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パ Form 990-PF

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

OMB No. 1545-0052

	Department of the Treasury Internal Revenue Service Note: The foundation may be ab						Treated as a Private Foundation a able to use a copy of this return to satisfy state reporting requirement					ortina requirements	, 2008	
			enue Service Note: The foundation may be able to use a copy of this return to satisfy state report and ar year 2008, or tax year beginning , 2008, and ending							ting requirements	, 20			
			that apply		Initial retu		Final return	1	Amended r		<u></u>	Address change	X Name change	
•		TICON OIL	Name of fo				T mai rotani	—	174110110001	O.d.iii		A Employer identific		
	He	e the IRS	THE MEA	UM WILL	IEW FOU	אדאב מוא	ON							
		label.			ELUCCHI			DE	COLIDATE			94-3	3256658	
	Ot	herwise,					mail is not delivered to s			Room/s	uite	B Telephone number (see		
		print			N PARKW				,			,,		
		or type.	DUTTOTA		0, 4TH							,	\ _	
		Specific	City or tow		and ZIP co							C If exemption applicat	ion is	
	Ins	tructions	. ,	.,	,							pending, check here	▶ 1 1	
			CAN MAT	·FO .	CA 9440	2						D 1 Foreign organizati	•	
	u ^	hook tw					c)(3) exempt priva	to f	oundation			2. Foreign organizat 85% test, check he	ere and attach	
	~~	1	pe or organiz i 4947(a)(1) n				Other taxable			"OD		computation	▶ □	
			et value of a				unting method					E If private foundation	- I I	
										iuai		under section 507(b)		
		6) ► \$	rom Part II, c			(Part I	ther (specify) column (d) must be		cash hasis)			F if the foundation is under section 507(b):	. 1 1	
1			lysis of Rev	30,8		-	Coldina (c) made be	7	00011 00010 7		T	under secudit 507(b)	(d) Disbursements	
		total	of amounts in	column	s (b), (c), an	d (d)	(a) Revenue and		(b) Net inve	stment		(c) Adjusted net	for charitable	
			not necessan mn (a) (see pa				expenses per books		incom	e	1	ıncome	purposes	
-	Τ.					- / /	7,32	, 		· · · · · · · · · · · · · · · · · · ·	 		(cash basis only)	
	1	Contrit	outions, gifts, grant	foundate	tion is not req	uired to	1,32	4.						
	3		- allac				2,47	,,		2,471.	<u> </u>		STMT 1	
			st on savings an ends and intei	•	•		894,36	\neg		1,363.			STMT 2	
	1		enus and inter s rents				094,30	٠,٠	094	1, 363.			51M1 Z	
	`		ental income or (<u> </u>			
	, ا		ain or (loss) from				1,001,12							
ì	ğ `	b Gross	sales price for a		18,216		1,001,12	· · ·						
	antia 7		s on line 6a :al gain net inc	ome (fr				一	1 001	1.128.	1			
à	֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓	•	hort-term cap	•		•		$\neg \neg$	1,003	120.	-	· · · · ·		
	,		ne modificatio	-			, , , , , , , , , , , , , , , , , , , 							
		a Gross	sales less return	s I										
			llowances • • • • Cost of goods so											
2010			s profit or (loss		h schedule)			\neg	· · · · · · · · · · · · · · · · · · ·			-	· · · · ·	
	1.		r income (atta				100,69	7.					STMT 3	
\Leftrightarrow	12		. Add lines 1 t				2,005,98		1,897	7,962.				
ا	1:		ensation of offic					NE		, , , , , ,				
>=	14		r employee sa											
MAY	ß 1		ion plans, emp											
			l fees (attach s				_							
Ω	3		unting fees (a				14,38	5.		NONE		NONE	NONE	
ANNED	16 17 17 17 17 17 17 17 17 17 17 17 17 17		r professional					1			L			
\$	ē 17		est											
2	2 18		(attach schedule				36,96	6.	_					
$\mathcal{G}_{\mathcal{F}}^{2}$	[19	Depre	eciation (attac	h sche	dule) and de	pletion .								
U t	20	Occu	pancy											
			el, conferences											
5	2 2 2 2	2 Prints	ng and public					\Box						
1	2 2 2 4 2 4 2 4 2 4 2 4 2 4 2 4 2 4 2 4	3 Other	r expenses (at				119,43	3.	119	273.			160.	
,	<u> </u>	4 Total	operating an					\Box	· ·					
Š	3	Add I	ines 13 throug	gh 23			170.78	4.	119	273.		NONE	160.	
•	25	5 Conti	ributions, gifts				1,535,00						1,535,000.	
	26		xpenses and disbi				1,705,78		119	273.		NONE	1,535,160.	
	27	7 Subtr	act line 26 fro	m line	12			П						
		a Excess	of revenue over e	expenses	and disbursem	ents	300,19	9.						
		b Net is	nvestment inc	ome (if	negative, er	nter -0-)	· -		1,778	3,689.				
		c Adju	sted net incon	ne (if ne	egative, ente	r -0-)						-0-		

For Privacy Act and Paperwork Reduction Act Notice, see page 30 of the instructions. * * STMT-5 SE1410 1 000

