	Documents are available on our website

Identifier	Return Reference	Explanation
Form 990, Part VI, Line 15b	Form 990, Part VI, Line 15b Compensation Review and Approval Process for Officers and Key Employees	The Executive Committee examines compensation surveys and makes a recommendation to the Board for approval of the CEO salary

ldentifier	Return Reference	Explanation
Form 990, Part VI, Line 12c	, , , , , , , , , , , , , , , , , , ,	Officers and directors are required to disclose potential conflicts annually

ldentifier	Return Reference	Explanation
Form 990, Part VI, Line 10	Form 990, Part VI, Line 10 Form 990 Review Process	Finance Committee reviews the 990

Identification of Disregarded Entities

DLN: 93493130018530

OMB No 1545-0047

Open to Public Inspection

Related Organizations and Unrelated Partnerships

Department of the Treasury

Southern Arizona

Part I

(Form 990)

SCHEDULE R

Attach to Form 990. To be completed by organizations that answerd "Yes" to Form 990, Part IV, lines 33, 34, 35, 36, or 37. ► See separate instructions.

Internal Revenue Service Name of the organization Community Foundation for

Employer identification number

94-2681765

(A) Name, address, and EIN of disregarded entity	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Total income	(E) End-of-year assets	(F) Direct controlling entity
Part II Identification of Related Tax-Exempt Organizat	ions				
(A) Name, address, and EIN of related organization	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Exempt Code section	Public charity stat (if section 501(c)(tus (F) Direct controlling (3)) entity
See Additional Data Table					
For Paperwork Reduction Act Notice, see the Instructions for Form 990.		Cat No 5013	5Y		Schedule R (Form 990) 2008

(A) Name, address, and EIN of related organization	Prim	(B) nary activity	(C) Legal domicile (state or foreign country)	(D) Direct controlling entity	incom	(E) lominant le(related, lestment, related)	Share	(F) e of total income	(G) Share of end-of- year assets	(H Disprop allocat	l) ortionate tions?	(I) Code V—UBI amount on Box 20 of K-1	Gene mana part	agıng
										Yes	No		Yes	No
Part IV Identification of R	Related	l Organizations	Taxable as	a Corporation	ı or Tr	ust								
(A) Name, address, and EIN of related organ		(B) Primary activity		(C) Legal domicile (state or foreign country)		(D) Direct contro	olling	(E) Type of entity (C corp, S corp or trust)	(F) Share of total income	end	(G) hare of l-of-yea assets	(H) Percentage r ownership		

Part V	Transactions with Related Organizations
--------	---

126	τν	Transactions with Related Organizations				
	Note.	Complete line 1 if any entity is listed in Parts II, III or IV			Ye	es No
1 Du	rıng th	ne tax year, dıd the orgranızatıon engage ın any of the following transactıon	s with one or more related organizations listed in Parts II-	·IV?		
а	Recei	pt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled enti	ıty		1a	No
b	Gıft, g	rant, or capital contribution to other organization(s)			1b	No
c	Gıft, g	rant, or capital contribution from other organization(s)			1c	No
d	Loans	or loan guarantees to or for other organization(s)			1d	No
e	Loans	or loan guarantees by other organization(s)			1e	No
f	Sale o	fassets to other organization(s)		<u></u>	1f	No
g	Purch	ase of assets from other organization(s)		<u>[</u>	1g	No
h	Excha	inge of assets		<u>.</u>	1h	No
i I	Lease	of facilities, equipment, or other assets to other organization(s)			1i	No
j	Lease	of facilities, equipment, or other assets from other organization(s)		<u> </u>	1 j	No
k	Perfor	mance of services or membership or fundraising solicitations for other org	anization(s)	L	1k	No
1 1	Perfor	mance of services or membership or fundraising solicitations by other orga	anization(s)	[11	No
m	Sharın	ng of facilities, equipment, mailing lists, or other assets		<u>[</u>	1m	No
n	Sharır	ng of paid employees		<u>[</u>	1n	No
o	Reımb	oursement paid to other organization for expenses		<u></u>	10	No
р	Reımb	oursement paid by other organization for expenses		<u> </u>	1p	No
q	Other	transfer of cash or property to other organization(s)		-	1q	No
r	Other	transfer of cash or property from other organization(s)		[1r	No
2	Ifthe	answer to any of the above is "Yes," see the instructions for information or	n who must complete this line, including covered relations	nips and transaction thresholds		
		(A)	(B) Transaction	(C)		
		Name of other organization(s)	type(a-r)	Amount Involved		
(1)						
(2)						
(2)						
(3)						
(4)						
(+)						
(5)						
(6)						

Part VI Unrelated Organizations Taxable as a Partnership

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

									_	
(A) Name, address, and EIN of entity	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Are all partners section 501(c)(3) organizations	57	(E) Share of end-of-year assets			(G) Code V—UBI amount on Box 20 of K-1	(H) General o managing partner?)
			Yes	No		Yes	No		Yes	No
			•			•	•	Sabadula	D / Form	000) 2000

