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## Form 990-PF

6 2010

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SCANNED AUG

## Return of Private Foundation

# or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation

Department of the Treasury Internal Revenue Service

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

2009

OMB No 1545-0052

For calendar year 2009, or tax year beginning 2009, and ending 20 G Check all that apply. Initial return Initial return of a former public charity Final return Amended return Address change Name change Name of foundation Use the IRS A Employer identification number label. IN YA JOU FOUNDATION 04-3736887 Otherwise, Number and street (or P.O box number if mail is not delivered to street address) B Telephone number (see instructions) Room/suite print 7199 E SHEA BLVD STE 109-225 (602)750-7315 or type. See Specific City or town, state, and ZIP code C If exempt application is pending, check here Instructions. SCOTTSDALE AZ 85254 1. Foreign organizations, check here ▶ 2. Foreign organizations meeting the 85% test, check here and attach computation X Section 501(c)(3) exempt private foundation H Check type of organization. If private foundation status was Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation terminated under section I Fair market value of all assets at end of Accounting method X Cash Accrual 507(b)(1)(A), check here If the foundation is in a 60-month year (from Part II, col (c), line 16) Other (specify) termination under section (Part I, column (d) must be on cash basis ) **▶** \$ 1,439,792 507(b)(1)(B), check here Part | Analysis of Revenue and Expenses (a) Revenue and (d) Disbursements The total of amounts in columns (b). (b) Net investment (c) Adjusted net for charitable expenses per (c), & (d) may not necessarily equal the purposes (cash basis only) income income books amounts in column (a) (see instructions).) Contributions, gifts, grants, etc., received (attach schedule)

Check 

If the foundation is **not** required to attach Sch. B Interest on savings and temp, cash investments Dividends and interest from securities 24,458 24,458 5 a Gross rents . . . . **b** Net rental income or (loss) 6 a Net gain/(loss) from sale of assets not on line 10 50 b Gross sales price for all assets on line 6a 49,550 Capital gain net income (from Part IV, line 2) . 50 Net short-term capital gain ...... 0 Income modifications. 0 10 a Gross sales less rtns & allowances b Less Cost of goods sold . . . c Gross profit or (loss) (attach schedule) Other income (attach schedule) . . . . Total. Add lines 1 through 11 . 12 24,508 24,508 0 Compensation of officers, directors, trustees, etc. 0 13 E R Other employee salaries and wages... Pension plans, employee benefits . . . A 16 a Legal fees (attach schedule). . . . . . b Accounting fees (attach schedule) #1 485 485 N c Other professional fees (attach schedule) G RECEIVED & Taxes (attach schedule) (see instructions) 19 Depreciation (attach sch ) and depletion D 2 1 2010 М 20 Occupancy . . . . . . . . . . . . . 21 Travel, conferences, and meetings... Ν OGDEN. UT 22 Printing and publications . . . . . Ε 23 Other expenses (attach schedule), #.2 354 354 24 Total operating and administrative Ε N expenses. Add lines 13 through 23 839 839 0 0 S Contributions, gifts, grants paid . . . . 25 30,695 30,695 26 Total exp & disbursements. Add lines 24 and 25 31,534 839 0 30,695 Subtract line 26 from line 12 Excess of revenue over expenses -7,026 b Net investment Income (if neg , enter -0-) 23,669 c Adjusted net Income (if neg., enter -0-) 0

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

Form **990-PF** (2009)

