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Return of Private Foundation
or Section 4947(a)(1) Nonexempt Charitable Trust
Treated as a Private Foundation
Note: The foundation may be able to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0052

	2008
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Fo	or ca	lendar year 2008, d	or tax year begi	nning	12/	01 , 2008	, and end	ing	_	11/30, 20 09
G	Che	ck all that apply.	Initial retur	n	Final return	Amended	return		Address change	Name change
		Name of fou	ndation						A Employer identific	ation number
ι	Jse th	ne IRS								
	lab		RICH FAMILY	FOUN	DATION				94-2	2781744
(Other				mail is not delivered to street	address)	Room/su	ııte	B Telephone number (see	
	pri	int				•				,
	or ty	דוא אוז חחכו	T MON A VENIU		II ET OOD				1651	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
		City or town	LTON AVENUI , state, and ZIP coo		n FLOOR		l		C If exemption applica	0) 838-1030 tion is
li	ıstru	ctions.	, State, and Zir Cox						pending, check here	····· [
									D 1 Foreign organizati	_
_			O, CA 9430			 			2 Foreign organizat 85% test, check h	
H	\neg				(c)(3) exempt private f				computation .	▶ □
Ŧ		ection 4947(a)(1) noi			Other taxable pr				E If private foundation	status was terminated
i		market value of all			unting method <u>x</u> C	asn Acc	crual		under section 507(b)	(1)(A), check here . >
	•	ear (from Part II, col			ther (specify)				F If the foundation is	
			.0,392.		column (d) must be on	casn basis)			under section 507(b)	(1)(B), check here
Li	art	Analysis of Reve			(a) Revenue and	(b) Net inve	estment	1	c) Adjusted net	(d) Disbursements for charitable
		may not necessarily	equal the amounts	s in ´	expenses per	incon		· `	income	purposes
_		column (a) (see pag	e 11 of the instruct	ions).)	books	/#. 25 N \	<u> </u>	-		(cash basis only)
	1	Contributions, gifts, grants,				1880 T	12 14 (B) 18 15 15 15 15 15 15 15 15 15 15 15 15 15	13. 3	TAKES AND SEEDS	The state of the s
	2		oundation is not requesch B		100 6 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	The top for the	<u>ૄૄ૾</u>	Z.		
	3	Interest on savings and			1,178.		1,178.			STMT %10%
	4	Dividends and intere	est from securities							
	5 a	Gross rents						l		The waster than the
	b	Net rental income or (los	ss)					14.8		
<u>a</u>	6a	Net gain or (loss) from	sale of assets not on I	line 10		经验的	学で記	党 编	APPENDENCE OF	12/12/1-42 1-33 12/20
ו ב	b	Gross sales price for all assets on line 6a				330 330		14.3		
Revenue	7	Capital gain net inco	me (from Part IV. I	ine 2) .	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -			* 3° 20		CONTRACTOR OF THE PROPERTY OF
, 04	8	Net short-term Capit			1,73	- FL 1	• • • •			1 87 1879 13W
?	9	Income modification				::- \ \ , 7 ,				1.3
•	10 a	Gross sales less returns and allowances		78	1877	ALCONO.				
<u>[</u>]	b	Less Cost of good Asold	G.1 1 2010	Ö	· · · · · · · · · · · · · · · · · · ·	通经的 类的	ny 1200	Sept. 1	。 "会会是整理	
2		Gross profit or (loss)		S						
á	11	Other income/(attack		1년 .	1,663.					STMT 2
3	12	Total. Add lines 1 th	, , , , , , , , , , , , , , , , , , ,		2,841.		1,178.			May's a sixon
2/	13	Compensation of office		etc	NONE	· · ·				
	14	Other employee sala						<u> </u>		
ses	15	Pension plans, empl	•							
ens		Legal fees (attach so								
Administrative Expens		Accounting fees (att		 ГТ 3	3,245.		1,623.		NONE	1,622.
ē					3,213.	1	_,		,,ond	
ativ	17	Interest	-							
str	18	Taxes (attach schedule)			13,737.	 				
Ë	19	Depreciation (attach			13,737.	1				
Ę	20					<u> </u>				1. 24. 24. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.
Ă		Occupancy								
and	21	Travel, conferences,				-		 		
ğ	22	Printing and publica			101					101
Operating	23	Other expenses (atta			181.					181
era	24	Total operating and				1				
á		Add lines 13 through			17,163.	hogy myssick	<u>1,623.</u>	W 0.5	NONE	1,803.
_	25	Contributions, gifts,			544,985.	Emily Milestine		1 2	Carlo a Carrier or or or see	544,985.
_	26	Total expenses and disbur		4 and 25	562,148.		<u>1,623.</u>	<u> </u>	ŇONE	546,788
	27	Subtract line 26 from						÷		
		Excess of revenue over ex	•		-559,307.	3.4		ļ., <u>"</u>		
		Net investment inco	· -			,	-0-	<u> </u>	** * / **	<u> </u>
	l c	Adjusted net incom-	e (if negative, enter	r -0-)	1 2 2 2 3	1 1 1 1		1	-0-	