Software ID: 08000091 Software Version: 2008v2.7

EIN: 94-2681765

Name: Community Foundation for Southern Arizona

Form 990, Schedule R, Part II - Identification of Related Tax-Exempt Organizations

Form 990, Schedule R, Part II - Identification of Related T	fax-Exempt Organiza	itions	I	ı	
(A) Name, address, and EIN of related organization	(B) Primary Activity	(C) Legal Domicile (State or Foreign Country)	(D) Exempt Code section	(E) Public charity status (if 501(c)(3))	(F) Direct Controlling Entity
Sycamore Canyon Conservation Foundation				'	
2250 E Broadway Tucson, AZ85719 20-5391377	Conservation	ΑZ	501(c)(3)	11	N/A
The Howard V Moore Foundation					
Tucson, AZ85719 20-3983894	Charitable	ΑZ	501(c)(3)	11	N/A
Zuckerman Community Outreach Foundation					
2250 E Broadway Tucson, AZ85719 20-3617544	Charitable	ΑZ	501(c)(3)	11	N/A
John W Madden & Joann Darrall Foundation	!				
4830 N Hidden Valley Rd Tucson, AZ85750 75-3022663	Charitable	ΑZ	501(c)(3)	11	N/A
Worth and Dot Howard Foundation	,				
3191 N 29th Place Phoenix, A Z85016 86-0984133	Charitable	ΑZ	501(c)(3)	11	N/A
Knisely Family Foundation					
8360 E Brookwood Drive Tucson, AZ85750 86-0952581	Charitable	ΑZ	501(c)(3)	11	N/A
Womens Foundation of Southern Arizona	,				
2250 E Broadway Tucson, AZ85719 31-1660702	Charitable	ΑZ	501(c)(3)	7	N/A
The Thomas R Brown Family Foundation	,				
PO Box 31930 Tucson, AZ85751 86-0933380	Charitable	ΑZ	501(c)(3)	11	N/A
CFSA Properties Inc					
2250 E Broadway Tucson, AZ85719 86-0742820	Property Mgmt	ΑZ	501(c)(3)	11	N/A
I Have a Dream Foundation of Tucson	!				
2250 E Broadway Tucson, AZ85719 86-0767464	Charitable	ΑZ	501(c)(3)	11	N/A
The William E Hall Foundation					
2250 E Broadway Blvd Tucson, AZ85719 _13-6105057	Charitable	ΑZ	501(c)(3)	11	N/A
The Melody S Robidoux Foundation	,				
2850 N Swan Rd Tucson, AZ85712 86-0667916	Charitable	ΑZ	501(c)(3)	11	N/A
4					

Grantee Name	Address			EIN	Status	Amount
88-Crime	32 N Stone Avenue	Tucson	AZ 85701			3,091 00
Administration of Resources and Choices	P.O Box 86802	Tucson	AZ 85754	86-0735999	501-c-3	30,300.00
After Dinner Opera Company, Inc	23 Stuyvesant Street	New York	NY 10003-7505			100 00
Ahmed, Arsalan	4070 W Braemore Street	Tucson	AZ 85742			4,673 97
Ajo Community Health Center	410 N Malacate Street	Tucson	AZ 85321	86-0871311	501-c-3	20,000 00
Akıba-Schechter Jewish Day School	5235 South Cornell Avenue	Chicago	IL 60615			1,500 00
Albert Einstein College of Medicine	1165 Morris Park Ave/Rousso325	Bronx	NY 10461			144 33
Alumni Association Bronx High School of Science	Jerome Avenue Station	Bronx				100 00
Alzheimers Association, Central Arizona Reg Office	1028 East McDowell Road	Phoenix	AZ 85006			100 00
Alzheimers Association, Southern AZ Reg Office	P O Box 27352	Tucson	AZ 85726			400 00
Amado Community Foodbank	P O Box 26727	Tucson	AZ 85726			2,000 00
America-Israel Friendship League	4729 E Sunrise Drive PMB 437	Tucson	AZ 85718			4,754 00
American Cancer Society, Inc.	1636 N Swan Road	Tucson	AZ 85712-4065			100 00
American College of Physicians Foundation	190 N Independence Mall West	Philadelphia	PA 19106-1572			100.00
American Diabetes Association	333 W Ft Lowell, Suite 123	Tucson				200 00
American Heart Association, Inc	5325 E. Pima Street	Tucson	AZ 85712-3631			100 00
American Israel Friendship League	4729 East Sunrise	Tucson	AZ 85718			100 00
American Parkinson Disease Assoc/AZ Chapter	5905 E Pima Street	Tucson	AZ 85712			100 00
American Red Cross, Southern Arizona Chapter	5301 E Broadway Blvd	Tucson	AZ 85711	8068600-98	501-c-3	10,600 00
Amigos de Educacion de Alamos	6336 N Oracle Road #326	Tucson	AZ 85704			2,500 00
Amnesty International USA	5 Penn Plaza	New York	NY 10001			2,500 00
Angel Charity for Children, Inc	P O Box 14225	Tucson	AZ 85732-3318			2,498 40
Angels Purse, Inc	140 Duquesne Road	Nogales				3,000 00
Ara Parseghian Medical Research Foundation	3530 E. Campo Abierto	Tucson	AZ 85718-3327			1,100 00
Arizona Arthritis Center	1501 North Campbell	Tucson	AZ 85724			100 00
Arizona Center for the Study of Children and Families	870 West Miracle Mile	Tucson				5,000 00
Arizona Civil Liberties Foundation	77 E Columbus	Phoenix				2,500.00
Arizona Daily Star Sportsmens Fund, Inc	P O. Box 16141	Tucson				1,000 00
Arizona Department of Commerce	1700 W Washington	Phoenix			Government	40,000 00
Arizona Friends of Chamber Music	P O Box 40802	Tucson	AZ 85717			3,110 00
Arizona Friends of Tibet	P O Box 31956	Tucson				250 00
Arizona Historical Society, Southern Arizona Division	949 E. Second Street	Tucson		86-1015752	501-c-3	5,308 45
Arizona Onstage Productions	405 N Granada	Tucson				1,700 00
Arizona Open Land Trust	3127 N Cherry Ave.	Tucson				100 00
Arizona Opera Company	3501 N Mountain Avenue	Tucson		23-7169261	501-c-3	7,995 20
Arizona Public Media	P.O Box 210067	Tucson		86-6050388	501-c-3	5,150 00
Arizona Repertory Singers		Tucson	AZ 85717			198 00
Arizona State University - Scholarship Office	P O Box 870412	Tempe		86-0196696	School	17,650 00
Arizona State University Foundation		Tempe				100 00
Arizona Theatre Company	P O Box 1631	Tucson	AZ 85702			1,250 00
Arizona Town Hall	One East Camelback Road	Phoenix	AZ 85012			2,000 00
Arizona Western College	P O Box 929	Yuma				750 00
Arizonas Children Association, Southern Region	2700 S 8th Avenue	Tucson	AZ 85713	86-0096772	501-c-3	12,500.00
Arizona-Sonora Desert Museum, Inc.	2021 N. Kinney Road	Tucson		86-0111675	501-c-3	21,350.00
Arts for All, Inc - Third Street Kids	2520 N Oracle Road	Tucson				2,000 00
Assistance League of Tucson, Inc	1307 N. Alvernon Way	Tucson	AZ 85712			690 28

