



See a Social Security Number? Say Something!  
Report Privacy Problems to <https://public.resource.org/privacy>  
Or call the IRS Identity Theft Hotline at 1-800-908-4490



## "Notice 2008-6 Status Change"

COPY

PRIOR PC

Form **990-PF**
**Return of Private Foundation**  
 or Section 4947(a)(1) Nonexempt Charitable Trust  
 Treated as a Private Foundation

OMB No 1545-0052

2008

Department of the Treasury  
Internal Revenue Service

Note: The foundation may be able to use a copy of this return to satisfy state reporting requirements

For calendar year 2008, or tax year beginning 3/1/2008, and ending 2/28/2009

G Check all that apply ☐ Initial return ☐ Final return ☐ Amended return ☐ Address change ☐ Name change

|                                                                                        |                                                                                                                                                                                                                                                   |                                            |                                                                                                                                                                                                                                                                                                                                                                                                                 |
|----------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Use the IRS label. Otherwise, print or type. See Specific Instructions.                | Name of foundation<br><b>FIRTH, CLARA HELEN CHAR T/U/W 810446</b>                                                                                                                                                                                 |                                            | A Employer identification number<br><b>95-6698210</b>                                                                                                                                                                                                                                                                                                                                                           |
|                                                                                        | Number and street (or P O box number if mail is not delivered to street address) Room/suite<br><b>WELLS FARGO BANK N.A - P O Box 63954, MAC A0330-011</b>                                                                                         |                                            | B Telephone number (see page 10 of the instructions)<br><b>(800) 352-3705</b>                                                                                                                                                                                                                                                                                                                                   |
|                                                                                        | City or town, state, and ZIP code<br><b>SAN FRANCISCO CA 94163</b>                                                                                                                                                                                |                                            | C If exemption application is pending, check here <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                      |
|                                                                                        | H Check type of organization. <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation<br><input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation |                                            | D 1 Foreign organizations, check here <input type="checkbox"/><br>2 Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/><br>E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/><br>F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/> |
| I Fair market value of all assets at end of year (from Part II, col (c), line 16) ▶ \$ | J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual<br><input type="checkbox"/> Other (specify) _____                                                                                                   |                                            |                                                                                                                                                                                                                                                                                                                                                                                                                 |
|                                                                                        |                                                                                                                                                                                                                                                   | (Part I, column (d) must be on cash basis) |                                                                                                                                                                                                                                                                                                                                                                                                                 |

**Part I Analysis of Revenue and Expenses** (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see page 11 of the instructions))