For Privacy Act and Paperwork Reduction Act Notice, see page 30 of the instructions. **STMT $\,4\,$ JSA

Form 990-PF (2008)

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	•				
For	m 990	P-PF (2008)		-2781744	Page 2
B	art II	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End o	of year
		amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			
-	2	Savings and temporary cash investments	1,669,699.	1,110,392.	1,110,392.
	3	Accounts receivable		e w war and the second of the second	
		Less allowance for doubtful accounts ▶			<u> </u>
	4	Pledges receivable		11 12 12 13 13 13 13 13 13 13 13 13 13 13 13 13	
		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)	3,} ~		\$ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
	-	Less allowance for doubtful accounts ▶		- 1 - 4 1 - 1 - 1 - 1 - 1 -	
	8	Inventories for sale or use			•
Assets	9	Prepaid expenses and deferred charges			
SS					
٩		Investments - U.S. and state government obligations (attach schedule)			
		Investments - corporate stock (attach schedule)	·		
	11 °	Investments - corporate bonds (attach schedule)		Company of the company	
1	12	Investments - mortgage loans			
- 1	13 14	Investments - other (attach schedule) Land, buildings, and equipment basis		The second of th	
		Less accumulated depreciation (attach schedule)	THE RE SE STATE OF THE SECOND	ments den a mil der menener bestämmidetilmant han	an dis a mass i will be discussive a 21 till had been share
ļ	15	Other assets (describe)			
	16	Total assets (to be completed by all filers - see the			
		instructions Also, see page 1, item I)	1,669,699.	1,110,392.	1,110,392.
	17	Accounts payable and accrued expenses			京學學家(Y) 1975年
	18	Grants payable			[1] 《 [1] 《 [2] [2]
S	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			医神经学生 医乳毒
٩	21	Mortgages and other notes payable (attach schedule)			
اڌ	22	Other liabilities (describe			
1	23	Total liabilities (add lines 17 through 22)	•		
7		Foundations that follow SFAS 117, check here			The man hand to be a first of the
		and complete lines 24 through 26 and lines 30 and 31.			The said of the sa
S	24	Unrestricted			下型化學聚變。養的逐步
ä	25	Temporarily restricted			[1] 水源經過學學學學
ᇒ	26	Permanently restricted			
힏		Foundations that do not follow SFAS 117,			
اق		check here and complete lines 27 through 31. ► X			
딝	27	Capital stock, trust principal, or current funds	350.	350.	
3	24 25 26 27 28 29 30	Paid-in or capital surplus, or land, bldg , and equipment fund	330.	550.	
Set	20		1 660 240	1 110 042	
As	20	Retained earnings, accumulated income, endowment, or other funds	1,669,349.	1,110,042.	
<u>e</u>	JU	Total net assets or fund balances (see page 17 of the	1	1 110 200	1
Z		instructions)	1,669,699.	1,110,392.	1 7 2 Sept. 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	31	Total liabilities and net assets/fund balances (see page 17			[] [] [] [] [] [] [] [] [] [] [] [] [] [
		of the instructions)	1,669,699.	1,110,392.	<u> </u>

Part III Analysis of Changes in Net Assets or Fund Balances 1 Total 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) 1,669,699. 2 Enter amount from Part I, line 27a 2 -559,307. 3 Other increases not included in line 2 (itemize) ▶ 3 4 1,110,392. 5 Decreases not included in line 2 (itemize) ▶__ 5 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30. 6 1,110,392.

