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

2009

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

For calendar year 2009, or tax year beginning , and ending

G Check all that apply ☐ Initial return ☐ Initial return of a former public charity ☐ Final return
☐ Amended return ☐ Address change ☐ Name change

Use the IRS label. Otherwise, print or type. See Specific Instructions	Name of foundation KAMPE FAMILY FOUNDATION		A Employer identification number 20-0512724
	Number and street (or P O box number if mail is not delivered to street address)	Room/suite	B Telephone number 775-345-7638
	City or town, state, and ZIP code VERDI, NV 89439		C If exemption application is pending, check here ☐
			D 1. Foreign organizations, check here ☐ 2. Foreign organizations meeting the 85% test, check here and attach computation ☐
H Check type of organization ☒ Section 501(c)(3) exempt private foundation ☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation			E If private foundation status was terminated under section 507(b)(1)(A), check here ☐
I Fair market value of all assets at end of year (from Part II, col (c), line 16) \$ 2,085,151.		J Accounting method ☒ Cash ☐ Accrual ☐ Other (specify) _____	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ☐

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
1 Contributions, gifts, grants, etc., received				N/A	
2 Check ☒ if the foundation is not required to attach Sch B					
3 Interest on savings and temporary cash investments		150.	9.		STATEMENT 1
4 Dividends and interest from securities		40,012.	40,012.		STATEMENT 2
5a Gross rents					
b Net rental income or (loss)					
6a Net gain or (loss) from sale of assets not on line 10		<99,354.>			
b Gross sales price for all assets on line 6a		399,710.			
7 Capital gain net income (from Part IV, line 2)			0.		
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		920.	0.		STATEMENT 3
12 Total. Add lines 1 through 11.		<58,272.>	40,021.		
13 Compensation of officers, directors, trustees, etc.		7,912.	0.		7,912.
14 Other employee salaries and wages					
15 Pension plans, employee benefits					
16a Legal fees					
b Accounting fees		4,975.	746.		4,229.
c Other professional fees					
17 Interest					
18 Taxes		10.	10.		0.
19 Depreciation and depletion		473.	473.		
20 Occupancy					
21 Travel, conferences, and meetings					
22 Printing and publications		808.	0.		808.
23 Other expenses		34,220.	6,882.		27,338.
24 Total operating and administrative expenses. Add lines 13 through 23		48,398.	8,111.		40,287.
25 Contributions, gifts, grants paid		37,618.			37,618.
26 Total expenses and disbursements. Add lines 24 and 25		86,016.	8,111.		77,905.
27 Subtract line 26 from line 12		<144,288.>			
a Excess of revenue over expenses and disbursements					
b Net investment income (if negative, enter -0-)			31,910.		
c Adjusted net income (if negative, enter -0-)				N/A	

Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only

		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash - non-interest-bearing	8,039.	5,897.	5,897.
	2 Savings and temporary cash investments	228,622.	34,033.	34,033.
	3 Accounts receivable ▶			
	Less allowance for doubtful accounts ▶			
	4 Pledges receivable ▶			
	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 ▶			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments - U S and state government obligations			
	b Investments - corporate stock STMT 7	1,668,267.	1,719,985.	1,903,793.
	c Investments - corporate bonds			
11 Investments - land, buildings, and equipment basis ▶				
Less accumulated depreciation ▶				
12 Investments - mortgage loans				
13 Investments - other STMT 8	171,709.	172,907.	140,168.	
14 Land, buildings, and equipment basis ▶ 2,364.				
Less accumulated depreciation STMT 9 ▶ 1,104.	1,733.	1,260.	1,260.	
15 Other assets (describe ▶)				
16 Total assets (to be completed by all filers)	2,078,370.	1,934,082.	2,085,151.	
Liabilities	17 Accounts payable and accrued expenses			
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable			
	22 Other liabilities (describe ▶)			
23 Total liabilities (add lines 17 through 22)	0.	0.		
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ☐ and complete lines 24 through 26 and lines 30 and 31.			
	24 Unrestricted			
	25 Temporarily restricted			
	26 Permanently restricted			
	Foundations that do not follow SFAS 117, check here ☒ and complete lines 27 through 31.			
	27 Capital stock, trust principal, or current funds	0.	0.	
	28 Paid-in or capital surplus, or land, bldg, and equipment fund	0.	0.	
	29 Retained earnings, accumulated income, endowment, or other funds	2,078,370.	1,934,082.	
30 Total net assets or fund balances	2,078,370.	1,934,082.		
31 Total liabilities and net assets/fund balances	2,078,370.	1,934,082.		