|                                                                                               | (a) Revenue and expenses per books | (b) Net investment income | (c) Adjusted net income | (d) Disbursements for charitable purposes (cash basis only) |
|-----------------------------------------------------------------------------------------------|------------------------------------|---------------------------|-------------------------|-------------------------------------------------------------|
| 1 Contributions, gifts, grants, etc., received (attach schedule)                              |                                    |                           |                         |                                                             |
| 2 Check <input checked="" type="checkbox"/> if the foundation is not required to attach Sch B |                                    |                           |                         |                                                             |
| 3 Interest on savings and temporary cash investments                                          |                                    | 0                         |                         |                                                             |
| 4 Dividends and interest from securities                                                      | 239,204                            | 229,272                   |                         |                                                             |
| 5 a Gross rents                                                                               |                                    | 0                         |                         |                                                             |
| b Net rental income or (loss)                                                                 | 0                                  |                           |                         |                                                             |
| 6 a Net gain or (loss) from sale of assets not on line 10                                     | -220,585                           |                           |                         |                                                             |
| b Gross sales price for all assets on line 6a                                                 | 532,355                            |                           |                         |                                                             |
| 7 Capital gain net income (from Part IV, line 2)                                              |                                    | 0                         |                         |                                                             |
| 8 Net short-term capital gain                                                                 |                                    | 0                         |                         |                                                             |
| 9 Income modifications                                                                        |                                    |                           |                         |                                                             |
| 10 a Gross sales less returns and allowances                                                  | 0                                  |                           |                         |                                                             |
| b Less: Cost of goods sold                                                                    | 0                                  |                           |                         |                                                             |
| c Gross profit or (loss) (attach schedule)                                                    | 0                                  |                           |                         |                                                             |
| 11 Other income (attach schedule)                                                             | 0                                  | 0                         | 0                       |                                                             |
| 12 Total. Add lines 1 through 11                                                              | 18,619                             | 229,272                   | 0                       |                                                             |
| 13 Compensation of officers, directors, trustees, etc                                         | 0                                  |                           |                         |                                                             |
| 14 Other employee salaries and wages                                                          |                                    |                           |                         |                                                             |
| 15 Pension plans, employee benefits                                                           |                                    |                           |                         |                                                             |
| 16 a Legal fees (attach schedule)                                                             | 0                                  | 0                         | 0                       | 0                                                           |
| b Accounting fees (attach schedule)                                                           | 775                                | 0                         | 0                       | 775                                                         |
| c Other professional fees (attach schedule)                                                   | 0                                  | 0                         | 0                       | 0                                                           |
| 17 Interest                                                                                   |                                    |                           |                         |                                                             |
| 18 Taxes (attach schedule) (see page 14 of the instructions)                                  | 2,487                              | 2,487                     | 0                       | 0                                                           |
| 19 Depreciation (attach schedule) and depletion                                               | 0                                  | 0                         | 0                       |                                                             |
| 20 Occupancy                                                                                  |                                    |                           |                         |                                                             |
| 21 Travel, conferences, and meetings                                                          |                                    |                           |                         |                                                             |
| 22 Printing and publications                                                                  |                                    |                           |                         |                                                             |
| 23 Other expenses (attach schedule)                                                           | 54,551                             | 40,906                    | 0                       | 13,645                                                      |
| 24 Total operating and administrative expenses. Add lines 13 through 23                       | 57,813                             | 43,393                    | 0                       | 14,420                                                      |
| 25 Contributions, gifts, grants paid                                                          | 224,783                            |                           |                         | 224,783                                                     |
| 26 Total expenses and disbursements. Add lines 24 and 25                                      | 282,596                            | 43,393                    | 0                       | 239,203                                                     |
| 27 Subtract line 26 from line 12                                                              |                                    |                           |                         |                                                             |
| a Excess of revenue over expenses and disbursements                                           | -263,977                           |                           |                         |                                                             |
| b Net investment income (if negative, enter -0-)                                              |                                    | 185,879                   |                         |                                                             |
| c Adjusted net income (if negative, enter -0-)                                                |                                    |                           | 0                       |                                                             |

For Privacy Act and Paperwork Reduction Act Notice, see page 30 of the instructions

Form 990-PF (2008)

(HTA)

JAN 28 2010

SCANNED FEB 25 2010 Revenue

5/24

12

Form 990-PF (2008)

FIRTH, CLARA HELEN CHAR T/U/W 810446

95-6698210

Page 4

**Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instructions)**

|                                                                                                                                                                                                                              |    |       |       |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|-------|-------|
| 1 a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1.<br>Date of ruling letter _____ (attach copy of ruling letter if necessary—see instructions) |    |       |       |
| b Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b                                                                            |    | 1     | 3,718 |
| c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)                                                                                                    |    |       |       |
| 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)                                                                                                                   |    | 2     | 0     |
| 3 Add lines 1 and 2                                                                                                                                                                                                          |    | 3     | 3,718 |
| 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)                                                                                                                 |    | 4     |       |
| 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-                                                                                                                                    |    | 5     | 3,718 |
| 6 Credits/Payments                                                                                                                                                                                                           |    |       |       |
| a 2008 estimated tax payments and 2007 overpayment credited to 2008                                                                                                                                                          | 6a | 0     |       |
| b Exempt foreign organizations—tax withheld at source                                                                                                                                                                        | 6b |       |       |
| c Tax paid with application for extension of time to file (Form 8868)                                                                                                                                                        | 6c | 0     |       |
| d Backup withholding erroneously withheld                                                                                                                                                                                    | 6d |       |       |
| 7 Total credits and payments. Add lines 6a through 6d                                                                                                                                                                        | 7  | 0     |       |
| 8 Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached                                                                                                          | 8  | 0     |       |
| 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed                                                                                                                                              | 9  | 3,718 |       |
| 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid                                                                                                                                 | 10 | 0     |       |
| 11 Enter the amount of line 10 to be Credited to 2009 estimated tax <input type="checkbox"/> Refunded <input type="checkbox"/>                                                                                               | 11 | 0     |       |