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(a) List a	nd describe the kind(s) of property so brick warehouse, or common stock, 2	old (e g , real estate,	(b) How acquired P-Purchase D-Donation		(d) Date sold (mo , day, yr.)
1a					
b					
С					
d		· ·			
е					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gaın or (lo (e) plus (f) mın	
_a					
_b					
С					
_d					
е					
Complete only for assets	· · · · · · · · · · · · · · · · · · ·	owned by the foundation on 12/31/69) Gains (Col (h) g	
(i) F M V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (ı) over col (j), if any	col	(k), but not less Losses (from co	
а					
b					
С					
d					
е	<u></u>	74-24-1			
2 Capital gain net income	or (net capital loss)	If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7	2		
Net short-term capital ga	in or (loss) as defined in sections	s 1222(5) and (6)			
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	, line 8	<u> </u>	3		
Part V Qualification L	Jnder Section 4940(e) for R	educed Tax on Net Investment Inc	come		
	·	stributable amount of any year in the b	ase perio	od?	Yes X No
		ear, see page 18 of the instructions be	efore ma	kıng anv entries	·
(a)	(b)	(c)	1	(d)	
Base period years Calendar year (or tax year beginning in)		Net value of nonchantable-use assets		Distribution r (col (b) divided by	
2007	42,625	497,100.		, , , ,	0.085747
2006	56,640				0.240449
2005	95,863				0.278516
2004	63,958				0.147906
2003	29,020				0.063095
2 Total of line 1, column (d)		2		0.815713
3 Average distribution rati	o for the 5-year base period - di	vide the total on line 2 by 5, or by the			
number of years the fou	ndation has been in existence if	less than 5 years	3		0.163143
4 Enter the net value of ne	oncharitable-use assets for 2008	3 from Part X, line 5	4	1	L,277,431.
					1
5 Multiply line 4 by line 3			5		208,404.
6 Enter 1% of net investm	ent income (1% of Part I, line 27t	o)	6		
7 Add lines 5 and 6			7		208,404.
8 Enter qualifying distribut	tions from Part XII, line 4		8		546,788.
If line 8 is equal to or the Part VI instructions of	greater than line 7, check the	box in Part VI, line 1b, and comple	te that p	part using a 1%	6 tax rate See

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Page 3

	990-PF (2008) 94-2781744		Page 4
_	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of the	ne instruct	tions)
1a	Exempt operating foundations described in section 4940(d)(2), check here And enter "N/A" on line 1		\$ -\$ \$
	Date of ruling letter (attach copy of ruling letter if necessary - see instructions)		7.7.4
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		NON
	here ► X and enter 1% of Part I, line 27b	Same	3
	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)	23	لندبر
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 2		
3	Add lines 1 and 2		NONE
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 4		NONE
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0	*/ %* *L *.	NONE
6	Credits/Payments	2. 3.	
	2008 estimated tax payments and 2007 overpayment credited to 2008 6a 1,663.		
	Exempt foreign organizations-tax withheld at source 6b NONE	3673 244 B	3, 3
	Tax paid with application for extension of time to file (Form 8868) 6c NONE	gr (gr - 1 gr -	1 A 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	Backup withholding erroneously withheld 6d	ek. `∴ `	W. W.
7	Total credits and payments. Add lines 6a through 6d		<u>, 663</u> .
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached		
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		
10 11	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid Enter the amount of line 10 to be Credited to 2009 estimated tax 100 Refunded 11		<u>, 663</u> .
	t VII-A Statements Regarding Activities 100. Refunded ▶ 11	1	<u>, 563</u> .
		Yes	No.
ıa	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?	1a	No X
h	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19	14	 ^
	of the instructions for definition)?	1 b	x
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	published or distributed by the foundation in connection with the activities		(3 E) - 13
_	(a)	1c	X
ď	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year	7 3 3 3	1.20
_	(1) On the foundation (2) On foundation managers (3)		
_	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on	(t)	3 33.73
Ū	foundation managers > \$	3423 44	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2	X
_	If "Yes," attach a detailed description of the activities	78.37.3 KURY	
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	3	X
4 a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	Х
	Agricultural and the second and the	4 b	N/A
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5	х
		4. 3 B	
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either		
	By language in the governing instrument, or	1 1 4 5 1	
	By state legislation that effectively amends the governing instrument so that no mandatory directions that		2 44
	conflict with the state law remain in the governing instrument?	6 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.	7 X	
8 a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	
	instructions)	[汉州区系	3 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General	13 . 13 . 1 . L	. 27 L
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8ь х	
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)? If "Yes," complete Part XIV	9	<u> </u>
0	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their		
	names and addresses	1 4 4 1	l v

