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Return of Private Foundation

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

2009

OMB No 1545-0052

		t of the Treasury venue Service Note. The foundation may	be able to use a copy of this			rtıng reguirements.	2009
_		dar year 2009, or tax year beginning		, and e			_ <u>L</u>
		all that apply: Initial return	Initial return of a fo			Final return	
•		Amended return	Address chan	•		Name change	
	the label.	···				A Employer identification	number
	nerwi	se, KHAKI FOUNDATION				20-0461805	
	print				Room/suite	B Telephone number	
	r type		.E.			425-442-66	62
	Spec ructio	the City of town, State, and ZIP code				C If exemption application is pe	· · · · · · · · · · · · · · · · · · ·
		SAMMAMISH, WA 980/5				D 1. Foreign organizations	
H_(_		xempt private foundation			Foreign organizations me check here and attach col	mputation Lest,
		ction 4947(a)(1) nonexempt charitable trust	Other taxable private founda			E. If private foundation stat	us was terminated
		· · · · · · · · · · · · · · · · · · ·	ting method: X Cash	Accr	uai	under section 507(b)(1)	
			Other (specify) umn (d) must be on cash i	haere l		F If the foundation is in a 6	5 1
_	-\$ art l		T			under section 507(b)(1)	(d) Disbursements
_	art I	(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and expenses per books		vestment ome	(c) Adjusted net	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received	222,002.			N/A	· · · · · · · · · · · · · · · · · · ·
	2	Check fithe foundation is not required to attach Sch. B. Interest on savings and temporary					
	3	cash investments	74,938.	7	4,785.		STATEMENT 1
	4	Dividends and interest from securities Gross rents	14,330.		4,105.		SIKIEMENI I
	1	Net rental income or (loss)					
	62	Net gain or (loss) from sale of assets not on line 10	<313,608.	>			
Revenue	b	Gross sales price for all assets on line 6a 972,257.	10207000				
š	7 Capital gain net income (from Part IV, line 2)				0.		
æ	8	Net short-term capital gain					
	9	Income modifications					
	10a	Gross sales less returns and allowances					
	b	Less Cost of goods sold					····
	C	Gross profit or (loss)					
	11	Other income	<1,399.			>	STATEMENT 2
	12	Total Add lines 1 through 11	<18,067.	> 7			^
	13	Compensation of chicers, curectors in usees, etc	0.		0.		0.
	14 15	Other employee salaries and wages					
es		Pension plans, employee benefits Legarites AUG 0 2 2010					
šuš	h	Legarites AUG 9 2 2010 S					
SOBREMED ALLE OF LUM	ָּ	Other profession DEN USTMT 3	2,885.		2,885.		0.
والح	17	Interest	27000				
res	18	Taxes STMT 4	1,182.		1,182.		0.
⊘ s	19	Depreciation and depletion	•	•			
呈	20	Occupancy					
₹	21	Travel, conferences, and meetings					
	22	Printing and publications					
豐	23	Other expenses STMT 5	52,031.	5	2,014.		17.
7	24	Total operating and administrative		_			
906	1	expenses. Add lines 13 through 23	56,098.	5	6,081.		17.
Œ.	1	Contributions, gifts, grants paid	260,960.			<u> </u>	260,960.
	26	Total expenses and disbursements.	217 050	-	C 001		260 077
	07	Add lines 24 and 25	317,058.	5	<u>6,081.</u>		260,977.
	27	Subtract line 26 from line 12:	<335,125.				
	1	Excess of revenue over expenses and disbursements Net investment income (if negative, enter -0-)	7333,143.		7,305.		<u> </u>
	1	Adjusted net income (if negative, enter -0-)			<u>, , , , , , , , , , , , , , , , , , , </u>	N/A	
9235 02-0		LHA For Privacy Act and Paperwork Reduction	n Act Notice, see the instruc	tions.			Form 990-PF (2009)