P	art II	Balance Sheets description column should be for end-of-year	Beginning of year		10 of year
_		amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	760,838.	1,004,219	1,004,219.
	2	Savings and temporary cash investments			
	3	Accounts receivable			
		Less, allowance for doubtful accounts ▶			
	4	Pledges receivable ▶			
		Less allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see page 15 of the instructions)			
	7	Other notes and loans receivable (attach schedule)			
		Less allowance for doubtful accounts ▶			
s	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
Ass	10 a	Investments - U S and state government obligations (attach schedule)			
`	ł .	Investments - corporate stock (attach schedule) STMT. 7.	45, 196, 095.	26,826,640	26, 826, 640.
		Investments - corporate bonds (attach schedule)	10/230/030.	20,020,010	20,020,0101
	11 Č	Investments - land, buildings,			
		and equipment basis Less accumulated depreciation (attach schedule)			
	12	Investments - mortgage loans		_	
	13	Investments - other (attach schedule)			
	14	Land, buildings, and			-
		Land, buildings, and equipment basis Less accumulated depreciation			
		equipment basis Less accumulated depreciation (attach schedule)			
	15	Other assets (describe Total assets (to be completed by all filers - see the			
	16	Instructions Also, see page 1, item I)	45 056 022	27 222 25	27 020 050
_	-		45, 956, 933.	27,830,859	27,830,859.
	17	Accounts payable and accrued expenses			$\overline{}$
	18	Grants payable			-
ies	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons .			
iat	21	Mortgages and other notes payable (attach schedule)			
_	22	Other liabilities (describe			_
_	23	Total liabilities (add lines 17 through 22)			\rightarrow
		Foundations that follow SFAS 117, check here			
co.		and complete lines 24 through 26 and lines 30 and 31.			
alances	24	Unrestricted	45, 956, 933.	27,830,859).
lan	25	Temporarily restricted			_
8	26	Permanently restricted		-	
Б		Foundations that do not follow SFAS 117,			
교		check here and complete lines 27 through 31. ▶ 🔲			
9	27 28 29 30	Capital stock, trust principal, or current funds			
ets	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
SS	29	Retained earnings, accumulated income, endowment, or other funds			
t A	30	Total net assets or fund balances (see page 17 of the			
ž		instructions)	45, 956, 933.	27,830,859	∂ .
	31	Total liabilities and net assets/fund balances (see page 17			
		of the instructions)	45, 956, 933.	27,830,859	ə. <u> </u>
E	art I	Analysis of Changes in Net Assets or Fund E	Balances		
1	Tota	net assets or fund balances at beginning of year - Part II,	column (a), line 30 (must	agree with	
	end-	of-year figure reported on prior year's return)			45, 956, 933.
2	Ente	r amount from Part I, line 27a			300, 199.
3	Othe	r increases not included in line 2 (itemize)			3
4	Add	lines 1, 2, and 3	· · · · · · · · ·		4 46, 257, 132.
5	Deci	eases not included in line 2 (itemize) SEE STAT	EMENT 8		18, 426, 273.
		I net assets or fund balances at end of year (line 4 minus l			27,830,859.
JS			· · · · · · · · · · · · · · · · · · ·		Form 990-PF (2008)
	1420 1	000			, ,

Form 990-PF (2008)	and I are a factor	94-32566	58		Page 3		
	s and Losses for Tax on Inv		(b) How	(c) Date	T		
	d describe the kind(s) of property sold (prick warehouse, or common stock, 200	, -	acquired P-Purchase	acquired (mo , day, yr)	(d) Date sold (mo, day, yr)		
1a SEE PART IV SCHE		dia iniza da ,	D-Donation	()			
b ,							
С							
d							
<u>e</u>							
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) minu			
а							
b							
<u> </u>					·- · · · · · · · · · · · · · · · · · ·		
<u>d</u>							
Complete only for accets a	bowers som in onlyma (b) and over	and his the foundation on 42/24/60					
Complete only for assets s		ned by the foundation on 12/31/69		Gains (Col (h) ga (k), but not less t			
(i) F M.V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col (j), if any		Losses (from co			
<u>a</u>					<u></u>		
<u>b</u>							
<u>c</u>							
d e				<u> </u>			
	(If	gain also enter in Part I line 7	 				
2 Capital gain net income or	P. Capital gain net income or (net capital loss)						
3 Net short-term capital gair	n or (loss) as defined in sections 12				001,128.		
If gain, also enter in Part I	, line 8, column (c) (see pages 13	and 17 of the instructions)					
If (loss), enter -0- in Part I,	line 8	<u> </u>	3				
		uced Tax on Net Investment Inc e section 4940(a) tax on net investi					
	•	outable amount of any year in the b	ase period	^{d?} \Box] Yes ∑ No		
		see page 18 of the instructions be	fore mak	ing any entries			
(a)	(b)	(c)	lore mak	(d)	-		
Base penod years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of nonchantable-use assets		Distribution ra (col (b) divided by			
2007	1,550,160.	43, 457, 665.		· · · · · · · · · · · · · · · · · · ·	0.035671		
2006	1,912,784.	34,065,731.			0.056150		
2005	655,000.	23, 827, 271.			0.027490		
2004	500,000.	15,142,251.			0.033020		
2003	368,000.	9,617,523.	,		0.038263		
2 Total of line 1, column (d)),,	.,.,,,,.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	2		0.190594		
3 Average distribution ratio	for the 5-year base period - divide	e the total on line 2 by 5, or by the					
number of years the found	dation has been in existence if less	s than 5 years	3		0.038119		
4 Enter the net value of non	ncharitable-use assets for 2008 fro	m Part X, line 5	4	37,	,358,254.		
5 Multiply line 4 by line 3			5	1	,424,059.		
				±,			
	nt income (1% of Part I, line 27b)	• • • • • • • • • • • • • • • • • • • •	6		17,787.		
7 Add lines 5 and 6			7	1	,441,846.		
8 Enter qualifying distribution If line 8 is equal to or go the Part VI instructions on	reater than line 7, check the box page 18.	k in Part VI, line 1b, and complet	8 e that pa	1, art using a 1%	,535,160. tax rate See		

Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their

Form 990-PF (2008)

Χ

8 b

names and addresses

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Par	t VII-A Statements Regarding Activities (continued)	_		
	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
• •	meaning of section 512(b)(3)? If "Yes," attach schedule (see page 20 of the instructions),	11		Х
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before			
	August 17, 2008?	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	N/	A
	Website address N/A			
14	The books are in care of ► MARIA DELUCCHI-KAHALE Telephone no ► 650-312	2-300	20	
	Located at ▶ONE FRANKLIN PARKWAY, SAN MATEO, CA ZIP+4 ▶ 94403			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		▶	Ш
	and enter the amount of tax-exempt interest received or accrued during the year			
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required	_		
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	<u> </u>	Yes	No
1a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for			
	the benefit or use of a disqualified person)?Yes X No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if			
	the foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days)			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	l		
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?	1 b		<u> X</u>
	Organizations relying on a current notice regarding disaster assistance check here			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that	1.		
	were not corrected before the first day of the tax year beginning in 2008?	1 c	-	<u> X</u>
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private]		
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	At the end of tax year 2008, did the foundation have any undistributed income (lines 6d and 6e. Part XIII) for tax year(s) beginning before 20082			
	oc, rate All for tax year(s) beginning before 2000 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		1	
	If "Yes," list the years			
D	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)	2 b		х
_	to all years listed, answer "No" and attach statement - see page 20 of the instructions)	-		
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
3 a	Did the foundation hold more than a 2% direct or indirect interest in any business			
Ja	enterprise at any time during the year?			
h	If "Yes," did it have excess business holdings in 2008 as a result of (1) any purchase by the foundation or			
U	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the			
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse			
	of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the			
	foundation had excess business holdings in 2008)	3 Ь	N/	A
4 a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	'''	X
	Did the foundation invest during the year any amount in a mainter that would separatize its character purposes?			
~	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2008?	4 b		x