OHIII	990-PF (2006) 94-2781 <u>74</u> 4		,	Page J
Par	t VII-A Statements Regarding Activities (continued)			
11	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)	111		х
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before			
	August 17, 2008?	12		х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?		x	
	Website address ► N/A			
1.4	The books are in care of ▶ JEANNIE BIER Telephone no ▶	38-10	030	
. •	Located at ▶300 HAMILTON AVE. 4TH FL, PALO ALTO, CA ZIP+4 ▶ 94301-			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here N/A		▶	T
13	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.	-	Yes	No
12	During the year did the foundation (either directly or indirectly)	6. 7		215.2
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No	*	18 87	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	47 %	3 40 755	200
	disqualified person?	12	ye ye white	
	(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	10.00	مورة برا	(% 12)
	(5) Transfer any income or assets to a disqualified person (or make any of either available for	25.8	Sa Julie V	1,22,22
	the benefit or use of a disqualified person)?		(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)	A SACTOR
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if	18 % d	3 3 4 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	
	the foundation agreed to make a grant to or to employ the official for a period after	18.5	A Section	
	termination of government service, if terminating within 90 days)	200 m		V 54.08
h	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	15 m		
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?	16	N/	Α
	Organizations relying on a current notice regarding disaster assistance check here			212.0
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that	1837	3	2 2 2
•	were not corrected before the first day of the tax year beginning in 2008?	1 c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	10.70	- X &	700 kg to 100 3 1865 0
_	operating foundation defined in section 4942(j)(3) or 4942(j)(5))	(3)	155	
а	At the end of tax year 2008, did the foundation have any undistributed income (lines 6d and			1
_	6e, Part XIII) for tax year(s) beginning before 2008?	4 8	2	
	If "Yes," list the years ▶			7.30
ь	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)	28 16.	Signal .	
	to all years listed, answer "No" and attach statement - see page 20 of the instructions)	2b	N/	Α
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here	250	100	
	>	100	, E	
3a	Did the foundation hold more than a 2% direct or indirect interest in any business		3.2	
	enterprise at any time during the year? Yes X No		200	337
b	If "Yes," did it have excess business holdings in 2008 as a result of (1) any purchase by the foundation or	400	12 p. 100	J. 872
_	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the	\$ \$ \$ \$ S	1 35 X.	
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse		13/2	
	of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the		1 500	
	foundation had excess business holdings in 2008)	3 b	N/	A
4 a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		Х
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its		£	222
-	charitable purpose that had not been somewed from recovering the first day of the taylors beginning in 20002	A ha	*****	1

2 Compensation of five highest-paid employees (other than those included on line 1 - see page 23 of the instructions).

(a) Name and address 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 defered compensation

(e) Expense account, other allowances

NONE

Part VIII	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Emploand Contractors (continued)	yees,
3 Five high	est-paid independent contractors for professional services (see page 23 of the instructions). If none,	enter "NONE."
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE		
Total number	er of others receiving over \$50,000 for professional services	▶ NONE
Part IX-A	Summary of Direct Charitable Activities	
	dation's four largest direct chantable activities during the tax year. Include relevant statistical information such as the number ons and other beneficianes served, conferences convened, research papers produced, etc.	Expenses
1 NOT A	PPLICABLE	
2		
3		
		1
4		
		Į
Part IX-B		
Describe the	two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 NOT A	PPLICABLE	
2		
All other pro	gram-related investments. See page 24 of the instructions	
□□□□□□		
Total Add I	ines 1 through 3	

POIII	1980-FF (2008) 94-2781744		Page O
Pa ·	Minimum Investment Return (All domestic foundations must complete this part. Foreign see page 24 of the instructions.)	gn foundation	S,
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	
	Average of monthly cash balances	1b	1,296,884.
	Fair market value of all other assets (see page 24 of the instructions)	1c	NONE
	Total (add lines 1a, b, and c)	1d	1,296,884.
	Reduction claimed for blockage or other factors reported on lines 1a and	A 3	1/250/004.
	1c (attach detailed explanation)1e	-	
2	Acquisition indebtedness applicable to line 1 assets	2	NONE
3	Subtract line 2 from line 1d	3	1,296,884.
4	Cash deemed held for charitable activities Enter 1 1/2 % of line 3 (for greater amount, see page 25		1,230,004.
	of the instructions)	4	19,453.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	1,277,431.
6	Minimum investment return. Enter 5% of line 5		63,872.
Pa	Minimum investment return. Enter 5% of line 5 rt XI Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) privations)	ite operating	03,072.
	foundations and certain foreign organizations check here	part)	
1	Minimum investment return from Part X, line 6	1	63,872.
	Tax on investment income for 2008 from Part VI, line 5 2a NONE	1 ' /	03,012.
_ b	Income tax for 2008 (This does not include the tax from Part VI) 2b	(18) (18)	
	Add lines 2a and 2b	2c	NONE
3	Distributable amount before adjustments Subtract line 2c from line 1	3	63,872.
4	Recoveries of amounts treated as qualifying distributions	4	03,012.
5	Add lines 3 and 4	5	62 072
6	Deduction from distributable amount (see page 25 of the instructions)	6	63,872.
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1 · · · · · · · · · · · · · · · · · ·	7	63,872.
_		<u> </u>	03,812.
Pa	rt XII Qualifying Distributions (see page 25 of the instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes	S. S	
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	546,788.
b	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
_	nurnoses	2	NONE
3	Amounts set aside for specific charitable projects that satisfy the	- 	NONE
a	Suitability test (prior IRS approval required)	3a	NONE
b	One by the distribution and the state of the	3b	NONE
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	NONE FAC 700
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		546,788.
-	Enter 1% of Part I, line 27b (see page 26 of the instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	E46 700
•	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating w		546,788.
	qualifies for the section 4940(e) reduction of tax in those years	metrier trie iour	IUaUUI