Part II Balance Sheets description column should be for		Balance Sheets description column should be for	Beginning of year	End	End of year	
<u> </u>		end-of-year amounts only. (See inst.)	(a) Book Value	(b) Book Value	(c) Fair Market Value	
	1	Cash non-interest-bearing				
	2	Savings and temporary cash investments				
	3	Accounts receivable ►				
		Less allowance for doubtful accts. ▶	Ì			
	4	Pledges receivable ▶		-		
		Less allowance for doubtful accts. ▶	1			
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other				
	•	disqualified persons (attach schedule) (see the instructions)				
A	7	Other notes and loans receivable (attach schedule)				
S		Less allowance for doubtful accounts	İ			
S	8	Inventories for sale or use				
E	9	Prepaid expenses and deferred charges				
s		Investments U S and state govt. obligations (attach sch)			<del>-  </del>	
		Investments corporate stock (attach schedule)				
	[	Investments corporate bonds (attach schedule)#3.	1,371,203	1,364,177	1,439,792	
	11	Investments land buildings	1,3/1,203	1,304,177	1,439,792	
		and equipment basis	1			
	12	Less accumulated depreciation (attach schedule)  Investments mortgage loans			<u> </u>	
	13	Investments mortgage loans Investments other (attach schedule)			<del></del>	
	14		-			
	' '	Land, buildings, and equipment basis ▶  Less accumulated depreciation	1			
	15	(attach schedule)			<del>-  </del>	
	16	Total assets (to be completed by all filers see the		<u> </u>		
	''	Instructions. Also, see page 1, item I)	1 271 202	1 264 177	1 430 700	
匸	17	Accounts payable and accrued expenses	1,371,203	1,364,177	1,439,792	
Ĭ	18	Grants payable			-	
A B	19	Deferred revenue			-	
1	20	ř				
Ĩ	21	Loans from officers, directors, trustees, and other disqualified persons		<del></del>		
Ť	22	Mortgages and other notes payable (attach schedule) Other liabilities (describe ► )			-	
E S	23	Other liabilities (describe ►)  Total liabilities (add lines 17 through 22)			_	
	23	Foundations that follow SFAS 117, check here	0	0		
		and complete lines 24 through 26 and lines 30 and 31.				
NF.	24	Unrestricted	İ			
N.U T.N	24			<del></del>	_	
n	ı	Temporarily restricted				
ŜΒ	26	Permanently restricted			_	
AB SA E		Foundations that do not follow SFAS 117, ck. here ▶				
ΕÀ						
TASN	27	Capital stock, trust principal, or current funds			4	
O E R S	28	Paid-in or capital surplus, or land, bldg., and equipment fund	1 271 222		_	
RS	29	Retained earnings, accumulated income, endowment, or other funds	1,371,203	1,364,177	<del></del> f	
	30 Total net assets or fund balances (see the instructions)		1,371,203	1,364,177	<b>⊣</b>	
Da	31 → 111	Total liabilities and net assets/fund balances (see the inst )	1,371,203	1,364,177	<u></u>	
	rt III	Analysis of Changes in Net Assets or Fund Bal			<u> </u>	
1		net assets or fund balances at beginning of year Part II, column				
2		r of-year figure reported on prior year's return)				
2		r amount from Part I, line 27a		<del></del>	<del></del>	
3		r increases not included in line 2 (itemize) ▶	<del></del>		<del></del>	
4		lines 1, 2, and 3	•••••	<del>                                     </del>	1,364,177	
5		eases not included in line 2 (itemize) ►	Dort II. ashuma (IS III	5	1 264 255	
6	i Otal	THE LASSELS OF INTIM DATABLES AT GUID OF YEAR (HINE 4 MINUS HINE 5)	· rart II. column (b). line :	30   6	1.364.177	