Form	990-PF (2008)			94-325	6658		Page 6
Par	t VII-B State	ements Regarding Activities for	or Which Form 4	720 May Be Requi	ired (continued)		
5 a	 (1) Carry on proj (2) Influence the directly or inc (3) Provide a gra (4) Provide a gra section 509(a) (5) Provide for a 	int to an individual for travel, study, or oth int to an organization other than a chari a)(1), (2), or (3), or section 4940(d)(2)? (iny purpose other than religious, charitab	nce legislation (section (see section 4955), oner similar purposes? table, etc., organization (see page 22 of the inside, scientific, literary, of	or to carry on, on described in structions)	Yes X No		
		ourposes, or for the prevention of cruelty				'	
ь	Regulations sect	Yes" to 5a(1)-(5), did any of the transaction 53 4945 or in a current notice regaritying on a current notice regarding disast	ding disaster assistan	ice (see page 22 of the	instructions)?	<u>5</u> b	N/A
_	_	Yes" to question 5a(4), does the foundation					
	because it mainta	ained expenditure responsibility for the gree statement required by Regulations sect	ant? tion 53 4945-5(d)		. Yes X No		
oa		in, during the year, receive any funds, d	•		Yes X No	,	
h		nefit contract?			. — —	6ь	l l _x
_		Yes" to 6b, also file Form 8870	city of indirectly, on a	personal benefit contrat	٠	• • • • • • • • • • • • • • • • • • • •	
7 a	•	g the tax year, was the foundation a pai	rty to a prohibited tax	shelter transaction?	Yes X No	.	
		undation receive any proceeds or have a	-	•	• — —		$\frac{1}{x}$
		nation About Officers, Directors					
	and Co	ontractors				-	
<u>'</u>		directors, trustees, foundation m	(b) Title, and average	(c) Compensation	(d) Contributions to	(e) Expens	e account
	(8	a) Name and address	hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	employee benefit plans and deferred compensation	other all	owances
			70 20000				
SEE	STATEMENT			NONE	NONE	NO	ONE
							
	Compensation of f none, enter "N	of five highest-paid employees (otl NONE."	her than those inc	luded on line 1 - se	e page 23 of the inst	tructions).	
	<u> </u>	of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expens	
NOT	<u>APPLICABLE</u>						
Tota	number of othe	er employees paid over \$50,000 .					NONE
							-PF (2008)

Part VIII	Information About Officers, Directors, Trustees, Foundation Manand Contractors (continued)	nagers, Highly Paid Emplo	yees,	
3 Five high	nest-paid independent contractors for professional services (see page 23	of the instructions). If none,	enter "N	ONE."
	(a) Name and address of each person paid more than \$50,000	(b) Type of service		pensation
NOT_APPI	ICABLE			
				-
Total numb	er of others receiving over \$50,000 for professional services		▶	NONE
Part IX-A	Summary of Direct Charitable Activities			
List the four of organizat	dation's four largest direct charitable activities during the tax year. Include relevant statistical info ons and other beneficianes served, conferences convened, research papers produced, etc	rmation such as the number	Ехф	enses
1 <u>NOT</u>	APPLICABLE			
			1	
2				
			<u> </u>	
3			į	
4			 	·-
·				
Part IX-B	Summary of Program-Related Investments (see page 23 of the ins	tructions)	1	
Describe the	two largest program-related investments made by the foundation during the tax year on lines 1 are	nd 2	Ап	nount
1 NONE				_
2			ļ	
-				
		·		
All other pro	gram-related investments See page 24 of the instructions	· · · · · · · · · · · · · · · · · · ·		
2 NONE			1	

Pa	Minimum Investment Return (All domestic foundations must complete this part. Foreignee page 24 of the instructions.)	gn found	lations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes		
а	Average monthly fair market value of securities	1a	36,506,303.
b	Average of monthly cash balances	1b	1,420,858.
С	Fair market value of all other assets (see page 24 of the instructions)	1c	NONE
đ	Total (add lines 1a, b, and c)	1d	37,927,161.
e	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e		
2	Acquisition indebtedness applicable to line 1 assets	2	NONE
3	Subtract line 2 from line 1d	3	37,927,161.
4	Cash deemed held for charitable activities. Enter 1 1/2 % of line 3 (for greater amount, see page 25		
	of the instructions)	4	568,907.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	37,358,254.
6	Minimum investment return. Enter 5% of line 5	6	1,867,913.
Pa	rt XI Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) priva		
	foundations and certain foreign organizations check here and do not complete this p	part)	
1	Minimum investment return from Part X, line 6	1	1,867,913.
2 a	Tax on investment income for 2008 from Part VI, line 5 2a 17, 787.		
b	Income tax for 2008 (This does not include the tax from Part VI) 2b	1	
С	Add lines 2a and 2b	2c	17,787.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	1,850,126.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	1,850,126.
6	Deduction from distributable amount (see page 25 of the instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	1,850,126.
_		<u> </u>	
Ρa	rt XII Qualifying Distributions (see page 25 of the instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	1,535,160.
ь	Program-related investments - total from Part IX-B	1b	NONE
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		NONE
		2	NONE
3	Amounts set aside for specific charitable projects that satisfy the	- - -	NONL
a	Suitability test (prior IRS approval required)	3a	NONE
b	Cash distribution test (attach the required schedule)	3b	NONE
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	1,535,160.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income	 	1,000,100.
-	Enter 1% of Part I, line 27b (see page 26 of the instructions)	5	17,787.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	1,517,373.
•	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating w		
	qualifies for the section 4940(e) reduction of tax in those years	neuter ti	io iounidation

