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Return of Organization Exempt From Income Tax

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

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

	A F	or the	2009 cai	endar ye	ar, or tax	year beginn	ing				,	and er	nding	-				
	B C	neck if ap	plicable	Please	C Name	of organization	SUN	BOW	5 FOUNDA	1OITA	I. INC.) Empl	oyer id	entification nu	mber	
	A	ddress	change	use IRS label or	Doing	Business As								4-3060	1667			
Ī	N.	ame ch	ange	print or	Numbe	er and street (o	r P O box if n	nail is n	ot delivered to	street a	address)	Ro		Telep		umber		
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_	J W	ebsite	: ► N/A					H(c) G							tion nui	mber 🕨		
	K Fo	rm of o	rganization	⊠c₀	rporation	Trust	Association	n [Other ▶			L Year	r of formation	on 1	989	M State of le	aal domicile	э ма
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	nan																	
	2 Check this box if the organization discontinued its operations or dispose 3 Number of voting members of the governing body (Part VI, line 1a) 4 Number of independent voting members of the governing body (Part VI, line 1b) 5 Total number of employees (Part VI, line 2a)										=0/ =4	ita mat aana						
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	_	11			enue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) ue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)						990		600					
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		17				column (A)				A \ 1	- 25\		 		135,			84,192
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	Мау	the IF	RS discus	ss this re	turn with	the prepar	er shown a	bove'	? (see instr	uction	ns) .						X Yes	☐ No

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Pa	Statement of	Program Service	Accomplishments			
1	Briefly describe the organi	ızation's mıssıon				
	Training and seminars to	promote philosophy	of individual environment	tal awareness and	environmental impi	rovement
2	Did the organization unde	doko ony significan	t program populace during	the veer which		
2	Did the organization unde the prior Form 990 or 990			•	ere not listed on	□, □,
						Yes X No
_	If "Yes," describe these ne					
3	Did the organization cease services?	e conducting, or ma 	ke significant changes in	how it conducts, a	iny program 	Yes X No
	If "Yes," describe these ch	nanges on Schedule	e O			<u> </u>
4	Describe the exempt purp Section 501(c)(3) and 501 allocations to others, the t	ose achievements for (c)(4) organizations	for each of the organizations and section 4947(a)(1) to	rusts are required	to report the amoun	
4a	(Code)(Expenses \$	96,036 including grants	of \$	0) (Revenue \$	25.965)
	Training and seminars to					
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4c	(Code) (Expenses \$	0 including grants	of \$	<u>0</u>) (Revenue \$	0)
				of \$	<u>0</u>) (Revenue \$	0)
	Other program services ((Expenses \$		le O.)	of\$		0)

04-3060667 Part IV **Checklist of Required Schedules** Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A . . 1 Х . Is the organization required to complete Schedule B, Schedule of Contributors? 2 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I. Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II . . . 4 Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III 5 Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I 6 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II. 7 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III . 8 Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D. Part IV 9 Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable • Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes." complete Schedule D, Part VI • Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII • Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII. Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII 12 12A Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional. 12A Х Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 14a Did the organization maintain an office, employees, or agents outside of the United States? 14a b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I 14b Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III. 16 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I 17 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?

Did the organization operate one or more hospitals? If "Yes," complete Schedule H

If "Yes," complete Schedule G, Part III

Part IV	Checklist	of Required	Schedules	(continued)

		1		
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations		Yes	No
	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II.	21		х
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the			<u> </u>
	United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III .	22		х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			<u> </u>
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		Х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines	ł		
	24b through 24d and complete Schedule K. If "No," go to line 25	24a		<u> X</u>
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		<u> </u>
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		X
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		<u> </u>
258	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "You " complete Schodule I. Port I.	250		
h	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
D	prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or			
	990-EZ? If "Yes," complete Schedule L, Part I	25b		х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or	200		`
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor, or a grant selection committee member, or to a person related to such an individual?			
	If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,	党,源(
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):	秘達	22°14')	<u>&</u>
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete</i>			
_	Schedule L, Part IV	28b		X
U	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L,			
	Part IV	28c		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?			
	If "Yes," complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			١.,
. .	sections 301 7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,	24	Х	
35	III, IV, and V, line 1 Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete	34	_^_	
55	Schedule R, Part V, line 2	35		x
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related			
	organization? If "Yes," complete Schedule R, Part V, line 2	36		х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part			
	VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and			
	19? Note. All Form 990 filers are required to complete Schedule O	38_	X	
		Form	990	(2009)

Pan	Statements Regarding Other IRS Filings and Tax Compliance		1	
10	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of	Γ	Yes	No
ıa		ما		
b	U.S. Information Returns. Enter -0- if not applicable	의		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	ٵ		
	gaming (gambling) winnings to prize winners?	1c		X
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	10		 ^- -
	Statements, filed for the calendar year ending with or within the year covered by this return 2a	3	1	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	$\vdash \vdash$
-	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> this return (see		1	
	instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by			
	this return?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority		1	
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		X
b	If "Yes," enter the name of the foreign country: ▶			
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank		}	
	and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? .	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? .	5b	_	<u> </u>
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding			
	Prohibited Tax Shelter Transaction?	<u>5c</u>	-	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			,,
	organization solicit any contributions that were not tax deductible?	6a	-	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	C.L.		
~	gifts were not tax deductible?	6b	-	1 1
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	7a		X
L	and services provided to the payor?	7b	+-	+^
b c	Did the organization holdy the donor of the value of the goods of services provided? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	10	1	
C	required to file Form 8282?	7c		x
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal	7		
•	benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		Х
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as			
	required?	7h		X
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			
	organization, have excess business holdings at any time during the year?	8		ļ
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		-
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		-
10	Section 501(c)(7) organizations. Enter			
a	Initiation fees and capital contributions included on Part VIII, line 12	\dashv	1	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	\dashv		
11	Section 501(c)(12) organizations. Enter.			
a	Gross income from members or shareholders	-		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 11b			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	128	.	1
ıza h	If "Ves " enter the amount of tax-exempt interest received or accrued during the year	<u> </u>	\top	

Part VI

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions.