or	m 99	90-PF (2009) KHAKI FOUNDATION	· · · · · · · · · · · · · · · · · · ·	20-0	0461805 Page 2
P	àrt	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	
•		Column Should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
		Cash - non-interest-bearing	606 256	460 370	460 250
		Savings and temporary cash investments	696,256.	460,370.	460,370.
	3	Accounts receivable ► Less; allowance for doubtful accounts ►			
		Pledges receivable			
	4	Less; allowance for doubtful accounts			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other	-		
		disqualified persons			
	7	Other notes and loans receivable			
		Less: allowance for doubtful accounts			
S	8	Inventories for sale or use			
ssets	9	Prepaid expenses and deferred charges			
ĕ	10a	Investments - U.S. and state government obligations			
	Ь	Investments - corporate stock STMT 6	5,090,772.	4,991,533.	4,799,652.
	C	Investments - corporate bonds			
	11	Investments - land, buildings, and equipment basis			
		Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other			
	14	Land, buildings, and equipment; basis			
		Less accumulated depreciation			
	15	Other assets (describe ►)			.
			F 707 000	F 4F1 000	F 260 022
_		Total assets (to be completed by all filers)	5,787,028.	5,451,903.	5,260,022.
	17	· · · · · · · · · · · · · · · · · · ·			
	18 19	· · ·	-		
abilities		Loans from officers, directors, trustees, and other disqualified persons			
₫	,	Mortgages and other notes payable			
2	l .	Other liabilities (describe)			
	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here			
		and complete lines 24 through 26 and lines 30 and 31.			
Ses	24	Unrestricted			
ă	25	Temporarily restricted	,		
g	26	Permanently restricted			
or Fund Balances		Foundations that do not follow SFAS 117, check here			
Ĭ		and complete lines 27 through 31.			
8	27	Capital stock, trust principal, or current funds	0.	0.	
SSE	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
Net Assets	29	· · · · · · · · · · · · · · · · · · ·	5,787,028.	5,451,903.	
S	30	Total net assets or fund balances	5,787,028.	5,451,903.	
			5 505 000	E 454 000	
	31	Total liabilities and net assets/fund balances	5,787,028.	5,451,903.	
P	art	III Analysis of Changes in Net Assets or Fund Ba	lances		
_	Total	I net assets or fund balances at beginning of year - Part II, column (a), line 3	<u></u>	<u> </u>	
		st agree with end-of-year figure reported on prior year's return)	10	1	5,787,028.
		r amount from Part I, line 27a		2	<335,125.
		r increases not included in line 2 (itemize)		3	0.
		lines 1, 2, and 3	•	4	5,451,903.
		eases not included in line 2 (itemize)		5	0.
		net assets or fund balances at end of year (line 4 minus line 5) - Part II, col	umn (b), line 30	6	5,451,903.
					Form 990-PF (2009)

02-02-10

2	Total of line 1, column (d)	2	.206844
3	Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	.041369
4	Enter the net value of noncharitable-use assets for 2009 from Part X, line 5	4	4,381,578.
5	Multiply line 4 by line 3	5	181,262.
6	Enter 1% of net investment income (1% of Part I, line 27b)	6	173.
7	Add lines 5 and 6	7	181,435.
8	Enter qualifying distributions from Part XII, line 4	8	260,977.
	If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.		

	1990-PK(2009) KHAKI FOUNDATION	<u> 20-</u>	0461	805		Page 4
	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4	948	- see ı	nstru	ction	าร)
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.					
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)					
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🗶 and enter 1%	1_	ļ		1	<u>73.</u>
	of Part I, line 27b					
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2				0.
3	Add lines 1 and 2	3			1	73.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4				0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5			<u> </u>	73.
6	Credits/Payments:					
а	2009 estimated tax payments and 2008 overpayment credited to 2009 6a 7, 381.					
b	Exempt foreign organizations - tax withheld at source 6b					
	Tax paid with application for extension of time to file (Form 8868) 6c]				
	Backup withholding erroneously withheld 6d		1			
	Total credits and payments. Add lines 6a through 6d	7			7,3	81.
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8				-
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9				
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	 		7.2	08.
	Enter the amount of line 10 to be: Credited to 2010 estimated tax > 7,208. Refunded	11				0.
	irt VII-A Statements Regarding Activities	1	<u> </u>			
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene	ווו			Yes	No
-	any political campaign?			1a		Х
Ь	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?			1b		Х
_	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published	d or				
	distributed by the foundation in connection with the activities					
c	Did the foundation file Form 1120-POL for this year?			1c		х
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			"		
٠	(1) On the foundation. \triangleright \$ 0 • (2) On foundation managers. \triangleright \$ 0 •					
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation	-				
e	<u> </u>				į	
2	managers. • \$0 . Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		х
2						
•	If "Yes," attach a detailed description of the activities.	. .				
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	,,		3		X
4-	Did the foundation have unrelated business gross income of \$1,000 or more during the year?					X
	· · · · · · · · · · · · · · · · · · ·	N	I/A	4a 4b	-	
	If "Yes," has it filed a tax return on Form 990-T for this year? Was there a liquidation, termination, dissolution, or substantial contraction during the year?	7/	. / 🕰	5		Х
Э				3		
e	If "Yes," attach the statement required by General Instruction T. Are the requirements of section 509(a) (relating to sections 4041 through 4045) satisfied either:					
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:					
	By language in the governing instrument, or By state levelation that office with among de the convergence materials at that an excellent directions that conflict with the state.	lour				
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state	; iaw			v	
-	remain in the governing instrument?			7	X	
1	Did the foundation have at least \$5,000 in assets at any time during the year?			- ' - 	Δ.	
_	If "Yes," complete Part II, col. (c), and Part XV.				ŀ	
Вa	Enter the states to which the foundation reports or with which it is registered (see instructions)					
Ŀ	WA If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)				ļ	
0	of each state as required by General Instruction G? If "No," attach explanation			8ь	Х	
n	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for cale	nder		90	-1	
9		iiiual		9		X
10	year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," complete Part XIV			10		X
IU	Did any persons become substantial contributors during the tax year? if "Yes," attach a schedule listing their names and addresses	-	For	n 990	-PF	
			1 011	555	(

Form **990-PF** (2009)

had not been removed from jeopardy before the first day of the tax year beginning in 2009?