Pa	Part XIII Undistributed Income (see page 26 of the instructions)									
	:	(a)	(b)	(c)	(d)					
1	Distributable amount for 2008 from Part XI,	Corpus	Years prior to 2007	2007	2008					
	line 7				1,850,126.					
2	Undistributed income, if any, as of the end of 2007									
а	Enter amount for 2007 only			1,336,371.						
	Total for prior years 20,20,20									
3	Excess distributions carryover, if any, to 2008									
а	From 2003									
b	From 2004 NONE									
С	From 2005									
d	From 2006									
е	From 2007									
f	Total of lines 3a through e	NONE								
4	Qualifying distributions for 2008 from Part XII,									
	line 4 ▶ \$1,535,160.									
а	Applied to 2007, but not more than line 2a			1,336,371.						
ь	Applied to undistributed income of prior years (Election									
	required - see page 26 of the instructions)									
С	Treated as distributions out of corpus (Election									
	required - see page 26 of the instructions)									
d	Applied to 2008 distributable amount				198,789.					
е	Remaining amount distributed out of corpus	NONE								
5	Excess distributions carryover applied to 2008	NONE			NONE					
	(If an amount appears in column (d), the same amount must be shown in column (a))									
6	Enter the net total of each column as									
	indicated below:									
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	NONE								
b	Prior years' undistributed income Subtract			j						
	line 4b from line 2b									
С	Enter the amount of prior years' undistributed income for which a notice of deficiency has been									
	issued, or on which the section 4942(a) tax has									
	been previously assessed									
d	Subtract line 6c from line 6b Taxable									
_	amount - see page 27 of the instructions									
е	Undistributed income for 2007 Subtract line 4a from line 2a Taxable amount - see page									
	27 of the instructions									
f	Undistributed income for 2008 Subtract lines									
	4d and 5 from line 1 This amount must be									
7	distributed in 2009				1,651,337.					
•	to satisfy requirements imposed by section									
	170(b)(1)(F) or 4942(g)(3) (see page 27 of the									
8	instructions)									
•	applied on line 5 or line 7 (see page 27 of the									
	instructions)									
9	Excess distributions carryover to 2009.	.,,,,,,								
	Subtract lines 7 and 8 from line 6a	NONE								
	Analysis of line 9									
	Excess from 2004									
	Excess from 2005									
	Excess from 2006									
	Excess from 2007									
_ e	Excess from 2008 NONE			11						

1 a	If the foundation has r			· · · · · · · · · · · · · · · · · · ·	- T	
	foundation, and the ruling	•	· ·			
b	Check box to indicate whe		a private operating foun		n4942(j)(3) or 4942(j)(5
a	Enter the lesser of the ad-	Tax year	-	Prior 3 years	,	(e) Total
	justed net income from Part I or the minimum investment return from Part X for each year listed	(a) 2008	(b) 2007	(c) 2006	(d) 2005	
b	85% of line 2a					
С	Qualifying distributions from Part					
d	XII, line 4 for each year listed . Amounts included in line 2c not					
ŭ	used directly for active conduct of exempt activities	·				
е	Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c.					
	Complete 3a, b, or c for the					
a	alternative test relied upon "Assets" alternative test - enter					
	(1) Value of all assets (2) Value of assets qualifying under section					
b	4942(j)(3)(B)(i) "Endowment" alternative test- enter 2/3 of minimum invest-					
	ment return shown in Part X, line 6 for each year listed					
С	"Support" alternative test - enter (1) Total support other than					
	gross investment income (interest, dividends, rents,					
	payments on secunties loans (section 512(a)(5)), or royalties)					
	(2) Support from general public and 5 or more exempt organizations as					
	provided in section 4942 (j)(3)(B)(iii)					
	(3) Largest amount of sup- port from an exempt organization					
	(4) Gross investment income .		<u> </u>	<u> </u>		
Pa			Complete this part je 27 of the instructi	only if the foundati ions.)	on had \$5,000 or m	ore in assets at any
1	Information Regarding	Foundation Manag	ers:		· · · · · · · · · · · · · · · · · · ·	
а	List any managers of the before the close of any	tax year (but only if				
b	SEE STATEM List any managers of		own 10% or more of	of the stock of a corp	oration (or an equally	/ large portion of the
	ownership of a partner	ship or other entity) (of which the foundatio	n has a 10% or greate	r interest.	<u>.</u>
<u> </u>	Information Regarding	Contribution, Gran	nt, Gift, Loan, Scholars	hip, etc., Programs:		
	Check here ▶ ☐ If the unsolicited requests for	or funds If the fou	ndation makes gifts,	grants, etc. (see page	itable organizations a e 28 of the instruction	and does not accept ons) to individuals or
	organizations under oth					
	The name, address, as		·			
b	The form in which appl	ications should be s	ubmitted and informat	ion and materials they	should include	
С	N/ A Any submission deadling	nes				
d	N/A Any restrictions or hir factors	nitations on award	s, such as by geogr	aphical areas, charita	able fields, kinds of	institutions, or other
	N/A		<u></u> -			
JSA 90 1	000					Form 990-PF (2008

Part XV Supplementary Information (continued)										
3 Grants and Contributions Paid During the Year or Approved for Future Payment										
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount						
Name and address (home or business)	or substantial contributor	recipient	contribution							
a Paid during the year										
SEE STATEMENT 11										
			İ							
Total	 		▶ 3a	1,535,000.						
b Approved for future payment										
	Ì			İ						
		1								

Form 990-PF (2008)			94-	3256658	Page 1
Part XVI-A Analysis of Income-Produ Enter gross amounts unless otherwise indicated	T	vities ated business income	Evaluded by	y section 512, 513, or 514	(e)
:	(a) Business code	(b)	(c) Exclusion code	(d) Amount	(e) Related or exempt function income (See page 28 of
1 Program service revenue					the instructions)
a b					
			1		
d	<u> </u>				
e			 		
g Fees and contracts from government agencies					
2 Membership dues and assessments	-				•
Interest on savings and temporary cash investments			14	2,471.	
Dividends and interest from securities			14	894, 363.	
Net rental income or (loss) from real estate					
a Debt-financed property					
b Not debt-financed property					
Net rental income or (loss) from personal property .					
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory		. <u> </u>	14	1,001,128.	
9 Net income or (loss) from special events					
O Gross profit or (loss) from sales of inventory					
1 Other revenue a					
b					
c					
d					
e					
2 Subtotal Add columns (b), (d), and (e)				1,897,962.	
3 Total. Add line 12, columns (b), (d), and (e)				¹³	1,897,962.
See worksheet in line 13 instructions on page 28 Part XVI-B Relationship of Activities			cempt Purp	oses	
Line No. Explain below how each active the accomplishment of the for page 28 of the instructions.)					
		- -			
		· -			
		NOT APPLICABL	E		
				_	
	-				
		·			
			-		
					
					
				 	