Sect	ion A. Governing Body and Management					
					Yes	No
1a	Enter the number of voting members of the governing body	1a		5		
b	Enter the number of voting members that are independent	1b		7	1	
2	Did any officer, director, trustee, or key employee have a family relationship or a business rel	ations	hip with	7		
	any other officer, director, trustee, or key employee?			2	X	
3	Did the organization delegate control over management duties customarily performed by or u	nder t	he direct		1	
	supervision of officers, directors or trustees, or key employees to a management company or			3		Х
4	Did the organization make any significant changes to its organizational documents since the prior Form 9	90 wa	s filed?	4		Х
5	Did the organization become aware during the year of a material diversion of the organization	i's ass	ets?.	5		X
6	Does the organization have members or stockholders?			6		Х
7a	Does the organization have members, stockholders, or other persons who may elect one or r	nore n	nembers			
	of the governing body?			7a	<u> </u>	Х
b	Are any decisions of the governing body subject to approval by members, stockholders, or ot	her pe	rsons?	7b		Х
8	Did the organization contemporaneously document the meetings held or written actions unde	rtaker	during	ł		
	the year by the following			· · · · · · · · · · · · · · · · · · ·	<u> </u>	
а	The governing body?			8a	<u> </u>	Х
b	Each committee with authority to act on behalf of the governing body?			8b		X
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot		eached			
	at the organization's mailing address? If "Yes," provide the names and addresses in Schedul		<u> </u>	9a		X
	ion B. Policies (This Section B requests information about policies not required by th	e Inte	rnal			
Reve	enue Code)					
					Yes	No
10a	Does the organization have local chapters, branches, or affiliates?			10a	ļ	Х
b	,		chapters,	ļ		
	affiliates, and branches to ensure their operations are consistent with those of the organization			10b	ļ	
11	Has the organization provided a copy of this Form 990 to all members of its governing body by	efore	filing the	1		
	form?		•	11	<u> </u>	X
	Describe in Schedule O the process, if any, used by the organization to review this Form 990	1		—	-	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
12a	9			12a	<u> </u>	X
b	Are officers, directors or trustees, and key employees required to disclose annually interests	that co	ould give	401		
_	rise to conflicts?			12b	-	X
С	Does the organization regularly and consistently monitor and enforce compliance with the po	licy?	"Yes,"	425		
42	describe in Schedule O how this is done	•		12c		X
13	Does the organization have a written whistleblower policy?			13	<u> </u>	x
14 15	Does the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and a	00000	ol by	14	 	^
13	independent persons, comparability data, and contemporaneous substantiation of the deliber		-		}	
а	The organization's CEO, Executive Director, or top management official	alion	and decision.	15a		X
a b	Other officers or key employees of the organization .	•	•	15b	†	X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)			100		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar a				×	,
	with a taxable entity during the year?	ag		16a	1	Х
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization	to ev	aluate	1		
_	its participation in joint venture arrangements under applicable federal tax law, and taken ste			1		
	the organization's exempt status with respect to such arrangements?			16b	1	······································
Sect	tion C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filed ► MA, NY			-	-	
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, at	nd 990)-T (501(c)(3)s	only)		
	available for public inspection. Indicate how you make these available. Check all that apply		· · · · · · · · · · · · · · · · · · ·	••		
	Own website Another's website X Upon request					
19	Describe in Schedule O whether (and if so, how), the organization makes its governing docur	nents.	conflict of inte	rest		
	policy, and financial statements available to the public	·				
20	State the name, physical address, and telephone number of the person who possesses the b	ooks	and records of	the		
	organization ► KENJI HIGASHIDE					
	70 KATHI EEN DR N. SYOSSET NV 11701					

	(2009)	

SUNBOW 5 FOUNDATION, INC.

04-3060667

Page 7

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

 List persons in the following order, individual trustees or directors: institutional trustees, officers, key employees, highest

List persons in the following order individual trustees or directors; institutional trustees, officers, key employees, highest compensated employees; and former such persons.

Check this box if the organization did not compe	ensate any curre	ent off	ice	r, d	irec	ctor, o	r tru	ustee		
(A)	(B)				C)			(D)	(E)	(F)
Name and Title	Average hours per week	Individual trustee of or director	Institutional trustee	Officer		Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
TETSUO SAKAI DIRECTOR	1	х						0	0	26,000
YASUHIRO SUKA DIRECTOR	1	х						0	0	14,000
FRAN HUTCHINS DIRECTOR	1.	х						0	0	0
YOICHIRO IGUCHI DIRECTOR	1	х						0	0.	26,000
K YOSHIMOTO PRESIDENT	40			x	x	Х		13,750	0	0
KENJI HIGASHIDE TREASURER	40			х	х	Х		16,800	0	22,000

Pa	rt VII Section A. Officers, Directors, Tru	ustees, Key Em	ploy	ees	, and	Hig	hest	t Co	mpensated Em	ployees (d	ontinu	ed)	
	, (A)	(B)	_			C)			(D)	(E)	ŀ	(F)
	Name and title	Average hours per week	<u> </u>		(chec	Key	nat ap		Reportable compensation from the	Reportal compensa from rela organizati	ation ted	Estim amou oth	ınt of ter
			Individual trustee or director	institutional trustee	, ,	employee	Highest compensated employee	er 	organization (W-2/1099-MISC)	(W-2/1099-I		comper from organi and re organiz	the zation elated
												_	
												-	
	·····						<u> </u>						
<u>1b</u>	Total							. ▶	30,550	-	0		88,000
2	Total number of individuals (including but no reportable compensation from the organizat		e list	ted a		e) wł	no re	ceiv	ed more than \$1	00,000 in			
	reportable compensation from the organizat	1011			0_							Yes	No
3	Did the organization list any former officer, employee on line 1a? If "Yes," complete Sci					yee,	or h	ighe	st compensated		3		X
4	For any individual listed on line 1a, is the su the organization and related organizations of	m of reportable	com	pens	satio				-				
	ındıvıdual										4		X
5	Did any person listed on line 1a receive or a services rendered to the organization? If "You have been services rendered to the organization?"	•				•			•		5		Х
`	ction B. Independent Contractors									2122 22			
1	Complete this table for your five highest cor compensation from the organization	npensated inde _l	pend	ent d	contr	acto	rs tha	at re		n \$100,00	D of 		
	(A) Name and business a	ddress							(B) Description of sen	vices	Com	(C) opensation	
													0
								 		-			0 0
													0
													0
2	Total number of independent contractors (in more than \$100,000 in compensation from t			ed to	thos	se lis	ted a		e) who received				

Net income or (loss) from sales of inventory Miscellaneous Revenue **Business Code** 11a Rent 531110 600 600 0 0 All other revenue. 0 Total. Add lines 11a-11d 600 Total revenue. See instructions 845 52,008 25,965 Form **990** (2009)