Distributable amount for 2008 from Part XI, Inne 7 Inne 7 Indistributed income, if any, as of the end of 2007 and 2008 inne 7 Indistributed income, if any, as of the end of 2007 and 2008 and 2009 an	Pa	rt XIII Undistributed Income (see page	e 26 of the instruction	ns)		
line 7 2 Undistributed income, if any, as of the end of 2007 a Enter amount for 2007 only b Total for pnor years 20 20 20 20 3 Excess distributions carryover, if any, to 2008 a From 2003 NONE b From 2004 28,871. c From 2005 78,701. d From 2006 444,872 e From 2007 28,202. f Total of lines 3a through e 180,546. 2 Qualifying distributions for 2008 from Part XII, line 4 b \$ \$46,788. a Applied to 2007, but not more than line 2a b Applied to 2007, but not more than line 2a b Applied to 2008 distributions environment of corpus (Election required - see page 26 of the instructions). c Treeted as distributions corpove applied to 2008, iff an amount appears in column (a), the same amount must be shown in column (a). Excess distributions carryover applied to 2008, iff an amount appears in column (a) the same amount must be shown in column (a). a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b 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 6 from line 6 b Taxable amount - see page 27 of the instructions. d Undistributed income for 2008 Subtract lines 4 af from line 2 a Taxable amount - see page 27 of the instructions. d Undistributed income for 2008 Subtract lines 4 and 5 from line 1 This amount must be distributed in 2009. 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 1700(11)(F) or 4942(g)(3) (see page 27 of the instructions).	1	Distributable amount for 2008 from Part XI.	• •	1 ' '		1 ' '
2 Undistributed income of any, as of the end of 2007 a Enter amount for 2007 only b Total for prior years 20		· · · · · · · · · · · · · · · · · · ·	Chambridge L. Jang Samer	many military	10 Ter my 10 11 11 11 11 11 11 11 11 11 11 11 11	63,872
a Enter amount for 2007 only b Total for proryears 2 0 2 0 20 3 Excess distributions carryover, if any, to 2008 a From 2003 NONE b From 2004 28.871 c From 2005 78.701. d From 2006 444.872. e From 2007 28.202 f Total of lines 3a through e 180,646. 4 Qualitying distributions for 2008 from Part XII, line 4 \(\mathbb{P} \) \$ \$546,788. a Applied to 2007, but not more than line 2a b Applied to 2007, but not more than line 2a b Applied to 2008 distributions error years (Election required - see page 28 of the instructions). d Applied to 2008 distributions arrover applied to 2008 (If an amount appears in column (d), the same amount must be shown in column (d). E Excess distributions carryover applied to 2008 (If an amount appears in column (d), the same amount must be shown in column (d). E Enter the net total of each column as indicated below: a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income of brior which a notice of deficiency has been sused, 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 (I Undistributed income for 2007. Subtract lines 4d and 5 from line 1 This amount must be distributed in 2009 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(a)(3) (see page 27 of the instructions)	2		The state of the s	-1 12 114	L. 水平等30分型	94 1 2 2
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applied on line 5 or line 7 (see page 27 of the instructions)		applied on line 5 or line 7 (see page 27 of the	NONE	5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		By the wife of the
9 Excess distributions carryover to 2009.	9			44 4 7	S 35/1 2 4	1 to 1 4 1
Subtract lines 7 and 8 from line 6a 663, 562.	-	-	663,562		影楽源・ハランドゥ	[集] 经基本公司
10 Analysis of line 9	10			30 m 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	8 1 C C T C T S T S T S T S T S T S T S T S	The state of the s
a Excess from 2004						19. 18. 18. 18. 18. 18. 18. 18. 18. 18. 18
b Excess from 2005						The state of the s
c Excess from 2006				Strange and the strange of the state of the	The second contrast the second	mind for the first of the first
d Excess from 2007	d		The first of the second	ALL STATES AND	James Brown Brown	
e Excess from 2008	_е	· ——		The last growing to		

List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the If the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see page 28 of the instructions) to individuals or SEE STATEMENT 6 The form in which applications should be submitted and information and materials they should include: LETTER OF REQUEST WITH SUPPORTING DOCUMENTATION c Any submission deadlines: d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors Form 990-PF (2008)