	and Losses for Tax on In		me		
- •	the kind(s) of property sold (e.g., re		(b) Howacquired P Purchase	(c) Date acquired	(d) Date sold
	ouse; or common stock, 200 shs N	ILC Co )	D Donation	(mo , day, yr )	(mo., day, yr)
1a See attachment					
<u>b</u>				-	
		<del></del>			
					<del> </del>
	(A) Dominary allowed	(-) (		<b>"</b>	
(e) Gross sales price	(f) Depreciation allowed (or allowable)	,,	r other basis ense of sale		n or (loss) f) minus (g)
<u>a</u>					
b					
d		<del></del>			
e	· · · · ·		_		
	owing gain in column (h) and owne	d by the foundation	n on 12/21/60		
·	(j) Adjusted basis		ss of col. (i)		l (h) gain minus less than -0-) <b>or</b>
(I) F.M.V. as of 12/31/69	as of 12/31/69	1 ' '	(j), if any	• • •	rom col (h))
a			d),	· · · · · ·	
b					
С		· · · · · · · · · · · · · · · · · · ·	<u></u>		
d					<u> </u>
е					
2 Capital gain net income or (r	net capital loss) If gain,	also enter in Part I, enter -0- in Part I	line 7	2	50
3 Net short-term capital gain o	or (loss) as defined in sections 1222		,	_	
	ne 8, column (c) (see the instruction				
	ne 8			3	50
	Jnder Section 4940(e) for		on Net Investm	ent Income	<del>-</del> -
	ve this part blank. section 4942 tax on the distributab qualify under section 4940(e). Do i			od?	Yes X No
1 Enter the appropriate amoun	nt in each column for each year; se	e the instructions b	efore making any e	ntries	
(a)	(b)		(c)		(d)
Base period years Calendar year (or tax year beg. in	Adjusted qualifying distribu	tions	Net value of charitable-use assets	Dis (col (b)	tribution ratio divided by col (c))
2008					
2007					·
2006					
2005					
2004	L	<u>.</u>		<del></del>	<del></del>
0 Takal at has 4 salaman (a)					0 00000
2 Total of line 1, column (d)				2	0.00000
	r the 5-year base period divide been in existence if less than 5 yea				0 00000
or years the loundation has	been in existence it less than 5 year	15		. 3	0.00000
4 Enter the net value of nonch	naritable-use assets for 2009 from i	Part X, line 5		4	
5 Multiply line 4 by line 3				5	
6 Enter 1% of net investment	income (1% of Part I, line 27b)			6	237
	, · · · · · · · · · · · · · · · · · · ·				
7 Add lines 5 and 6				7	237
	s from Part XII, line 4			. 8	30,695
If line 8 is equal to or greate instructions.	r than line 7, check the box in Part	VI, line 1b, and co	mplete that part usi	ng a 1% tax rate Se	e the Part VI

10

Fərn	n 990-PF (2009) LIN YA JOU FOUNDATION 04-3736887		Р	age 5
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			$\Box$
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before		_	$\vdash$
	August 17, 2008?	12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13		<del>                                     </del>
	Website address ▶N/A		<u>-                                    </u>	
14	The books are in care of ▶See attachment #5 Telephone no. ▶			
	Located at ► ZIP+4 ►			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 Check here		<u> </u>	ightharpoonup
	and enter the amount of tax-exempt interest received or accrued during the year   15			
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.	T	Yes	No
1a	During the year did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	if the foundation agreed to make a grant to or to employ the official for a period			
	after termination of government service, if terminating within 90 days)			-
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in			
	Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see the instructions)?	1b		Х
	Organizations relying on a current notice regarding disaster assistance check here			
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts,			
	that were not corrected before the first day of the tax year beginning in 2009?	1c		Х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			
а	At the end of tax year 2009, did the foundation have any undistributed income (lines 6d			
	and 6e, Part XIII) for tax year(s) beginning before 2009? Yes X No			
	If "Yes," list the years ▶ 20 , 20 , 20 , 20			
b	Are there any years listed in 2a for which the foundation is <b>not</b> 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)			
	to all years listed, answer "No" and attach statement see the instructions.)	2b		X
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	▶ 20 <u> </u>			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business			ļ
	enterprise at any time during the year?			
b	If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation			
	or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved			
	by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3)			
	the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine			
_	If the foundation had excess business holdings in 2009 )	3b		X
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable			
	purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2009?	l 4h		l Y