Part IX Statement of Functional Expenses

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

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

Companies Comp		not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
organizations in the U.S. See Part IV, line 21 0 0 1 1	7b,			•	•	
2 Grants and other assistance to individuals in the U.S. See Part IV, line 2.2 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	1					
the U S See Part IV, line 2 2 0 0		-	0			
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	2					
organizations, and individuals outside the U.S. See Part IV, lines 17 on the presence of the protection of current of the protection of t	_		0			
U.S. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(f)(1)) and section 405(f) employer contributions) Other reinployee benefits 10 Payroll taxes 3,066 2,555 511 Fees for services (non-employees) a Management. b Legal 3,170 0 3,170 0 3,170 c Accounting 7,520 0 7,	3					
4 Benefits paid to or for members.			_]			
5 Compensation of current officers, directors, trustees, and key employees 6 Compensation not included above, to disqualified persons (as defined under section 4958((f)(1)) and persons described in section 4958((f)(1)) and section 4058((f)(1)) and section 4058((f)(1)) and section 4058((f)(1)) and section 4058((f)(1)) and section 405((f)(1)) and 605((f)(1)) and						
tustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958()(11)) and persons (as defined under section 4958()(3)(8) Other salaries and wages Pension plan contributions (include section 401(k) and section 4010k) employer contributions) Other employee benefits Other employees to services (non-employees) Advangement Other employees Other employees benefits Other employees benefits Other employees benefits Other employees Other e			0			
6 Compensation not included above, to disqualified persons (as defined under section 4958(n)(1)) and persons described in section 4958(n)(3)(8) 0 0 7,789 1,288 7 1,288 7 1,288 7 1,288 8 1,288 9 1,2	Э		00 ==0	24.42		
persons (as defined under section 4958(f)(1) and persons describled in section 4958(c)(3)(B) 0 7 Other salanes and wages 9,077 7,789 1,288 8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions) 0 9 Other employee benefits 0 10 Payroll taxes 3,066 2,555 511 11 Fees for services (non-employees)	c		30,550	24,127	6,423	
persons described in section 4958(c)(3)(B)	0					
7 Other salanes and wages Pension plan contributions (include section 401(k) and section 403(b) employer contributions) O						
Pension plan contributions (include section 401(k) and section 403(b) employer contributions) 0 0 0 0 0 0 0 0 0	7			7 700	1 200	
and section 403(b) employer contributions) Other employee benefits O 0 Payroll taxes 3,066 2,555 511 Fees for services (non-employees) A Management Legal C Accounting C Acc			9,077	7,789	1,288	
9 Other employee benefits 10 Payroll taxes 11 Fees for services (non-employees): a Management. b Legal	0					
10 Payroll taxes 3,066 2,555 511 11 Fees for services (non-employees): a Management 0						
11 Fees for services (non-employees): a Management. 0				2.555		
a Management. b Legal			3,000	2,555	511	
b Legal						
C Accounting d Lobbying e Professional fundraising services See Part IV, line 17 f Investment management fees g Other 2 Advertising and promotion 13 Office expenses 1,647 1,384 263 11,647 1,384 263 11,647 1,384 263 11,647 1,384 263 11,647 1,384 263 11,647 1,384 263 11,647 1,384 263 11,647 1,384 263 11,647 1,384 263 11,647 1,384 263 11,647 1,384 263 11,647 1,384 263 11,647 1,384 263 11,647 1,384 263 11,647 1,384 263 11,647 1,384 263 11,647 1,384 263 11,647 1,384 263 11,233 11,233 11,233 11,233 11,233 11,233 11,233 11,233 11,233 11,233 11,233 11,233 11,233 11,233 11,233 11,245		•		0	2 470	·
d Lobbying e Professional fundraising services See Part IV, line 17 f Investment management fees g Other Other Advertising and promotion O				·		
e Professional fundraising services See Part IV, line 17 f Investment management fees g Other 0 0	-	•		U	7,020	
f Investment management fees 0 0 1 1 2 2 Advertising and promotion 0 0 1 3 2 3 3 4 263 3 3 4 1 384 263 3 3 4 1 384 263 3 3 3 3 3 3 3 3 3	-	, ,				
g Other 2 Advertising and promotion 3 Office expenses 1,647 1,384 263 14 Information technology 5 Royalties 6 Occupancy 7 Travel 7 Travel 8 Payments of travel or entertainment expenses for any federal, state, or local public officials 9 Conferences, conventions, and meetings 10 Interest 10 Payments to affiliates 11,545 10,851 1,794 11,794 12 Payments to affiliates 10 Payments to affiliates 11,583 10,752 1,831 0 10,200 8,246 1,954 10,954 10,954 10,954 10,954 10,955 10	•			» ·		
12	'			···· · · · · · · · · · · · · · · · ·		
13 Office expenses 1	_					
Information technology		= :	-	1 204	263	
15 Royalties 0 0 0 0 0 0 0 0 0				1,304	203	
16		<u> </u>				
17 Travel		·				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials. 19 Conferences, conventions, and meetings 20 Interest 21 Payments to affiliates. 22 Depreciation, depletion, and amortization 23 Insurance. 24 Other expenses Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below) 2 Auto 3 Auto 4 Communication 5 1,584 4 1,792 7 192 4 Repair & Maintenance Miscellaneous 5 10 309 201 5 All other expenses Attach Statement 8 1,78 7 1,62 1,016 2 1,016 2 1,016 3 0,849 0 1 2 1,016 3 0,849 0 1 2 1,016 3 0,036 3 0,036 3 0,849 0 1 2 1,016 3 0,036 3 0,036 3 0,849 0 1 2 1,016 3 0,036 3 0,036 3 0,849 0 1 2 1,016 2 1,016 3 0,036 3 0,036 3 0,039 3 0,036 3 0,039 4 0 2 1,016 3 0,036 3 0,036 3 0,039 4 0 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		· · ·		5 310	1 233	
for any federal, state, or local public officials. Conferences, conventions, and meetings Interest Int			0,040	3,310	1,200	
19 Conferences, conventions, and meetings 0 12,645 10,851 1,794		•	٨			
20	19					
Payments to affiliates 0				10.851	1 704	
Depreciation, depletion, and amortization 12,583 10,752 1,831 0				10,001	1,704	
10,200 8,246 1,954				10.752	1 831	0
Other expenses Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below) a Auto 8,856 7,252 1,604 b Communication 3,689 2,961 728 c Utilities 5,584 4,792 792 d Repair & Maintenance 2,967 2,546 421 e Miscellaneous 510 309 201 f All other expenses Attach Statement 8,178 7,162 1,016 25 Total functional expenses. Add lines 1 through 24f 126,885 96,036 30,849 0 26 Joint costs. Check here ▶ if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising						
covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below) 8,856 7,252 1,604 a Auto 8,856 7,252 1,604 b Communication 3,689 2,961 728 c Utilities 5,584 4,792 792 d Repair & Maintenance 2,967 2,546 421 e Miscellaneous 510 309 201 f All other expenses Attach Statement 8,178 7,162 1,016 25 Total functional expenses. Add lines 1 through 24f 126,885 96,036 30,849 0 26 Joint costs. Check here ▶ ☐ if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising 0 0				<u> </u>		
and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below) a Auto						
5% of total expenses shown on line 25 below) a Auto						
a Auto 8,856 7,252 1,604 b Communication 3,689 2,961 728 c Utilities 5,584 4,792 792 d Repair & Maintenance 2,967 2,546 421 e Miscellaneous 510 309 201 f All other expenses Attach Statement 8,178 7,162 1,016 25 Total functional expenses. Add lines 1 through 24f 126,885 96,036 30,849 0 26 Joint costs. Check here ▶ ☐ if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising		•				
b Communication 3,689 2,961 728 c Utilities 5,584 4,792 792 d Repair & Maintenance 2,967 2,546 421 e Miscellaneous 510 309 201 f All other expenses Attach Statement 8,178 7,162 1,016 25 Total functional expenses. Add lines 1 through 24f 126,885 96,036 30,849 0 26 Joint costs. Check here ▶☐ if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising	а	Auto	8,856	7,252	1,604	
the discellaneous control of the organization reported in column (B) joint costs from a combined educational campaign and fundraising control of the discellaneous control of the discellaneous control of the control	b	Communication				
e Miscellaneous 510 309 201 f All other expenses Attach Statement 8,178 7,162 1,016 25 Total functional expenses. Add lines 1 through 24f 126,885 96,036 30,849 0 26 Joint costs. Check here ▶ ☐ If following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising	С					
e Miscellaneous 510 309 201 f All other expenses Attach Statement 8,178 7,162 1,016 25 Total functional expenses. Add lines 1 through 24f 126,885 96,036 30,849 0 26 Joint costs. Check here ▶ ☐ If following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising	d	Repair & Maintenance	2,967	2,546	421	
f All other expenses Attach Statement 8,178 7,162 1,016 25 Total functional expenses. Add lines 1 through 24f 126,885 96,036 30,849 0 26 Joint costs. Check here ▶ ☐ If following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising	е					
Total functional expenses. Add lines 1 through 24f 126,885 96,036 30,849 0 Joint costs. Check here ▶ if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising	f				1,016	
Joint costs. Check here ▶☐ If following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising	25				·	0
SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising	26					
reported in column (B) joint costs from a combined educational campaign and fundraising						
educational campaign and fundraising						
· · · · · · · · · · · · · · · · · · ·						
		· •				