	990-PF		Regarding T	ransfers To an	nd Transa		3256658 d Relationships	With N	oncl		ge 13
		Exempt Orga					•				
1 a	501(c	ne organization directly) of the Gode (other than fers from the reporting f	section 501(c)(3)	organizations) or in	section 527, r			section		Yes	No
		ash			_				1a(1)		х
		ther assets						ľ	1a(2)		Х
b		transactions									
	(1) S	ales of assets to a nonct	naritable exempt o	rganization					1b(1)		Х
		urchases of assets from							1b(2)		Х
	(3) R	ental of facilities, equipm	ent, or other asset	s					1b(3)		Х
	(4) R	eimbursement arrangeme	ents						1b(4)		Х
		oans or loan guarantees									Х
		erformance of services of							1b(6)		Х
С		ng of facilities, equipmen							1 c		Х
a	other	answer to any of the ab assets, or services giver gement, show in column	by the reporting	foundation If the	foundation re	ceived less th					
(a)	Line no	(b) Amount involved	(c) Name of n	oncharitable exempt org	ganization	(d) Descript	ion of transfers, transaction	ns, and sham	ng amar	gemer	nts
		N/A		.,		N/A					
											-
			-			•					
							<u>-</u>				
_											
	sectio	e foundation directly or in 501(c) of the Code (oth	ner than section 5	•	•	nore tax-exen	npt organizations desc	ribed in	Ye	s 🗓] No
	пте	 s," complete the following (a) Name of organization 		(b) Type of	organization	· · · · · · · · · · · · · · · · · · ·	(c) Description	n of relations	——		
N/C	ם בי דיכ	PLICABLE	· · · · · · · · · · · · · · · · · · ·	(2) 1) po 0.			(4) 2000.151.01		<u>"P</u>		
	<u> </u>	тысарыь									
			-								
			-								
.е	belief,	penalties of perjury, I decl it is true, correct, and com	are that I have examplete Declaration of	imined this return, inclif f preparer (other than t	uding accompa taxpayer or fidu	nying schedules iciary) is based 4-/0-/	on all information of whi	the best of ch preparer	my kn has an	owled y know	ge and wledge
Sign Here	"	Preparer's	12	1	Date	/, 0	Check if [Preparer's i See Signatui nstructions)			
S	aid parer's 9 Only	signature	9 9	احد	/	100		005424	<u>75</u>		
	Paid Preparer's Use Only	Firm's name (or yours if self-employed), address		ATERHOUSECOO!		- .	EN ▶ 13	<u>-40083</u> ;	24		
		i semempioyed), address	THREE	EMBARCADERO (F.N.F.R		1				

СA

94111

THREE EMBARCADERO CENTER

SAN FRANCISCO,

Form 990-PF (2008)

Phone no 415-498-5000

self-employed), address

and ZIP code

Schedule B

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, 990-EZ, and 990-PF.

OMB No 1545-0047

Name of the organization		Employer identification number
THE MEADOWVIEW FOUNDATION	NO	
C/O MARIA DELUCCHI-KAHAI	LE	94-3256658
Organization type (check one)		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private fou	ndation
	527 political organization	
Form 990-PF	x 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundat	ion
	501(c)(3) taxable private foundation	
	od by the General Rule or a Special Rule . (Note . Only a section 501(c)(oth the General Rule and a Special Rule. See instructions)	7), (8), or (10)
General Rule		
	orm 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or i ontributor. Complete Parts I and II	more (in money or
Special Rules		
under sections 509(a)(1)/	rganization filing Form 990, or Form 990-EZ, that met the 331/3% supp 170(b)(1)(A)(vi), and received from any one contributor, during the ye 2) 2% of the amount on Form 990, Part VIII, line 1h or 2% of the amou	ar, a contribution of the
during the year, aggregat	8), or (10) organization filing Form 990, or Form 990-EZ, that received e contributions or bequests of more than \$1,000 for use exclusively for ational purposes, or the prevention of cruelty to children or animals. C	religious, charitable,
during the year, some cor not aggregate to more that the year for an exclusively applies to this organization	8), or (10) organization filing Form 990, or Form 990-EZ, that received intributions for use <i>exclusively</i> for religious, charitable, etc., purposes, ban \$1,000 (If this box is checked, enter here the total contributions the religious, charitable, etc., purpose. Do not complete any of the parts un because it received nonexclusively religious, charitable, etc., contrib	out these contributions did at were received during inless the General Rul e outions of \$5,000 or more
990-EZ, or 990-PF), but they must a	covered by the General Rule and/or the Special Rules do not file Sche answer "No" on Part IV, line 2 of their Form 990, or check the box in the form 990-PF, to certify that they do not meet the filing requirements of	ne heading of their

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. These instructions will be issued separately.

Schedule B (Form 990, 990-EZ, or 990-PF) (2008)

Schedule B	(Form 990, 990-EZ, or 990-PF) (2008)		Page of of Part
Name of o	rganization THE MEADOWVIEW FOUNDATION	E	Employer identification number
Part I	C/O MARIA DELUCCHI-KAHALE Contributors (see instructions)		94-3256658
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	ELLIZABETH WISKEMANN ONE FRANKLIN PARKWAY SAN MATEO, CA 94403	\$7,324	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		 \$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)

FORM 990PF, PART I - INTEREST ON TEMPORARY CASH INVESTMENTS

;

NET	INVESTMENT	INCOME		2,442.	16.	13.	2,471.	===========
REVENUE AND	EXPENSES	PER BOOKS		2,442.	16.	13.	2,471.	
							TOTAL	
		DESCRIPTION		FIDUCIARY 491206000	FICUCIARY 441007510	FIDUCIARY 441007530		

STATEMENT

FORM 990PF, PART I - DIVIDENDS AND INTEREST FROM SECURITIES

NET INVESTMENT INCOME	517,956.	208,270.	152,436.	14,871.	830.	894,363.
REVENUE AND EXPENSES PER BOOKS	517,956.	208,270.	152,436.	14,871.	830.	894,363.
						TOTAL
DESCRIPTION	FIDUCIARY 491206000	FIDUCIARY 441007530	FIDUCIARY 441007510	PORTSMOUTH	FRANKLIN MONEY FUND	

DESCRIPTION

INCOME TAX REFUND

FORM 990PF, PART I - OTHER INCOME

> REVENUE AND EXPENSES

PER BOOKS

100,697.

TOTALS

100,697. _____

FORM 990PF, PART I - ACCOUNTING FEES

:	CHARITABLE PURPOSES	 	 - - - - - - -	NONE	
ADJUSTED	NET INCOME	 		NONE	
NET	INVESTMENT INCOME			NONE	
REVENUE AND	EXPENSES PER BOOKS		14,385.	14,385.	
				TOTALS	
	DESCRIPTION		AUDIT FEES		

FORM 990PF, PART I - TAXES _____

REVENUE AND EXPENSES DESCRIPTION PER BOOKS _____ FOREIGN TAXES PAID 29,642. 2007 OVERPAYMENT APPLIED 7,324. TOTALS 36,966.

