

DECUMENT CONTINUES OF A **CORPORATION ANNUAL REPORT** & CERTIFICATE OF DISCLOSURE

DUE ON OR BEFORE 04/23/2007

FY06-07

FII

The following information is required by A.R.S. §§10-1622 & 10-11622 for all corporations organized pursuant to Arizona Revised The Commission's authority to prescribe this form is A.R.S. §§10-121.A. & 10-3121.A. YOUR REPORT MUST BE SUBMITTED ON THIS ORIGINAL FORM. Make changes or corrections where necessary. Information for the report should reflect the current status of the corporation. See instructions on page 4 for proper format.

1. -0879651-5 FOX TUCSON THEATRE FOUNDATION 30 N CHURCH TUCSON, AZ 85701

BECEIAED

AUG 0 6 2007

ARIZONA CORP. COMMESTON CORPORATIONS DIVISION

designated the new Statutory Agent,

	Business Phone:	(Business phone is optional.)	
_	State of Domicile: ARIZONA T	ype of Corporation: NON-PROFIT	RECEIVED
2.	Statutory Agent: HERE STRATFORD	Physical Address,	If Different.
	Mailing Address: 308 E 2ND ST City, State, Zip: TUCSON, AZ 85705	Physical Address: City, State, Zip:	MAY 1 4 2007
	Use this	box only if appointing a ne	ARIZONA CORP. COMMISSION STATUTOTY TO SUPPORT TO SUPPO

ACC USE ONLY	Use this box only if appointing a new Statutory
Fee \$	If appointing a <u>new</u> statutory agent, the new agent MUST consent to that appointment by signing below.
Penalty \$	I, (individual) or We, (corporation or limited liability company) having been designated the new St do hereby consent to this appointment until my removal or resignation pursuant to law.
Expedite \$	Signature of new Statutory Agent
	Printed Name of new Statutory Agent

Secondary Address:

(Foreign Corporations are REQUIRED to complete this section).

1. Check the one category below which best describes the CHARACTER OF BUSINESS of your corporation.

DUJINESS CUP		NON-PROFIT CORPORATIONS
1. Accounting	20. Manufacturing	1. Charitable
2. Advertising	21. Mining	2. <u> </u>
3. Aerospace	22. News Media	3 Educational
4. Agriculture	23. Pharmaceutical	4 Civic
5. Architecture	24. Publishing/Printing	5. Political
6. Banking/Finance	25. Ranching/Livestock	6. Religious
7. Barbers/Cosmetology	26. Real Estate	7. Social
8. Construction	27. Restaurant/Bar	8. Literary
9. Contractor	28. Retali Sales	9. Cultural
10. Credit/Collection	29. Science/Research	10. Athletic
11. Education	30. Sports/Sporting Events	11 Science/Research
12. Engineering	31. Technology(Computers)	12 Hospital/Health Care
13. Entertainment	32. Technology(General)	13 Agricultural
14. General Consulting	33. Television/Radio	14 Animal Husbandry
15. Health Care	34. Tourlsm/Convention Services	 Homeowner's Association
16. Hotel/Motel	35. Transportation	Professional, commercial
17. import/Export	36. Utilities	industrial or trade association
18. insurance	37. Veterinary Medicine/Animal Care	17 Other
19. Legal Services	38. Other	

	LIZATIVIT: (Dusiness Curpulations and Du		
Business tru the trust est	usts must indicate the number of transfera tate. Please Print or Type Cle	ble certificates he	ld by trustees evidencing their beneficial interest in 08/19/06/-6
5a. Plea	ase examine the corporation's original Arti	cles of Incorporati	
Number of S	Shares/Certificates Authorized	Class	Series Within Class (if any)
NA	P		
5b. Rev	riew all corporation amendments to deter coration's minutes for the number of share	rmine if the origines issued.	nal number of shares has changed. Examine the
Number of S	Shares/Certificates Issued	Class	Series Within Class (if any)
N/A			
6. <u>SHAREH</u>	OLDERS: (Business Corporations and Bu	usiness Trusts are	REQUIRED to complete this section.)
List shareho	olders holding more than 20% of any classifierest in the corporation. Please Type	s of shares issue	d by the corporation, or having more than a 20%
penenciai III	Name: What I was a support of the su		early.
NONE 🗍	Name:		:
7. OFFICER	RS Please Type or Print Clea	rly. You Mus	t List at Least One.
Name:	sary Partick	Name:	Suzanne Ellenbogen
Title:	resident	Title:	Treasurer
Address: _5	550 N. Camino Escuela	Addres	s: 5575 N. Maria Dr.
	Two, Az 85718		Tuesca Ar. 85704
Date taking	office: Feb 18 2007	Date ta	king office: Feb 18, 2006
Name: <u></u>	Sery Baroff	Name:	Edna Meza Aquirre
Title:	Scartary	fitle:	Vice President
Address:	630 N. W. Imot	Address	s: 252. N. Main Aug # 3
<	Tocoen, Az 85711		TULSON AZ 85701
	office: 2/18/010	Date ta	king office: 2/18/06
8. <u>DIRECTO</u>	ORS Please Type or Print Clea	rly. You Mus	t List at Least One.
Name: 叁	lle Patterson	Name:	Bob Hannen
Address: 🚄	400 & Speedway Ste /	04 Address	PD Box 36165
	Tucson Az		Tueso Az 85740
Date taking o	office: Feb 18,2006	Date tal	king office: 3/21/05
Name:	<u>'</u>		I
Address:		Address	s;
Date taking o	office:	Date tai	ding office:

3:46 PM 04/24/07 Accrual Basis

Fox Tucson Theatre Foundation Balance Sheet

As of December 31, 2006

	Dec 31, 06
ASSETS	
Current Assets	
Checking/Savings Regular Checking - 6736	113,944.42
Regular Savings - 5617	37,121.65
Puro Mexicano Checking - 5	-247.76
Petty Cash	400.00
Total Checking/Savings	151,218.31
Accounts Receivable	400 000 00
General Promises to Give - Net	108,300.00 125,321.38
Total Accounts Receivable	233,621.38
Other Current Assets Due from AZ Fox	85.00
Due From AZ Rehab	83,216.58
Due from Fox Presents!, LLC	35,232.22
Prepaid Expenses	12,611.07
Inventory	943.78
Undeposited Funds	250.00
Total Other Current Assets	132,338.65
Total Current Assets	517,178.34
Fixed Assets	
Liqour License	7,360.00
Fixtures and Furnishings	54,696.58 38,513.59
Tenant Improvement Arizona Star (30 & 32)	828,737.26
Total Fixed Assets	929,307.43
	323,001.40
Other Assets Investment in AZ FOX	11862082.25
Worker's Compensation Deposit	2,133.00
Capital Contrib-Fox Presents	171,160.85
Total Other Assets	12035376.10
TOTAL ASSETS	13481861.87
LIABILITIES & EQUITY	
Liabilities	
Current Liabilities	
Accounts Payable	
Accounts Payable	74,054.88
Total Accounts Payable	74,054.88
Credit Cards	
Staples	-131.25
Office Max	777.29
Total Credit Cards	646.04

3:46 PM 04/24/07 Accrual Basis

Fox Tucson Theatre Foundation Balance Sheet

As of December 31, 2006

	Dec 31, 06
Other Current Liabilities Due to Fox Presents Deferred Revenue Payroll Taxes Payable	7,599.52 40,080.00 336.21
Total Other Current Liabilities	48,015.73
Total Current Liabilities	122,716.65
Long Term Liabilities Notes Payable Rio Nuevo District Obligation Total Long Term Liabilities	271,510.20 6,614,403.34 6,885,913.54
Total Liabilities	7,008,630.19
Equity AZ FOX Net Assets Net Assets Net Income Total Equity	3,500,000.00 2,969,922.09 3,309.59 6,473,231.68
TOTAL LIABILITIES & EQUITY	13481861.87

3:46 PM 04/24/07 Accrual Basis

Fox Tucson Theatre Foundation Profit & Loss

January through December 2006

	Jan - Dec
Ordinary Income/Expense	
Income	
Special Event/Prog Income	148,246.62
Organ Fund Restricted	250.00
Naming Revenue	60,791.00
Development Fee	108,300.00
Management Fee	0.00
Restricted Mickey Mouse Club	0.00
Restricted Funds-Panorama 2	10,520.00
Cultural Preservation Fee	0.00
Building Restoration Fund-Restr	0.00
Founder Club	18,000.00
in-kind Contribution	1,547.25
Board Contributions and Dues	8,550.00
Fundraising	118,008.14
Other Income	58,987.72
Private Grants	35,887.72
Fox Fiesta, Net	6,813.58
Grand Re-Opening, Net Puro Mexicano Film Festival	0.00
Rent from Fox Presents	32,992.00
Investment Income	12,240.00 66.65
investment income	
Total Income	621,200.68
Expense	
Lodging & Travel	0.00
Employee Related Expenses	171,169.54
Professional Fees	108,862.61
Insurance	-2,920.52
Office and Operating	65,797.09
Event Expense	224,544.32
Development Expense	2,567.89
Debt Service	8,258.92
Travel and Entertainment	12,607.04
Miscellaneous	3,004.20
Depreciation	24,000.00
Total Expense	617,891.09
Net Ordinary Income	3,309.59
Net Income	3,309.59