Pá	art X	Balance Sheet			
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	4,393	1	8,338
	2	Savings and temporary cash investments	75,709	2	3,817
	3	Pledges and grants receivable, net	0	3	0
	4	Accounts receivable, net	0	4	0
	5	Receivables from current and former officers, directors, trustees, key			
		employees, and highest compensated employees. Complete Part II of			
		Schedule L	0	5	
	6	Receivables from other disqualified persons (as defined under section			
		4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete			
		Part II of Schedule L	0	6	
Assets	7	Notes and loans receivable, net	0	7	0
SS	8	Inventories for sale or use		8	
⋖	9	Prepaid expenses and deferred charges	3,670	9	3,705
	10a	Land, buildings, and equipment. cost or 10a 747,206			
		other basis. Complete Part VI of Schedule D			
	b	Less accumulated depreciation 10b 140,551	615,686	10c	606,655
	11	Investments—publicly traded securities	0	11	0
	12	Investments—other securities See Part IV, line 11	0	12	. 0
i	13	Investments—program-related See Part IV, line 11	0	13	0
	14	Intangible assets .	0	14	0
	15	Other assets See Part IV, line 11	1,674	15	671
	16	Total assets. Add lines 1 through 15 (must equal line 34)	701,132	16	623,186
	17	Accounts payable and accrued expenses		17	
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities	0	20	
es	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
Liabilities	22	Payables to current and former officers, directors, trustees, key	* * *		·,
ab		employees, highest compensated employees, and disqualified	*		
		persons Complete Part II of Schedule L	0	22	
	23	Secured mortgages and notes payable to unrelated third parties .	177,965	23	170,126
	24	Unsecured notes and loans payable to unrelated third parties	0	24	0
	25	Other liabilities Complete Part X of Schedule D	629	25	5,398
	26	Total liabilities. Add lines 17 through 25	178,594	26	175,524
		Organizations that follow SFAS 117, check here ▶ X and			
Ses		complete lines 27 through 29, and lines 33 and 34.			
ă	27	Unrestricted net assets	522,538	27	447,662
Bal	28	Temporarily restricted net assets		28	
Þ	29	Permanently restricted net assets		29	
ᆵ		Organizations that do not follow SFAS 117, check here ▶	, ·		`
P		and complete lines 30 through 34.			
Ş	30	· • • • • • • • • • • • • • • • • • • •		30	
SSe	31	Capital stock or trust principal, or current funds		31	
Ä	32	Paid-in or capital surplus, or land, building, or equipment fund		32	
Net Assets or Fund Balances	33	Retained earnings, endowment, accumulated income, or other funds .	500 500		447,662
_	1	Total net assets or fund balances	<u>522,538</u>		
	34	Total liabilities and net assets/fund balances	701,132	34	623,186

r Onni s	SUNBOW 5 FOUNDATION, INC	04-3060667	P	age 1∠
Part	XI Financial Statements and Reporting			
	·		Yes	No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in			
	Schedule O	·		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		Х
b	Were the organization's financial statements audited by an independent accountant?	2b		Х
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of			
	the audit, review, or compilation of its financial statements and selection of an independent accountant?	. 2c		X
	If the organization changed either its oversight process or selection process during the tax year, explain in			
	Schedule O.			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were	i		
	issued on a consolidated basis, separate basis, or both			
	Separate basis Consolidated basis Both consolidated and separate basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in			
	the Single Audit Act and OMB Circular A-133?	3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		

Form **990** (2009)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

on

OMB No 1545-0047
2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

► See separate instructions.