JSA 8E1490 1 000

Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment								
	If recipient is an individual.	Foundation		 				
Recipient (hama as his assay)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	status of	Purpose of grant or contribution	Amount				
Name and address (home or business)	or substantial contributor	recipient						
a Paid during the year								
CDD CD3@EMBN# 3								
SEE STATEMENT 7								
	1							
			<u> </u>					
Total		 	▶ 3a	544,985.				
b Approved for future payment	T	1		344,503.				
			1					
			1					
	1							
Total			▶ 3b	I				

ter gross amounts unless otherwise indicated		ated business income	Excluded by	section 512, 513, or 514	(e) Related or exempt
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(See page 28 of
Program service revenue.	Business code	Amount	Exausion code	Alliount	the instructions)
a					
b					
d			+		
	:		-		
f					
g Fees and contracts from government agencies					
Membership dues and assessments					
Interest on savings and temporary cash investments			14	1,178.	
Dividends and interest from securities					
Net rental income or (loss) from real estate	V 45 X	" Soften Colon State of	125 March	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
a Debt-financed property					
b Not debt-financed property					
Net rental income or (loss) from personal property .					
Other investment income			+		
Gain or (loss) from sales of assets other than inventory	'				
Net income or (loss) from special events			<u> </u>		
Gross profit or (loss) from sales of inventory			 		
Other revenue a	-			1 660	
b EXCISE TAX REFUND			01	1,663.	
C	-				
ai .					
d		·	 		
e	ok skrak			2 941	
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions on page 28 art XVI-B Relationship of Activities	to verify calco	ulations) complishment of E	cempt Purp		2,84
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions on page 28 art XVI-B Relationship of Activities ine No. Explain below how each activities the accomplishment of the form	to verify calcos to the Ac	ulations) complishment of Exch income is reporte	cempt Purp	ooses (e) of Part XVI-A con	2,84
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94-2781744 Information Regarding Transfers To and Transactions and Relationships With Noncharitable Fart XVII **Exempt Organizations** Did the organization directly or indirectly engage in any of the following with any other organization described in section Yes No 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? a Transfers from the reporting foundation to a noncharitable exempt organization of 1a(1) Х (2) Other assets X 1a(2) **b** Other transactions: ع بيلوم ر ما 1b(1) (2) Purchases of assets from a noncharitable exempt organization Х (4) Reimbursement arrangements . . . 1b(5) (6) Performance of services or membership or fundraising solicitations 1b(6) Х c Sharing of facilities, equipment, mailing lists, other assets, or paid employees d 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 (b) Amount involved (a) Line no (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements N/A N/A

2a		foundation directly or n 501(c) of the Code (other					escribed in Yes X No
b	If "Yes	s," complete the following	schedule				
		(a) Name of organization		(b) Type of	organization	(c) Descrip	tion of relationship
N,	/A						
							
							
	11-4	<u> </u>			<u></u>		
	belief,	it is true, correct, and comp	re that I have examplete Declaration of	ined this return, incli preparer (other than t	iding accompanying sche axpaver or fiduciary) is b	edules and statements, and based on all information of	to the best of my knowledge and which preparer has any knowledge
		Du to		. ,	ار آمر	N	- 1
	_4	MY AUG	ann-	\	8/4/	10 no	sident
<u>a</u>	S/	ghature of officer or trustee			/bate/	Title	•
Here	U	1			Date	0	Preparer's identifying number
드	ο ⁰ >	Preparer's A 9-1				Check if self-employed ▶	(See Signature on page 30 of the instructions)
Sign	arer. Only	signature	ma D. M	lamin	7 23 10	oc. c. pioyed	P00305572
-	Paid reparei Jse Oni	Firm's name (or yours if	SEILER	T.T.P	- 	EIN N	94-1624276
	جَ يَ	self-employed), address,			OBE 400		94-1024270
		00.1 0.1.0.0,000, addition,	THREE	AGOON DRIVE	, STE 400	l	

Form 990-PF (2008)

Phone no 650-365-4646

and ZIP code

REDWOOD CITY,

94065

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

NET INVESTMENT INCOME		1,178.	1,178.	
		1,178.	1,178.	
			TOTAL	
DESCRIPTION		INTEREST INCOME		

STATEMENT

DESCRIPTION

EXCISE TAX REFUND

FORM	990PF,	PART	I	_	OTHER	INCOME

REVENUE AND EXPENSES

PER BOOKS

1,663.

TOTALS

1,663.