9. FINANCIAL DISCLOSURE (A.R.S. §10-11622.A Nonprofit corporations <u>must attach</u> a financial statement (forms of corporations are exempt from filing a financial disparations). 9A. MEMBERS (A.R.S. § 10-11622.A.6)	e.g. income/exper	ise statement, balanc	e sheet including 08796	g assets, liabilities).	All other
Only Nonprofit Corporations must answer this question.	This cor	poration DOES	DOES N	OT Dhave mer	nhare
Only templan corporations must answer mis question.]	Sizion DOLG	14.	C. Diave mei	iiDCi3.
10. CERTIFICATE OF DISCLOSURE (A.R.S. §§10-Has ANY person serving either by election or appointment a than 10% of the issued and outstanding common shares of been: [Underlined portion pertains to business corpor	as an officer, director 10% of any othe	tor, trustee, incorpora	tor <u>and/or perso</u> al or membersh	on controlling or hold ip interest in the co	ling more rporation
 Convicted of a felony involving a transaction in securities, consumer fraud or antitrust in any state or federal jurisdiction within the seven year period immediately preceding the execution of this certificate? Convicted of a felony, the essential elements of which consisted of fraud, misrepresentation, theft by false pretenses or restraint of trade or monopoly in any state or federal jurisdiction within the seven year period immediately preceding execution of this certificate? Or are subject to an injunction, judgment, decree or permanent order of any state or federal court entered within the seven year period immediately preceding execution of this certificate where such injunction, judgment, decree or permanent order involved the violation of: (a) fraud or registration provisions of the securities laws of that jurisdiction, or (b) the consumer fraud laws of that jurisdiction, or (c) the antitrust or restraint of trade laws of that jurisdiction? 					
	,	One box must be	e marked:	YES 🗆 NO	Z
If "YES", the following information must be submof the actions stated in Items 1. through 3. above.	<u>iitted</u> as an attac				or more
Full name and prior names used.		and location of birth			
2. Full birth name.		al Security Number	# /.		
Present home address. Prior addresses (for immediate	7. The	nature and description late and location; the	n of each convic	ction or judicial action	n;
preceding 7 year period).		ille or cause number o		agency involved, a	na
,					
11. STATEMENT OF BANKRUPTCY, RECEIVERS 1623 & 10-11623)	HIP or CHARTE	R REVOCATION (_
A) Has the corporation filed a petition for bankruptcy or ap	pointed a receive	? One box <u>must</u> !	be marked:	YES I NO	1
B) Has any person serving as an officer, director, trustee or incorporator of the corporation served in any such capacity OR held or controlled over 20% of the issued and outstanding common shares, or 20% of any other proprietary, beneficial or membership interest in any other corporation which has been placed in bankruptcy, receivership or had its charter revoked, or administratively or judicially dissolved by any state or jurisdiction?					
[Underlined portion pertains to business corporations	only]	One box <u>must</u>	be marked:	YES INO	1
If "YES" to A and/or B, the following information mustatement above. 1. The names and addresses of each corporation stockholder) 2. The state in which each corporation was a) incomplete and incomplet	on and the person prporated b) transativolved in any oth	or persons involved acted business. her bankruptcy proced	l. (e.g. officer, (director, trustee or	major
12. SIGNATURES: Annual Reports must be signed	and dated by at	east one duly author	orized officer o	or they will be reje	cted.
I declare, under penalty of law that all corporate incomflied with the Arizona Department of Revenue. I furthe certificate, including any attachments, and to the best	ne tak returns red er declare under	uired by Title 43 of penalty of law that i	the Arizona Re (we) have exa	vised Statutes ha	ve been and the
Name Gary Bottier Date 28	1 1	Suzanne Elle	aboge a	_Date_ \$\frac{1}{25} \right 6	7
Signature	Signatui	E TOUR			_
Title the Sedant	Title	1805 (01 22			
(Signator(s) must be duly authoriz			ion 7 of this re	port.)	_