Name o	of the	organization						· ·	Employe	identificat	ion numb	er	
		5 FOUNDAT					· -				060667		
Par				narity Status (All org						<u>nstructio</u>	ns		
The o 1	rgar			ation because it is. (For rches, or association of).			
2				on 170(b)(1)(A)(ii). (At				•		•			
3	\Box			nospital service organi		•	section	170(b)(1)	(A)(iii).				
4		A medical re		ation operated in conju						(b)(1)(A)	(iii). Ent	er the	
5				r the benefit of a collect (Complete Part II.)	ge or univ	ersity owr	ned or op	erated by	a govern	mental ur	nit descr	ibed	
6		A federal, st	ate, or local gov	ernment or governmer	ntal unit d	escribed	n sectio	170(b)(ʻ	1)(A)(v).				
7	X			y receives a substanti (1)(A)(vi). (Complete f		its suppor	t from a o	governme	ntal unit o	or from the	e genera	al publ	С
8		A community	y trust described	in section 170(b)(1)((A)(vi) . (C	omplete f	Part II)						
9		receipts from support from	n activities relate i gross investme	y receives. (1) more the doto its exempt function its exempt function in the doto its exempt function after June 30, 1975.	ons—subj ted busine	ect to cer	tain exce	ptions, an (less sec	id (2) no r ition 511 t	nore than	33 1/3	% of it	
10	Ш	An organizat	tion organized a	nd operated exclusive	ly to test t	for public	safety So	ee sectio	n 509(a)(4).			
11		purposes of	one or more pul	nd operated exclusive blicly supported organ at describes the type o	izations d	escribed	in section zation an	509(a)(1 d comple) or section	on 509(a) Le throug	(2) See	section	on
е		By checking persons other	this box, I certif	y that the organization on managers and othe	is not co	ntrolled d	rectly or	ndirectly	-	more dis	qualifie	t	on
f		If the organiz	zation received a	a written determinatior	from the	IRS that	ıt ıs a Typ	e I, Type	II, or Typ	e III supp	orting		_
		_	, check this box										
g		following per		the organization acce	pted any	gift or con	tribution	rom any	of the				
		• .		or indirectly controls, i	either aloi	ne or toge	ther with	nersons (described	in (iı)		Yes	No
			•	verning body of the su		_		po/00/10 \			11g(i)		
		(ii) A fami	ly member of a	person described in (i)	above?						11g(ii)		
_				y of a person describe				•			11g(iii)		
(1)		Provide the i	following informa	ation about the suppor (III) Type of organization (described on lines 1–9 above or IRC section (see instructions))	(iv) Is the o	nization(s) organization sted in your document?	(v) Did y the organ ∞l (i)	rou notify nization in of your port?	organizat (i) organi	s the non in col zed in the S ?		Amount support	of
					Yes	No	Yes	No	Yes	No			
													0
													0
											-		0
					;						<u> </u>	_	0

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Schedule A (Form 990 or 990-EZ) 2009 SUNBOW 5 FOUNDATION, INC. 04-3060667 Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (Complete only if you checked the box on line 5, 7, or 8 of Part I) Section A. Public Support Calendar year (or fiscal year beginning in) ▶ (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.") 15,393 19,545 13,216 23,210 25,198 96,562 Tax revenues levied for the organization's 2 benefit and either paid to or expended on its behalf 0 0 3 The value of services or facilities furnished by a governmental unit to the organization without charge 0 Total. Add lines 1 through 3. 15.393 4 19.545 13,216 23.210 25.198 96.562 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 96.562 Public support. Subtract line 5 from line 4 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total 7 Amounts from line 4 19,545 23,210 25,198 15,393 13,216 96,562 8 Gross income from interest, dividends, payments received on securities loans. rents, royalties and income from similar sources 9,556 23,578 18.011 7,208 845 59.198 Net income from unrelated business activities, whether or not the business is regularly carried on 0 10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) 23.201 65.169 769 55 15.179 25.965 Total support. Add lines 7 through 10 220,929 11 12 Gross receipts from related activities, etc. (see instructions) 12 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 43 71% 14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f)) 15 Public support percentage from 2008 Schedule A, Part II, line 14 15 53 98% 33 1/3% support test-2009. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶ X

D	33 1/3% support test-2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this	
	box and stop here. The organization qualifies as a publicly supported organization	
17a	10%-facts-and-circumstances test-2009. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10%	
	or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how _	

the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization 10%-facts-and-circumstances test-2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how

the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization. 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

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	5011BOV 51 O	ONDATION, IN	<u> </u>			04-300000	Page 🧿
Par				ion 509(a)(2)	-		
0	(Complete only if you checked to	<u>he box on line</u>	9 of Part I)				
	tion A. Public Support	(a) 2005	(h) 2000	(-) 0007	(-1) 0000	(-) 0000	
Cale	endar year (or fiscal year beginning in)	(a) 2005_	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not include any "unusual grants.")						0
_	• ,						0
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						0
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						0
4	Tax revenues levied for the organization's		·-				
	benefit and either paid to or expended on						
_	its behalf	0	0				0
5	The value of services or facilities furnished by a governmental unit to the				{		
	organization without charge	اه	o				0
6	Total. Add lines 1 through 5	- 0	0	0	0	0	0
	Amounts included on lines 1, 2, and 3						
	received from disqualified persons						. 0
	·						
D	Amounts included on lines 2 and 3 received from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year	ļ					0
С	Add lines 7a and 7b	o	0	0	0	0	0
8	Public support (Subtract line 7c from	`	•	, ,	ÿ		
	line 6.)	* -* 200 2			* 3 -		0
	tion B. Total Support						
Cal	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	Amounts from line 6	0	0	0	0	o	. 0
10a	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties and income from similar						0
b	sources Unrelated business taxable income (less	<u> </u>					0
IJ	section 511 taxes) from businesses						
	acquired after June 30, 1975						0
С	Add lines 10a and 10b	0	0	0	0	0	0
11	Net income from unrelated business						
	activities not included in line 10b,						
	whether or not the business is regularly						0
12	carried on						
-	loss from the sale of capital assets						
	(Explain in Part IV)				0		0
13	Total support. (Add lines 9, 10c, 11,	-			~,-		
	and 12)	0	0	0	0	o	0
14	First five years. If the Form 990 is for the or		t, second, third	d, fourth, or fifth	n tax year as a	section 501(c)	(3)
	organization, check this box and stop here.		<u> </u>	· ·			<u> </u>
Sec	tion C. Computation of Public Support					, -	
15	Public support percentage for 2009 (line 8, c	٠,	•	olumn (f))		15	0 00%
16	Public support percentage from 2008 Schedu					16	0 00%
	tion D. Computation of Investment Inc				0)		0.000
17	Investment income percentage for 2009 (line			e 13, column (T))	17	0 00%
18	Investment income percentage from 2008 Sc	nedule A, Part	III, line 17		o 15 io mara 4	18 22n 33 1/3% ar	0 00%
ısa	33 1/3% support tests-2009. If the organization more than 33 1/3%, check this box and s						<u> </u>
b							
	line 18 is not more than 33 1/3%, check this box a						▶ □

