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. 7885 08/30/2010 8 41 AM

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047 2008 Open to Public Inspection

| | 1.2 | | | | | i inspection |
|-------------------|-------------------|-------------------------------|--|-----------------------------|----------------------------------|--|
| <u>A</u> | For the 2008 | 3 calendar ye | ar, or tax year beginning 11/01/08 , and ending 10/31/09 | | | |
| B (| Check if appliced | | C Name of organization | | D Emplo | yer identification number |
| ∐. | Address change | use IRS | SUN VALLEY CENTER FOR THE ARTS, | INC | | |
| $\overline{\Box}$ | Name change | label or print or | Doing Business As | | 23- | 7113276 |
| | Marile Change | type | Number and street (or P O box if mail is not delivered to street address) Room/sui | te I | | one number |
| \sqcup | Initial return | See | P.O. BOX 656 | | _ ,0,0,0,0,0 | one named |
| | Termination | Specific | | 1 | • | ipts \$ 2,710,538 |
| \equiv | | Instruc- | City or town, state or country, and ZIP + 4 SUN VALLEY ID 83353 | F | G Gross rece | pts \$ 2,710,550 |
| | Amended return | | | | | |
| | Application pend | anig | e and address of principal officer | 1 | | a group return for |
| | | | INA PETERS | | affiliate H(b) Are all | |
| | | | O. BOX 3486 | 1 | include | |
| | | | TCHUM ID 83340 | | If "No," | attach a list (see instructions) |
| 1 | Tax-exempt | status X | 501(c) (3) 4 (insert no) 4947(a)(1) or 527 | | | |
| J | Website: | SUNV | ALLEYCENTER.ORG | | H(c) Group | exemption number |
| ĸ | Type of organiz | ation X Co | poration Trust Association Other L Year of form | ation 19 | 71 | M State of legal domicile ID |
| | art I | Summai | | | - | |
| | | | he organization's mission or most significant activities | | , | |
| | , | • | ER'S MISSION IS TO PROVOKE AND STIMULATE THE | | | |
| ည | 1 | | ION WHILE OPENING HEARTS AND MINDS THROUGH | | | |
| Governance | | | SE IN DIVERSE ARTS PROGRAMMING. THIS IS DONE BY | | | |
| <u> </u> | | | | 5 | | |
| Ó | l . | k this box | | assets | 1 - 1 | 0.2 |
| ంఠ | 1 | | members of the governing body (Part VI, line 1a) | 100 | 3 | 23 |
| ies | 4 Num | ber of indep | endent voting members of the governing body (Part VI, line 1b) SEP 1 4 2019 |) 인 | 4 | 21 |
| Activities | 5 Total | I number of | employees (Part V, line 2a) | RS-OS | 5 | 19 |
| ç | 6 Total | number of | /olunteers (estimate if necessary) | | 6 | 317 |
| _ | 7a Total | l gross unrel | ated business revenue from Part VIII, line 12, column (C) OGDEN, L |) | | |
| | b Netu | inrelated bu | siness taxable income from Form 990-T, line 34 | | 7b | 0 |
| | | | | Prior Year | | Current Year |
| Ф | 8 Cont | ributions and | d grants (Part VIII, line 1h) | 2,815 | | 1,742,215 |
| Revenue | 9 Prog | ram service | revenue (Part VIII, line 2g) | | ,092 | <u>219,185</u> |
| ě. | 10 Inves | stment incon | ne (Part VIII, column (A), lines 3, 4, and 7d) | 58 | ,464 | 20 |
| œ | 11 Othe | r revenue (F | Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) | 191 | .,395 | 272,725 |
| | 12 Tota | l revenue—a | add lines 8 through 11 (must equal Part VIII, column (A), line 12) | 3,374 | , 393 | 2,234,145 |
| | 13 Gran | its and simila | ar amounts paid (Part IX, column (A), lines 1-3) | 53 | ,615 | 48,016 |
| | 14 Bene | efits paid to d | or for members (Part IX, column (A), line 4) | | | |
| 10 | 15 Sala | ries, other co | ompensation, employee benefits (Part IX, column (A), lines 5–10) | 926 | ,458 | 827,066 |
| Expenses | 16a Profe | | draising fees (Part IX, column (A), line 11e) | | | |
| 96 | h Tota | | expenses (Part IX, column (D), line 25) ▶ . 618,197 | | | |
| X | 17 Othe | _ | | . 676 | ,228 | 1,269,922 |
| | | • | · · · · · · · · · · · · · · · · · · · | 2,656 | | 2,145,004 |
| | i | • | | | ,092 | 89,141 |
| - g | | enue iess ex | penses Subtract line 18 from line 12 | ginning of | | End of Year |
| Net Assets or | 20 Tota | l assets (Pai | | 7,538 | | 7,495,850 |
| Asse | 20 Tota | • | art X, line (6) | | ,862 | 86,672 |
| Set . | 21 1014 | • | | | ,660 | 7,409,178 |
| | | | nd balances Subtract line 21 from line 20 | ,,=10 | ,, 550 | |
| | art II | | | | - AL- 1 : | f and be added |
| 7 | | Under penal and belief. if | ties of perjury, I declare that I have examined this return, including accompanying schedules and statem is side, correct and complete. Declaration of preparer (other than officer) is based on all information of v | ents, and to which prena | o tne best o arer has an | r my knowledge y knowledge |
| ٥ | | - | | | 1 9 | 17/10 |
| Sig | - 1 | | (Bellmachy) | | | 1 110 |
| ₋ He | re | Signatu | re of officer | | Date | |
|) | | | Yresident | | | |
| | | Type or | print name and title | | | |
| i _ | | Preparer's | Date D | Check if | | Preparer's identifying number (see instructions) |
| Pa | L | signature | Mindar (hamber 8/30/10 | self- employe | ed 🕨 | P00157522 |
| | eparer's | <u> </u> | BECKER CHAMBERS & CO P A | ,- | EIN | ▶ 82-0437743 |
| Us | e Only | Firm's name if self-emplo | DO DOY 000 | | Phone | , |
| | | address, an | 7n | | no ▶ | 208-788-9595 |
| Mar | v the IRS di | | turn with the preparer shown above? (see instructions) | | 1 110 | Yes No |
| | | | Paperwork Reduction Act Notice, see the separate instructions. | | | Form 990 (2008) |
| | p iv | | | | | (2000) |

Checklist of Required Schedules

| | , | | Yes | No |
|-----|--|----------|------------|---------------|
| 1 | Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," | | | |
| | complete Schedule A | 1 | X | |
| 2 | Is the organization required to complete Schedule B, Schedule of Contributors? | 2 | X | |
| 3 | Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to | | | |
| | candidates for public office? If "Yes," complete Schedule C, Part I | 3 | | X |
| 4 | Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete | | | |
| | Schedule C, Part II | 4 | | X |
| 5 | Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) | | | |
| | notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III | 5 | | |
| 6 | Did the organization maintain any donor advised funds or any accounts where donors have the right to | | | |
| | provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete | | | 37 |
| _ | Schedule D, Part I | 6 | | X |
| 7 | Did the organization receive or hold a conservation easement, including easements to preserve open space, | 1_ | | v |
| | the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II | 7 | | <u> </u> |
| 8 | Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III | | | v |
| 9 | Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part | 8 | | X |
| 9 | X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," | 1 | | |
| | complete Schedule D, Part IV | 9 | | x |
| 10 | Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V | 10 | х | |
| 11 | Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, | 10 | | |
| • | Parts VI, VIII, IX, or X as applicable | 11 | x | |
| 12 | Did the organization receive an audited financial statement for the year for which it is completing this return | <u> </u> | | |
| | that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII | 12 | x | |
| 13 | Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E | 13 | | x |
| 14a | Did the organization maintain an office, employees, or agents outside of the U.S.? | 14a | | X |
| b | Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, | | | |
| | business, and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I | 14b | | X |
| 15 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any | | | |
| | organization or entity located outside the United States? If "Yes," complete Schedule F, Part II | _15 | | X |
| 16 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance | | | |
| | to individuals located outside the United States? If "Yes," complete Schedule F, Part III | 16 | | X |
| 17 | Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I | 17 | | X |
| 18 | Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II | 18 | X | |
| 19 | Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III | 19 | | <u> </u> |
| 20 | Did the organization operate one or more hospitals? If "Yes," complete Schedule H | 20 | | X |
| 21 | Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule 1, Parts I and II | 21 | | X |
| 22 | Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III | 22 | X | |
| 23 | Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete | 1 1 | | - |
| 24- | Schedule J | 23 | | _ <u>X</u> _ |
| 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. | | | v |
| ь | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? | 24a | | <u> </u> |
| c | Did the organization maintain an escrow account other than a refunding escrow at any time during the year | 24b | | |
| · | to defease any tax-exempt bonds? | 24c | | |
| d | Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? | 24d | | |
| 25a | Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction | 1 | $-\dagger$ | |
| | with a disqualified person during the year? If "Yes," complete Schedule L, Part I | 25a | | X |
| b | Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified | | | - |
| - | person from a prior year? If "Yes," complete Schedule L, Part I | 25b | | X |
| 26 | Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or | | | - |
| | disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II | 26 | | X |
| 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 | | X |
| | | Form | 990 | (2008) |

Part IV Checklist of Required Schedules (continued)

| | | | Yes | No |
|----|---|-----|-----|----|
| 28 | During the tax year, did any person who is a current or former officer, director, trustee, or key employee | | | |
| а | Have a direct business relationship with the organization (other than as an officer, director, trustee, or | | | |
| | employee), or an indirect business relationship through ownership of more than 35% in another entity | | | |
| | (individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, | | | |
| | Part IV | 28a | X | |
| b | Have a family member who had a direct or indirect business relationship with the organization? If "Yes," | | | |
| | complete Schedule L, Part IV | 28b | | X |
| С | Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a | | | |
| | professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV | 28c | | X |
| 29 | Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M | 29 | | X |
| 30 | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified | | | |
| | conservation contributions? If "Yes," complete Schedule M | 30 | | X |
| 31 | Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, | | | |
| | Part I | 31 | | X |
| 32 | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete | | | |
| | Schedule N, Part II | 32 | | X |
| 33 | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations | | | |
| | sections 301.7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I | 33 | | X |
| 34 | Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, | | | |
| | III, IV, and V, line 1 | 34 | | X |
| 35 | Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete | | | |
| | Schedule R, Part V, line 2 | 35 | | X |
| 36 | Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related | | | |
| | organization? If "Yes," complete Schedule R, Part V, line 2 | 36 | | X |
| 37 | Did the organization conduct more than 5% of its activities through an entity that is not a related organization | | | |
| | and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part | | | |
| | VI | 37 | | X |