FORM 990PF, PART I - OTHER EXPENSES

160.	119,273.	119,433.	TOTALS	
150.		150.		RRF-1 FEES
	119,273.	119,273.		INVESTMENT FEES
10.		10.		CA FILING FEE
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
PURPOSES	INCOME			DESCRIPTION
CHARITABLE	INVESTMENT			
	NET	REVENUE AND		
:				

FORM 990PF, PART II - CORPORATE STOCK

DESCRIPTION	BEGINNING BOOK VALUE	ENDING BOOK VALUE	ENDING FMV	•.
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	* * * * * * * * * * * * * * * * * * * *	 	
FIDUCIARY TRUST 491206000	36,803,393.	20,186,138.	20,186,138.	
FIDUCIARY TRUST 441007510	3,759,021.	3,198,282.	3, 198, 282.	
FIDUCIARY TRUST 441007530	4,259,624.	2,967,324.	2,967,324.	
PORTSMOUTH	333,140.	433,149.	433,149.	
FRANKLIN MONEY FUND	40,917.	41,747.	41,747.	
TOTALS	45,196,095.	26,826,640.	26,826,640.	

: FORM 990PF, PART III - OTHER DECREASES IN NET WORTH OR FUND BALANCES ______

DESCRIPTION AMOUNT _____ _____

DECREASE OF STOCK FAIR MARKET VALUE 18,426,273.

> TOTAL 18, 426, 273.

FORM 990PF, PART VII-A, LINE 10 - NEW SUBSTANTIAL CONTRIBUTORS

SUPPORT -----DIRECT PUBLIC DATE ELLIZABETH WISKEMANN ONE FRANKLIN PARKWAY SAN MATEO, CA 94403 NAME AND ADDRESS

7,324.

7,324.

TOTAL CONTRIBUTION AMOUNTS

:

90C114 4178

σ

STATEMENT

:

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

COMPENSATION	NONE	NONE	NONE	NO NE
TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	TRUSTEE	PRESIDENT	VICE PRES. & SECRETARY	TREASURER
NAME AND ADDRESS	ELIZABETH WISKEMANN ONE FRANKLIN PARKWAY BUILDING 920, 4TH FLOOR SAN MATEO, CA 94403	KIM D. WISKEMANN BESSOLO ONE FRANKLIN PARKWAY BUILDING 920, 4TH FLOOR SAN MATEO, CA 94403	CHRISTINE Y. WISKEMANN ONE FRANKLIN PARKWAY BUILDING 920, 4TH FLOOR SAN MATEO, CA 94403	ESTHER B. WISKEMANN TORRES ONE FRANKLIN PARKWAY BUILDING 920, 4TH FLOOR SAN MATEO, CA 94403

NONE

GRAND TOTALS

NS PAID DURING THE YEAR	
D CONTRIBUTIONS P	
(V - GRANTS AND CO	
M 990PF, PART >	
2	ij

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
DOCTORS WITHOUT BORDERS	N/A 501(C)(3) CHARITY	CHARITABLE SUPPORT	25,000.
ALASKA RAPTOR	N/A 501(C)(3) CHARITY	CHARITABLE SUPPORT	20,000
CHILDREN OF THE NIGHT	N/A 501(C)(3) CHARITY	CHARITABLE SUPPORT	20,000
CHILDREN'S HOSPITAL - OAKLAND	N/A 501(C)(3) CHARITY	CHARITABLE SUPPORT	40,000
ANIMAL ARC	N/A 501(C)(3) CHARITY	CHARITABLE SUPPORT	20,000
HOMEBOY INDUSTRIES	N/A 501(C)(3) CHARITY	CHARITABLE SUPPORT	20,000.
PEDIATRIC BRAIN TUMOR FOUNDATION	N/A 501(C)(3) CHARITY	CHARITABLE SUPPORT	25,000.
UC DAVIS REGENTS - DAVIS VET RESEARCH	N/A 501(C)(3) CHARITY	CHARITABLE SUPPORT	50, 000.

FORM 990PE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND	·	
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
WILDCARE (SAN RAFAEL)	N/A 501(C)(3) CHARITY	CHARITABLE SUPPORT	10,000.
PEGASUS PROJECT	N/A 501(C)(3) CHARITY	CHARITABLE SUPPORT	40,000.
RED CROSS	N/A 501(C)(3) CHARITY	CHARITABLE SUPPORT	100,000
THE SMILE TRAIN	N/A 501(C)(3) CHARITY	CHARITABLE SUPPORT	50,000.
STATUE OF LIBERTY/ELLIS ISLAND	N/A 501(C)(3) CHARITY	CHARITABLE SUPPORT	20,000.
NOVATO COMMUNITY HOSPITAL	N/A 501(C)(3) CHARITY	CHARITABLE SUPPORT	100,000
PACIFIC TSUNAMI HOSPITAL	N/A 501(C)(3) CHARITY	CHARITABLE SUPPORT	20,000.
COLDEN GATE UNIVERSITY	N/A 501(C)(3) CHARITY	CHARITABLE SUPPORT	15,000

STATEMENT 12

94-3256658

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
THE ALLAIRE HOSPITAL	N/A 501(C)(3) CHARITY	CHARITABLE SUPPORT	20,000
MARIN GENERAL HOSPITAL	N/A 501(C)(3) CHARITY	CHARITABLE SUPPORT	100,000
MARIN MILITARY ACADEMY	N/A 501(C)(3) CHARITY	CHARITABLE SUPPORT	25,000.
ST MARY'S COLLEGE OF CA	N/A 501(C)(3) CHARITY	CHARITABLE SUPPORT	200,000.
PEGASUS VOYAGES	N/A 501(C)(3) CHARITY	CHARITABLE SUPPORT	40,000.
MARINE MAMMAL CENTER	N/A 501(C)(3) CHARITY	CHARITABLE SUPPORT	50, 000.
THE MARIN SCHOOL	N/A 501(C)(3) CHARITY	CHARITABLE SUPPORT	100, 000.
LOYOLA MARYMOUNT UNIVERSITY	N/A 501(C)(3) CHARITY	CHARITABLE SUPPORT	300, 000.

FORM 990PE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

RECIPIENT NAME AND ADDRESS	is 70 i	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT 25,000.
CHAPMAN UNIVERSITY	501(C)(3) CHAKIIY N/A 501(C)(3) CHARITY	CHARITABLE SUPPORT	75,000.
OSTEOPATHY'S PROMISE TO CHILDREN	N/A 501(C)(3) CHARITY	CHARITABLE SUPPORT	25,000.

1,535,000.