Part VII-B Statements Regarding Activities for Which I	orm 4720 May Be	Required (control	20-04618	305	Page 6
5a During the year did the foundation pay or incur any amount to:	Olli 4720 May be i	required (contin	lueu)		
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	1 /0/5/6/\2	□ v.	es X No		
(2) Influence the outcome of any specific public election (see section 4955); o			25 140		
any voter registration drive?	i to ourly on, directly or mail		es X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes'	?		es X No		
(4) Provide a grant to an organization other than a charitable, etc., organization				ł	
509(a)(1), (2), or (3), or section 4940(d)(2)?	a described in section	□ v ₄	es X No		1
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational nurnoses, or		.5 (22) 140		
the prevention of cruelty to children or animals?	or outdetrorial parposos, or		es X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	der the exceptions described				
section 53,4945 or in a current notice regarding disaster assistance (see instru	·	ga.a	N/A	5b	
Organizations relying on a current notice regarding disaster assistance check h	,		▶ □		
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr		uned		1	
expenditure responsibility for the grant?			es No		
If "Yes," attach the statement required by Regulations section 53.4945		.,			
6a Did the foundation, during the year, receive any funds, directly or indirectly, to					
a personal benefit contract?	. • .	Ye	es X No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?			6Ь	x
If "Yes" to 6b, file Form 8870.					
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	Ye	es X No	1	
b If yes, did the foundation receive any proceeds or have any net income attribute	able to the transaction?		N/A	7b	
Information About Officers, Directors, Trusto		anagers, Highly	у		
Paid Employees, and Contractors					
1 List all officers, directors, trustees, foundation managers and their		1		_	
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) acco allo	Expense unt, other wances
SEE ATTACHED STATEMENT	,				
	0.00	0.	О.	.	0.
		<u> </u>			
				1	
2 Compensation of five highest-paid employees (other than those inc		enter "NONE."	(4)		
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e)	Expense unt, other
1	devoted to position	(6) 55	compensation	allo	wances
NONE					
		<u> </u>		<u> </u>	
				<u> </u>	
				<u> </u>	
				-	
The state of other conditions of the conditions	<u> </u>		<u> </u>		
Total number of other employees paid over \$50,000				000 5	0
			Form	99U-P	F (2009)

Form **990-PF** (2009)

All other program-related investments. See instructions.

Total. Add lines 1 through 3

P	art X Minimum Investment Return (All domestic foundations must complete	ete this part Foreign foun	dations,	see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purpo	oses:		
a			1a	3,900,793.
b		Ī	1b	3,900,793. 547,510.
C	Fair market value of all other assets	Ī	1c	
d	Total (add lines 1a, b, and c)	1	1d	4,448,303.
е	Reduction claimed for blockage or other factors reported on lines 1a and			
	1c (attach detailed explanation) 1e	0.		
2	Acquisition indebtedness applicable to line 1 assets		2	0.
3	Subtract line 2 from line 1d	[3	4,448,303.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructi	ions)	4	66,725.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line	4	5	4,381,578.
6	Minimum investment return. Enter 5% of line 5		6	219,079.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) privations or organizations check here and do not complete this part.)	ate operating foundations and	d certain	
1	Minimum investment return from Part X, line 6		1	219,079.
2a	Tax on investment income for 2009 from Part VI, line 5	173.		
b	Income tax for 2009. (This does not include the tax from Part VI.)			
C	Add lines 2a and 2b		2c	173.
3	Distributable amount before adjustments. Subtract line 2c from line 1		3	218,906.
4	Recoveries of amounts treated as qualifying distributions		4	0.
5	Add lines 3 and 4		5	218,906.
6	Deduction from distributable amount (see instructions)		6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1		7	218,906.
P	art XII Qualifying Distributions (see instructions)			
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:			
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	Ĺ	1a	260,977.
b	Program-related investments - total from Part IX-B		1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purp	oses	2	
3	Amounts set aside for specific charitable projects that satisfy the:		ŀ	
a	Suitability test (prior IRS approval required)		3a	
b	Cash distribution test (attach the required schedule)		3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, li	ine 4	4	260,977.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment	[
	income. Enter 1% of Part I, line 27b		5	173.
6	Adjusted qualifying distributions. Subtract line 5 from line 4		6	260,804.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculati	ng whether the foundation q	ualifies for	the section

Form **990-PF** (2009)