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

Schedule A (Form 990 or 990-EZ) 2009	SUNBOW 5 FOUNDATION	I, INC	04-3060667	Page 4
Part IV Supplemental	nformation. Complete thi	is part to provide the explanations requi	red by Part II, line 10	D.
'Part II, line 17a	or 17b. and Part III. line 12	Provide any other additional information	on See instructions	•
			<u> </u>	
Part II Line 10 Other income inclu	ides agricultural products es	alac		
	ides. agricontinal products sa	iles		
			, - 	
				
			· • • • • • • • • • • • • • • • • • • •	

SCHEDULE D (Form 990)

Supplemental Financial Statements

Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

► Attach to Form 990. ► See separate instructions.

20**09**

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

Employer identification number

SUNI	BOW 5 FOUNDATION, INC				04-3060667
Part	Organizations Maintaining Don	or Advised Funds or Other	Similar Fur	nds or Acc	ounts. Complete if
	the organization answered "Yes" t				<u> </u>
		(a) Donor advised funds		(b) Fun	ds and other accounts
1	Total number at end of year				
2	Aggregate contributions to (during year)				
3	Aggregate grants from (during year)				
4	Aggregate value at end of year .				
5	Did the organization inform all donors and o	donor advisors in writing that the	e assets held i	n donor adv	ised
	funds are the organization's property, subje	ct to the organization's exclusive	e legal contro	l? .	Yes No
6	Did the organization inform all grantees, do	_	_		e <u> </u>
	used only for charitable purposes and not for	or the benefit of the donor or do	nor advisor, o	r for any oth	er
	purpose conferring impermissible private be	enefit?		-	Yes No
Part	Conservation Easements. Com	olete if the organization answ	vered "Yes" to	o Form 990), Part IV, line 7.
1	Purpose(s) of conservation easements held			•	
•	Preservation of land for public use (e.g.			f on historia	ally important land area
					•
	Protection of natural habitat		Preservation o	f a certified	historic structure
	Preservation of open space				
2	Complete lines 2a through 2d if the organiz	ation held a qualified conservat	tion contribution	on in the form	n of a conservation
	easement on the last day of the tax year.				
					Held at the End of the Tax Year
а	Total number of conservation easements			2a	
b	Total acreage restricted by conservation ea	sements		2b	
С	Number of conservation easements on a co		ed in (a) .	2c	
d	Number of conservation easements include			. 2d	
3	Number of conservation easements modifie		uished, or terr	minated by t	he organization
	during the tax year	, , ,		•	
4	Number of states where property subject to	conservation easement is loca	nted >		
5	Does the organization have a written policy			i, handling o	f
	violations, and enforcement of the conserva			,	Yes No
6	Staff and volunteer hours devoted to monitor		conservation	easements	during the year
	>	3, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,			• ,
7	Amount of expenses incurred in monitoring	inspecting, and enforcing con-	servation ease	ements durin	ng the year
	▶ \$,			,
8	Does each conservation easement reported	d on line 2(d) above satisfy the	requirements	of section	
_	170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?				☐ Yes ☐ No
9	In Part XIV, describe how the organization		s in its revenu	e and exper	se statement, and
_	balance sheet, and include, if applicable, the				
	the organization's accounting for conservat		,2111241311311	a,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Par			res, or Other	Similar Ass	ets.
_	Complete if the organization answere				
1a	If the organization elected, as permitted un	der SEAS 116, not to report in i	ts revenue sta	tement and	balance sheet works of
	art, historical treasures, or other similar ass	sets held for public exhibition, e	ducation, or re	search in fu	rtherance of public
	service, provide, in Part XIV, the text of the	footnote to its financial stateme	ents that desci	ribes these i	tems
b	If the organization elected, as permitted un	der SFAS 116, to report in its re	evenue statem	ent and bala	ance sheet works of art,
	historical treasures, or other similar assets	held for public exhibition, educa-	ation, or resea	rch in furthe	rance of public
	service, provide the following amounts rela				
	(i) Revenues included in Form 990, Part V	III, line 1		. 1	\$
				ļ	> \$ > \$
2	If the organization received or held works of				
-	following amounts required to be reported in				3 , 1
а	Revenues included in Form 990, Part VIII,	_			\$
	Assets included in Form 990. Part X		•		► \$