. 41.	THE Statements regarding Activ	VILLES TOT WITHCH	OIIII 4720 May De	nequired (continu	ieu)				
5 a	During the year did the foundation pay or incur	r any amount to:			_				
	(1) Carry on propaganda, or otherwise attemption	•		. 📙 Yes 🛚 🗓	No				
	(2) Influence the outcome of any specific pub	•			,				
on, directly or indirectly, any voter registration drive?									
	(3) Provide a grant to an individual for travel, study, or other similar purposes? Yes X No								
	(4) Provide a grant to an organization other than a charitable, etc., organization described								
	in section 509(a)(1), (2), or (3), or section	4940(d)(2)? (see ınstrı	ictions)	Yes   X	No				
	(5) Provide for any purpose other than religion		•		,				
	educational purposes, or for the preventio				No				
b	If any answer is "Yes" to 5a(1)-(5), did any of t		•						
	Regulations section 53.4945 or in a current not			uctions)?	5	b	X		
	Organizations relying on a current notice regar	•			▶ 📙 📗				
C	If the answer is "Yes" to question 5a(4), does t				,				
	because it maintained expenditure responsibili			N/A Yes	No				
	If "Yes," attach the statement required by Regu		, ,						
6a	Did the foundation, during the year, receive an	•			_				
	on a personal benefit contract?				No				
b	Did the foundation, during the year, pay premi	ums, directly or indirec	tly, on a personal benefi	t contract?	_ E	b	X		
	If "Yes" to 6b, file Form 8870.				,				
	At any time during the tax year, was the foundation				No				
	If yes, did the foundation receive any proceeds				1 -	b	X		
Pa	t VIII Information About Officers,	Directors, Truste	es, Foundation Ma	inagers, Highly F	Paid Emp	oloyees	i,		
	and Contractors								
	List all officers, directors, trustees, foundati		ir compensation (see ti						
	(a) Name and address	(b) Title, and avg. hours per week	(c) Compensation	(d) Contributions to employee benefit plai	ns (e) Expo	ense acco			
<u></u>		hours per week devoted to position	(If not pald, enter -0-)	employee benefit plai and deferred comp	other	allowand	es		
566	e attachment #6								
		<u> </u>		<del></del>					
2	Compensation of five highest-paid employe	es (other than those	included on line 1 s	ee the instructions).					
	If none, enter "NONE."		<del></del> -	480-41-		_			
(a	) Name and address of each employee paid	(b) Title, and avg.		(d) Contributions to employee benefit	(e) Exp	ense acco	ount.		
•	more than \$50,000	hours per week devoted to position	(c) Compensation	plans and deferred	other	allowand	ces		
NIOR		devoted to position		compensation					
NOI	NE.								
Tota	number of other employees paid over \$50,000				<u> </u>	<b>•</b>	C		
11/6	00 000DE6 TWE 22164 Comments Form	(C-44 O-1.) 0000	T14/		E 06	O DE	(0000)		

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Part VIII Information About Officers, Directors, Trustees, Formation About Officers, Directors,	undation Managers, High	ly Paid Employees,
3 Five highest-paid independent contractors for professional services (see the	e 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 of others receiving over \$50,000 for professional services  Part IX-A Summary of Direct Charitable Activities  List the foundation's four largest direct charitable activities during the tax year. Include relevant sta	tistical information such as the number	Expenses
of organizations and other beneficiaries served, conferences convened, research papers produced,	etc	
1		
2		
3		
4		
Part IX-B Summary of Program-Related Investments (see the in	nstructions)	

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2

Amount

All other program-related investments. See the instructions.