	222 Plum Street P O Box 41176 616 N Virginia Ste. D 5425 E Broadway Boulevard 2050 N Pantano Road 200 S Tucson Boulevard P O Box 50544 11 S Sixth Avenue 5280 No Valley View Road 160 E Alameda Street P O Box 5852 10810 Ayres Ave P O Box 2791 590 N Tyler Avenue P O Box 2791 500 N Tyler Avenue P O Box 2791 500 N Tucson Boulevard 11344 Espadrille Ct 780 S Park Centre Avenue P O Box 40217 5 South State Street 1940 E Silverlake Road 11344 Espadrille Ct 780 S Park Centre Avenue 20 N Tucson Boulevard 11344 Espadrille Ct 780 S Park Centre Avenue 20 N Stone Avenue 200 N Stone Avenue 200 N Stone Avenue 200 N Stone Avenue 21 East Court Street 27 West 45th Street P O Box 530 P O Box 530 P O Box 530 P O Box 530 P O Box 1516 630 West 168 Street P O Box 26727 1001 Connecticut Avenue, NW 5550 E Fifth Street 2443 East 4th Street 2290 E Speedway Boulevard 349 West 31st Street 22500 N Tucson Boulevard	Nogales Tucson Tucson Tucson Tucson Tucson Tucson Tucson Tucson Nogales Tucson Nogales Tucson Catalina Tucson New York Chillicothe Tucson Washington Tucson		86-1026982 86-0188050 86-0782752 86-0548361 86-0615999 86-0615999 86-0314595 86-0314595 51-0192519	501-6-3 501-6-3 501-6-3 501-6-3 501-6-3 501-6-3 501-6-3 501-6-3	750 00 25,000 00 25,000 00 2,000 00 1,000 00 1,400 00 1,400 00 1,250 00 25,197 22 6,516 00 25,197 22 6,516 00 25,100 00 1,250 00 24,100 00 2,500 00 2,500 00 2,500 00 2,500 00 2,500 00 2,500 00 2,500 00 2,500 00 1,000 00 1,000 00 1,000 00 1,000 00 1,000 00 2,500 00 2,500 00 2,500 00 1,000 00 1,000 00 1,000 00 1,000 00 2,250 00 1,000 00 1,000 00 2,250 00 7,500 00
DM Officers Spouses Scholarship/Charitable Club Desert Dove Farm Desert Skies United Methodist Church Disabled American Veterans	P O. Box 15280 P O Box 31615 3255 N Houghton Road P.O Box 14301	Tucson Tucson Cincinnatı	AZ 85708-0280 AZ 85751 AZ 85749 OH 45250-0301	86-1014572	501-c-3	750 00 10,000 00 298.40 1,000.00