4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
Distributable amount for 2009 from Part XI,	Обіраз	Tears prior to 2000	2000	2009
line 7				218,906.
2 Undistributed income, if any, as of the end of 2009				== <u>0</u> 1300.
a Enter amount for 2008 only			38,380.	
b Total for prior years:				
,		0.		
3 Excess distributions carryover, if any, to 2009:				
a From 2004				
b From 2005				
c From 2006				
d From 2007				
e From 2008				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2009 from				
Part XII, line 4: ► \$ 260,977.				
a Applied to 2008, but not more than line 2a			38,380.	
b Applied to undistributed income of prior		_		
years (Election required - see instructions)		0.		·····
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			010 000
d Applied to 2009 distributable amount	2 601			218,906.
e Remaining amount distributed out of corpus	3,691.			
5 Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	3,691.			
b Prior years' undistributed income. Subtract	- /			
line 4b from line 2b		0.		
c 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		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2008. Subtract line				
4a from line 2a. Taxable amount - see instr. f Undistributed income for 2009. Subtract			0.	
lines 4d and 5 from line 1. This amount must				
be distributed in 2010				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2004				
not applied on line 5 or line 7	0.		j	
9 Excess distributions carryover to 2010.				
Subtract lines 7 and 8 from line 6a	3,691.			
10 Analysis of line 9:	•	·		
a Excess from 2005				
b Excess from 2006				
c Excess from 2007				
d Excess from 2008				
e Excess from 2009 3,691.				
				000 DE

	FOUNDATION	 			161805 Page 10
Part XIV Private Operating			II-A, question 9)	N/A	
1 a If the foundation has received a ruling		, , ,			
foundation, and the ruling is effective f			▶		
b Check box to indicate whether the four		ng foundation described		4942(j)(3) or4	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		4
income from Part I or the minimum	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total
investment return from Part X for					
each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly			T		
for active conduct of exempt activities.					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the					
alternative test relied upon:					
a "Assets" alternative test - enter:(1) Value of all assets					
` '		-			
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter 2/3 of minimum investment return					
shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:					
(1) Total support other than gross					
investment income (interest,			İ		
dividends, rents, payments on securities loans (section					ļ
512(a)(5)), or royalties)					
(2) Support from general public					
and 5 or more exempt					
organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income					
Part XV Supplementary Inf	ormation (Comple	te this part only	if the foundation	n had \$5 000 or m	ore in assets
at any time during			ii tiic iotiidatio	π παα φο,σοσ στ πι	ore in assets
1 Information Regarding Foundati		,			
a List any managers of the foundation w	_	than 20/ of the total con	tributions recovered by th	o foundation before the ele	non of any toy
year (but only if they have contributed			u loutions received by th	ie iounication before the cit	ise of any lax
NONE					
	the own 100/ or more of th	a stack of a paragration	/or on oqually large near	tion of the outporchin of a	
b List any managers of the foundation w other entity) of which the foundation h			(or all equally large por	tion of the ownership of a p	Jarthership of
	or greater interes				
NONE					
2 Information Regarding Contribu					
Check here X if the foundation					
the foundation makes gifts, grants, etc	' 			complete nems 2a, o, c, an	<u>u u.</u>
a The name, address, and telephone nur	nber of the person to who	n applications should be	e addressed:		
b The form in which applications should	be submitted and informa	tion and materials they s	hould include:		
c Any submission deadlines:		. <u></u>			
	d		I ada da ser e	the feet	
d Any restrictions or limitations on awar	us, such as by geographica	ai areas, charitable fields	, kinas of institutions, of	other factors:	
					5 000 DE (000)