**Part VII-A Statements Regarding Activities**

|                                                                                                                                                                                                                                                                                                                                      |     |    |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|
| 1 a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?                                                                                                                                                             | Yes | No |
| 1a                                                                                                                                                                                                                                                                                                                                   |     | X  |
| b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 of the instructions for definition)?                                                                                                                                                                              |     | X  |
| If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities                                                                                                                                         |     |    |
| c Did the foundation file Form 1120-POL for this year?                                                                                                                                                                                                                                                                               |     | X  |
| d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:<br>(1) On the foundation <input type="checkbox"/> \$ _____ (2) On foundation managers <input type="checkbox"/> \$ _____                                                                                                         |     |    |
| e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. <input type="checkbox"/> \$ _____                                                                                                                                                            |     |    |
| 2 Has the foundation engaged in any activities that have not previously been reported to the IRS?<br>If "Yes," attach a detailed description of the activities                                                                                                                                                                       |     | X  |
| 3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes                                                                                                         |     | X  |
| 4 a Did the foundation have unrelated business gross income of \$1,000 or more during the year?                                                                                                                                                                                                                                      |     | X  |
| b If "Yes," has it filed a tax return on Form 990-T for this year?                                                                                                                                                                                                                                                                   | N/A | X  |
| 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?<br>If "Yes," attach the statement required by General Instruction T                                                                                                                                                                 |     | X  |
| 6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:<br>• By language in the governing instrument, or<br>• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? | X   |    |
| 7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV                                                                                                                                                                                                  | X   |    |
| 8 a Enter the states to which the foundation reports or with which it is registered (see page 19 of the instructions) <input type="checkbox"/> CA                                                                                                                                                                                    |     |    |
| b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation                                                                                                                        | X   |    |
| 9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2008 or the taxable year beginning in 2008 (see instructions for Part XIV on page 27)?<br>If "Yes," complete Part XIV                                                                 |     | X  |
| 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses                                                                                                                                                                                                |     | X  |

Form 990-PF (2008)

## Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

- |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |     |  |       |  |  |       |  |  |       |  |  |       |  |  |       |  |  |       |  |  |       |  |  |       |  |  |    |  |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-----|--|-------|--|--|-------|--|--|-------|--|--|-------|--|--|-------|--|--|-------|--|--|-------|--|--|-------|--|--|----|--|--|
| <p><b>1</b> Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?</p> <p><b>a</b> Transfers from the reporting foundation to a noncharitable exempt organization of</p> <p>(1) Cash</p> <p>(2) Other assets</p> <p><b>b</b> Other transactions:</p> <p>(1) Sales of assets to a noncharitable exempt organization</p> <p>(2) Purchases of assets from a noncharitable exempt organization</p> <p>(3) Rental of facilities, equipment, or other assets</p> <p>(4) Reimbursement arrangements</p> <p>(5) Loans or loan guarantees</p> <p>(6) Performance of services or membership or fundraising solicitations</p> <p><b>c</b> Sharing of facilities, equipment, mailing lists, other assets, or paid employees</p> <p><b>d</b> If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received</p> | <table border="1"> <tr> <td></td> <td>Yes</td> <td></td> </tr> <tr> <td>1a(1)</td> <td></td> <td></td> </tr> <tr> <td>1a(2)</td> <td></td> <td></td> </tr> <tr> <td>1b(1)</td> <td></td> <td></td> </tr> <tr> <td>1b(2)</td> <td></td> <td></td> </tr> <tr> <td>1b(3)</td> <td></td> <td></td> </tr> <tr> <td>1b(4)</td> <td></td> <td></td> </tr> <tr> <td>1b(5)</td> <td></td> <td></td> </tr> <tr> <td>1b(6)</td> <td></td> <td></td> </tr> <tr> <td>1c</td> <td></td> <td></td> </tr> </table> |  | Yes |  | 1a(1) |  |  | 1a(2) |  |  | 1b(1) |  |  | 1b(2) |  |  | 1b(3) |  |  | 1b(4) |  |  | 1b(5) |  |  | 1b(6) |  |  | 1c |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Yes                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |     |  |       |  |  |       |  |  |       |  |  |       |  |  |       |  |  |       |  |  |       |  |  |       |  |  |    |  |  |
| 1a(1)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |     |  |       |  |  |       |  |  |       |  |  |       |  |  |       |  |  |       |  |  |       |  |  |       |  |  |    |  |  |
| 1a(2)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |     |  |       |  |  |       |  |  |       |  |  |       |  |  |       |  |  |       |  |  |       |  |  |       |  |  |    |  |  |
| 1b(1)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |     |  |       |  |  |       |  |  |       |  |  |       |  |  |       |  |  |       |  |  |       |  |  |       |  |  |    |  |  |
| 1b(2)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |     |  |       |  |  |       |  |  |       |  |  |       |  |  |       |  |  |       |  |  |       |  |  |       |  |  |    |  |  |
| 1b(3)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |     |  |       |  |  |       |  |  |       |  |  |       |  |  |       |  |  |       |  |  |       |  |  |       |  |  |    |  |  |
| 1b(4)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |     |  |       |  |  |       |  |  |       |  |  |       |  |  |       |  |  |       |  |  |       |  |  |       |  |  |    |  |  |
| 1b(5)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |     |  |       |  |  |       |  |  |       |  |  |       |  |  |       |  |  |       |  |  |       |  |  |       |  |  |    |  |  |
| 1b(6)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |     |  |       |  |  |       |  |  |       |  |  |       |  |  |       |  |  |       |  |  |       |  |  |       |  |  |    |  |  |
| 1c                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |     |  |       |  |  |       |  |  |       |  |  |       |  |  |       |  |  |       |  |  |       |  |  |       |  |  |    |  |  |

[illegible]

- 2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No
- b** If "Yes," complete the following schedule

| (a) Name of organization | (b) Type of organization | (c) Description of relationship |
|--------------------------|--------------------------|---------------------------------|
|                          |                          |                                 |
|                          |                          |                                 |
|                          |                          |                                 |
|                          |                          |                                 |

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge.

|           |                                                                                                                        |                                                                                                                |                   |                   |                                                                                                 |                                                               |
|-----------|------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------|-------------------|-------------------|-------------------------------------------------------------------------------------------------|---------------------------------------------------------------|
| Sign Here | <br>Signature of officer or trustee |                                                                                                                | 6/24/2009<br>Date |                   | VICE PRES. & TRUST OFFICER<br>Title                                                             |                                                               |
|           | Paid<br>Preparer's<br>Use Only                                                                                         | Preparer's<br>signature<br> |                   | Date<br>6/24/2009 |                                                                                                 | Check if<br>self-employed <input checked="" type="checkbox"/> |
|           | Firm's name (or yours if<br>self-employed), address,<br>and ZIP code                                                   |                                                                                                                |                   |                   | Preparer's identifying<br>number (see Signature on<br>page 30 of the instructions)<br>P00364310 |                                                               |
|           | PRICEWATERHOUSECOOPERS, LLP<br>600 GRANT STREET, PITTSBURGH 15219-2777                                                 |                                                                                                                |                   |                   | EIN 13-4008324<br>Phone no 412-355-6000                                                         |                                                               |