Dove of Peace Lutheran Church Eastern Anzona College	665 W Roller Coaster Road P.O Box 1430	Tucson Thatcher	AZ 85704 AZ 85552			1,264.00
Educational Enrichment Foundation	3809 E Third Street	Tucson				3,011 00
El Frida Citizens Alliance, Inc	P O Box 172	El Frida		86-0988722	501-c-3	10,000 00
El Paso Community Foundation	1616 Texas Commerce Bank Blvd	El Paso		74-1839536	501-c-3	10,000.00
El Rio Foundation		Tucson		86-0816675	501-c-3	14,000 00
Elvira Elementary School	250 West Elvira Road	lucson	AZ 85/06	06 0010160	0 7 0 2	500 00 44 126 50
Emerge Center Against Domestic Abuse	2545 East Adams Street	Incson		2017150-00	201-0-2	74,120.30
Equine Voices Rescue & Sanctuary	P O Box 1685	Green Valley				2,500 00
Ethica	PO Box 130822	Ann Arbor			-	2,300 00
Faith Academy of Marble Falls	P O. Box 1240	Marble Falls		74-2888658	School	100,000 00
Falkenstrom, Karen	5732 E 2nd St	Tucson	AZ 85711			25,000 00
First Presbyterian Church	401 Elm Street	Chillicothe	\sim			4,000 00
Foundation For Creative Broadcasting	220 S 4th Avenue	Tucson				200 00
French Camp Academy	1 Fine Place	French Camp	-			200 00
Friends of the Oro Valley Public Library	14128 N Fawnbrooke Drive	Oro Valley	AZ 85737			1,000 00
Friends of Vallarta Botanical Gardens AC	759 N Campus Way	Davis		33-1156194	501-c-3	19,978 00
Fundacion del Empresariado Sonorense, A C	825 N Grand Avenue	Nogales	AZ 85621			34,000 00
Georgetown University/Ofc of Student Financial Serv	Box 571252, G19 Healy Hall	Washington				1,200 00
Goodwill Industries of Tucson, Inc	1940 E. Sılverlake	Tucson	AZ 85713	86-0223401	501-c-3	13,158 00
Green Valley Assistance Services, Inc	250 E Continental Road	Green Valley	AZ 85614-1806	94-2783969	501-c-3	37,993 73
Green Valley Community Food Bank	250 E Continental Road	Green Valley				1,500 00
Green Valley Community Fund	P O Box 785	Green Valley	AZ 85622			1,500 00
Habbjach - Dollars For Scholars	6602 East Villa Dorado Drive	Tucson				1,000 00
Habitat For Humanity Tucson	621 W Lester Street	Tucson	-	94-2725100	501-c-3	11,201 00
Handi-Dogs, Inc	75 S Montego Drive	Tucson		95-3247091	501-c-3	6,194 00
Hardison, Kristi M	3282 Ridge Crest Street	Sierra Vista				582 00
Harvard College	124 Mount Auburn Street	Cambridge				100.00
Hispanic Womens Corporation	4545 N. 36th Street	Phoenix				2,500 00
Homer Davis Elementary School		Tucson				200 00
Huber, Tammı	18457 S Bellflower Place	Green Valley				4,000 00
Humane Society of Southern Arizona	3450 N Kelvin Boulevard	Tucson		86-0112798	501-c-3	11,308.45
Huntingtons Disease Society of America, Inc	Greater Los Angeles Chapter	Beverly Hills		13-3349872	501-c-3	10,000 00
Imago Dei Middle School	P O. Box 3056	Tucson				4,500 00
Information & Referral Services, Inc.	3130 N Dodge Boulevard	Tucson		86-0252610	501-c-3	17,124 62
Integrative Touch for Kids	8340 N Thornydale Road	Tucson				200 00
Intercultural Ctr - Study of Deserts and Oceans		Tucson				100 00
Interfaith Community Services	2820 W Ina Road	Tucson				1,191 00
International Campaign for Tibet	1825 Jeffersen Place, NW	Washington				250.00
International Sonoran Desert Alliance	P O Box 687	Ajo		86-0778917	501-c-3	49,483.00
Isaac M Wise Temple	8329 Ridge Road	Cincinnati	_			350 00
Jackson YMCA	127 W Wesley	Jackson				875 20
Jewish Family & Childrens Service of So AZ, Inc	4301 E Fifth Street	Tucson		86-0623896	501-c-3	4,946 00
Jewish Federation of Southern Arizona	3822 E. River Road	Tucson		86-0096795	501-c-3	7,000.00
Jewish Federation of the Berkshires	196 South Street	Pittsfield _	-			3,000 00
Jewish History Museum	P O Box 889	Tucson				250 00
John B Wright Elementary School	4311 E. Linden	Tucson	AZ 85712			900.00