Total. Add lines 1 through 3

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Pa	Minimum Investment Return (All domestic foundations must complete this part. Foreign found see the instructions)	dations,	
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	
h	Average of monthly cash balances	1b	
-	Fair market value of all other assets (see the instructions)	1c	
4	Total (add lines 1a, b, and c)	1d	0
e	Reduction claimed for blockage or other factors reported on lines 1a and	"	
·	1c (attach detailed explanation).		
2	Acquisition indebtedness applicable to line 1 assets.	2	
3	Subtract line 2 from line 1d	3	<del></del>
4	Cash deemed held for charitable activities Enter 1 1/2 % of line 3 (for greater amount, see		
4	· · ·	4	
_	the instructions)	5	
5		6	
6	Minimum Investment return. Enter 5% of line 5	6	<del></del>
Pa	<b>Distributable Amount</b> (see the instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ▶ ☐ and do not complete this part.)		
1		1	
2a	Minimum investment return from Part X, line 6	-	
2a b	Income tax for 2009. (This does not include the tax from Part VI) 2b	-	
		2c	227
c	Add lines 2a and 2b  Distributable amount before adjustments Subtract line 2c from line 1	3	237
3	Recoveries of amounts treated as qualifying distributions	4	
4		5	
5	Add lines 3 and 4	6	<del></del>
6	Deduction from distributable amount (see the instructions)		
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,	7	
	line 1		0
Pa	t XII Qualifying Distributions (see the instructions)		
	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	30,695
b	Program-related investments total from Part IX-B	1b	30,033
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	-	<del></del>
Z		2	
3	purposes	-	
_	Suitability test (prior IRS approval required)	30	
a	Cook disturbution that (attack the very used pakedule)	3a 3b	
b		H	30 605
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	30,695
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.	_	225
_	Enter 1% of Part I, line 27b (see the instructions)	5	237
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	30,458
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether t	ne rour	Idation
	qualifies for the section 4940(e) reduction of tax in those years.		
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Par	t Alli   Undistributed income (see				
		(a)	(b)	(c)	(d)
1	Distributable amount for 2009 from Part XI,	Corpus	Years prior to 2008	2008	2009
	line 7				0
2	Undistributed income, if any, as of the end of 2009				
a	Enter amount for 2008 only				
	Total for prior years 20 , 20 , 20				
3	Excess distributions carryover, if any, to 2009	······			
	From 2004				
	From 2005				
	5				
	From 2006				
	From 2007				
	From 2008				
f	Total of lines 3a through e	0			
4	Qualifying distributions for 2009 from Part XII,				
	line 4 ▶ \$ 30,695				
а	Applied to 2008, but not more than line 2a				
b	Applied to undistributed income of prior years				
	(Election required see the instructions)				
С	Treated as distributions out of corpus				
	(Election required see the instructions)				
d	Applied to 2009 distributable amount				
	Remaining amount distributed out of corpus				
			······		
5	Excess distributions carryover applied to 2009				
	(If an amount appears in column (d), the same				
_	amount must be shown in column (a) )				
6	Enter the net total of each column as				
	Indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	***************************************			
b	Prior years' undistributed income. Subtract				
	line 4b from line 2b				
С	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has been				
	issued, or on which the section 4942(a) tax has				
	been previously assessed				
d	Subtract line 6c from line 6b. Taxable				
_	amount see the instructions				
	Undistributed income for 2008, Subtract				
•					
	line 4a from line 2a Taxable amount				
-	see the instructions				
f	Undistributed income for 2009. Subtract				
	lines 4d and 5 from line 1. This amount				
	must be distributed in 2010				
7	Amounts treated as distributions out of				
	corpus to satisfy requirements imposed				
	by section 170(b)(1)(F) or 4942(g)(3) (see				
	the instructions)				
8	Excess distributions carryover from 2004	_			
	not applied on line 5 or line 7 (see the				
	instructions)				
9	Excess distributions carryover to 2010.				•••••
-	Subtract lines 7 and 8 from line 6a	<u> </u>			
10	Analysis of line 9:				
	Excess from 2005				
	Excess from 2006				
	Excess from 2007				
	Excess from 2008				
е	Excess from 2009				

Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

Ferm 990-PF (2009) LIN YA JOU FOUNDATION 04-3736887 Page **11** Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Foundation Recipient Purpose of grant or show any relationship to status of Amount any foundation manager contribution recipient Name and address (home or business) or substantial contributor a Paid during the year See attachment #7 30,695 Approved for future payment