Form **990** (2008)

| Pa | rt V Statements Regarding Other IRS Filings and Tax Compliance | | | | | |
|---------|---|--------------|-------------|-------|----------|----------|
| | 1 | | | | Yes | No |
| 1a | Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of | 1 1 | | | | |
| | U.S. Information Returns. Enter -0- if not applicable | 1a | 89 | | | |
| b | Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable | 1b | 1 | 7 | | |
| c | Did the organization comply with backup withholding rules for reportable payments to vendors and report | table | | 7 | | |
| | gaming (gambling) winnings to prize winners? | | | 1c | Х | |
| 2a | Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax | | | | | |
| | Statements, filed for the calendar year ending with or within the year covered by this return | 2a | 19 | | | |
| b | If at least one is reported on line 2a, did the organization file all required federal employment tax returns? |) | | 2b | X | |
| | Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see | | | | | |
| | instructions) | | | | | |
| 3a | Did the organization have unrelated business gross income of \$1,000 or more during the year covered by | y | | | | |
| | this return? | | | 3a | | X |
| b | If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O | | | 3b | | |
| 4a | At any time during the calendar year, did the organization have an interest in, or a signature or other authorized the calendar year, did the organization have an interest in, or a signature or other authorized the calendar year. | | | | | 1 |
| | over, a financial account in a foreign country (such as a bank account, securities account, or other financial | al | | | | |
| | account)? | | | 4a | ļ | X |
| 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 Ban | k | | | | |
| _ | and Financial Accounts. | | | | | |
| 5a | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? | | | _5a | | X |
| b | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction | ارا | | 5b | | X |
| C | If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity | | | | | |
| 6- | Regarding Prohibited Tax Shelter Transaction? | | | 5c | | 77 |
| 6a b | Did the organization solicit any contributions that were not tax deductible? | | | 6a | | X |
| U | If "Yes," did the organization include with every solicitation an express statement that such contributions of gifts were not tax deductible? | or | | | ١. | |
| 7 | Organizations that may receive deductible contributions under section 170(c). | | | 6b | | |
| a | Did the organization provide goods or services in exchange for any quid pro quo contribution of more that | _ | | | - | |
| • | \$75? | 11 | | 7a | x | |
| b | If "Yes," did the organization notify the donor of the value of the goods or services provided? | | | 7b | X | |
| c | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was | | | 10 | | |
| | required to file Form 8282? | | | 7c | | х |
| d | If "Yes," indicate the number of Forms 8282 filed during the year | 7d | | 1.0 | | |
| е | Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a person | | | | | |
| | benefit contract? | | | 7e | 1 | x |
| f | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? | | | 7f | | X |
| g | For all contributions of qualified intellectual property, did the organization file Form 8899 as required? | | | 7g | | X |
| h | For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as | | | | | |
| | required? | | | 7h | | X |
| 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 sponsor | ring | | | | |
| | organization, have excess business holdings at any time during the year? | | | 8 | | Х |
| 9 | Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds. | | | | 1 | |
| а | Did the organization make any taxable distributions under section 4966? | | | 9a | | X |
| b | Did the organization make a distribution to a donor, donor advisor, or related person? | | | 9b | | X |
| 10 | Section 501(c)(7) organizations. Enter | 1 | | | | |
| a | Initiation fees and capital contributions included on Part VIII, line 12 | 10a | | - | I | |
| ь 11 | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities | 10b | · | - | ŧ | |
| | Section 501(c)(12) organizations. Enter. Gross income from members or shareholders | المد | | | I | |
| a b | Gross income from members or shareholders | 11a | | - | 1 | |
| U | Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) | 446 | | | I | |
| l2a | Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 104 | 11b 112 | | + 45. | ŧ | |
| | If "Yes," enter the amount of tax-exempt interest received or accrued during the year | | | 12a | | |
| ~ | 100, Since the amount of tax-exempt interest received of accreed during the year | 12b | | _£l | <u>I</u> | <u> </u> |

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

| Sec | tion A. Governing Body and Management | | | |
|------------|---|--------|--------------|-----|
| | | | Yes | No |
| | For each "Yes" response to lines 2–7b below, and for a "No" response to lines 8 or 9b below, describe the | | | |
| | circumstances, processes, or changes in Schedule O See instructions | | | |
| 1a | Enter the number of voting members of the governing body | | | |
| b | Enter the number of voting members that are independent 1b 21 | | | |
| 2 | Did any officer, director, trustee, or key employee have a family relationship or a business relationship with | | | |
| | any other officer, director, trustee, or key employee? | 2 | \mathbf{x} | |
| 3 | Did the organization delegate control over management duties customarily performed by or under the direct | | | |
| | supervision of officers, directors or trustees, or key employees to a management company or other person? | 3 | | X |
| 4 | Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? | 4 | | X |
| 5 | Did the organization become aware during the year of a material diversion of the organization's assets? | 5 | | X |
| 6 | Does the organization have members or stockholders? | 6 | | X |
| 7a | Does the organization have members, stockholders, or other persons who may elect one or more members | | | |
| | of the governing body? | 7a | | X |
| b | Are any decisions of the governing body subject to approval by members, stockholders, or other persons? | 7b | | X |
| 8 | Did the organization contemporaneously document the meetings held or written actions undertaken during | | | |
| | the year by the following | | | |
| а | The governing body? | 8a | X | |
| b | Each committee with authority to act on behalf of the governing body? | 8b | X | |
| 9a | Does the organization have local chapters, branches, or affiliates? | 9a | | X |
| b | If "Yes," does the organization have written policies and procedures governing the activities of such chapters, | | | |
| | affiliates, and branches to ensure their operations are consistent with those of the organization? | 9b | | |
| 10 | Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations | | | |
| | must describe in Schedule O the process, if any, the organization uses to review the Form 990 | 10 | X | |
| 11 | Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at | | | |
| | the organization's mailing address? If "Yes," provide the names and addresses in Schedule O | 11 | | X |
| Sec | tion B. Policies | | | |
| | | | Yes | No |
| 12a | Does the organization have a written conflict of interest policy? If "No," go to line 13 | 12a | X | |
| b | Are officers, directors or trustees, and key employees required to disclose annually interests that could give | | | |
| | rise to conflicts? | 12b | X | |
| С | Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," | | | |
| | describe in Schedule O how this is done | 12c | X | |
| 13 | Does the organization have a written whistleblower policy? | 13 | | _X_ |
| 14 | Does the organization have a written document retention and destruction policy? | 14 | | _X_ |
| 15 | Did the process for determining compensation of the following persons include a review and approval by | | | |
| | independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision: | | | |
| а | The organization's CEO, Executive Director, or top management official? | 15a | X | |
| þ | Other officers or key employees of the organization? | 15b | | X |
| | Describe the process in Schedule O. (see instructions) | | | |
| 16a | Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement | | | |
| | with a taxable entity during the year? | 16a | | X |
| 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 | | |
| <u>Sec</u> | tion C. Disclosure | | | |
| 17 | List the states with which a copy of this Form 990 is required to be filed ID | | | |
| 18 | Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) | | | |
| | available for public inspection. Indicate how you make these available. Check all that apply | | | |
| | Own website | | | |
| 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 | | | |
| 20 | State the name, physical address, and telephone number of the person who possesses the books and records of the | | | |
| | organization > SUN VALLEY CENTER FOR THE ARTS, INC 191 FIFTH STREET EAST | | | |
| KI | ETCHUM ID 83340 | 208-72 | 6-9 | 491 |

Form 990 (2008) SUN VALLEY CENTER FOR THE ARTS, INC 23-7113276

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

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

- 1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. List persons in the following order individual trustees or directors, institutional trustees, officers; key employees, highest compensated employees, and former such persons

| Check this box if the o | rganization did not compen- | sate | any d | office | r, dı | recto | r, tru | istee, or key employee. | | |
|-------------------------|------------------------------|-------------------------------|-------|---------|-------|------------------------------|----------------|---|--|--|
| (A) | (B) | | | (0 | | | | (D) | (E) | (F) |
| Name and Title | Average hours per week | ndıvıdual trustee or director | | Officer | | Highest compensated employee | ply) Former | Reportable compensation from the organization (W-2/1099-MISC) | Reportable compensation from related organizations (W-2/1099-MISC) | Estimated amount of other compensation from the organization and related organizations |
| MR. RUFUS M | PPOWN | | | | | | | | | |
| DIRECTOR | 1 | x | | | | | | o | o | 0 |
| MR. MARK CAR | | 1 | | | _ | ╁ | | | <u> </u> | 0 |
| DIRECTOR | 1 | x | | | | | | 0 | 0 | 0 |
| MRS. SUSAN O | | 1 | | | | | | | | |
| DIRECTOR | 0 | x | | | | | | 0 | 0 | 0 |
| DR. BONNI CU | | | | | | 1 1 | | | | |
| DIRECTOR | о о | x | | | | | | 0 | o | 0 |
| MS. MARYBETH | | | | | | | | | | |
| DIRECTOR | 0 | X | | | | ll | | o | o | 0 |
| MS. DANA MON | SON | | | | _ | \Box | | | _ | |
| DIRECTOR | 0 | X | | | | | | 0 | 0 | 0 |
| MRS. ADRIAN | NORRIS | | | | | | | | | |
| DIRECTOR | 1 | X | | | | | | 0 | 0 | 0 |
| MS. LINDA PA | CKER | | | | | | | | | |
| DIRECTOR | 1 | X | | | | | | 0 | 0 | 0 |
| MRS. LINDA A | POTTER | | | | | | | | | |
| DIRECTOR | 0 | X | | | | | | 0 | 0 | 0 |
| MS. ROBIN RE | INERS | | | | | | | | | |
| DIRECTOR | 1 | X | | | | | | 0 | 0 | 0 |
| | CHEIFELE-HOLM | | | | | | | | | |
| DIRECTOR | 1 | X | | | | | | 0 | 0 | 0 |
| MR. TOM B SW | | | | | | | | | | · |
| DIRECTOR | 0 | X | | | | | | 0 | 0 | 0 |
| MR. JACK THO | | | | | | | | | | |
| DIRECTOR | 1 | X | | | | | | 0 | 0 | 0 |
| MRS. JILL VO | _ | | | | | | | _ | | |
| DIRECTOR | 1 | X | | | | Ш | | 0 | 0 | 0 |
| | WINSTON-LEVIT | | | | | | | | | |
| DIRECTOR | 0 | X | | | | | | 0 | 0 | 0 |
| MR. TOD HAMA | _ | | | | | | | _ | | - |
| DIRECTOR | 4 | Х | | | | \vdash | | 0 | 0 | 0 |
| MR. KARL KRE | 1 | | | İ | | | l | | _ | - |
| DIRECTOR | 3 | X | | | | | | 0 | 0 | 0 |