Judicial Watch, Inc.	501 School Street, SW	Washington	DC 20026	86-0184349	501-6-3	1,000 00
Kershishik Seth N	2000 E. River Road	Tucson	AZ 85718))	2,000 00
Kids Keeper International, Inc	4 Quarter Mile Road	Armonk		36-4495149	501-c-3	20,000.00
Kore Press, Inc	P O Box 42315	Tucson	AZ 85733	86-0821144	501-c-3	5,500 00
KXCI FM	220 S 4th Avenue	Tucson				1,000.00
La Pilita Association	420 S. Main	Tucson				100 00
La Posada Foundation	350 E Morningside Road	Green Valley				1,000 00
League of Women Voters of Greater Tucson	2424 E Broadway	Tucson				1,000 00
LGBTS Fund	2250 E Broadway Blvd	Tucson				250 00
Linkages	1920 E Sılverlake Road	Tucson				100 00
Literacy Volunteers of America-Santa Cruz County, Inc	125 E Madison Street	Nogales				3,000 00
Literacy Volunteers of Tucson	2850 E Speedway Boulevard	Tucson		23-7047508	501-c-3	50,437 00
Literary and Prologue Society of The Southwest	2398 E Camelback Rd Ste 400	Phoenix				300 00
Loft Cinema, Inc	3233 E Speedway Boulevard	Tucson				2,700 00
MAKE WAY FOR BOOKS	3955 E Fort Lowell	Tucson		31-1583036	501-c-3	25,100 00
Many Mouths One Stomach	PO Box 15	Tucson	AZ 85702	34-2039132	501-c-3	8,500 00
Marine Mammal Center	1065 Fort Cronkhite	Sausalito	CA 94965-2609			2,500 00
Marion Woodman Foundation	212 Olive Street	Santa Cruz	CA 95060			100 00
Mariposa Community Health Center	1852 N Mastick Way	Nogales	AZ 85621	86-0524321	501-c-3	8,683 00
Media Research Center, Inc	325 South Patrick Street	Alexandria	VA 22314-3580			2,000 00
Memorial Sloan-Kettering Cancer Center	P.O Box 750	New York	NY 10131			100.00
Mesa Community College	1833 W Southern Avenue	Mesa				4,800 00
Miracle Square Project, Inc	2601 North Oracle	Tucson	AZ 85705-4325			300 00
Missouri Colleges Fund Inc	3401 W Truman Blvd	Jefferson City	_			1,500 00
Mobile Meals of Tucson, Inc	3003 S Country Club Road	Tucson		23-7157579	501-c-3	00 000'9
Mt Graham Safe House, Inc	P O Box 1202	Safford		0660080-98	501-c-3	15,000 00
Murphy, Brendan Guy	25 East 15th Street	Tucson				10,226 00
NAMI of Southern Arizona	6122 E 22nd Street	Tucson				250 00
National Legal and Policy Center	107 Park Washington Court	Falls Church				2,000 00
National Multiple Sclerosis Society	P.O Box 1217	White Plains				100.00
Native Seeds/SEARCH	526 N Fourth Avenue	Tucson				200 00
New Beginnings for Women & Children, Inc	2590 N. Alvernon Way	Tucson				3,000 00
New York University/Office of the Bursar	7 East 12th Street	New York				1,200.00
Nogales Community Development Corporation	PO Box 421	Nogales		86-0878561	501-c-3	27,000 00
Northern Arizona University	P O Box 4108	Flagstaff		74-2579628	School	22,150.00
Ocotillo Literary Endeavors, Inc	P O Box 44000	Tucson				100 00
Old Pueblo Childrens Academy	450 North Pantano	Tucson		86-1014447	501-c-3	10,000.00
Onaway Camp Trust	P O Box 4064	Albany				1,000.00
Open Inn, Inc	PO Box 5766	Tucson				3,400 00
Opening Minds Through The Arts Foundation	3208 E Fort Lowell Rd	Tucson		20-0184741	501-c-3	35,250 00
Opportunity Center for the Homeless	P O Box 63	El Paso				5,000 00
Oracle School District	HCR Box 2743	Oracle				4,000.00
Orcas Island Community Foundation	Post Office Box 1496	Eastsound		91-1680527	501-c-3	15,208 06
Our Family Services, Inc	P.O. Box 40250	Tucson				400 00
Our Saviours Lutheran Church	1200 N Campbell Ave.	Tucson				2,329 30
OXFAM America	226 Causeway Street	Boston	MA 02114			200 00