-Par		Organizations Maintainin	g Collections of	Art, His	torical	reasures	, or Oti	<u>ner Similar A</u>	ssets (C	<u>ontınu</u>	<u>ıed)</u>
3		g the organization's acquisition of its collection items (check all		other reco	rds, ched	ck any of th	e follow	ing that are a s	ignificant	ï	
а	آ آ	Public exhibition	that apply)	d \square	Loan	or exchang	e progra	ams			
ь	Ħ	Scholarly research		e 🗀	Other	-	- p. eg.				
c	H	Preservation for future generation	ations	е <u> </u>	Olliei			· • • • • • • • • • • • • • • • • • • •			
4	Provi	de a description of the organiz		and expla	ain how t	hev further	the ora	anızatıon's exe	mpt purp	ose in	
	Part 2	XIV				,					
5		ng the year, did the organization ts to be sold to raise funds rath								es 🔲	No
Part	IV	Escrow and Custodial Ail IV, line 9, or reported an ail	_	•		-	answe	red "Yes" to F	Form 990), Par	t
1a		e organization an agent, truste					ons or o	ther assets not			
_		ded on Form 990, Part X?							Ye	es 💹	No
b	If "Ye	es," explain the arrangement in	Part XIV and com	plete the	following	table			A		
С	Regur	nning balance .					1c	+	Amount		
d	_	ions during the year	• • •		•		1d				
e		butions during the year				•	1e				
f		ng balance .		•	•		1f				
2a		ne organization include an amo	ount on Form 990	Dart V Ii	no 212	·				es X	No
b		es," explain the arrangement in	·	rant A, II	HE ZI!	•			ш"	,5 <u>(</u>	NO
Part		Endowment Funds. Com		nization a	nswere	d "Yes" to	Form 9	990 Part IV II	ne 10		
			(a) Current year	(b) Pric		(c) Two yea		(d) Three years ba		our years	back
1a	Begir	nning of year balance .	0			(-, -, -, -, -, -, -, -, -, -, -, -, -, -		<u> </u>	1		1
b		ributions	<u>_</u>			* 4	**	*1 5			
С	Net in	nvestment earnings, gains,				<u> </u>					
		osses				¥	1		ž ·	**	>
d	Gran	ts or scholarships									
e	Other	r expenditures for facilities									
	and p	orograms .				` *	18	*			<i>?</i> ~
f	Admı	nistrative expenses .									
g	End o	of year balance	0		0		<u>_</u>				
2	Provi	de the estimated percentage of	of the year end bal	ance held	l as:						
а	Board	d designated or quasi-endowm	nent 🕨	%							
b		nanent endowment	<u>%</u>								
С		endowment •	<u>%</u>								
3a		here endowment funds not in t	he possession of t	the organ	zation th	at are held	and ad	ministered for t	he r	1	
	-	nization by							- m	Yes	No
	(i)	unrelated organizations		•	•	• •	•	•	3a(i)		
L	(ii)	related organizations.						•	3a(ii)	-	
b		es" to 3a(ii), are the related org					•	•	3b		
Part		ribe in Part XIV the intended u					ort V Iu	20.10			
ı arı	V I								(d) Da		
		Description of investment	(a) Cost or of (investm			st or other s (other)		Accumulated epreciation	(0) 50	ook value	5
1a	Land			0		205,743				20	4,768
b	Build			0		466,986		77,032			9,954
С		ehold improvements		0		0		0			0
d		oment		0		74,477		62,544		1	1,933
e_	Othe			0		0		0			0
Tota	I. Add	lines 1a through 1e (Column)	(d) must equal For	m 990. P	art X col	lumn (B), lir	ne 10(c)) >		60	6,655

Schedule D (Form 990) 2009

Part VII	Investments—Other Securitie	s. See Form 990, Part X,	line 12	
, (Description of security or category (including name of security)	(b) Book value	(c) Method of valua Cost or end-of-year ma	
Financial de	erivatives .	0		
Closely-hel	d equity interests	0		
Other		0		
		0		
		0	1."	
		0		·
		0		
		0		
		0		
		0		
		0		
Total (Column ((b) must equal Form 990, Part X, col (B) line 12)			\$
Part VIII	Investments—Program Relate	1	I-1	
	(a) Description of investment type	(b) Book value	(c) Method of value	ation
	(a) Description of investment type	(b) book value	Cost or end-of-year ma	
		C		
		O		
		O)	
			<u> </u>	
		C		
		C	· · · · · · · · · · · · · · · · · · ·	
		C	 	
		<u> </u>		
	(b) must equal Form 990, Part X, col (B) line 13			
Part IX	Other Assets. See Form 990, F	(a) Description		(b) Book value
		a) Description		0
				0
				0
-				0
				0
-				0
				0
				0
		-		0
				0
	lumn (b) must equal Form 990, Part X,		<u> </u>	0
Part X	Other Liabilities. See Form 99		W. W. C. W. D. X. W. 25	5 8388824
<u>1. </u>	(a) Description of liability	(b) Amount		
	come taxes		<u> </u>	
	es withheld/accrued		368	*
Loan paya	ble - officer	5,	030	* .
		 		
		 	0 * * * * * * * * * * * * * * * * * * *	* .
		 		\$
			0	· · · · · ·
		 		,
		 		' "
Total (Column	(b) must equal Form 990, Part X, col (B) line 25)	5	398	**
(00/0/////	(-) (5)	<u> </u>	<u> </u>	

SUNBOW 5 FOUNDATION, INC 04-3060667 Schedule D (Form 990) 2009 Page 5 _Part XIV Supplemental Information (continued)

SCHEDULE O (Form 990)

Name of the organization

Supplemental Information to Form 990

OMB No 1545-0047 Open to Public

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information. Department of the Treasury ► Attach to Form 990. Internal Revenue Service

Inspection

Name of the organization	Employer identification number
SUNBOW 5 FOUNDATION, INC.	04-3060667
Form 990 Part VI Section A Line 2 Tetsuo Sakai (Director), Yasuyuki Suka (Director), Yoichi Igu	ıchı
(Director), and Kenji Higashide (Treasurer) have business relationship	
Form 990 Part VI Section C Line 19 Filing of Form 990 is deligated to president & treasurer_Bo	ard
of Directors does not review the Form 990 prior to filing due to foreign residence and language	
differences All material transactions are approved by the Board prior to execution	
•••••••••••••••••••••••••••••••••••••••	

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

▶ Attach to Form 990. ▶ See separate instructions.

2009/	Inspection
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SUNBOW 5 FOUNDATION, INC.

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number 04-3060667

	(f) Direct controlling entity							sause it	(f) Direct controlling entity				
	(e) End-of-year assets	0	0	0	0	0	0	art IV, line 34 bec	(e) Public charity status (if section 501(c)(3))				
Part IV, line 33.)	(d) Total income	0	0	0	0	0	0	s" to Form 990, P	(d) Exempt Code section				
ss" on Form 990,	(c) Legal domicile (state or foreign country)							ion answered "Ye	(c) Legal domicile (state or foreign country)				
nization answered "Ye	(b) Primary activity							nplete if the organizat tax year.)	(b) Primary activity				
Identification of Disregarded Entities (Complete if the organization answered "Yes" on Form 990, Part IV, line 33.)	(a) Name, address, and EIN of disregarded entity							Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)	(a) Name, address, and EIN of related organization				
Part								Part II					

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. (HTA)

Schedule R (Form 990) 2009

Page 2

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SUNBOW 5 FOUNDATION, INC

Schedule R (Form 990) 2009

Part III

Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year

% % ŝ 8 8 낆 낆 Schedule R (Form 990) 2009 Percentage ownership General or manæging partner? Yes Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part 0 0 (i)
Code V—UBI
amount in box 20 of (g) Share of end-of-year assets Schedule K-1 (Form 1065) (h)
Disproportionate
allocations? 0 ŝ (f) Share of total income Yes IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year) (g) Share of end-of-year Type of entity (C corp, S corp, or trust) C Corp 0 0 0 O O (f) Share of total income (d)
| Direct controlling | entity ¥ (c) Legal domicile foreign country) (e)
Predominant
income (related,
unrelated,
excluded from tax under sections 512-514) Japan Primary activity Sales of food (d) Direct controlling 646 Kamone, Misaki-cho, Isumi, CHIBA 299-4624 Japan (c) Legal domicile (state or foreign country) Name, address, and EIN of related organization (b) Primary activity Name, address, and EIN of Kitanodaı Kaıhatsu N/A related organization Part IV

SUNBOW 5 FOUNDATION, INC.