TOTAL CONTRIBUTIONS PAID

THE MEADOWVIEW FOUNDATION

FEIN: 94-3256658 FYE: 12/31/2008

STATEMENT 14-FORM 990-PF, PART XV, LINE 2A-D

ALL GIFTS ARE MADE PURSUANT TO TRUST INSTRUMENTS AND IN THE DISCRETION OF THE TRUSTEE.

GRANT REQUESTS ARE SENT TO:

THE MEADOWVIEW FOUNDATION C/O MARIA DELUCCHI-KAHALE ONE FRANKLIN PARKWAY BUILDING 920, 4TH FLOOR SAN MATEO, CA 94403

SCHEDULE D (Form 1041)

Department of the Treasury

Capital Gains and Losses

► Attach to Form 1041, Form 5227, or Form 990-T. See the separate instructions for Form 1041 (also for Form 5227 or Form 990-T, if applicable).

OMB No 1545-0092

2008

Internal Revenue Service Name of estate or trust Employer identification number THE MEADOWVIEW FOUNDATION C/O MARIA DELUCCHI-KAHALE 94-3256658 Note: Form 5227 filers need to complete only Parts I and II Short-Term Capital Gains and Losses - Assets Held One Year or Less (e) Cost or other basis (f) Gain or (loss) for (b) Date acquired (a) Description of property (c) Date sold (see page 4 of the instructions) the entire year Subtract (e) from (d) (d) Sales price (Example 100 shares 7% preferred of "Z" Co) (mo, day, yr) (mo, day, yr) 1a **b** Enter the short-term gain or (loss), if any, from Schedule D-1, line 1b 1b **-1**, 160, 070. Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824 Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts . . . 3 Short-term capital loss carryover Enter the amount, if any, from line 9 of the 2007 Capital Loss Net short-term gain or (loss). Combine lines 1a through 4 in column (f). Enter here and on line 13, -1,160,070.Long-Term Capital Gains and Losses - Assets Held More Than One Year (e) Cost or other basis (f) Gain or (loss) for (a) Description of property (Example 100 shares 7% preferred of "Z" Co) (b) Date acquired (c) Date sold (d) Sales price (see page 4 of the instructions) the entire year Subtract (e) from (d) (mo, day, yr) (mo, day, yr) 6a 6b 2,156,001. Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824 Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts 9 5,197. Gain from Form 4797, Part I 10 10 Long-term capital loss carryover Enter the amount, if any, from line 14 of the 2007 Capital Loss 11 Net long-term gain or (loss). Combine lines 6a through 11 in column (f) Enter here and on line 14a, 2,161,198

Sche	dule D (Form 1041) 2008					Page 2
Pai	Summary of Parts I and II Caution: Read the instructions before completing this part		(1) Beneficiaries' (see page 5)	(2) Es or tru		(3) Total
13	Net short-term gain or (loss)	3				-1,160,070.
14						
а	Total for year14	a				2,161,198.
	Unrecaptured section 1250 gain (see line 18 of the wrksht) 14	b				
	28% rate gain	-				
	Total net gain or (loss). Combine lines 13 and 14a ▶ 15					1,001,128.
to Pa	e: If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4 (or Form 9 or t V, and do not complete Part IV If line 15, column (3), is a net loss, complete Part I					
Pa	t IV Capital Loss Limitation					
16	Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, Part I				,	
a	The loss on line 15, column (3) or b \$3,000		22 / F 000 T /	24	16 ()
Carry	over Worksheet on page 7 of the instructions to figure your capital loss carryover	iine	: 22 (or Form 990-1, 11	ne 34), IS a	ioss, con	npiete the Capital Loss
	t V Tax Computation Using Maximum Capital Gains Rates					-
Forn	n 1041 filers. Complete this part only if both lines 14a and 15 in column	(2)	are gains, or an an	nount is er	itered in	Part I or Part II and
	e is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is more the					
	tion: Skip this part and complete the worksheet on page 8 of the instruction	าร ก	f			
	ther line 14b, col. (2) or line 14c, col. (2) is more than zero, or oth Form 1041, line 2b(1), and Form 4952, line 4g are more than zero					
	n 990-T trusts. Complete this part only if both lines 14a and 15 are ga	2 IDG	or qualified divide	ande are u	acluded	in income in Part I
	orm 990-T, and Form 990-T, line 34, is more than zero. Skip this part a					
	er line 14b, col (2) or line 14c, col (2) is more than zero				- 3 -	
17	Enter taxable income from Form 1041, line 22 (or Form 990-T, line 34)		17			
18	Enter the smaller of line 14a or 15 in column (2)	• •	'		1	
	but not less than zero					
19	Enter the estate's or trust's qualified dividends					
	from Form 1041, line 2b(2) (or enter the qualified					
	dividends included in income in Part I of Form 990-T) 19					
20	Add lines 18 and 19					
21	If the estate or trust is filing Form 4952, enter the					
	amount from line 4g, otherwise, enter -0 ▶ 21					
22	Subtract line 21 from line 20 If zero or less, enter -0		. 22]	
23	Subtract line 22 from line 17. If zero or less, enter -0-		. 23]	
24	Enter the smaller of the amount on line 17 or \$2,200		. 24]	
25	Is the amount on line 23 equal to or more than the amount on line 24?					
	Yes. Skip lines 25 and 26, go to line 27 and check the "No" box.					
	No. Enter the amount from line 23		. 25			
26	Subtract line 25 from line 24		. 26		1	
27	Are the amounts on lines 22 and 26 the same?					
	Yes. Skip lines 27 thru 30, go to line 31 No. Enter the smaller of line 17 or line 22		27			
28	Enter the amount from line 26 (If line 26 is blank, enter -0-)		28			
20	Enter the amount from time 20 (if time 20 is blank, enter -0-)	• •	. 20		1 1	
29	Subtract line 28 from line 27		29			
30	Multiply line 29 by 15% (.15).				30	
31	Figure the tax on the amount on line 23. Use the 2008 Tax Rate Scheo	 dule	for Estates and Tr	usts (see	"" 	
	the Schedule Ginstructions)			•	31	
		• •	• • • • • • • • • • • • • • • • • • • •			
32	Add lines 30 and 31				32	
33	Figure the tax on the amount on line 17 Use the 2008 Tax Rate Scheo	dule	for Estates and Tr	usts (see		
	the Schedule Ginstructions)			•	33	
34	Tax on all taxable income. Enter the smaller of line 32 or line					
	Schodulo C. Form 1041 (or loce 35 of Form 990 T)				الموا	

SCHEDULE D-1 (Form 1041)

Continuation Sheet for Schedule D
(Form 1041)

► See instructions for Schedule D (Form 1041).