Patagonia Creative Arts Association	P O Box 1248	Patagonia	AZ 85624 AZ 85624	31-1641854	501-c-3 501-c-3	7,000.00
Potentia Volunteel File & Nescue, IIIC.		Tueson		74-2351135	501-6-3	21 332 50
Patrons of the Arts. Inc	P. O Box 533	Nogales		200) - - -	5,000 00
Paws Patrol. Inc	0	Green Valley		20-5537148	501-c-3	10,000 00
PEO Foundation	3700 Grand Avenue,	Des Moines	IA 50312-2899			1,000 00
People For Puget Sound	911 Western Avenue	Seattle				1,000 00
People For the American Way Foundation	149 5th Avenue, 7th Floor	New York		13-3065716	501-c-3	10,000 00
Phi Delta Theta Educational Foundation	2 South Campus Avenue	Oxford				1,000 00
Pima Community Access Program		Tucson				1,350 00
Pima Community College		Tucson				250.00
Pima Community College Foundation, Inc	4905-C E Broadway Boulevard	Tucson		86-0345089	School	41,366 00
PIMA Council on Aging, Inc.	8467 E Broadway Boulevard	Tucson		86-0251768	501-c-3	12,302.65
Pima County Juvenile Court Center	2225 East Ajo Way	Tucson				200 00
Pima County Library Foundation Fund	P O Box 13245	Tucson				3,100 00
Pima Foundation For Youth, Inc	4845 N Gerhart Road	Tucson				1,000 00
Pima Prevention Partnership	2525 E. Broadway Boulevard	Tucson				4,632 00
Pimeria Alta Historical Society	136 North Grand Avenue	Nogales				2,000 00
Planned Parenthood Arizona	2255 N Wyatt Drive	Tucson		86-0146520	501-c-3	33,600 00
Primavera Foundation, Inc	702 S 6th Avenue	Tucson		86-0733182	501-c-3	40,000 00
Rainbow Acres, Inc	P O Box 1326	Camp Verde	AZ 86322			501 00
Rebuilding Together - Santa Cruz County	3061 N Sunrise Place	Nogales				3,000 00
Refugee Law Center	705 Center Street	Boston	_			250 00
Rocklein, Robyn Michele	2656 W Desert Bluffs Ct	Tucson				3,000 00
Rodel Charitable Foundation of Arizona	6720 N Scottsdale Road	Paradise Valley		86-0941890	501-c-3	15,000.00
Rogers, Barbara	6161 N Camino Padre Isidoro	Tucson	AZ 85718			1,000 00
Rotary Club of Tucson Foundation	3900 E Timrod Street	Tucson				1,312 80
SaddleBrooke Community Outreach Inc	63675 E SaddleBrooke Blvd	Tucson		86-0843458	501-c-3	5,690 28
Saddlebrooke Rotary Foundation, Inc	62383 E Iron Crest Drive	Tucson				2,000 00
Sahuaro Girl Scout Council, Inc	4300 E Broadway Boulevard	Tucson				1,500 00
Salgado, John	520 S Country Club	Tucson				1,000 00
Salpointe Catholic High School	1545 E Copper Street	Tucson				2,500.00
San Miguel High School	6601 S San Fernando Road	Tucson		48-1270906	School	10,595.00
Santa Cruz Council on Aging	125 E Madison Avenue	Nogales				4,000.00
Santa Cruz County Young Audiences, Inc	P O Box 1571	Nogales				4,141 00
Santa Cruz Humane Society, Inc	232 E Patagonia Highway	Nogales				2,000 00
Schlesing, Jaimy M	1000 N Park Avenue	Tucson	N I			4,673 96
Science and Arts Academy	1825 Miner Street	Des Plaines				358 00
Scottsdale Community College	9000 East Chaparral Road	Scottsdale	AZ 85256-2626			4,050 00
Seattle University	PO Box 222000	Seattle	WA 98122-1090			2,000 00
Senior Citizens of Livingston County Missouri	515 Washington	Chillicothe	MO 64601			1,000 00
Senior Citizens of Patagonia, Inc	P O. Box 1121	Patagonia				2,500 00
Seva Foundation	1786 Fifth Street	Berkeley				100 00
SharMoore Childrens Productions	5833 E South Wilshire	Tucson		20-2006366	501-c-3	10,100 00
Shelton, Richard	1548 W. Plaza de Lirios	Tucson				1,000 00
Skidmore College	815 N Broadway	Saratoga Springs				100.00
Sky Island Alliance	P O. Box 41165	Tucson	AZ 85717-1165			2,500.00