| Part VII Section A | . Officers, Directors, Trus | tees | , Ke | y En | nplo | yees | , an | d Highest Compensated E | mployees (continued) | | | | age o |
|---|---|-----------------------------------|-----------------------|---------|--------------|------------------------------|---------|---------------------------------------|---|-------------------|---------------------|---------|-------------|
| (A) , | (B) | | | ((| C) | | | (D) | (E) | | (F) | - | |
| Name and title | Average | _ | _ | | | nat ap | | Reportable | Reportable | | Estima | | |
| | hours per week | Individual trustee or director | Institutional trustee | Officer | Key employee | 鬟 | Form | compensation from | compensation from related | | amoun | | |
| | | recto dua | utio | [š | emp | est | Jer | the | organizations | 0 | ompen | | |
| | | ₹ | nal t | | loye | e co | | organization | (W-2/1099-MISC) | | from | | |
| | | stee | rust | | ď | pen | | (W-2/1099-MISC) | | | organız: and rel | | |
| | | ~ | 8 | | | Highest compensated employee | |] | | | organiza | | |
| MS. ANN PUCH | NER | \vdash | | | - | <u> </u> | _ | | | | | | |
| DIRECTOR | 3 | х | | | | | | 0 | 0 | | | | 0 |
| MS. JENNIFER | ROBERTS | | | | | | | | | | | | <u> </u> |
| DIRECTOR | 4 | X | | | | | | 0 | 0 | | | | 0 |
| MS. KATHLEEN | | | | | | | | | | | | | |
| DIRECTOR | 3 | X | | | | _ | | 0 | 0 | <u> </u> | | | 0 |
| MS. KINGSLEY | | ٠, | | | | | | | | ĺ | | | _ |
| DIRECTOR MS. KATHIE I | EVI SON | X | - | | | - | | 0 | 0 | | | | |
| DIRECTOR | 0 | x | | | | | | o | o | ĺ | | | 0 |
| MR. LAWRENCE | | - | \vdash | | | | | | | <u> </u> | | | |
| CO VICE PRES | 7 | | | х | | | | 0 | o | l | | | 0 |
| MS. JEANNE M | EYERS | | | | | | | | | - | | | |
| CO VICE PRES | 7 | | | X | _ | | | 0 | 0 | | | | 0 |
| MRS. SARA NE | | | | | | | | | | 1 | | | |
| TREASURER | PETERS | | | X | | | | 0 | 0 | <u> </u> | | | 0 |
| MRS. TRINA H PRESIDENT | | | x | | | | | 0 | ĺ | | | ^ | |
| MS. GAIL S T | HORNTON | | | | - | | | 0 | 0 | | | | 0 |
| SECRETARY 3 X 0 0 | | | | | | | | | | 0 | | | |
| MARK S GAPPM | | | | | | | | | | | | | |
| EXEC DIR | 40 | | | | | X | | 122,828 | 0 | | | | 0 |
| | | | | | | | | | | | | | |
| | | | | | | <u> </u> | | | | | | | |
| | | | | | | | | | | | | | |
| 1b Total | | | | · | | | | 122,828 | | | | | |
| 2 Total number of indiv | riduals (including those in 1 | a) wl | no re | ceive | ed m | ore t | han | \$100,000 in reportable com | pensation from the | | | | |
| organization ▶ 1 | | | | | | | | | | | | | |
| 2 Did the assessment of | lat a f | • | | | | | | | | f | | Yes | No |
| | list any former officer, direct ? If "Yes," complete Schedu | | | | | | loye | ee, or highest compensated | | | 3 | Ī | X |
| 4 For any individual list | ted on line 1a, is the sum of | repo | ortab | le co | mpe | nsati | | and other compensation fror | | | | | |
| the organization and individual | related organizations great | er th | an \$ | 150,0 | ე00? | ' If "Y | es," | complete Schedule J for su | ich | ŀ | 4 | Ī | X |
| | l on line 1a receive or accru | е со | mpe | nsatı | on fr | om a | ו אָתוּ | unrelated organization for | | | - | | |
| | the organization? If "Yes," | | | | | | | | | | _ 5 | | X |
| Section B. Independent | | | | | | | | | · | | | | |
| Complete this table for compensation from the | | sate | d ind | lepei | nden | it con | trac | tors that received more that | n \$100,000 of | | | | |
| <u> </u> | (A) Name and business address | | | | | | - | Descrin | (B) con of services | | Co | (C) | |
| | | | | | | | | | SAT OF SCHOOLS | | | препзац | 011 |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | ļ | · · · · · · · · · · · · · · · · · · · | | | | | |
| | | | | | | | | | | | | | |
| | | | - | | | | | | · - · - · · - · · · · · · · · · · · · · | | | | |
| (1) | | | | | | | | | | | | | |
| | | | | | | | | | | Ī | | | |
| 2 Total number of inde | pendent contractors (includ | no H | 1000 | ın 1' | \ wh | o rec | | d more than \$100,000 in | · | \longrightarrow | | | |
| compensation from the | | y u | 1036 | 41 1, | , ***** | . 160 | -1VE | a more tian \$100,000 III | | | 0 | | |
| | | | | | | _ | | | | | <u></u> | | |

Form 990 (2008) SUN VALLEY CENTER FOR THE ARTS, INC 23-7113276

| Pa | rt V | III Statement of Rev | enue | | | | | | |
|--|----------|--|------------|-------------------|----------------|----------------------|--------------------------------|---|--|
| | | • | | | | (A) Total revenue | (B) Related or exempt function | (C) Unrelated business revenue | (D) Revenue excluded from tax under sections |
| 10 (0 | 4- | | 4- | ••••••••••• | | | revenue | 75751145 | 512, 513, or 514 |
| anta | ıa L | Federated campaigns | 1a | _ . | - | | | | |
| ρğ | D | Membership dues | 1b | 956 10 | _ | | | | |
| ra, | С. | Fundraising events | 1c | 856,19 | ا ڪٰ | | | | |
| <u>.e.</u> | d | Related organizations | 1d | | <u> </u> | | | | |
| sin | е | Government grants (contributions) | 1e | 30,70 | 9 | | | | |
| 萝 | f | All other contributions, gifts, grants, and similar amounts not included above | | 0.5.5 | | | | | |
| 를등 | | | 1f | 855,31 | <u>.</u> | | | | |
| Se | g | | a-1f \$ | | | | | | |
| Program Service Revenue Contributions, gifts, grants | <u>h</u> | Total. Add lines 1a-1f | | | • | 1,742,215 | | | |
| uge | | | | Busn. C | ode | | | | |
| eve | 2a | VISUAL ARTS FEES | | | | 89,580 | 89,580 | | |
| ě. | ь | EDUCATION FEES | | | | 78,864 | 78,864 | | |
| <u>Ş</u> | С | PERFORMING ARTS FE | ES | | | 50,741 | 50,741 | | |
| S | d | | | | | | | | |
| гаш | е | | | | | | | | |
| 5 g | f | All other program service rev | enue | | | | | | |
| | g | Total. Add lines 2a-2f | | | • | 219,185 | | | |
| | 3 | Investment income (including | dividen | ds, interest, and | | | | | |
| | | other similar amounts) | | | | 19,931 | | ··· | 19,931 |
| | 4 | Income from investment of ta | x-exemp | t bond proceeds | ▶ | | | ···· | |
| | 5 | Royalties | - | | • | | | | |
| | | (ı) Real | | (II) Personal | _ | | | | |
| | 6a | Gross Rents | | | _ | 1 | | | |
| | b | Less rental exps | | | | 1 | | | |
| | С | Rental inc or (loss) | | | _ | 1 | | | |
| | d 73 | Net rental income or (loss) Gross amount from | - | | ▶ | | | | |
| | , a | sales of assets | | (II) Other | \blacksquare | | | | |
| | | other than inventory 6. | 3,654 | | _ | 1 | | | |
| | b | Less cost or other | | | | 1 | | | |
| | | | 3,565 | | _ | 1 | | | |
| | С | ` ' <u> </u> | 9,911 | <u>l</u> | _ | 1 | | | |
| | d | Net gain or (loss) | | | ▶ | -19,911 | -19,911 | | |
| | 8a | Gross income from fundraising ev | | | | 1 | | | |
| une | | (not including \$ 856 | | | | Ī | | | |
| ЭVӨ | | of contributions reported on line 1 | c) | | | 1 | | | |
| R | | See Part IV, line 18 | а | 561,6 | - | 1 | | | |
| Other Revenue | | Less: direct expenses | b | 392,8 | 28 | | | | |
| 0 | | Net income or (loss) from fun | - 1 | events | ▶ | 168,788 | 168,788 | | · · · · · · · · · · · · · · · · · · · |
| | 9a | Gross income from gaming activit | ies : | | | 1 | | | |
| | _ | See Part IV, line 19 | a | | | I | | | |
| | | Less: direct expenses | b | | | | | | |
| | 1 | Net income or (loss) from gar | | vities | ▶ | | | ; | |
| | 10a | Gross sales of inventory, less | 5 | | l | 1 | | | |
| | | returns and allowances | а | | \dashv | 1 | | | |
| | | Less. cost of goods sold | b | | \dashv | 1 | | | |
| | С | Net income or (loss) from sale | | | ▶ | | | | |
| | | Miscellaneous Reven | ue | Busn. Co | ode | | | | |
| | 11a | OTHER INCOME | | | | 103,937 | | | 103,937 |
| | b | | | | | | | | |
| | С | | | | | | | | |
| | d | All other revenue | | L | _ ļ | | | | |
| | e | Total. Add lines 11a-11d | | | ▶ | 103,937 | | | |
| | 12 | Total Revenue. Add lines 1h | , 2g, 3, 4 | , 5, 6d, 7d, 8c, | | | | | |
| | | 9c, 10c, and 11e | | | | 2,234,145 | 368,062 | . 0 | 123,868 |

Part IX Statement of Functional Expenses

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

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

| | All other organizations must co | | e not required to complet | e columns (B), (C), and (D) | · |
|--------|---|-----------------------|------------------------------|-------------------------------------|--|
| | not include amounts reported on lines 6b, , 8b, 9b, and 10b of Part VIII. | (A) Total expenses | (B) Program service expenses | (C) Management and general expenses | (D) Fundraising expenses |
| 1 | | | САРОПОСО | general expenses | CXPENSES |
| | organizations in the U.S. See Part IV, line 21 | | | | |
| 2 | Grants and other assistance to individuals in | | | | |
| _ | the U S See Part IV, line 22 | 48,016 | 48,016 | | |
| 3 | Grants and other assistance to governments, | | | | |
| • | organizations, and individuals outside the | | | 1 | |
| | U S See Part IV, lines 15 and 16 | ì | | | |
| 4 | Benefits paid to or for members | | | | |
| 5 | Compensation of current officers, directors, | " · | | | ······································ |
| Ū | trustees, and key employees | | | | |
| 6 | Compensation not included above, to disqualified | | | | |
| Ū | persons (as defined under section 4958(f)(1)) and | | | | |
| | persons described in section 4958(c)(3)(B) | | | | |
| 7 | Other salaries and wages | 702,429 | 381,989 | 75,549 | 244,891 |
| 8 | Pension plan contributions (include section 401(k) | ,02,123 | 301,303 | 73,343 | 244,001 |
| · | and section 403(b) employer contributions) | | | | |
| 9 | Other employee benefits | 66,922 | 38,374 | 7,738 | 20,810 |
| 10 | Payroll taxes | 57,715 | 31,413 | 6,139 | 20,163 |
| 11 | Fees for services (non-employees) | 31,113 | 31,413 | 0,139 | 20,103 |
| | Management | | | | |
| a b | | 9,999 | | 6,792 | 3,207 |
| | | 6,558 | | 6,558 | 3,201 |
| C C | <u> </u> | 0,338 | | 0,336 | |
| | Lobbying Professional fundament converse Con Bort IV line 17 | | | | |
| | Professional fundraising services See Part IV, line 17 | | | | |
| f | Investment management fees | 285,979 | 143,695 | 20 420 | 111 045 |
| g | F | 59,370 | | 30,439 | 111,845 |
| 12 | Advertising and promotion | | 50,766 | 8,200 | 404 |
| 13 | Office expenses | 105,182 | 78,822 | 14,174 | 12,186 |
| 14 | Information technology | | | - | · · · · · · · · · · · · · · · · · · · |
| 15 | Royalties | 24 271 | 10 700 | | |
| 16 | Occupancy | 34,371 | 19,788 | 5,937 | 8,646 |
| 17 | Travel | | | | |
| 18 | Payments of travel or entertainment expenses | | | | |
| | for any federal, state, or local public officials | | | | |
| 19 | Conferences, conventions, and meetings | | | | ······································ |
| 20 | Interest | | | | |
| 21 | Payments to affiliates | | | | ··· , |
| 22 | Depreciation, depletion, and amortization | 71,243 | 11,496 | 59,747 | |
| 23 | Insurance | 15,500 | 9,274 | 2,993 | 3,233 |
| | | ! | | 1 | |
| 24 | Other expenses Itemize expenses not | Į. | | # | |
| | covered above (Expenses grouped together | | | | |
| | and labeled miscellaneous may not exceed | <u> </u> | | | |
| | 5% of total expenses shown on line 25 below) | | | | |
| а | ARTIST/LECTURE FEE | 221,107 | 221,107 | | |
| b | PRINTING | 117,391 | 30,935 | 22,274 | 64,182 |
| С | HUMAN RESOURCE EXPENSE | 71,940 | 35,970 | 11,990 | 23,980 |
| d | ARTIST/LECTURE HOUSING/TR | 48,282 | 48,282 | | |
| е | BANK CHARGES | 43,484 | 8,995 | -857 | 35,346 |
| f | All other expenses | 179,516 | 95,231 | 14,981 | 69,304 |
| 25 | Total functional expenses. Add lines 1 through 24f | 2,145,004 | 1,254,153 | 272,654 | 618,197 |
| 26 | Joint Costs. Check here Diffollowing SOP 98-2. Complete this line only if the organization reported in column (B) joint costs | | | | |
| | from a combined educational campaign and fundraising solicitation | | | i | |
| DAA | | | <u></u> | | Form 990 (2000) |