A Paid dungth to year AFCHAN POVERTY RELIEF AFCHAN POVERTY REGRESSION AND AND AND AND AND AND AND AND AND AN	Part XV Supplementary Information	(continued)			
NONE PUBLIC SISTANCE WITH PROGRAM-MONILE LIBRARY FOR HUMANITY EAST KING COUNTY POOR 137 RECISENCE WITH PROGRAM-MONISHED FOR MANAGARA POUNDATION AND WELFARE TRUST RECISERED CHARITY PROGRAM-MONISH CHARITY C	3 Grants and Contributions Paid During the Y	- Y	Payment		
Padd dumng the year	· · · · · · · · · · · · · · · · · · ·	show any relationship to any foundation manager	status of		Amount
AFGHAN POVERTY RELIEF INIT 210, 99-103 LOMOND SROVE LONDON, UNITED CHARITY PROGRAM-SUPPORT FOR DAPHANS ROVE LONDON, UNITED CHARITY PROGRAM-SUPPORT FOR DAPHANS PUBLIC SISTANCE WITH PROGRAM-SUPPORT FOR DAPHANS PUBLIC CHARITY PROGRAM-HOBILE LIBRARY FOR IMPOVERISHED CHILDREN RAMECHABLY FOR HUMANITY EAST NONE CHARITY PROGRAM-HOBILE LIBRARY FOR IMPOVERISHED CHILDREN RING COUNTY CHARITY PROGRAM-HOUSING FOR NEEDY RIPARE TRUST REGISTERED PROGRAM-HOUSING FOR NEEDY REPARE TRUST REGISTERED PROGRAM-CONSTRUCTION OF SCHOOL BUILD CHARITY PROGRAM-CONSTRUCTION OF SCHOOL BUILD CHARITY PROGRAM-SUPPORT FOR DAPHANS RAMANGAZA FOUNDATION NONE PUBLIC CHARITY PROGRAM-SUPPORT FOR DAPHANS RIPARS CHARITY PROGRAM-CONSTRUCTION OF SCHOOL BUILD CHARITY PROGRAM-SUPPORT FOR DAPHANS RIPARS CHARITY PROGRAM-SUPPORT FOR DAPHANS RIPARS CHARITY PROGRAM-HOUSING FOR NEEDY RESISTANCE WITH PROGRAM-CONSTRUCTION OF SCHOOL BUILD CHARITY PROGRAM-SUPPORT FOR DAPHANS RIPARS CHARITY PROGRAM-SUPPORT FOR DAPHANS RIPARS CHARITY PROGRAM-HOUSING FOR NEEDY RESISTANCE WITH PROGRAM-HOUSING FOR NEEDY REGORM-SUPPORT FOR DAPHAN CHARITY PROGRAM-SUPPORT FOR DAPHANS RESISTANCE WITH PROGRAM-GONDAM-HOUSING FOR NEEDY REGORM-SUPPORT FOR DAPHAN CHARITY PROGRAM-SUPPORT FOR DAPHANS RESISTANCE WITH PROGRAM-HOUSING FOR NEEDY REGORM-SUPPORT FOR DAPHAN CHARITY PROGRAM-HOUSING FOR NEEDY REGORM-SUPPORT	<u> </u>	or substantial contributor	recipient		
D-402 SHREEMANDNAGAR PART-2 VEJALPUR, ARMEDABAD, INDIA 380051 HABITAT FOR HUMANITY EAST NONE PUBLIC CHARITY PROGRAM-HOUSING FOR NEEDY 7. TAFARIA EDUCATION AND NEIFARE TRUST REGISTERED POTEMAHALLI VILLAGE SAURIBIDNUR TALUK, KOLAR AWANGAZA FOUNDATION 3020 ISSAQUAH PINE LAKE RD., #539 SAMMAMISH, WA PROFAN PROGRAM-SUPPORT FOR DRPHANS NONE PUBLIC CHARITY PROGRAM-SUPPORT FOR DRPHANS NONE PUBLIC CHARITY PROGRAM-SUPPORT FOR DRPHANS NONE PUBLIC CHARITY PROGRAM-BUCATIONAL ASSISTANCE WITH PROGRAM-BUCATIONAL ASSIST FOR MEDOVERISHED NONE NONE PUBLIC CHARITY PROGRAM-BUCATIONAL ASSIST FOR MEDOVERISHED ASSISTANCE WITH PROGRAM-BUCATIONAL ASSIST FOR MEDOVERISHED NONE NONE PUBLIC CHARITY PROGRAM-BUCATIONAL ASSIST FOR MEDOVERISHED NONE	AFGHAN POVERTY RELIEF UNIT 210, 99-103 LOMOND GROVE LONDON, UNITED	NONE		PROGRAM-SUPPORT FOR	121,340
CHARITY PROGRAM-HOUSING FOR NEEDY CHARITY PROGRAM-HOUSING FOR NEEDY POOL BOX 817 REDMOND, WA 98073 UAFARIA EDUCATION AND NONE VELFARE TRUST REGISTERED CHARITY PROGRAM-CONSTRUCTION OF SCHOOL BUILD SOLUTION OF SCHOOL BUILD CHARITY PROGRAM-CONSTRUCTION OF SCHOOL BUILD ASSISTANCE WITH CHARITY PROGRAM-SUPPORT FOR DRIPHANS CHARITY PROGRAM-SUPPORT FOR DRIPHANS CHARITY PROGRAM-SUPPORT FOR DRIPHANS PUBLIC ASSISTANCE WITH SCHOOL BUILD ASSISTANCE WITH CHARITY PROGRAM-EDUCATIONAL ASSIST FOR IMPOVERISHED Total b Approved for future payment NONE NONE	Q-402 SHREENANDNAGAR PART-2 VEJALPUR,	NONE		PROGRAM-MOBILE LIBRARY FOR IMPOVERISHED	10,870
NELFARE TRUST REGISTERED CHARITY PROGRAM-CONSTRUCTION DF SCHOOL BUILD	KING COUNTY P.O. BOX 817 REDMOND, WA	NONE	1	PROGRAM-HOUSING FOR	10,000
3020 ISSAQUAH PINE LAKE RD., #539 SAMMAMISH, WA 98075 WIPAHS P.O. BOX 1895 DAR ES SALAAM, TANZANIA Total NONE Total NONE CHARITY PROGRAM-SUPPORT FOR DRPHANS ASSISTANCE WITH PROGRAM-EDUCATIONAL ASSIST FOR IMPOVERISHED **DIAL** **PROGRAM-SUPPORT FOR DRPHANS 3.2 **CHARITY PROGRAM-SUPPORT FOR DRPHANS **ACCURATION ASSISTANCE WITH ASSISTANCE WITH PROGRAM-SUPPORT FOR DRPHANS **ACCURATION ASSISTANCE WITH ASSISTANCE WITH ASSISTANCE WITH ASSISTANCE WITH ASSISTANCE WITH AS	WELFARE TRUST REGISTERED POTENAHALLI VILLAGE	NONE		PROGRAM-CONSTRUCTION	74,000.
P.O. BOX 1895 DAR ES SALAAM, TANZANIA Total NONE CHARITY PROGRAM-EDUCATIONAL ASSIST FOR IMPOVERISHED PROGRAM-EDUCATIONAL ASSIST FOR IMPOVERISHED NONE	3020 ISSAQUAH PINE LAKE RD., #539 SAMMAMISH, WA	NONE	1	PROGRAM-SUPPORT FOR	12,000
NONE NONE	P.O. BOX 1895 DAR ES	NONE	1	PROGRAM-EDUCATIONAL ASSIST FOR	32,750
NONE NONE					
NONE			T	▶ 3a	260,960
	b Approved for future payment				
Total	NONE				
Total		!			
Total					
10(a) 30	Total		1	▶ 3b	0.