Skyline Country Club	5200 E Saint Andrews Drive	Tucson	AZ 85718 AZ 85751-1562			3,886 50
Southern Arizona AIDS Foundation	375 S Euclid Avenue	Tucson		86-0864100	501-c-3	27,250 00
Southern Arizona Association for the Visually Impaired	3767 E Grant Road	Tucson				288 67
Southern Arizona Center Against Sexual Assault	1600 N Country Club Road	Tucson		86-0363205	501-c-3	00 000'9
Southern Arizona Legal Aid, Inc	2343 E Broadway Suite 200	Tucson		86-0143449	501-c-3	30,000 00
Spay and Neuter Solutions	P.O Box 762	Cortaro				5,000 00
St. Ambrose Pansh- Catholic School	300 South Tucson Bivd	Tucson				3,753 00
St. Andrews Childrens Clinic, Inc.	P O. Box 67	Green Valley		86-0684094	501-c-3	18,537 00
	192 S. Stone Ave	Tucson		86-1047742	501-c-3	94,000.00
St Edwards University	3001 South Congress Avenue	Austin	TX 78704			2,000 00
St Francis in the Foothills United Methodist Church	4625 E River Road	Tucson				1,200 00
St Gregory College Preparatory School	3231 N Craycroft Road	Tucson	AZ 85712-5207			1,000 00
St Marks Presbyterian Church Preschool	3809 E Third Street	Tucson	AZ 85716			1,000 00
St Phillips Preservation and Endowment Fund, Inc.	P O Box 65840	Tucson	AZ 85728			1,838 00
State Policy Network	2020 North 14th Street	Arlıngton	VA 22201			1,000 00
Steele Childrens Research Center	P O. Box 245073	Tucson	AZ 85724-5073			1,000 00
Steven M Gootter Foundation	P O Box 64583	Tucson	AZ 85728-4583	20-3798976	501-c-3	00 000'9
StrengthBuilding Partners	P O Box 91313	Tucson		86-0954216	501-c-3	20,300 00
Sunstone Cancer Support Centers	310 South Williams Blvd	Tucson	AZ 85711			5,000 00
Susan G Komen Breast Cancer Foundation	P.O Box 14677	Tucson	AZ 85732-4677			200 00
Tambiyn, Dennis	2656 W Desert Bluffs Ct.	Tucson	AZ 85742			2,000 00
Tax Foundation	529 14th Street, NW, Suite 420	Washington	DC 20045-1000			1,000 00
Teen Challenge of Arizona, Inc	P. O Box 77370	Tucson				1,000 00
Temple Emanu-El Mitzvah Corporation	225 N Country Club	Tucson	AZ 85716			1,550 00
The Culinary Institute of America	1946 Campus Drive	Hyde Park				2,363 50
The Drawing Studio, Inc	33 South 6th Avenue	Tucson		86-0992193	501-c-3	7,500 00
The Dream Street Foundation	9536 Wilshire Blvd, Ste 310	Beverly Hills				5,000 00
The Glassman Foundation, Inc		Tucson				200 00
The Hentage Foundation	214 Massachusetts Avenue, N E	Washington				2,000 00
The Leadership Institute	1101 North Highland Street	Arlington				2,000 00
The Marisa Magel Memorial Fund-The Missy Project	11303 Dead Oak Lane	Austin		74-2934750	501-c-3	10,000 00
The National Center for Public Policy	501 Capitol Court	Washington				2,000 00
The Nature Conservancy of Anzona	1510 E Fort Lowell Road	Tucson				4,600 00
The Newman Foundation at the University of Arizona	P. O. Box 40473	Tucson				100 00
The Salvation Army	1001 N Richey Boulevard	Tucson	AZ 85716	94-1156347	501-c-3	12,596 80
The Salvation Army - El Paso	PO Box 10756	El Paso				5,000 00
The Sonoran Institute	7650 E Broadway Boulevard	Tucson				1,200 00
The Tri-Community Food Bank, Inc	P O. Box 38	Mammoth				2,000 00
Therapeutic Riding of Tucson, Inc	8920 E, Woodland Road	Tucson				298 40
Tohe, Laura	PO Box 870302	Tempe				1,000 00
Tohono Chul Park	7366 N Paseo del Norte	Tucson	AZ 85704-4415			2,660 00
Touch Point Connection, Inc.	P O Box 36960	Tucson		26-1530589	501-c-3	15,000 00
Tu Nidito Children & Family Services	3922 N Mountain Avenue	Tucson				200 00
Tucson Arthritis Support League	P.O Box 31164	Tucson		1	:	100 00
Tucson Audubon Society	300 E University Boulevard	Tucson	AZ 85705-7899	86-6053779	501-c-3	21,562 00
Tucson Botanical Gardens	2150 N. Alvernon Way	Tucson	AZ 85712			3,000.00