| P | art X | (Balance Sheet | | | <u> </u> | | | | | | |
|-------------|--|---|---------|---|---------------------------------------|-----|--------------|-----------------|--|--|--|
| | | • | | | (A) Beginning of year | | (E End o | | | | |
| | 1 | Cashnon-interest bearing | | | 1,785 | 1 | Lilo | year | 783 | | |
| | 2 | Savings and temporary cash investments | | - | 306,998 | | | 52, | | | |
| | 3 | Pledges and grants receivable, net | | ŀ | 1,131,874 | | | 97, | | | |
| | 4 | Accounts receivable, net | | F | 203,052 | | | 30, | | | |
| | 5 | Receivables from current and former officers, directors, tru | istees | kev | 203,002 | | | 50, | | | |
| | | employees, or other related parties Complete Part II of So | | · 1 | | 5 | | | | | |
| | 6 | Receivables from other disqualified persons (as defined up | | F | | Ť | | | | | |
| | - | 4958(f)(1)) and persons described in section 4958(c)(3)(B | | . | | | | | | | |
| | | Part II of Schedule L | , | P1010 | | 6 | Ť | | | | |
| Ø | 7 | Notes and loans receivable, net | | | | 7 | | | | | |
| Assets | 8 | Inventories for sale or use | | - | | 8 | | | | | |
| Ąŝ | 9 | Prepaid expenses and deferred charges | | | 746 | _ | | | 246 | | |
| | 10a | • | 10a | 4,353,224 | | | | | | | |
| | ĺ | Less accumulated depreciation Complete | | , | | | ŧ | | | | |
| | | Part VI of Schedule D | 10ь | 636,870 | 3,763,135 | 10c | 3,7 | 16, | 354 | | |
| | 11 | Investments—publicly traded securities | | | 1,007,297 | 11 | 9 | 23, | 055 | | |
| | 12 | Investments—other securities. See Part IV, line 11 | | <u></u> | | 12 | | | | | |
| | 13 | Investments—program-related See Part IV, line 11 | | Ī | | 13 | | | | | |
| | 14 | Intangible assets | | | | 14 | | | | | |
| | 15 | Other assets See Part IV, line 11 | | [| 1,123,635 | 15 | 1,1 | 74, | 809 | | |
| | 16 | Total assets Add lines 1 through 15 (must equal line 34) | | | 7,538,522 | 16 | 7,4 | 95, | 850 | | |
| | 17 | | 44, | 360 | | | | | | | |
| | 18 Grants payable 18 19 Deferred revenue 33,495 19 | | | | | | | | | | |
| | | | | | | | | | | | |
| | 20 | Tax-exempt bond liabilities | | | | 20 | | | | | |
| Liabilities | 21 | Escrow account liability Complete Part IV of Schedule D | | | | 21 | | | | | |
| | 22 | Payables to current and former officers, directors, trustees | , key | | | | | | | | |
| iab | | employees, highest compensated employees, and disqual | ıfied | | | | • | | | | |
| | | persons. Complete Part II of Schedule L | | <u> </u> | | 22 | | | | | |
| | 23 | Secured mortgages and notes payable to unrelated third p | arties | <u>_</u> | · · · · · · · · · · · · · · · · · · · | 23 | | | | | |
| | 24 | Unsecured notes and loans payable | | <u> </u> | | 24 | | | | | |
| | 25 | Other liabilities Complete Part X of Schedule D | | <u> </u> | | 25 | | | | | |
| | 26 | Total liabilities. Add lines 17 through 25 | | | 121,862 | 26 | | 86, | <u>672</u> | | |
| ces | | - | and | | | | ‡ | | | | |
| 2 | l | complete lines 27 through 29, and lines 33 and 34. | | | C 155 500 | | | | 40- | | |
| alan | 27 | Unrestricted net assets | | - | 6,177,790 | | 5,7 | | | | |
| ∞ | 28 | Temporarily restricted net assets | | - | 1,215,450 | | | 52, | | | |
| Fund | 29 | Permanently restricted net assets | , r | ٠, - | 23,420 | 29 | | 24, | 042 | | |
| Ē | | Organizations that do not follow SFAS 117, check here | • ▶ [| _ | | | | | | | |
| 9 | | and complete lines 30 through 34. | | • | | | | | | | |
| Assets | 30 | Capital stock or trust principal, or current funds | | - | | 30 | · | | | | |
| SS | 31 | Paid-in or capital surplus, or land, building, or equipment for | | | | 31 | | | | | |
| Ä | 32 | Retained earnings, endowment, accumulated income, or o Total net assets or fund balances | iner tu | nas - | 7,416,660 | 32 | 7 / | 09, | 170 | | |
| Net | 33 34 | Total liabilities and net assets/fund balances | | <u> </u> | 7,538,522 | 33 | | 95, | | | |
| | art X | | | | 1,330,322 | 34 | | 9 5, | 850 | | |
| | all A | i manciai Statements and Reporting | | | | | ·- ·- ·- | \ | N. | | |
| 1 | Δα | counting method used to prepare the Form 990 C | ash | X Accrual Oth | or | | | Yes | No | | |
| 2 | | ere the organization's financial statements compiled or review | | | | | 22 | 1 | x | | |
| z. | | ere the organization's financial statements complied or reviewers the organization's financial statements audited by an indi- | | | | | 2a 2b | x | | | |
| | | Yes" to lines 2a or 2b, does the organization have a commit | • | | oversight of | | 20 | * | | | |
| ` | | e audit, review, or compilation of its financial statements and | | , , | - | | 2c | x | | | |
| 3: | | a result of a federal award, was the organization required to | | • | | | 20 | | | | |
| | | Single Audit Act and OMB Circular A-133? | | J 2224 0. 20010 40 001 1 | | | 3a | | x | | |
| _ t | | Yes," did the organization undergo the required audit or aud | ıts? | | | | 3b | | <u> </u> | | |
| | | | _ | | | | | | | | |

SCHEDULE A

(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

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

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Part I

SUN VALLEY CENTER FOR THE ARTS, INC

Employer identification number 23-7113276

| Pi | art I | Reas | on for Public Charity | Status (All organizations | must c | omplete | this p | art.) (s | see in: | structi | ons) | | |
|-------|----------|--|----------------------------------|--------------------------------------|--------------|-----------------------|---|-------------|--------------|------------|-------------|--|----------|
| The | orgar | nization is not | a private foundation because | ettis (Please check only one org | ganization |) | | | | | | | |
| 1 | \Box | A church, cor | nvention of churches, or asso | ociation of churches described in | section 1 | 70(b)(1)(| A)(i). | | | | | | |
| 2 | П | | cribed in section 170(b)(1)(A | | | (- // - // - | 7.7- | | | | | | |
| 3 | Ħ | | | e organization described in secti | ion 170/h | //1 //Δ \/iii\ | /Attach | Schedi | ıle H \ | | | | |
| 4 | \sqcap | | | in conjunction with a hospital de | | | | | | a hoeni | ital's namo | | |
| • | Ш | city, and state | - | in conjunction with a hospitar de | Scribed III | Section | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | ,,,,,,,,, | Linter ti | ie nospi | nars name, | | |
| 5 | \Box | • | | fo college or upwersely owned on | | h | | | | 1 | | | |
| 3 | Ш | | | f a college or university owned or | operated | by a gove | ernmenu | ai unit de | escribed | ı ın | | | |
| | | • | b)(1)(A)(iv). (Complete Part I | , | 4704 | | | | | | | | |
| 6 | Н | | | vernmental unit described in sec | • | | • | | | | | | |
| 7 | Ш | _ | - | ubstantial part of its support from | n a govern | imentai ur | iit or fror | n the ge | nerai pu | IDIIC | | | |
| _ | | | section 170(b)(1)(A)(vi). (Co | · | | | | | | | | | |
| 8 | H. | - | | 70(b)(1)(A)(vi). (Complete Part II | • | | | | | _ | | | |
| 9 | X | _ | • |) more than 33 1/3 % of its suppo | | | | • | | • | | | |
| | | _ | | ot functions—subject to certain e | - | | | | | f its | | | |
| | | support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses | | | | | | | | | | | |
| | | acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) | | | | | | | | | | | |
| 10 | Н | An organization organized and operated exclusively to test for public safety. See section 509(a)(4). (see instructions) | | | | | | | | | | | |
| 11 | | | | xclusively for the benefit of, to pe | | | | • | | | | | |
| | | | | d organizations described in sec | - | | | | | tion | | | |
| | | | $\overline{}$ | e type of supporting organization | | • | 11e thr | ough 11 | h | | | | |
| | _ | a Type I b Type II c Type III—Functionally Integrated d Type III—Other | | | | | | | | | | | |
| е | \sqcup | By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified | | | | | | | | | | | |
| | | persons other than foundation managers and other than one or more publicly supported organizations described in section | | | | | | | | | | | |
| | | 509(a)(1) or section 509(a)(2) | | | | | | | | | | | |
| f | | If the organiza | ation received a written deter | mination from the IRS that it is a | Type I, Ty | pe II, or 1 | ype III s | upportir | ıg | | | | |
| | | organization, | check this box | | | | | | | | | | |
| g | | Since August | : 17, 2006, has the organization | on accepted any gift or contributi | ion from a | ny of the | | | | | | | |
| | | following per | sons? | | | | | | | | | | |
| | | (i) A persor | who directly or indirectly cor | ntrols, either alone or together w | th person: | s describe | ed in (ii) | | | | | Yes | No |
| | | and (III) b | below, the governing body of | the supported organization? | | | | | | | 11g(i) | | <u> </u> |
| | | (ii) A family | member of a person describe | ed in (i) above? | | | | | | | 11g(ii) | | <u>L</u> |
| | | (iii) A 35% c | ontrolled entity of a person de | escribed in (i) or (ii) above? | | | | | | | 11g(iii | <u>1 </u> | |
| h | | Provide the f | ollowing information about the | e organizations the organization | supports | | | | | | | | |
| (i) | Name | of supported | (ii) EIN | (III) Type of organization | (IV) Is the | organization | (v) Did v | ou notify | (vi) | ls the | (vii) Am | ount of | |
| • • • | | anization | , , | (described on lines 1-9 | 1 ' ' | sted in your | | nization in | 1 | ion in col | supj | | |
| | | | | above or IRC section | governing | document? | | of your | | zed in the | | | |
| | | | | (see instructions)) | Yes | No | Yes | ort? | Yes | S? | | | |
| | | | | | 163 | | 163 | 140 | 163 | 100 | | | |
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| | | - | - | | | | - | | | <u> </u> | | | |
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| | | | | | | | | | | | | | |
| Γota | 1 | | 1 | | I . | | | l | | f l | l | | |