Schedule R (Form 990) 2009 SUNBOW 5 FO

04-3060667 Page 3

Transactions With Related Organizations (Complete of the organization answered "Yes" to Form 990, Part IV, line 34, 35, or 36) Part V

Note	Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Yes	ž	
-	During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II–IV?				
æ	Receipt of (i) interest (ii) annumes (iii) royalties or (iv) rent from a controlled entity	1 a		×	
Ω	Gift. grant. or capital contribution to other organization(s)	1 b		×	ı
ပ	Giff. grant. or capital contribution from other organization(s)	2	<u> </u>	×	ı
τ	Loans or loan apparate to or for other organization(s)	7	_	×	ı
3	Loans of Idan guarantees to of 10 ciries of gainzanous)	2 .	1	()	ī
Ð	Loans or loan guarantees by other organization(s)	9		×	r
-	Sale of assets to other organization(s)	11		×	
O.	Purchase of assets from other organization(s)	19		×	
ے د	Exchange of assets	1h		×	ì
	I ease of facilities equipment or other assets to other organization(s)	÷	_	×	
-	בלמסל כן מכווונסן כלמילווניון, כן כנונין מססלנס נס כנונין כן כנונין בייניין כו כנונין בייניין כנונין בייניין כנונין בייניין כנונין בייניין בי				
-	Lease of facilities, equipment, or other assets from other organization(s)	=		×	7
, ×	Performance of services or membership or fundraising solicitations for other organization(s)	<u> </u>	_	×	
_	Performance of services or membership or fundraising solicitations by other organization(s)	7		×	
. E		Ę	<u> </u>	×	ı
1		7		>	ı
_	Sharing of paid employees			4	_
			-	<u> </u> ;	-7
0	Reimbursement paid to other organization for expenses	9		×	
<u>σ</u>	Reimbursement paid by other organization for expenses	15		×	r
				E	
σ	Other transfer of cash or property to other organization(s)	19		×	
·		+		×	
7	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.	action 1	hresho	lds.	
	(A)		3		ı
	Name of other organization Name of other organization Name of other organization Name (3-r)	Amo	(c) Amount involved	ved	
	(I-p) odf				
€				0	_
1					
2				0	_1
Ś				_	
2				7	_ 1
4					_1
(2)				٩	_ 1
ý				C	
刘		2, 0 4.		<u>}</u>	

04-3060667

Unrelated Organizations Taxable as a Partnership (Complete of the organization answered "Yes" to Form 990, Part IV, line 37) Part VI

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships	nstructions regarding exc	slusion tor certain ii	nvestment	partnerships					
(a) Name address and EIN of entity	(b) Primary activity	(c) Legal domicile	(d) Are all partners	(e) Share of		(f) Isproportior		Ger	(h) General or
		(state or foreign country)	section 501(c)(3)	end-of-year assets		allocations?	ë o	E a	managing partner?
		:	organization				(Form 1065)		
			Yes No	0		Yes No	0	Yes	8 N
					0)	0	
				;	0		0		
					0)	0	
					0)	0	
					0		0	- 0	
					0)	0	
					0		0		
					0		0	0	
					0		0		
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					0		0		
			_		0		0		

Schedule R (Form 990) 2009

Part VIII, Lines 1a-h (990) - Contributions, Gifts, Grants, and Other Amounts

				Cash	Noncash
1	Federated Campaigns			1	 _
2	Membership dues			2	
3	Fundraising events .			3	
	Related organizations			4	
		ributions)		5	
6		fts, grants, and similar amou	nts not included above		
	Public Donations			25,198	
			- <u> </u>		
					
	Other contributions total .			25,198 6	
7	Total	· · · · · · · · · · · · · · · · · · ·	· · ·	25,198 7	

Part IX, Line 22 (990) - Depreciation, Depletion, and Amortization

	(000)		<u>, _</u>	(A) Total	(B) Program	(C) Management	(D) Fundraising
1 Depreciation			 1_	12,479	services 10,663	and general 1,816	
2 Depletion .3 Amortization			2 3	<u>0</u> 104	89	15	
4 Total	<u> </u>	•	 4	12,583	10,752	1,831	0

Part X, Lines 10a and 10b (990) - Land, Buildings, and Equipment

						1			747,206	128,071	140,551	0	615,686	606,655
				Leasehold			Check if	Check if		Beginning	Ending			ı
		<u></u>		Improve-			ij	Asset	Cost/Other	Accumulated	Accumulated	Disposals/	Beginning	Ending
	Category or Item	Land	Buildings	ments	Equipment	Other	_	Disposed	Basis	Depreciation	Depreciation		Balance	
-	Equipment (MA)				×				11,059	5,327	6,944		5,732	
7	Furniture & equipment (MA)				×				5,057	5,057	5,057		Q	0
က	Building (MA)		×						452,610	67,894	75,818		384,716	376,792
4	Land (MA)	×							202,743	0	0		202,743	202,743
2	Building improvement (MA)		×						14,376		1,214		13,441	13,162
9	Land improvement (MA)	×							3,000	825	975		2,175	2,025
7	Auto (MA)				×				34,324	28,024	29,824		6,300	4 500
&	Auto (NY)				×				19,874				222	0
6	Equipment (NY)				×				714	357			357	214
10	Equipment (MA) 2009				×				3,449	0	345		0	3,104
7									0	0			0	0
12									0	0			0	0
13									0	0			0	0
4									0	0			0	0
15									0	0			0	0
16									0	0			0	0
17									0	0			0	0
18									0	0			0	0
19									0	0			0	0
20									0	0			0	0

Part X, Line 15 (990) - Other Assets

<u>Part</u>	X, Line 15 (990) - Other Assets	1,674	671
	Description	Beginning	End
1_	Web design - less accum amortization of	774	671
2 ·_	Receivable individual from auto sale	900	0
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Part X, Lines 23 and 24 (990) - Secured and Unsecured Notes Payable

			177,965	170,126
	Lender's name	Check if Unsecured	Balance due beginning of year	Balance due end of year
1	Northampton Cooperative Bank		177,965	170,126
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