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(b) Amount	(c) Excl. code	(d) Amount	Related or exempt function income (See the instructions)
Amount	1	Amount	(See the
	code		instructions)
			1
<u> </u>			
	14	24,458	
	14	50	
			<u> </u>
0		24,508	0
		13	24,508
		0	

Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the Line No. ¥

accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See the instructions)

Pe	ert XV	Information F Exempt Orga		ransfers To and	Transactions an	d Relationships W	/ith Nonchai	itable	
1	Did tl			gage in any of the follo	wing with any other of	rganization described in	section	Yes	No
						to political organization		103	110
а		sfers from the reporting			-	y to political organization	15.		
_		Cash		•	•		10/1		v
							1a(1)		X
		Other assets	• • •			• • • • • • • • • • • • • • • • • • • •	.   1a(2)		
D		r transactions:							1,
									X
							<u> </u>		X
		Rental of facilities, equip				·· ····· · · ····		-	X
									X
		Loans or loan guarantee							X
									X
С									X
<b>'2)</b> 1	good	s, other assets, or servicaring arrangement, sho	ces given by the w in column (d)	e reporting foundation the value of the good	If the foundation recess, other assets, or sen	should always show the lived less than fair mark vices received.	ret value in any t	ransactio	on
<u>a)</u> L	ine no.	(b) Amount involved	(c) Name of the	oncharitable exempt of	gariizalion (d) Descri	ption of transfers, transactio	ins, and sharing arra	ngements	5
	section	foundation directly or it on 501(c) of the Code (c s," complete the followi	other than sectio			ot organizations describ	ed in	es X	No
		(a) Name of organizati	ion	(b) Type of o	rganization	(c) Descript	on of relationsh	р	
SIGN	Sign	nenalties of perjury, I declare rrect, and complete Declara Land nature of officer or truste	<u></u>	ied this return, including ac ther than taxpayer or fiduci	companying schedules an ary) is based on all inform Date	d statements, and to the be ation of which preparer has Title	Preparer's Iden	tifying	
H E R	Pald Pre- par- er's	Preparer's signature	in M		07-09-201	self-employed ►△	number (see Si the instructions	_	; in
E	Use	Firm's name (or yours			PA	EIN ▶			
	Only	if self-employed),		N. Granite		109 Phone no.			
J		address, and ZIP code	e' Scott	sdale, AZ 8	5250	J(480)9	41-1619		

## SCHEDULE OF ACCOUNTING FEES

Attachment 1: page 1 - 990-	PF Page 1, P	art I, Line	16b	
Open to Public Inspection For calendar year 2009, or tax	neriod healpping	and	ending	
Name of Organization	period beginning	, and	Employer Id	entification Number
Accounting Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for
TAX PREP	Amount	Net Investment Income 485	04-3736 Adjusted	887
Total	485	485		

#### OTHER EXPENSES SCHEDULE

Attachment 2: page 1 990-PF Page 1, Part I, Line 23 Open to Public Inspection For calendar year 2009, or tax period beginning , and ending Name of Organization **Employer Identification Number** LIN YA JOU FOUNDATION 04-3736887 Revenue and Net Investment Adjusted Disbursements for Description of Activity Expenses Income Net Income Charity IRS 354 354 354 Total 354

#### SCHEDULE OF INVESTMENTS - CORPORATE BONDS

Attachment 3: page 1 - 990-PF Page 2, Part II, Line 10c Open to Public Inspection For calendar year 2009, or tax period beginning , and ending Name of Organization **Employer Identification Number** LIN YA JOU FOUNDATION 04-3736887 FMV at Description of Property Cost **Book Value** Fair Market Value Year End MERRILL LYNCH 973,357 1,038,230 FIDELITY INVESTMENTS 390,820 401,562