Tucson Cares, Inc. Tucson Centers for Women and Children	P O Box 41702 2545 F Adams Street	Tucson	AZ 85717-1702 AZ 85716	26-1129087	501-c-3	8,000 00
Tucson Community Tennis Program	P O. Box 65916	Tucson		26-2145432	501-0-3	1,039 87
Tucson Hebrew Academy	3888 E River Road	Tucson		1))	3,500 00
Tucson Jewish Community Center, Inc	3800 E River Road	Tucson	AZ 85718-6600			1,550 00
Tucson Jewish Community Council	3822 E River Road	Tucson				2,500.00
Tucson Medical Center Foundation	5301 E. Grant Road	Tucson				200 00
Tucson Museum of Art	140 N Main Avenue	Tucson		86-6006371	501-c-3	16,891 40
Tucson Music Teachers Association	5831 E Bellevue Street	Tucson				2,775 00
Tucson Pops Orchestra	P.O. Box 14545	Tucson	AZ 85732-4545			1,000 00
Tucson Symphony Society	2175 N Sixth Avenue	Tucson	AZ 85705-5606	86-0107538	501-c-3	7,307 86
Tucson Symphony Womens Association	P O Box 42654	Tucson	AZ 85733			1,000 00
Tucson Zoological Society	1030 S Randolph Way	Tucson	AZ 85716			1,158 46
Tucson-Pima Arts Council	100 North Stone Ave, Ste 303	Tucson	AZ 85701	86-0465675	501-c-3	16,000.00
Tucson-Pima Library Foundation	P O Box 13245	Tucson	AZ 85732-3245			5,000 00
TUSD Fine Arts Dept /Project Shine	2025 East Winsett	Tucson	AZ 85719			2,500 00
Unicorn Centers, Inc	4630 Hamilton Wolfe Road	San Antonio	TX 78229-3331			250 00
United Community Health Center, Inc	81 W Esperanza Boulevard	Green Valley	AZ 85614			1,000 00
US Tennis Association, Southern Arizona District	P O Box 35661	Tucson	AZ 85740			1,039 88
United Way of Tucson and Southern Arizona	330 N Commerce Park Loop	Tucson	AZ 85745	86-0098932	501-c-3	93,768 26
University Medical Center Foundation	P O Box 245128	Tucson	AZ 85724	86-0572438	501-c-3	20,100 00
University of Arizona	P O Box 210096	Tucson	AZ 85721-0096			100 00
University of Arizona Foundation	PO Box 210109	Tucson	AZ 85721-0109	86-6050388	501-c-3	93,050 00
University of Arizona/Scholarship Development	1111 N Cherry Avenue	Tucson	AZ 85721	74-2652689	School	164,890 89
University of Arkansas/Fulbright	525 Old Main/Deans Office	Fayetteville	AR 72701			1,147 00
University of Massachusetts Foundation	109 Hills North	Amherst	MA 01003-9328			3,000 00
University of Phoenix, Southern Arizona Campus	870 W. Mariposa Rd	Nogales	AZ 85621			4,050 00
University of Washington	PO Box 24967	Seattle	_			1,200 00
Vanderbilt University	VU Station B #357727	Nashville	TN 37235-7727			2,500 00
Voices for Education - Arizona Children First, Inc	P O Box 44200	Tucson				5,000.00
Voices Community Stories Past and Present, Inc	P O. Box 2088	Tucson		86-0951679	501-c-3	39,800 00
Volunteer Center of Southern Anzona	924 N Alvernon Way	Tucson				2,000.00
VSA Arts of Arizona, Inc	330 S Scott Avenue	Tucson	AZ 85701			1,186 00
Washington State University Foundation	Chemical Engineering Dept	Pullman	WA 99163-9975			1,000 00
Wentworth Military Academy	1880 Washington Ave	Lexington	MO 64067			1,500 00
Wingspan	425 East 7th Street	Tucson				3,000 00
Womens Foundation of Southern Arizona	2250 E Broadway Boulevard	Tucson		31-1660702	501-c-3	11,600 00
World Wildlife Fund	1250 24th Street, NW	Washington				1,000 00
Yale University	Box 2	New Haven		06-0646973	School	10,000.00
YMCA Foundation of Southern Arizona		Tucson				1,250.00
Young Americas Foundation	110 Elden Street	Herndon				1,000 00
Youth On Their Own	1443 W Prince Road	Tucson		86-0644388	501-c-3	22,135 00
YWCA - Young Womens Christian Association	525 N. Bonita Avenue	Tucson	AZ 85745	•		3,504.00
Zonta Foundation of Nogales	1839 N San Carlos Loop	Nogales	AZ 85621	51-0204094	501-c-3	5,344.63

Software ID: Software Version:

EIN: 94-2681765

Name: Community Foundation for

Southern Arizona

Form 990, Part VII - Section Aaa

		Posit t	(C lion (i hat a	chec		I			(E)	(F)
(A) Name and Title	(B) Average hours per week	Individual Trustee or Director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	Estimated amount of other compensation from the organization and related organizations
William G Valenzuela , Director	2 00	Х						0	0	0
Valerie Coleman Morris , Director	2 00	Х						0	0	0
Tomas Leon , VP-Comm Phil	40 00					Х		84,087	0	13,840
Thomas Warne , 2nd Vice Chair	5 00	Х		Х				0	0	0
Steve Alley , CEO / President	40 00				Х			127,147	0	19,772
Roman Sandoval , Director	2 00	Х						0	0	0
Richard Mundinger , Director	2 00	Х						0	0	0
Ralph Abelt , Ex-Officio	2 00	X						0	0	0
Paul Lindsey , Secretary	5 00	X		Х				0	0	0
Nancy Davis , 1st Vice Chair	5 00	X		Х				0	0	0
Megan Davıs , Member at Large	2 00	Х						0	0	0
Mary Brown , Director	2 00	X						0	0	0
Judith Brown , Director	2 00	Х						0	0	0
Jonathan Rothschild , Member at Large	2 00	X						0	0	0
James Glasser , Director	2 00	Х						0	0	0
H Sue Nielsen , Ex-Officio	2 00	Х						0	0	0
Gerald Miron , Treasurer	5 00	Х		Х				0	0	0
Cındy Godwın , Dırector	2 00	X						0	0	0
Carrie Brennan , Director	2 00	Х						0	0	0
Carmen Marriott , Chair	5 00	Х		Х				0	0	0
Bradley Nystedt , Director	2 00	Х						0	0	0