FORM 990PF, PART I - ACCOUNTING FEES

,	CHAKLTABLE PURPOSES		1,622.		1,622.	
ADJUSTED	INCOME				NONE	
NET	INCOME	1 !!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!	1,623.		1,623.	
REVENUE AND	EAFENSES PER BOOKS	1 1 1 1 1 1			3,245.	
				1	TOTALS	
	DESCRIPTION	!!!!!!!!!!	ACCOUNTING FEES			

STATEMENT

FORM 990PF, PART I - TAXES

AND **EXPENSES** DESCRIPTION PER BOOKS EXCISE TAX 12,074. EXCISE TAX OVERPAYMENT APPLIED 1,663. TOTALS 13,737. _____

REVENUE

REVENUE AND PYDENSES	PER BOOKS	160.	21.
	ESCRIPTIO		BANK FEES

181.

TOTALS

CHARITABLE PURPOSES	160.	181.	
------------------------	------	------	--

12960

FORM 990PF, PART XV - NAME, ADDRESS AND PHONE FOR APPLICATIONS ________

JEANNIE BIER 300 HAMILTON AVENUE, 4TH FLOOR PALO ALTO, CA 94301-2581 650.838.1030

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

AIBUTOR WI PURPOSE OF GRANT OR CONTRIBUTION	300,000.	GENERAL 9,985.	GENERAL 2,500.	1,000.	GENERAL 25,000.	GENERAL 80,000.	GENERAL 100,000.
RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	NONE PUBLIC CHARITY	NONE PUBLIC CHARITY	NONE PUBLIC CHARITY	NONE PUBLIC CHARITY	NONE PUBLIC CHARITY	NONE PUBLIC CHARITY	NONE PUBLIC CHARITY
RECIPIENT NAME AND ADDRESS	THE CENTER FOR JEWISH CAMPUS LIFE P.O. BOX 20526 STANFORD, CA 94309	CANTOR ARTS CENTER LOMITA DRIVE AT MUSEUM WAY STANFORD, CA 94305	BREAST CANCER CONNECTIONS 390 CAMBRIDGE AVENUE PALO ALTO, CA 94306	PALO ALTO ART CENTER FOUNDATION 1313 NEWELL ROAD PALO ALTO, CA 94303	STANFORD HOSPITAL & CLINICS 300 PASTEUR DRIVE STANFORD, CA 94305	NATIONAL GALLERY OF ART 4TH AND CONSTITUTION AVENUE NW WASHINGTON, DC 20565	STANFORD UNIVERSITY - GIFT PROCESSING P.O. BOX 20466

12960

YEAR
뛾
DURING
PAID
CONTRIBUTIONS
AND
GRANTS
- /
⋈
PART
990PF,
FORM

AMOUNT	5,000.	500.	21,000.
PURPOSE OF GRANT OR CONTRIBUTION	GENERAL	GENERAL	GENERAL
RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	NONE	NONE	NONE
	PUBLIC CHARITY	PUBLIC CHARITY	PUBLIC CHARITY
RECIPIENT NAME AND ADDRESS	CALIFORNIA MUSIC PROJECT	SUSAN G. KOMEN FOR THE CURE	OSHMAN FAMILY JCC
	P.O. BOX 4297	P.O. BOX 650309	3921 FABIAN WAY
	SAN RAFAEL, CA 94913	DALLAS, TX 75265	PALO ALTO, CA 94303

544,985.

TOTAL CONTRIBUTIONS PAID

Form 8868

(Rev April 2009)

Application for Extension of Time To File an Exempt Organization Return

	200
1	547
OMB No. 1545-1	709

Department of the Treasury Internal Revenue Service

File a separate application for each return.