Unrelated business income Excluded by section 512, 513, or 514 (a) (b) (c) (d) Related or exemption 512, 513, or 514 Excluded by section 512, 513, or 514 (b) Related or exemption 512, 513, or 514 (c) Amount function income
Business Amount Sion Amount function income
CODE ATTOUR CODE ATTOUR
14 74,938.
14 <1,399.>
18 <313,608.>
0. <240,069.>
13 <240,06
' · · · · · · · · · · · · · · · · · · ·
0. <240,0

▼	the foundation's exempt purposes (other than by providing funds for such purposes).	
923621 02-02-10		Form 990-PF (2009)

Forn	1-00P r	PF(2009) KHAKI	FOUNDATION		20-04	461805	D:	ige 13
	irt X			and Transactions a	્તું Relationships With Nonc			ige is
		Exempt Organ			<i>"</i>			
1	Did th	ne organization directly or indi	rectly engage in any of the follow	ving with any other organization	described in section 501(c) of		Yes	No
	the C	ode (other than section 501(c))(3) organizations) or in section	527, relating to political organiz	rations?			
a	Trans	fers from the reporting founda	ation to a noncharitable exempt o	organization of:			'	
	(1)	Cash				1a(1)		X
	(2)	Other assets				1a(2)		X
b	Other	transactions:					· '	
	(1) 5	Sales of assets to a noncharital	ble exempt organization			<u>1b(1)</u>	<u> </u>	X
	(2) F	Purchases of assets from a no	ncharitable exempt organization			1b(2)		X
	(3) F	Rental of facilities, equipment,	or other assets			1b(3)		X
	(4) F	Reimbursement arrangements				1b(4)		X
		oans or loan guarantees				1b(5)		X
	٠,		embership or fundraising solicitat			1b(6)	 	X
			uling lists, other assets, or paid e			<u>1c</u>	<u> </u>	Х
d		-			ays show the fair market value of the goo		sets,	
					in any transaction or sharing arrangeme	nt, snow in		
<u>/^\.</u>		(b) Amount involved	other assets, or services received (c) Name of noncharitat		(d) Barrellan of transfers transactions			
(4)1	ine no	(b) Amount involved	N/A		(d) Description of transfers, transactions,	and snaring an	rangeme	31115
			N/A	<u> </u>				
								
								
				·				
				· · · · · · · · · · · · · · · · · · ·		•••		
						-		
2a	Is the	foundation directly or indirec	tly affiliated with, or related to, or	ne or more tax-exempt organiza	ations described			
	ın sed	ction 501(c) of the Code (other	r than section 501(c)(3)) or in se	ection 527?		Yes	X	No
b	If "Ye	s," complete the following sch						
		(a) Name of org	janization	(b) Type of organization	(c) Description of relati	ionship		
		N/A						
					<u></u>			
\neg	Linder r	sensities of nerium. I declare that I h	nave examined this return, including at	companying schedules and stateme	nts, and to the best of my knowledge and belief,	it is true corre	ect	
			er than taxpayer or fiduciary) is based of					
		M(-1)	LU-	17/20/10	les dent			
<u>و</u>	\overline{s}	gnature of officer of trustee		Date	Title			
半	, ,	Preparer's			ite. 1 Check if Pro	eparer's identif		nber
Sign Here	ئے خ	1 / 20	WICH	<u> </u>		20296	345	5
S	Paid sparer's se Only	Firm's name (or yours MARK	S HOLMES FOLEY	& MORALES, P	S. EIN >			
	Paid Preparer's Use Only	rf self-employed)/ 1001		, SUITE 3801				
	<u> </u>	address, and ZIP code 8EAT			Phone no. (20	06) 62	1-9	480

(206) 621-9480 Form **990-PF** (2009)

Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

OMB No 1545-0047

Employer identification number

2009

20-0461805 KHAKI FOUNDATION Organization type (check one): Filers of: Section: ____ 501(c)(Form 990 or 990-EZ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor Complete Parts I and II **Special Rules** For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III ☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year. ▶ \$ Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF) Schedule B (Form 990, 990-EZ, or 990-PF) (2009) LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions

for Form 990, 990-EZ, or 990-PF.