► Attach to Schedule D to list additional transactions for lines 1a and 6a.

OMB No 1545-0092

Department of the Treasury Internal Revenue Service Name of estate or trust

Employer identification number

THE MEADOWVIEW FOUNDATION Part I Short-Term Capital Gains and Losses - Assets Held One Year or Less (a) Description of property (Example 100 sh 7% preferred of "Z" Co) 1a FI DUCI ARY TRUST - 441007510 FI DUCI ARY TRUST - 441007530 FI DUCI ARY TRUST - 491206000 4,492,507.	94-3256658 (e) Cost or other basis	
1a FIDUCIARY TRUST - 441007510 859,062. FIDUCIARY TRUST - 379,862. FIDUCIARY TRUST - 379,862.	(e) Cost or other basis	I
1a FIDUCIARY TRUST - 441007510 859,062. FIDUCIARY TRUST - 379,862. FIDUCIARY TRUST - 379,862.	(e) Cost or other basis (see page 4 of the instructions)	(f) Gain or (loss) Subtract (e) from (d)
FIDUCIARY TRUST - 441007530 379,862. FIDUCIARY TRUST -		
441007530 379,862. FIDUCIARY TRUST -	1,134,518.	-275, 456.
FIDUCIARY TRUST -	531 045	151 202
1 1	531, 245.	-151,383.
1,7152,33	5, 225, 738.	-733, 231.
	3,223,130.	33, 231.
	-	
	 	
	1	
	-	
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For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

-1,160,070.Schedule D-1 (Form 1041) 2008 Name of estate or trust as shown on Form 1041 Do not enter name and employer identification number if shown on the other side Employer identification number Long-Term Capital Gains and Losses - Assets Held More Than One Year Part II (d) Sales price (see page 4 of the instructions) (e) Cost or other basis (see page 4 of the instructions) (b) Date acquired (mo , day, yr) (a) Description of property (Example 100'sh 7% preferred of "Z" Co) (c) Date sold (mo , day, yr) (f) Gain or (loss) Subtract (e) from (d) 6a FIDUCIARY TRUST -441007510 898,593. 1,241,786 -343,193 FIDUCIARY TRUST -1,195,828 441007530 852,985 -342,843. FIDUCIARY TRUST -10,733,074 491206000 7,891,037 2,842,037.

2,156,001

FORM 990-PF - PART IV
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

	of Property Description				P or	Date acquired	Date sold	
Gross sale price less	Depreciation allowed/	Cost or other	FMV as of	Adj basis as of	Excess of FMV over		Gain or (loss)	
expenses of sale	allowable	TOTAL CAPITA	12/31/69 AL GAIN DIS	l <u>12/31/69</u> TRIBUTIONS	adı basıs		5,197.	
		FIDUCIARY TE	RUST - 4410	07510		. ,	VAR	VAR
859,062.		1,134,518.					-275,456.	
		FIDUCIARY TE	RUST - 4410	07510			VAR	VAR
898, 593.		1,241,786.					-343, 193.	:
		FIDUCIARY TE	RUST - 4410	07530		,	VAR	VAR
379,862.		531,245.					-151, 383.	
		FIDUCIARY TE	RUST - 4410	07530			VAR	VAR
852,985.		1,195,828.					-342,843.	
		FIDUCIARY TE	RUST - 4912	06000			VAR	VAR
492,507.		5, 225, 738.					-733, 231.	
		FIDUCIARY TH	RUST - 4912	06000			VAR	VAR
10733074.		7,891,037.				;	2,842,037.	
TOTAL GAIN(L	OSS)		•			11	1,001,128.	

Form 8868

(Rev April 2008)

Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

Department of the Internal Revenue Se			► File a separate application for each return					
● If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box								
If you are fi Do not complete	iling for ai te Part II u	n Additional (Not Au <i>nless</i> you have alrea	rtomatic) 3-Month Extension, complete only Part II (on pa ady been granted an automatic 3-month extension on a pre	ige 2 of this form) eviously filed Form 8868.				
Part I Auto	matic 3-	Month Extension	of Time. Only submit original (no copies needed).					
A corporation in Part I only	required (o file Form 990-T ai	nd requesting an automatic 6-month extension - check this	box and complete				
time to file inco	ome tax re	eturns	rs), partnerships, REMICs, and trusts must use Form 7004 to					
one of the ref electronically returns, or a co	turns not f (1) you omposite	ed below (6 month want the additiona or consolidated Fro	n electronically file Form 8868 if you want a 3-month autis for a corporation required to file Form 990-T). Howell (not automatic) 3-month extension or (2) you file Forming 990-T Instead, you must submit the fully completed aring of this form, visit www.irs.gov/efile.and.click.on.e-file.for	ever, you cannot file Form 8868 is 990-BL, 6069, or 8870, group nd signed page 2 (Part II) of Form				
Type or	Name of	Employer identification number						
print			HI-KAHALE, FRANKLIN RESOURCES, INC.	94-3256658				
File by the	Number	street, and room or su	and room or suite no If a P O box, see instructions ONE FRANKLIN PARKWAY					
due date for filing your	BUILDING 920, 4TH FLOOR City, town or post office, state, and ZIP code For a foreign address, see instructions							
retum See instructions		•	•					
		N MATEO, CA 94	403 arate application for each return)					
Form 990		o be filed (file a sep		orm 4720				
Form 990				orm 5227				
Form 990			· · · · · · · · · · · · · · · · · · ·	orm 6069				
Form 990-EZ								
If the organIf this is forfor the whole g	nization d r a Group group, ch	Return, enter the org						
		nembers the extens	nths for a corporation required to file Form 990-T) extension	n of time				
until			to file the exempt organization return for the organization					
▶ x	calenda	r year 2008 or						
▶ □		beginning	,, and ending	,				
2 If this tax	year is f	or less than 12 mont	ths, check reason Initial return Final return	Change in accounting period				
			., 990-PF, 990-T, 4720, or 6069, enter the tentative tax	1 1				
		dits See instructions		3a \$ 37,943.				
			or 990-T, enter any refundable credits and estimated tax nent allowed as a credit					
			ine 3a Include your payment with this form, or, if require					
			by using EFTPS (Electronic Federal Tax Payment Sys	1 1				
instructions.								
Caution. If you	are goin	g to make an electro	onic fund withdrawal with this Form 8868, see Form 8453-					
for payment in								
For Privacy A	ct and Pa	perwork Reduction	Act Notice, see Instructions.	Form 8868 (Rev 4-2008)				