Total

1,364,177

1,439,792

## PART IV CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

Att	<u>achment 4: pag</u>	ge 1 - 990-PF Page	e 3, Part IV	7, line 1		
•	to Public					
Inspe	ection For calenda	r year 2009 or tax period beginn	Ing	, and endi	ng	•
	of Organization				Employer Identi	
LIN	YA JOU FOUNDA				<u> 04-373688</u>	7
ĺ		e the kind(s) of property sold (e g.		(b) How acquired	(c) Date acquired	(d) Date sold
		rehouse; or common stock, 200 st	ns. MLC Co )	P Purchase D Donation	(mo., day, yr.)	(mo , day, yr.)
1	5000-SHS FEDER	RAL GOVT ULTRA		P	11-09-2009	06-04-2009
		·	· · · · · · · · · · · · · · · · · · ·			
	(e) Gross sales price	(f) Depreciation allowed	(g) Cost or oth		(h) Gain o	•
1	49,550	(or allowable)	plus expens	se of sale 49,500	(e) plus (f)	minus (g)
		howing gain in column (h) and ow			(I) Gains (Col. (I	
ļ	(i) F.M.V as of 12/31/69	(J) Adjusted basis	(k) Excess if	• • • • • • • • • • • • • • • • • • • •	col (k), but not k	
		as of 12/31/69	over col. (	), if any	Losses (fro	
1						50

## **BOOKS ARE IN CARE OF**

Attachment	5 - 990-PF Pag	e 5, Part VII-	A, Line 14	
Open to Public				
Inspection	For calendar year 2009, or t	ax period beginning	, and ending	•
Name of Organiza	tion J FOUNDATION			Employer Identification Number 04 - 3736887
Part VII-A - Line 14				10 1 0 10 00 0
			LIZ JOU	
Street Address			6144 E HORSESHO	E RD
U S Address				
Zıp code or	<u>85253</u> C	ity PARADISE VAL	LEY Sta	te <u>AZ</u>
Foreign Address				
City				
Province of	State			
Country				<u> </u>
Postal code	e			
Phone Nur	nber			(480)609-7315
Fax Number	er			

# **CURRENT OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES**

Attachment 6: page 1 - 99	0-PF Page 6,	Part VIII		
Open to Public				
Inspection For calendar year 2009, or t	ax period beginning	, and	ending	
Name of Organization LIN YA JOU FOUNDATION				itification Number
(A) Name and Address	(B) Title and Average	(C) Compensation (If	04-37368 (D) Cont to Employee	(E) Expense Account
(A) Name and Address	Hrs. per Week	not paid, enter 0)	Ben Plans & Def Comp.	
LIZ JOU	PRESIDENT			
6144 E HORSESHOE RD				
PARADISE VALLEY, AZ 85253		0	0	0
			:	
		L	L	

## **GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR**

Attachment 7: page 1 990-1	PF Page 11, F	Part XV	Line 3a	
Open to Pu Inspection For calendar year 2009, or ta	x period beginning		, and ending	
Name of Organization LIN YA JOU FOUNDATION			<del></del>	dentification Number
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
MEMORIAL SLOAN-KETTERING CANCER CENTER		NON PROFIT	CANCER RESEARCH	
NEW YORK, NEW YORK BRIGHTON ENRICHMENT PROGRAM			LOW INCOME AFTER SCHOOL PROGRAM	6,000
BRIGHTON, MA AMITABHA BUDDIST SOCIETY OF USA	:	NON PROFIT	RELIGIOUS	6,000
SUNNYDALE, CA DHARMA DRUM MT BUDDIST ASSOCIATION		NON PROFIT	RELIGIOUS	1,200
EASTER SEALS		NON PROFIT	DONATION	1,200
NEW YORK, NEW YORK HE HAI UNIVERSITY		NON PROFIT	SCHOLARSHIPS FOR LOW INCOME	100
NAI JING, CHINA KUMON LEARNING CENTER TO SPORT STU		NON PROFIT	DONATION	15,000
SCOTTSDALE, AZ ZHOU SEN XI		NON PROFIT	RELIGIOUS	195
SCOTTSDALE, AZ		PROFII		1,000

Form 8868

(Rev. April 2009)

Department of the Treasury Internal Revenue Service

# Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return.