	4	-	
18	1 of	- 1	of Part I

Name of organization

Employer identification number

KHAKI	FO	UNDA	TI	on

KHAKI	FOUNDATION	2	0-0461805
Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	ASIYA KHAKI ONE ESTHER COURT	\$6,341.	Person X Payroll Noncash (Complete Part II of there
	OLD TAPPAN, NJ 07675		is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
2	MOHAMED JAWAD KHAKI 901 - 197TH AVENUE S.E. SAMMAMISH, WA 98075	\$ <u>141,570.</u>	Person Payroll Noncash X (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
<u>3</u>	MOHAMED JAWAD KHAKI 901 - 197TH AVENUE S.E. SAMMAMISH, WA 98075	\$ <u>74,091.</u>	Person Payroll Noncash X (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

Page 1 of 1 of Part II
Employer identification number

KHAKI FOUNDATION

20-0461805

tII M	Noncash Property (see instructions)		
) o. m	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	1,500 SH. DISCOVERY COMMUNICATIONS INC		
-		\$141,570.	12/22/09
) o. m	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	2,710 SH. DISCOVERY COMMUNICATIONS INC		
		\$ <u>74,091.</u>	12/22/09
) o. m	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_ _		\$	
o. em	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_		\$	
n) p. pm rt I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
- - - -		\$	
n) o. om rt l	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_ _			
_		\$Schedule B (Form 9	

Part IV Capital Gains and Lo	sses for Tax on Investment Income			
• (a) List and 2-story b	d describe the kind(s) of property sole rick warehouse; or common stock, 20	d, e.g., real estate, 00 shs. MLC Co.	(b) How acquired P - Purchase D - Donation	(c) Date acquired (d) Date sold (mo., day, yr.)
1a PUBLICLY TRADE	D SECURITIES: AL	LIANCE BERNSTEIN H	O P	VARIOUS VARIOUS
b PUBLICLY TRADE		LIANCE BERNSTEIN H		VARIOUS VARIOUS
c PUBLICLY TRADE	D SECURITIES: UB	S FINANCIAL SERVIC	E P	VARIOUS VARIOUS
d PUBLICLY TRADE	D SECURITIES: UB	S FINANCIAL SERVIC	E P	VARIOUS VARIOUS
e PUBLICLY TRADE	D SECURITIES: UB	S FINANCIAL SERVIC	E P	VARIOUS VARIOUS
1 PUBLICLY TRADE	D SECURITIES: UB	S FINANCIAL SERVIC	E P	VARIOUS VARIOUS
g PUBLICLY TRADE	D SECURITIES: UB	S FINANCIAL SERVIC	E P	VARIOUS VARIOUS
h PUBLICLY TRADE	D SECURITIES: 90	3 UNITS ALLIANCEBE	R P	04/16/0811/19/09
PUBLICLY TRADE	·····			VARIOUS VARIOUS
PUBLICLY TRADE		E BLACKSTONE GROUP		VARIOUS VARIOUS
k PUBLICLY TRADE	D SECURITIES: 2,	645 UNITS THE BLAC	K P	VARIOUS VARIOUS
m				
n				
0				<u> </u>
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale) Gain or (loss) lus (f) minus (g)
a <199.	>			<199.>
b <11.	>			<11.>
c 4,019.		21,253.		<u><17,234.</u> >
d 433,267.		542,195.		<u><108,928.</u> >
e 237,706.		235,860.		1,846.
f 143,771.		289,856.		<u> </u>
g 92,420.		130,040.		<u> </u>
h 27,745.		47,951.		<20,206.>
· <6.				<u> </u>
				<8.>
<u>k</u> 33,553.		18,710.		14,843.
m				
n				
0				
Complete only for assets show	ng gain in column (h) and owned by	the foundation on 12/31/69		sses (from col. (h))
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	Gains (excess of but n	of col. (h) gain over col. (k), ot less than "-0-")
a				<199.>
<u>b</u>	<u> </u>			<11.>
C	<u> </u>			<17,234.>
<u>d</u>				<108,928.>
e				1,846.
f				<146,085.>
g				<37,620.>
h				<20,206.>
1				<6.>
				<8.>
k				14,843.
m				
<u>n</u>				
0		r in Part I, line 7		242 622
2 Capital gain net income or (net ca	t 11 (1000); Untol U	.		<313,608.>
If (loss), enter "-0-" in Part I, line 8,		}		NT / 7\
ii (loss), enter -U- in Part I, line	0			N/A

ATTACHMENT

KHAKI FOUNDATION 2009 990-PF RETURN OF PRIVATE FOUNDATION

EIN: 20-0461805

Form 990-PF Part VIII

1 List all officers, directors, trustees, foundation managers and their compensation

(a) Mohamed Jawad Khaki 901-197 th Avenue S.E.	(b) Director/Presid	(c) ent/Treasurer	<u>(d)</u>	<u>(e)</u>
Sammamish, WA 98075	0	0	0	0
Kanize Fatima Khaki 901-197 th Avenue S.E.	Director/V.P./S	ecretary		
Sammamish, WA 98075	0	0	0	0
Ateqah Khaki 535 Atlantic Avenue, #A	Director			
Brooklyn, NY 11217	0	0	0	0
Ali Raza Khaki 901-197 th Avenue S.E.	Director			
Sammamish, WA 98075	0	0	0	0
Asiya Khaki One Esther Court	Director			
Old Tappan, NJ 07675	0	0	0	0