| Pa | art II Support Schedule for O | ganizations D | escribed in Se | ctions 170(b)(| I)(A)(iv) and 1 | 70(b)(1)(A)(v | /i) | |
|------------|---|-----------------------|-----------------------|------------------------|--------------------|-----------------|-----|---------------|
| | (Complete only if you che | ecked the box | on line 5, 7, or | 8 of Part I.) | | | • | |
| Sec | tion A. Public Support | | | - | | | | |
| Ca | lendar year (or fiscal year beginning in)▶ | (a) 2004 | (b) 2005 | (c) 2006 | (d) 2007 | (e) 2008 | | (f) Total |
| 1 | Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.") | | | | <u>-</u> | | | |
| 2 | Tax revenues levied for the organization's benefit and either paid to or expended on its behalf | | | | | | | |
| 3 | The value of services or facilities furnished by a governmental unit to the organization without charge | | | | | | | |
| 4 | Total. Add lines 1-3 | | | | | | | |
| 5 | The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) | | | | | | | |
| 6 | Public support. Subtract line 5 from line 4 | _ | | | | | | |
| | tion B. Total Support | | | | | | | |
| Ca | lendar year (or fiscal year beginning in)► | (a) 2004 | (b) 2005 | (c) 2006 | (d) 2007 | (e) 2008 | | (f) Total |
| 7 | Amounts from line 4 | | | | | | | |
| 8 | Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources | | | | | | | |
| 9 | Net income from unrelated business activities, whether or not the business is regularly carried on | | | | _ | | | |
| 0 | Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) | | | | | | | |
| 1 | Total support. Add lines 7 through 10 | | | | | | | |
| 2 | Gross receipts from related activities, etc. (| see instructions) | | | - · | 1 | 2 | |
| 3 | First five years. If the Form 990 is for the o | organization's first, | second, third, fourth | n, or fifth tax year a | s a section 501(c) | (3) | | |
| | organization, check this box and stop here | | | | | | | > _ |
| Sec | tion C. Computation of Public Su | · | | | | | | |
| 4 | Public support percentage for 2008 (line 6, | • • | • | f)) | | [_1 | 4 | <u>%</u> |
| 5 | Public support percentage from 2007 Sche | | | | | _ | 5 | % |
| 6a | 33 1/3 % support test—2008. If the organi | | | , and line 14 is 33 | 1/3 % or more, che | eck this box | | |
| | and stop here. The organization qualifies a | | - | 40 11 45 | | | | > _ |
| b | 33 1/3 % support test—2007. If the organi | | | • | s 33 1/3 % or more | e, check this | | |
| 7a | box and stop here. The organization qualif | | | | a. 10b and has 44 | 100/ | | ▶ _ |
| <i>,</i> a | 10%-facts-and-circumstances test—2006 more, and if the organization meets the "fac | | | | | | | |
| | organization meets the "facts-and-circumst | | | · · | • | A HOM HIS | | ▶ [|
| b | 10%-facts-and-circumstances test—200 | | • | | • | ne 15 is 10% or | | |
| • | more, and if the organization meets the "fac | | | | | | | |
| | organization meets the "facts-and-circumst | | | | | | | ▶□ |

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Part III Support Schedule for Organizations Described in Section 509(a)(2)

| | . (Complete only if you che | cked the box or | n line 9 of Part | :1.) | | | |
|-----------|--|---------------------------|----------------------|-----------------------|---------------------|-----------|----------------------|
| Sec | ction A. Public Support | | | | | | |
| Ca | llendar 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") | 1,587,192 | 3,521,206 | 3,161,811 | 2,815,442 | 1,742,215 | 12,827,866 |
| 2 | Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose | 1,148,720 | 1,262,204 | 991,034 | 1,096,081 | 780,801 | 5,278,840 |
| 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 | 2,735,912 | 4,783,410 | 4,152,845 | 3,911,523 | 2,523,016 | 18,106,706 |
| 7a | Amounts included on lines 1, 2, and 3 received from disqualified persons | 73,206 | 603,261 | 499,497 | 809,872 | 656,083 | 2,641,919 |
| b | Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000 | | | | | | |
| С | Add lines 7a and 7b | 73,206 | 603,261 | 499,497 | 809,872 | 656,083 | 2,641,919 |
| 8 | Public support (Subtract line 7c from | 2,662,706 | 4,180,149 | 3,653,348 | 3,101,651 | 1,866,933 | |
| Sac | tion B. Total Support | <u> </u> | <u></u> | | L | | 15,464,787 |
| | lendar year (or fiscal year beginning in)▶ | (a) 2004 | (b) 2005 | (c) 2006 | (d) 2007 | (e) 2008 | (f) Total |
| 9 | Amounts from line 6 | 2,735,912 | 4,783,410 | 4,152,845 | 3,911,523 | 2,523,016 | 18,106,706 |
| 10a | Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources | 48,353 | 72,120 | 92,331 | 58,464 | 19,931 | 291,199 |
| b | Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 | | .=,250 | 32,552 | 307101 | 13,331 | 231,133 |
| С | Add lines 10a and 10b | 48,353 | 72,120 | 92,331 | 58,464 | 19,931 | 291,199 |
| 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) | 576 | 8,735 | 292 | 806 | 103,937 | 114,346 |
| 13 | Total support. (Add lines 9, 10c, 11, and 12) | 2,784,841 | 4,864,265 | 4,245,468 | 3,970,793 | 2,646,884 | 18,512,251 |
| 14 | First five years. If the Form 990 is for the or organization, check this box and stop here | ganızatıon's first, se | cond, third, fourth, | or fifth tax year as | a section 501(c)(3 |) | 10,312,231 |
| Sec | tion C. Computation of Public Sup | port Percentag | e | | | | |
| 15 | Public support percentage for 2008 (line 8, c | column (f) divided by | line 13, column (f) |) | • | 15 | 83.5381 % |
| 6 | Public support percentage from 2007 Schedi | | | ·· | | 16 | 86.5176 % |
| 3ec 7 | tion D. Computation of Investment | | | | | 1,-1 | |
| 8 | Investment income percentage for 2008 (line Investment income percentage from 2007 Sc | | | uisin (1)) | | 17 | 1.5730 % 1.9489 % |
| 9a | 33 1/3 % support tests—2008. If the organic | | | , and line 15 is mor | re than 33 1/3 %. a | | 1.9489 % |
| | 17 is not more than 33 1/3 %, check this box 33 1/3 % support tests—2007. If the organic | and stop here. The | e organization qual | ifies as a publicly s | upported organizat | tion | ▶ 🕱 |
| | line 18 is not more than 33 1/3 %, check this | | | | | | ▶ □ |

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

Schedule A (Form 990 or 990-EZ) 2008 SUN VALLEY CENTER FOR THE ARTS, INC 23-7113276

Page 4

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

PART III, LINE 12 - OTHER INCOME DETAIL

OTHER INCOME

\$ 114,346

SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service
Name of the organization

Supplemental Financial Statements

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

OMB No 1545-0047
2008
Open to Public

Employer identification number

| SI | UN VALLEY CENTER FOR THE ARTS, INC | | 23-7 | 113276 | |
|----|--|--|------------|--------------------|-------------|
| Pa | organizations Maintaining Donor Advised Function the organization answered "Yes" to Form 990, F | ds or Other Similar Funds or Acc Part IV, line 6. | ounts. | Complete if | |
| | | (a) Donor advised funds | (b) | Funds and other ac | counts |
| 1 | Total number at end of year | | | | |
| 2 | Aggregate contributions to (during year) | | | | |
| 3 | Aggregate grants from (during year) | | | | |
| 4 | Aggregate value at end of year | | | | |
| 5 | Did the organization inform all donors and donor advisors in writing that the | ne assets held in donor advised | | | |
| | funds are the organization's property, subject to the organization's exclus | ive legal control? | | Yes | ∐ No |
| 6 | Did the organization inform all grantees, donors, and donor advisors in wr | iting that grant funds may be | | | |
| | used only for charitable purposes and not for the benefit of the donor or d | onor advisor or other | | _ | _ |
| | impermissible private benefit? | | | Yes | No |
| Pa | rt II Conservation Easements. Complete if the orga | nization answered "Yes" to Form | 990, P | art IV, line 7. | |
| 1 | Purpose(s) of conservation easements held by the organization (check al | l tha <u>t a</u> pply) | | | |
| | Preservation of land for public use (e.g., recreation or pleasure) | Preservation of an historically impor | rtant land | d area | |
| | Protection of natural habitat | Preservation of certified historic stru | ucture | | |
| | Preservation of open space | · | | | |
| 2 | Complete lines 2a-2d if the organization held a qualified conservation cor | ntribution in the form of a conservation easer | ment | | |
| | on the last day of the tax year | | | | |
| | | | | Held at the End | of the Year |
| а | Total number of conservation easements | | 2a | | |
| b | Total acreage restricted by conservation easements | | 2b | | |
| С | Number of conservation easements on a certified historic structure includ | ed ın (a) | 2c | | |
| d | Number of conservation easements included in (c) acquired after 8/17/06 | | 2d | | |
| 3 | Number of conservation easements modified, transferred, released, extin | guished, or terminated by the organization d | uring | | |
| | the taxable year | | | | |
| 4 | Number of states where property subject to conservation easement is loc | ated | | | |
| 5 | Does the organization have a written policy regarding the periodic monitor | ring, inspection, violations, and | | | |
| | enforcement of the conservation easements it holds? | | | ∐ Yes | ∐ No |
| 6 | Staff or volunteer hours devoted to monitoring, inspecting, and enforcing | easements during the year | | | |
| 7 | Amount of expenses incurred in monitoring, inspecting, and enforcing easi | sements during the year 🕒 💄 | | · - | |
| 8 | Does each conservation easement reported on line 2(d) above satisfy the | requirements of section | | | |
| | 170(h)(4)(B)(ı) and section 170(h)(4)(B)(ıı)? | | | ☐ Yes | ∐ No |
| 9 | In Part XIV, describe how the organization reports conservation easemen | | | | |
| | balance sheet, and include, if applicable, the text of the footnote to the org | ganization's financial statements that describ | es | | |
| | the organization's accounting for conservation easements | | | | |
| Pa | rt III Organizations Maintaining Collections of Art, H Complete if the organization answered "Yes" to | | ıilar As | ssets. | |
| 1a | If the organization elected, as permitted under SFAS 116, not to report in art, historical treasures, or other similar assets held for public exhibition, e provide, in Part XIV, the text of the footnote to its financial statements that | ducation, or research in furtherance of publi | | e, | |
| b | If the organization elected, as permitted under SFAS 116, to report in its ribistorical treasures, or other similar assets held for public exhibition, educing provide the following amounts relating to these items (i) Revenues included in Form 990, Part VIII, line 1 | | | s | |
| | (ii) Assets included in Form 990, Part X | | _ | · • | |
| 2 | If the organization received or held works of art, historical treasures, or other | her similar assets for financial dain, provide | the | * | |
| - | following amounts required to be reported under SFAS 116 relating to the | | 410 | | |
| а | Revenues included in Form 990, Part VIII, line 1 | | | · \$ | |
| | Assets included in Form 990, Part X | | | ~ — — - | |
| _ | | | | "- | |