 If you are f 	iling for an Automatic 3-Month Extension, complete only Part I and check this box	×
	filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on pag te Part II unless you have already been granted an automatic 3-month extension on a pre	e 2 of this form).
Part Auto	matic 3-Month Extension of Time. Only submit original (no copies needed)	
	required to file Form 990-T and requesting an automatic 6-month extension - check this b	oox and complete
Part I only		
	orations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 76 ome tax returns.	004 to request an extension of
	ng (e-file). Generally, you can electronically file Form 8868 if you want a 3-month aut	
	turns noted below (6 months for a corporation required to file Form 990-T) Howev	
	if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms omposite or consolidated From 990-T. Instead, you must submit the fully completed and	
	e details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for C	
Туре ог	Name of Exempt Organization	Employer identification number
print	FREIDENRICH FAMILY FOUNDATION	94-2781744
File by the	Number, street, and room or suite no. If a P.O. box, see instructions.	
due date for	300 HAMILTON AVENUE, 4TH FLOOR	
iling your retum See	City, town or post office, state, and ZIP code. For a foreign address, see instructions	
nstructions	PALO ALTO, CA 94301	
Check type o	f return to be filed (file a separate application for each return)	
Form 990		m 4720
Form 990		m 5227
Form 990		m 6069
X Form 990	-PF Form 1041-A For	m 8870
If the organIf this is forfor the whole g	No. ► 650 838–1030 FAX No ► nization does not have an office or place of business in the United States, check this box a Group Return, enter the organization's four digit Group Exemption Number (GEN) group, check this box. ► are so fall members the extension will cover.	
1 I reques	st an automatic 3-month (6 months for a corporation required to file Form 07/15,2010 to file the exempt organization return for the organization ganization's return for: calendar year or	
▶ X	tax year beginning 12/01, 2008, and ending	11/30.2009
2 If this tax	year is for less than 12 months, check reason: Initial return Final return	Change in accounting period
3a If this ap	plication is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax,	less any
nonrefund	dable credits. See instructions	3a \$ 100.
b If this app	plication is for Form 990-PF or 990-T, enter any refundable credits and estimated tax p	
	clude any prior year overpayment allowed as a credit	3b \$ 1,663.
	Due, Subtract line 3b from line 3a. Include your payment with this form, or, if required	RX-FXI
	O coupon or, if required, by using EFTPS (Electronic Federal Tax Payment Syste	m) See
instruction		3c \$ NONE
	are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-E0	O and Form 8879-EO
or payment ins		
For Privacy Ac	et and Paperwork Reduction Act Notice, see Instructions.	Form 8868 (Rev 4-2009)

Form 8868	(Rev 4-2009)				Page 2
	are filing for an Additional (Not Automatic) 3-Month Extension, complete onl	y Part II a	nd check this box		
	nly complete Part II if you have already been granted an automatic 3-month ex				
	are filing for an Automatic 3-Month Extension, complete only Part I (on page		,,		
	Additional (Not Automatic) 3-Month Extension of Time. Only		original (no copi	es need	led).
	Name of Exempt Organization	美国生活	Employer identifica		
Type or print	FREIDENRICH FAMILY FOUNDATION		94-2781744	Į	
File by the	Number, street, and room or suite no. If a P.O. box, see instructions.	建设设	For IRS use only		
extended	300 HAMILTON AVENUE, 4TH FLOOR				
due date for filing the	City, town or post office, state, and ZIP code. For a foreign address, see instructions			经被约翰	Kinalama
return. See		1.60			
	ype of return to be filed (File a separate application for each return)	1 sections a	CALLES TAKE A THE CARREST TAKE	1,61,023,53	September Same
	orm 990 X Form 990-PF		Form 1041-A	Fo	rm 6069
	orm 990-BL Form 990-T (sec 401(a) or 408(a) trust)	H	Form 4720		rm 8870
	orm 990-EZ Form 990-T (trust other than above)	\Box	Form 5227		1111 0070
	Oo not complete Part II if you were not already granted an automatic 3-mo	nth exter		sly filed	Form 8868
	ooks are in the care of JEANNIE BIER	THE CALCU	ioton on a previou	Jiy Theu	01111 0000.
	hone No. ► 650 838-1030 FAX No. ►				
	organization does not have an office or place of business in the United States,	obook this			
					▶∟
	is for a Group Return, enter the organization's four digit Group Exemption Number to be a series about the			··- ·-	
	whole group, check this box	s box	. ▶ <u>l</u> and attach	ıa	
	the names and EINs of all members the extension is for		 		
	equest an additional 3-month extension of time until 10/15/2010			-	
	r calendar year, or other tax year beginning	and end			 :
	-	Final retu			nting period
	ate in detail why you need the extension <u>INFORMATION NECESSARY TO</u>			ND	
	CURATE RETURN HAS NOT BEEN RECEIVED. THIS INFORMATIO	N WILL	AFFECT A		
SUI	BSTANTIAL PORTION OF THE RETURN.				
					
	his application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the	e tentative	· ·		
	nrefundable credits. See instructions.			8a \$	100.
	his application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundab		17	瀫	
	payments made Include any prior year overpayment allowed as a credit	t and any	·	<u> </u>	
	viously with Form 8868.			8b \$	<u> 1,663.</u>
	ance Due. Subtract line 8b from line 8a Include your payment with this form			İ	
witl	h FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment S	System) S	ee instructions	8c \$	
	Signature and Verificatio				NONE
-	alties of perjury, I declare that I have examined this form, including accompanying schedules a	ind statemen	ts, and to the best of	my knowle	dge and belief,
it is true, co	prrect, and complete, and that I am authonzed to prepare this form				
	91 h M.	Λ		91	1.
Signature	> They D. Mannin Title ➤ CP	17	Date ▶	7/12	-110
	4		f	Form 8868	(Rev. 4-2009)
	SEILER LLP				

THREE LAGOON DRIVE, STE 400 REDWOOD CITY, CA 94065