OMB No 1545-1709

Internal revenue our vice			
If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box			<b>▶</b> X
<ul> <li>If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page</li> </ul>	e 2 of this	form).	_
Do not complete Part II unless you have already been granted an automatic 3-month extension on a pr	eviously fil	ed Form 8	8868
Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).			<del></del>
A corporation required to file Form 990-T and requesting an automatic 6-month extension check this leads to file Form 990-T and requesting an automatic 6-month extension check this leads to file Form 990-T and requesting an automatic 6-month extension check this leads to file Form 990-T and requesting an automatic 6-month extension check this leads to file Form 990-T and requesting an automatic 6-month extension check this leads to file Form 990-T and requesting an automatic 6-month extension check this leads to file Form 990-T and requesting an automatic 6-month extension check this leads to file Form 990-T and requesting an automatic 6-month extension check this leads to file Form 990-T and requesting an automatic 6-month extension check this leads to file Form 990-T and requesting an automatic 6-month extension check this leads to file Form 990-T and requesting an automatic 6-month extension check this leads to file Form 990-T and 10-month extension check this leads to file Form 990-T and 10-month extension check this leads to file Form 990-T and 10-month extension check this leads to file Form 990-T and 10-month extension check this leads to file Form 990-T and 10-month extension check this leads to file Form 990-T and 10-month extension check this leads to file Form 990-T and 10-month extension check this leads to file Form 990-T and 10-month extension check this leads to file Form 990-T and 10-month extension check this leads to file Form 990-T and 10-month extension check this leads to file Form 990-T and 10-month extension check this leads to file Form 990-T and 10-month extension check this leads to file Form 990-T and 10-month extension check this leads to file Form 990-T and 10-month extension check this leads to file Form 990-T and 10-month extension check this leads to file Form 990-T and 10-month extension check this leads to file Form 990-T and 10-month extension check this leads to file Form 990-T and 10-month ex	oox and co	mplete	▶ []
All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to tax returns	request an	extension	n of time to file income
Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automat returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 88 consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Forelectronic filing of this form, visit www.irs.gov/efile.and.click.on.e-file.for Charities & Nonprofits	orm 8868 e 70, group	lectronica returns, o	ally or a composite or
Type or Name of Exempt Organization	Em	ployer Id	lentification number
print LIN YA JOU FOUNDATION		-3736	
Number, street, and room or suite no. If a P.O. box, see instructions.			
due date for 7199 E SHEA BLVD STE 109-225			
City, town or post office, state, and ZIP code For a foreign address, see instructions instructions. SCOTTSDALE AZ 85254			
Check type of return to be filed (file a separate application for each return):		<del></del>	<del></del>
Form 990 Form 990-T (corporation)			Form 4720
Form 990-BL Form 990-T (sec. 401(a) or 408(a) trust)			Form 5227
Form 990-EZ Form 990-T (trust other than above)			Form 6069
X Form 990-PF Form 1041-A			Form 8870
The books are in the care of ▶ See attachment #5  Telephone No. ▶ FAX No. ▶  If the organization does not have an office or place of business in the United States, check this box  If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)  for the whole group, check this box	box	• • •	lf this is ▶ □ and attach
for the organization's return for:			
X calendar year 20 0 9 or         tax year beginning	1	20	
2 If this tax year is for less than 12 months, check reason.	Ch	ange in a	ccounting period
3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax,	T		
less any nonrefundable credits. See instructions.	3a	\$	237
b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax			
payments made. Include any prior year overpayment allowed as a credit.	3b_	\$	0_
c Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required,			
deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment			
System) See instructions	Зс	\$	237
Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO	and Form	8879-EC	
for payment instructions.			