| che | dule D (Form 990) 2008 SUN VALLE | EY CENTER FOR ' | THE ARTS, | INC | 23-71 | <u> 13276</u> | <u>; </u> | | Page 2 |
|-----|--|--|--|-----------------|---------------------------------------|---------------|--|--------------|--|
| Pa | rt III Organizations Maintaining | Collections of Art, H | istorical Treası | ures, oi | Other Si | milar A | ssets (| continu | ed) |
| 3 | Using the organization's accession and other items (check all that apply) | records, check any of the fol | lowing that are a sig | nificant u | ise of its coll | ection | - | | |
| а | Public exhibition | d \ Loan o | r exchange program | าร | | | | | |
| b | Scholarly research | e Other | 3.1.3 | | | | | | |
| С | Preservation for future generations | | | | | | | | |
| 4 | Provide a description of the organization's col Part XIV | lections and explain how the | y further the organiz | ration's ex | xempt purpo | se in | | | |
| 5 | During the year, did the organization solicit or assets to be sold to raise funds rather than to | | | | ıılar | | | Yes | No |
| Pa | rt IV Trust, Escrow and Custod | ial Arrangements. Co | omplete if organ | nization | answere | d "Yes" | to Form | 990. | |
| | Part IV, line 9, or reported | | | | | | | , | |
| 1a | Is the organization an agent, trustee, custodia | | | | ot . | | | | |
| | included on Form 990, Part X? | , | | | | | | Yes | No |
| b | If "Yes," explain the arrangement in Part XIV a | and complete the following ta | ble | | | | _ | | ٠٠ |
| _ | g | | | | | | | Amount | 1 |
| c | Beginning balance | | | | | 10 | - | | |
| | Additions during the year | | | | | 10 | | | |
| | Distributions during the year | | | | | 10 | | | |
| | Ending balance | | | | | 11 | | | |
| | Did the organization include an amount on Fo | rm 990 Part X line 212 | | | | | | Yes | No |
| | If "Yes," explain the arrangement in Part XIV. | 1111 000, 1 dit X, iiii 21 | | | | | لــا | 162 | NO |
| | rt V Endowment Funds. Comp | lete if organization an | swered "Yes" to | Form | 990 Part | IV line | 10 | | |
| | | (a) Current year | (b) Prior year | 1 | years back | | years back | (e) Four | years back |
| 1a | Beginning of year balance | 23,420 | | 1 | | ` ' | | 1 | |
| | Contributions | 932,058 | ····· | | | | | <u> </u> | |
| | Investment earnings or losses | 40,579 | •••••• | | | | | | |
| | Grants or scholarships | | | | | | *************************************** | | ······································ |
| | Other expenditures for facilities | | | | | | *************************************** | | ••••• |
| ٠ | and programs | 45,201 | | | | | | | |
| f | Administrative expenses | 10/202 | | <u> </u> | | | | | ••••• |
| | End of year balance | 950,856 | | | | | | † | |
| _ | Provide the estimated percentage of the year | · | | £ | | | | L | |
| | Board designated or quasi-endowment | | | | | | | | |
| | Permanent endowment 2.53 % | | | | | | | | |
| | Term endowment \ % | | | | | | | | |
| | Are there endowment funds not in the posses | sion of the organization that | are held and admini | etared for | r tha | | | | |
| Ju | organization by | sion of the organization that | are nelo and admini | stered to | i tilo | | | ſ | Yes No |
| | (i) unrelated organizations | | | | | | | 3a(i) | X |
| | (ii) related organizations | | | | | | | 3a(ii) | X |
| h | If "Yes" to 3a(ii), are the related organizations | listed as required on Schedi | ıle R? | | | | | 3b | |
| | Describe in Part XIV the intended uses of the | • | | | | | | [55] | |
| | rt VI Investments—Land, Build | _ ' | |) Part) | X line 10 | | | | |
| | Description of investment | (a) Cost or other basis | (b) Cost or ott | / | | reciation | \Box | (d) Book | value |
| | | (investment) | basis (other | | (-) 50 | | | ,_, 2001 | |
| 12 | Land | | 2,650 | · | | | - | 2.6 | 50,986 |
| | Buildings | | 1,315 | | | 283,8 | 57 | | 31,234 |
| | Leasehold improvements | <u> </u> | 1 2,515 | , , , , , | | | | | , |
| | Equipment | | 397 | ,147 | · · · · · · · · · · · · · · · · · · · | 353,0 | 13 | - | 34,134 |
| | Other | | | /==/ | | 555,0 | | | , |
| | Add lines 1a-1e (Column (d) should equal Fi | orm 990 Part X column (B) | line 10(c)) | | | | | 3 7 | 16 354 |

| Schedule D (Form 990) 2008 SUN VALLEY CENTER FOR | THE ARTS, I | INC 23-7113276 | Page |
|--|--|----------------------------|---------------------------------------|
| Part VII Investments—Other Securities. See Form 99 | 0, Part X, line 12. | | |
| (a) Description of security or category | (b) Book value | (c) Method of valuation | n |
| (including name of security) | | Cost or end-of-year market | value |
| Financial derivatives and other financial products | | | |
| Closely-held equity interests | | | |
| Other | | | |
| | | | |
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| | | | |
| Total. (Column (b) should equal Form 990, Part X, col (B) line 12) | | | |
| Part VIII Investments—Program Related. See Form 99 | 0, Part X, line 13. | | |
| (a) Description of investment type | (b) Book value | (c) Method of valuation | า |
| | | Cost or end-of-year market | value |
| | | | |
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| Total. (Column (b) should equal Form 990, Part X, col (B) line 13.) | | | |
| Part IX Other Assets. See Form 990, Part X, line 15. | | | |
| (a) Description | | (1 | a) Book value |
| CONSTRUCTION IN PROGRES | SS | | 1,171,050 |
| INTEREST RECEIVABLE | | | 3,759 |
| | | | |
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| | | | |
| | | | |
| Total. (Column (b) should equal Form 990, Part X, col. (B) line 15) | | > | 1,174,809 |
| Part X Other Liabilities. See Form 990, Part X, line 29 | 5. | | |
| (a) Description of liability | (b) Amount | | |
| Federal income taxes | | | |
| | | | |
| | | | |
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| - · · · · · · · · · · · · · · · · · · · | | - | |
| Total. (Column (b) should equal Form 990, Part X, col. (B) line 25.) | | - | |
| In Part XIV, provide the text of the footnote to the organization's financial states | ments that reports the or | ganization's liability for | |
| uncertain tax positions under FIN 48 | alactoporto tric or | ga.n.caaon o noomy 101 | |

| _ | dule D (Form 990) 2008 SON VALLET CENTER FOR THE ARTS, INC 23-71132 | 0 | Page 4 |
|-------|--|-------------|---------------------------------------|
| Pa | rt XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements | | |
| 1 | Total revenue (Form 990, Part VIII, column (A), line 12) | 1 | 2,234,145 |
| 2 | Total expenses (Form 990, Part IX, column (A), line 25) | 2 | 2,145,004 |
| 3 | Excess or (deficit) for the year Subtract line 2 from line 1 | 3 | 89,141 |
| 4 | Net unrealized gains (losses) on investments | 4 | 54,861 |
| 5 | Donated services and use of facilities | 5 | |
| 6 | Investment expenses | 6 | |
| 7 | Prior period adjustments | 7 | |
| 8 | Other (Describe in Part XIV) | 8 | |
| 9 | Total adjustments (net) Add lines 4-8 | 9 | -96,621 |
| 10 | Excess or (deficit) for the year per financial statements. Combine lines 3 and 9 | 10 | |
| Pa | rt XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Retu | ırn | |
| 1 | Total revenue, gains, and other support per audited financial statements | 1 | 2,124,970 |
| 2 | Amounts included on line 1 but not on Form 990, Part VIII, line 12 | | |
| а | Net unrealized gains on investments 2a 54,861 | 4 1 | |
| þ | Donated services and use of facilities 2b | 1 1 | |
| С | Recoveries of prior year grants 2c | | |
| d | Other (Describe in Part XIV) 2d -164,036 | | |
| е | Add lines 2a through 2d | 2e | -109,175 |
| 3 | Subtract line 2e from line 1 | 3 | 2,234,145 |
| 4 | Amounts included on Form 990, Part VIII, line 12, but not on line 1: | | |
| а | investment expenses not included on Form 990, Part VIII, line 7b |] | |
| b | Other (Describe in Part XIV) | | |
| С | Add lines 4a and 4b | 4c | |
| 5 | Total revenue Add lines 3 and 4c. (This should equal Form 990, Part 1, line 12.) | 5 | 2,234,145 |
| Pa | rt XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Re | turn | |
| 1 | Total expenses and losses per audited financial statements | 1 | 2,132,450 |
| 2 | Amounts included on line 1 but not on Form 990, Part IX, line 25 | | |
| а | Donated services and use of facilities 2a | | |
| b | Prior year adjustments 2b | | |
| С | Losses reported on Form 990, Part IX, line 25 | | |
| d | Other (Describe in Part XIV) |] | |
| е | Add lines 2a through 2d | 2e | |
| 3 | Subtract line 2e from line 1 | 3 | 2,132,450 |
| 4 | Amounts included on Form 990, Part IX, line 25, but not on line 1: | | · · · · · |
| а | Investment expenses not included on Form 990, Part VIII, line 7b | | |
| b | Other (Describe in Part XIV) 4b 12,554 | | |
| С | Add lines 4a and 4b | 4c | 12,554 |
| 5 | Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part I, line 18) | 5 | 2,145,004 |
| Pa | rt XIV Supplemental Information | | <u> </u> |
| Com | plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b | | · · · · · · · · · · · · · · · · · · · |
| and 2 | b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b | | |
| _1 | PART V, LINE 4 - INTENDED USES FOR ENDOWMENT FUNDS | | |
| _ | THE BOARD DESIGNATED ENDOWMENT FUND CAN BE USED FOR ANY URPO | OSE ' | Which |
| _ | SUPPORTS THE MISSION OF THE CENTER. | | |
| -' | SOFFORIS INE MISSION OF THE CENTER. | | |
| _ | | | |
| _' | THE PERMANENT ENDOWMENT IS FOR MAINTENANCE OF THE NEW BUILD: | <u>ENG</u> | THAT_HAS_NOT_ |
| _1 | BEEN CONSTRUCTED YET. | | |
| | | | |
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| Schedule D (Form 990) 2008 SUN VALLET CENTER FOR THE ARTS, INC 23-/1132/6 | Page 5 |
|---|-------------------------|
| Part XIV Supplemental Information (continued) | |
| PART XI, LINE 8 - RECONCILATION OF CHANGES - OTHER | |
| _BAD_DEBT_ALLOWANCE \$ | 180,000 |
| _AMORTIZATION OF_DISCOUNT ON_LT PLEDGES \$ \$ | _15,964 |
| _ACCRUED_VACATION ADJUSTMENT \$ \$ | <u>8,228</u> |
| BOOK / TAX DEPRECIATION_DIFFERENCE \$ \$ | <u>4,326</u> |
| | - - - |
| PART XII, LINE 2D - REVENUE AMOUNTS INCLUDED IN FINANCIALS - OTHE | <u>R</u> |
| BAD DEBT ALLOWANCE \$ | 180,000 |
| AMORTIZATION OF DISCOUNT ON LT PLEDGES \$ | _15,964 |
| | |
| PART XIII, LINE 4B - EXPENSE AMOUNTS INCLUDED ON RETURN - OTHER | |
| _ACCRUED_VACATION ADJUSTMENT \$ | _ 8,228 |
| BOOK / TAX DEPRECIATION DIFFERENCE \$ | <u>4,326</u> |
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SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury

Department of the Treasury Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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

OMB No 1545-0047
2008
Open To Public

Inspection

Name of the organization

SUN VALLEY CENTER FOR THE ARTS. INC.

Employer identification number 23-7113276

| | | | | | | | . , , | | | |
|-----|---|--------------------|---|------------------------|-----------------------------------|---|---|--|--|--|
| Pa | rt I Fundraising Activities. Complete it | f the organization | on ar | nswe | ered "Yes" to Form | n 990, Part IV, line | e 17. | | | |
| | | | | | | | | | | |
| | (i) Name of individual or entity (fundraiser) | (II) Activity | (III) Did raiser custo contri contrib | have dy or of of | (IV) Gross receipts from activity | (v) Amount paid to (or retained by) fundraiser listed in cot (i) | (vi) Amount paid to (or retained by) organization | | | |
| | | | Yes | _ | | | | | | |
| | | | | | | | | | | |
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| Tot | al | | | • | | | | | | |

3 List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing Schedule G (Form 990 or 990-EZ) 2008

| Pi | art i | Fundraising Events from the more than \$15 | | | • | | | | | • | • | | r rep | orted | i |
|-----------------|-----------------|---|---------|------------------|------------------|-------------|--------------------------------|----------------|---------|-----------------|-----------|---------|----------|---------------------|-------------------------|
| | | more than \$10 | | (a) Event # | #1 ION | <u></u> | (b) Event | #2 | | (c) Other Even | ts | (d) | Total (a |) throu | gh |
| Revenue | 1 | Gross receipts | | | 417,812 | | (event typ | | | (total flumber) | | | | | 812 |
| ۳ | 2 | Less. Charitable contributions | | 8 | 356,196 | | | | | <u>-</u> | | | | | 196 |
| | 3 | Gross revenue (line 1 minus line 2) | | | 561,616 | | | | _ | | | | 5 | 61, | 616 |
| | 4 | Cash prizes | | | | | | | + | | | | | | |
| sesue | 5 | Non-cash prizes | | | | | | | + | | | | | | |
| Direct Expenses | 6 | Rent/facility costs | | | | | | | - | | | | | | |
| Dire | 7 | Other direct expenses | | 3 | 392,828 | | | | | | | | 3 | 92, | 828 |
| P | 8 9 art l | Direct expense summary. Net income summary Co Gaming. Comp | mbine | lines 3 and 8 ii | n column (d) | | d "Yes" to | Form 990, | , Par | t IV, line 19, | or repo | orted m | 10 | 92 , 1 68 , 1 | 828 ₎ 788 |
| | | than \$15,000 c | n Fo | orm 990-EZ, | line 6a. | | | | | | • | | | | |
| Revenue | | | | (a) Bingo | | | (b) Pull tabs/lbingo/progressi | | - | (c) Other gamin | ng | | - | nng (Ad gh col (| |
| æ | 1 | Gross revenue | | | | | | | _ | | | | | _ | |
| ses | 2 | Cash prizes | | | | | | | + | | | | | | |
| Direct Expenses | 3 | Non-cash prizes | | | | | | | - | | | | | | |
| Direc | 4 | Rent/facility costs | | | - | | | - | + | | | | | | |
| | 5 | Other direct expenses | | 1 | - | ļ, | , | | +- | 1 | | | | | |
| | 6 | Volunteer labor | | Yes No | % | | Yes No | % | \perp | Yes No | % . | | | | |
| | 7 | Direct expense summary. | . Add I | ines 2 through | 5 ın column (d |) | | | | | • | <u></u> | | | |
| | 8 | Net gaming income sumn | nary. (| Combine lines 1 | and 7 in colu | mn (d) | | | | | • | | | | |
| 9 a b | is t | ter the state(s) in which the he organization licensed to No," Explain | | | | | states? | | | | | | 9a | Yes | No |
| 10a b | | ere any of the organization's Yes," Explain | s gam | ing licenses rev | oked, suspen | ded or | terminated du | ring the tax y | ear? | | | | 10a | | |
| 11 12 | ls t | es the organization operate he organization a grantor, med to administer chantabl | benefi | ciary or trustee | | | er of a partne | rship or other | entity | | | | 11 12 | | |
| | | | - guil | ····/ | | | | | | Sche | dule G (F | orm 990 | | 0-EZ) | 2008 |

| Sche | edule G (Form 990 or 990-EZ) 2008 | ALLEY | CENTER | FOR | THE | ARTS, | INC | 23-7113 | 3276 | | P | age 3 |
|------|--|----------------|-------------------|-----------|----------|--------------|-----|----------|-----------|----|-----|-------|
| | • | | | | | | | | · | | Yes | No |
| 13 | Indicate the percentage of gaming activity operated | in: | | | | | | | | | 1 | |
| а | The organization's facility | | | | | | 13a | <u> </u> | % | | 1 | |
| b | An outside facility | | | | | | 13b | <u>L</u> | % | | I | |
| 14 | Provide the name and address of the person who pi | repares the o | organization's g | gaming/s | pecial e | vents books | | | | | | |
| | and records | | | | | | | | | | ı | |
| | Name ▶ | | | | | | | | | | | |
| | Address ▶ | | | | | | | | | | | |
| 15a | Does the organization have a contract with a third p | arty from wh | om the organiz | ation rec | eives g | aming | | | | | l | |
| | revenue? | | | | | | | | | 5a | | |
| b | If "Yes," enter the amount of gaming revenue receiv | ed by the org | ganization 🕨 | \$ | | | and | the | | | 1 | |
| | amount of gaming revenue retained by the third part | ty ▶ \$ | | | | | | | | | ı | |
| С | If "Yes," enter name and address | | | | | | | | | | | |
| | Name ▶ | | | | | | | | | | | |
| | Address ▶ | | | | | | | | | | | |
| 16 | Gaming manager information | | | | | | | | | | | |
| | Name ▶ | | | | | | | | | | | |
| | Gaming manager compensation ▶ \$ | | | | | | | | | | | |
| | Description of services provided ▶ | | | | | | | | | | į | |
| | Director/officer Employee | Ir | ndependent co | ntractor | | | | | 444 | | į | |
| 17 | Mandatory distributions | | | | | | | | | | I | |
| а | Is the organization required under state law to make | charitable d | istributions froi | n the ga | ning pro | oceeds to | | | | | Ī | |
| | retain the state gaming license? | | | | | | | | <u> 1</u> | 7a | | |
| þ | Enter the amount of distributions required under state | te law distrib | uted to other e | xempt or | ganızatı | ons or spent | | | | | ŧ | |
| | in the organization's own exempt activities during the | e tay year 🕨 | ¢ | | | | | | ŀ | 1 | I | |

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SCHEDULEI (Form 990)

Department of the Treasury Internal Revenue Service

Part

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

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OMB No 1545-0047

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☐ Yes

Open to Public Inspection Employer identification number 23-7113276 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and ► Complete if the organization answered "Yes," on Form 990, Part IV, lines 21 or 22. ► Attach to Form 990. INC SUN VALLEY CENTER FOR THE ARTS General Information on Grants and Assistance Name of the organization

| 8 | 🔀 | 1 | I | i | 1 | | 1 | l | ļ |
|--|---|---|---|---|---|--|---|---|---|
| X | l | ant | | | | | į | | |
| ☐ Yes | wered "Yes" on more than \$5,000. | (h) Purpose of grant or assistance | | | | | | | |
| • | lete if the organization ans no one recipient received | (g) Description of non-cash assistance | ł | | | | | | |
| | | (f) Method of valuation (book, FMV, appraisal, other) | | | | | | | |
| | ited States. Com Check this box | (d) Amount of cash grant (e) Amount of non-cash assistance | | | | | | | |
| in the United States | zations in the Un nore than \$5,000 needed | (d) Amount of cash grant | | | | | | | |
| rant funds | d Organ i ceived r pace is | (c) IRC section if applicable | | | | | | | |
| ntoring the use of g | vernments and ecipient that re) if additional s | (b) EIN | | | | | | | |
| the selection criteria used to award the grants or assistance? Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States | Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed ▶ | (a) Name and address of organization or government | | | | | | | |
| the se 2 Descri | Part | - | | | | | | | |

Enter total number of section 501(c)(3) and government organizations

Enter total number of other organizations

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

Schedule I (Form 990) 2008

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| Schedule I (F | Schedule I (Form 990) 2008 SUN VALLEY CENTER FOR THE ARTS, Part III Grants and Other Assistance to Individuals in the United St Use Schedule I-1 (Form 990) if additional space is needed. | ENTER FOR THI to Individuals in the if additional space is | اءَ כات | 3-7113276 nplete if the organiza | ARTS, INC 23-7113276 nited States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. eeded. | Page 2 orm 990, Part IV, line 22. |
|---------------|--|--|--------------------------|-------------------------------------|--|--|
| | (a) Type of grant or assistance | (b) Number of recipients | (c) Amount of cash grant | (d) Amount of non-cash assistance | (e) Method of valuation (book, FMV, appraisal, other) | (e) Method of valuation (book, (f) Description of non-cash assistance FMV, appraisal, other) |
| SCHOLA | SCHOLARSHIPS | 35 | 48,016 | | | |
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| Part IV | Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. | omplete this part to | provide the information | on required in Part I, | line 2, and any other addi | tional information. |

SCHEDULE L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Transactions With Interested Persons

► Attach to Form 990 or Form 990-EZ.