FORM 990-PF DIVIDENT	DS AND	INTER	EST	FROM	SECU	RITIES	ST	ATEMENT	1
SOURCE		GROSS	AMO	UNT		ITAL GAINS IVIDENDS	C	OLUMN (A AMOUNT)
ALLIANCE BERNSTEIN HOLDING L	.P.			81.		0.			81.
THE BLACKSTONE GROUP L.P. UBS FINANCIAL SERVICES-#0419	n.			182. 491.		0. 0.		18 35,49	82.
UBS FINANCIAL SERVICES-#0419:				656.		0.		5,6	
UBS FINANCIAL SERVICES-#0420				243.		0.		10,2	
UBS FINANCIAL SERVICES-#0420	3			285.		0.		23,2	
TOTAL TO FM 990-PF, PART I,	LN 4		74,	938.		0.		74,9	38.
FORM 990-PF	O	THER IN	NCOM	E			ST	ATEMENT	2
			(A)		(B)		(C)	
DESCRIPTION		I	REV	ENUE BOOKS		NET INVEST- MENT INCOME		ADJUSTEI NET INCOI	
ALLIANCE BERNSTEIN HOLDING L UNITED HELATH GROUP SETTLEMENTHE BLACKSTONE GROUP L.P.)		2	526.> 241. <14.>	241	•	_	
TOTAL TO FORM 990-PF, PART I	, LINE	11		<1,3	399.>	<1,399	•>		
FORM 990-PF	OTHER E	PROFESS	SION	AL FI	EES		STZ	ATEMENT	3
· · · · · · · · · · · · · · · · · · ·									
DESCRIPTION	(ISES		(B) INVE T INC		(C) ADJUSTED NET INCOM		(D) CHARITAI PURPOSI	
LEGAL & ACCOUNTING FEES		2,885.		2.	885.	-			0.
				- •					

FORM 990-PF	TAX	ES		STATEMENT 4	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME			
FOREIGN TAXES	1,182.	1,182.		0.	
TO FORM 990-PF, PG 1, LN 18	ORM 990-PF, PG 1, LN 18 1,182. 1,182.			0.	
FORM 990-PF	OTHER E	XPENSES		STATEMENT 5	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME			
STATE FILING FEES INVESTMENT FEES BANK CHARGES INVESTMENT EXPENSES	35. 51,611. 375. 10.	51,611. 375.		17. 0. 0. 0.	
TO FORM 990-PF, PG 1, LN 23	52,031.	52,014.		17.	
FORM 990-PF	CORPORAT	E STOCK		STATEMENT 6	
DESCRIPTION		во	OK VALUE	FAIR MARKET VALUE	
UBS FINANCIAL SERVICES-EQUITY HOLDINGS			4,991,533.	4,799,652.	
TOTAL TO FORM 990-PF, PART I		4,991,533. 4,799,652.			

Form **8868**

(Rev. April 2009)
Department of the Treasury

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No 1545-1709

			_ <u></u>
• If yo	ou are filing for an Automatic 3-Month Extension, complete only Part I and check this box ou are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this		▶ 🗓
Do no	t complete Part II unless you have already been granted an automatic 3-month extension on a previously fil	ed For	m 8868
Parl	Automatic 3-Month Extension of Time. Only submit original (no copies needed).		
A corp	poration required to file Form 990-T and requesting an automatic 6-month extension - check this box and com only	plete	▶ □
All oth	er corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an income tax returns	exten	sion of time
noted (not al you m	conic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronical atomatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or corpust submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic file and click on e-file for Chanties & Nonprofits.	cally if	(1) you want the additional ated Form 990.T. Instead,
Туре	or Name of Exempt Organization	Empl	loyer identification number
print	WHAVE HOURS AND ON	٠,	0 0461005
File by t	KHAKI FOUNDATION Number, street, and room or suite no If a P.O. box, see instructions.		0-0461805
due date filing yo	901 - 197TH AVENUE S.E.		
return S Instructi			
Checl	type of return to be filed (file a separate application for each return):		
	Form 990 Form 990-T (corporation) Form 47 Form 990-BL Form 990-T (sec. 401(a) or 408(a) trust) Form 52 Form 990-EZ Form 990-T (trust other than above) Form 60 Form 990-PF Form 1041-A Form 88	27 69	
	MOHAMED JAWAD KHAKI be books are in the care of ▶ 901 - 197TH AVENUE S.E SAMMAMISH, WA	98	075
• If ti	ephone No. ► 425-442-6662 FAX No. ► the organization does not have an office or place of business in the United States, check this box this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If thi The content of the group, check this box ► and attach a list with the names and EINs of all the content of the group.		
	I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unto AUGUST 15, 2010 , to file the exempt organization return for the organization named a is for the organization's return for: X calendar year 2009 or		The extension
	tax year beginning, and ending		_
2	If this tax year is for less than 12 months, check reason: Initial return Final return		Change in accounting period
	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	s <u>171</u> .
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	\$ 7,381.
	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).	20	s 0.
	See instructions	3c	\$ 0.

LHA For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

Form 8868 (Rev. 4-2009)

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.