► To be completed by organizations that answered

"Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c,

OMB No 1545-0047
2008
Open To Public

| Name of the a | | or For | rm 99 | U-EZ, Part | V, III | ne 38a or 4 | lOb. | · 1 | - | | | specti | | | |
|---|---|---------------------------|---|-------------------------|--|---------------------------------------|------------------------------------|-------------------|--------------------------------|--------------------------------|----------|------------|---------------------|--------------|--|
| Name of the or | • | ID E01 | FOR THE ARTS INC | | | | | | Employer identification number | | | | | | |
| Part I | | | FOR THE ARTS, INC 23 n 501(c)(3) and section 501(c)(4) organizations only). | | | | | | | -7113276 | | | | | |
| rait 1 | To be completed by organizations that answ | ction 501(d vered "Yes | c)(3) a s" on F | ind section Form 990 | 501(Part I | c)(4) orgar V line 25a | nizations only | /). orm 990-E7 | Part V | line / | 105 | | | | |
| | | 10100 100 | 5 0111 | 01111 000, | · unti | V, IIIC 200 | 01 200, 01 1 | OIII 000 LZ, | T dit V | 11110 | 100 | (0) | Correc | ted? | |
| 1 | (a) Name of disqualified person | | | | | (b) Description of tran | | | | insaction | | | | No | |
| | | | | | | | • | | | | | Yes | \top | | |
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| | he amount of tax imposed on the organization materials and the section 4958 | nanagers | or disc | qualified pe | erson | s during the | e year | | ▶ \$ | : | | | | | |
| | ne amount of tax, if any, on line 2, above, reimb | ursed by t | the or | ganization | | | | | ▶ \$ | | | | | | |
| Part II | Loans to and/or From Interested | | | | | | | | | | _ | | | _ | |
| | To be completed by organizations that answ | | | orm 990, | Part l | V, line 26, | or Form 990 | -EZ, Part V, I | ine 38a | 1 | | | | | |
| | (a) Name of interested person and purpose | (b) Lo | | | Origin | _ | | ance due | | default? | /f) An | proved | (a) V | Vritten | |
| (a) maile of miscosics person and perpose | | | m the | princip | - | | (=/ 50. | | (0, | Joidan | by bo | ard or | | ement? | |
| | | organiz | ation? | | | | | | L | | comn | nittee? | | | |
| | | То | From | | | _ | | | Yes | No | Yes | No | Yes | No | |
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| Total Part III | Grants or Assistance Benefitting | Interes | ted | Parsons | | ▶\$ | <u> </u> | | | | L | | | | |
| | To be completed by organizations that answ | | | | | V. line 27 | | | | | | | | | |
| | | | | | | rson and the | nd the (c) Amount of grant or type | | | | | of | | | |
| (a) Name of interested person | | | | | (b) Relationship between interested pers organization | | | | (6) 7 (111 | | | assistance | | | |
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| Part IV | Business Transactions Involving | Interes | ted | Persons | i_ | | ·- | | | | | | | | |
| | To be completed by organizations that answ | | | | | V, line 28a. | , 28b, or 28c | - | | | | | | | |
| | (a) Name of interested person (b) Relationship be | | | | | | | | | (d) Description of transaction | | | (e) Shann of org | | |
| | | | ested p | erson and th | | | | , , | (2) Dood phon of transact | | | _ | | org nues? | |
| | | | | nization | | | | | | | | Yes | No | | |
| CIRO RES | STAURANT | DIR | ECTC | R | | | 897 | CATEREI | EVE | NTS | <u> </u> | | L_ | х | |
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SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

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

2008 Open to Public inspection

OMB No 1545-0047

Name of the organization

SUN VALLEY CENTER FOR THE ARTS, INC

Employer identification number 23-7113276

FORM 990 - ORGANIZATION'S MISSION OR MOST SIGNIFICANT ACTIVITIES OFFERING EXHIBITIONS, LECTURES, CLASSES AND PERFORMING ARTS EVENTS THAT TOUCH ON ISSUES RELEVANT TO OUR TIMES AND BY BRINGING SOME OF THE WORLD'S MOST INTERESTING ARTISTS, WRITERS AND THINKERS TO OUR SMALL COMMUNITY IN CENTRAL IDAHO.

FORM 990, PART III, LINE 4D - ALL OTHER ACHIEVEMENTS

THE CENTER GRANTS SCHOLARSHIPS TO BLAINE COUNTY HIGH

SCHOOL AND COLLEGE STUDENTS AND TEACHERS FOR THE STUDY OF

THE ARTS AND HUMANITIES. THE CENTER ALSO OFFERS

SCHOLARSHIPS TO ART CLASSES OFFERED THROUGH THE CENTER.

FORM 990, PART VI, LINE 2 - RELATED PARTY INFORMATION AMONG OFFICERS

JACK THORNTON

DIRECTOR

DIRECTOR

HUSBAND/WIFE

FORM 990, PART VI, LINE 10 - ORGANIZATION'S PROCESS USED TO REVIEW FORM 990
THE BOARD PRESIDENT, EXECUTIVE DIRECTOR AND DEVELOPMENT DIRECTOR REVIEW
BEFORE MAILING.

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY
BOARD MEMBERS MUST SIGN A CONFLICT OF INTEREST STATEMENT AT THE BEGINNING
OF EVERY FISCAL YEAR.

Name of the organization

SUN VALLEY CENTER FOR THE ARTS, INC

Employer identification number

23-7113276

FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL THE EXECUTIVE COMMITTEE REVIEWED DATA PROVIDED BY A SEARCH FIRM.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION UPON REQUEST

Form **4562**

Department of the Treasury Internal Revenue Service

Depreciation and Amortization

(Including Information on Listed Property)

► See separate instructions. ► Attach to your tax return.

OMB No 1545-0172

2008
Attachment Sequence No 67

Name(s) shown on return

SUN VALLEY CENTER FOR THE ARTS, INC

Identifying number 23-7113276

| | ess or activity to which this form relates NDIRECT DEPRECIAT | ION | | | | | | | | |
|--------------|--|------------------------------|---------------------------------------|-------------|-----------------|-----------|------------|--------------|---------|--|
| Pa | rt I Election To Expe | nse Certain Prop | erty Under Sec | ction 1 | 79 | | | | | |
| | Note: If you have | any listed proper | ty, complete P | art V b | efore you | comp | olete Pa | rt I. | | |
| 1 | Maximum amount See the instructions for a higher limit for certain businesses | | | | | | | | | 250,000 |
| 2 | Total cost of section 179 property placed in service (see instructions) | | | | | | | | | |
| 3 | Threshold cost of section 179 property before reduction in limitation (see instructions) | | | | | | | | | 800,000 |
| 4 | Reduction in limitation Subtract line 3 from line 2. If zero or less, enter -0- | | | | | | | | | |
| 5 | Dollar limitation for tax year Subtract I | ine 4 from line 1. If zero o | r less, enter -0- If mar | ried filing | separately, see | e instruc | tions | | 5 | |
| | <u>'</u> | on of property | | | (business use | | | lected cost | | |
| 6 | | | | | | | | | | |
| | | | | | | | - | | | |
| 7 | Listed property Enter the amount | from line 29 | | | | 7 | | | | |
| 8 | Total elected cost of section 179 | property Add amounts | s in column (c), lines | 6 and 7 | | | | | 8 | |
| 9 | Tentative deduction Enter the sm | | | | | | | | 9 | |
| 10 | Carryover of disallowed deduction | | | | | | | | 10 | |
| 11 | Business income limitation Enter | • | | than zero | o) or line 5 (s | ee inst | ructions) | | 11 | |
| 12 | Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11 | | | | | | | | 12 | |
| 13 | Carryover of disallowed deduction to 2009 Add lines 9 and 10, less line 12 | | | | | | | | | |
| | Do not use Part II or Part III below | | | | | | | | | h |
| Pa | rt II Special Depreciat | ion Allowance a | nd Other Depre | eciatio | n (Do not | inclu | ıde liste | d prope | rtv.) (| (See instructions.) |
| 14 | Special depreciation allowance fo | | | | | | | р. ор о | | |
| | during the tax year (see instructio | , , , , , | | ,,,,, | | | | | 14 | 9,869 |
| 15 | Property subject to section 168(f) | • | | | | | | | 15 | |
| 16 | | | | | | | | | | 60,900 |
| | rt III MACRS Deprecia | | ude listed prope | ertv) (S | See instru | ction | ;) | | 16 | 50,700 |
| | | | | ion A | | 0.1011 | <i>.</i> , | | - | |
| 17 | MACRS deductions for assets pla | ced in service in tax vi | ears beginning befo | re 2008 | | | | | 17 | 0 |
| 18 | , | | | | | | eck here | ightharpoons | | I |
| | | -Assets Placed in Se | | | | | | ation Sy | stem | |
| | | (b) Month and | (c) Basis for depr | | (d) Recovery | | | | | |
| | (a) Classification of property | year placed in service | (business/investme | | period | (e) C | onvention | (f) Me | thod | (g) Depreciation deduction |
| 19a | 3-year property | | Unity God monde | | | | | | | |
| <u> </u> | 5-year property | - | 3 | , 985 | 5.0 | 1 | Y | S/ | ′T. | 398 |
| ~ | 7-year property | ╡ | | ,066 | 7.0 | | Y | S/ | | 76 |
| | 10-year property | ┥ | | 7000 | | | | | | |
| | 15-year property | 7 | | | | | | | - | |
| | 20-year property | ┪ | | | | | | | | |
| g | 25-year property | - | | | 25 yrs | | | S/L | | |
| | Residential rental | | † | | 27 5 yrs | | мм | S/L | | |
| •• | property | | | | 27 5 yrs. | | MM | S/L | | |
| i | Nonresidential real | | | | 39 yrs | | MM | S/L | | |
| • | property | | <u> </u> | | | | MM | S/L | | <u> </u> |
| | | Assets Placed in Ser | vice During 2008 T | Tay Voar | Using the A | | | | | <u>. </u> |
| 200 | Class life | ASSECT FIGURE III OUT | Vice Burning 2000 i | ux rear | Using the F | I | tive Depi | | | |
| | | - | | | 12 vra | <u> </u> | | S/L | | |
| | 12-year 12 yrs S/ | | | | | | | | | |
| | 40-year | ctructions \ | | | 40 yrs | | MM | S/L | | <u> </u> |
| | rt IV Summary (See in | | | | | | | | | |
| 21 | Listed property. Enter amount from | | 40 | | | | | | 21 | |
| 22 | Total. Add amounts from line 12, | - | | | | | | | _ | 71 040 |
| 22 | Enter here and on the appropriate | | = = = = = = = = = = = = = = = = = = = | corporation | ons—see ins | ir T | | | 22 | 71,243 |
| 23 | For assets shown above and place | - | · · · | | | _ | | | | |
| | enter the portion of the basis attrib | outable to section 263/ | A COSTS | | | 23 | | | | 4500 |