Part III Analysis of Changes in Net Assets or Fund Balances

1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	2,078,370.
2 Enter amount from Part I, line 27a	2	<144,288.>
3 Other increases not included in line 2 (itemize) ▶	3	0.
4 Add lines 1, 2, and 3	4	1,934,082.
5 Decreases not included in line 2 (itemize) ▶	5	0.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	1,934,082.

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co.)	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a MORGAN STANLEY SEE ATTACHED STATEMENTS	P	VARIOUS	VARIOUS
b MORGAN STANLEY SEE ATTACHED STATEMENTS	P	VARIOUS	VARIOUS
c			
d			
e			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a 40,606.		56,800.	<16,194.>
b 359,104.		442,264.	<83,160.>
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
a			<16,194.>
b			<83,160.>
c			
d			
e			

2 Capital gain net income or (net capital loss)	If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7	2	<99,354.>
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) If (loss), enter -0- in Part I, line 8	If gain, also enter in Part I, line 8, column (c) If (loss), enter -0- in Part I, line 8	3	N/A

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

☒ Yes ☐ No

If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year, see instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2008			
2007			
2006			
2005			
2004			

- 2 Total of line 1, column (d)
- 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
- 4 Enter the net value of noncharitable-use assets for 2009 from Part X, line 5
- 5 Multiply line 4 by line 3
- 6 Enter 1% of net investment income (1% of Part I, line 27b)
- 7 Add lines 5 and 6
- 8 Enter qualifying distributions from Part XII, line 4
- 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.

2	
3	
4	
5	
6	
7	
8	

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions)

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)		1	638.
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here ☐ and enter 1% 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	0.
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		3	638.
3 Add lines 1 and 2		4	0.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		5	638.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-			
6 Credits/Payments			
a 2009 estimated tax payments and 2008 overpayment credited to 2009	6a	3,138.	
b Exempt foreign organizations - tax withheld at source	6b		
c Tax paid with application for extension of time to file (Form 8868)	6c		
d Backup withholding erroneously withheld	6d		
7 Total credits and payments. Add lines 6a through 6d	7	3,138.	
8 Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached	8		
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9		
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	2,500.	
11 Enter the amount of line 10 to be Credited to 2010 estimated tax ☐ 2,500. Refunded ☐	11	0.	

Part VII-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)? If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.		X
c Did the foundation file Form 1120-POL for this year?		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation ☐ \$ 0. (2) On foundation managers ☐ \$ 0.		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ☐ \$ 0.		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities.		X
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
b If "Yes," has it filed a tax return on Form 990-T for this year?		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T.		X
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV.	X	
8a Enter the states to which the foundation reports or with which it is registered (see instructions) ☐ CA		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," complete Part XIV		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		X

N/A

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Part VII-A Statements Regarding Activities (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(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 August 17, 2008?	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► N/A	13	X	
14	The books are in care of ► ANDREW KAMPE Located at ► 390 SYLVAN COURT, VERDI, NV	Telephone no	► 775-345-7638	
		ZIP+4	► 89439	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the year		► 15	N/A

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

	Yes	No
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?	☐ Yes ☒ No	
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	☐ Yes ☒ No	
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	☐ Yes ☒ No	
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	☐ Yes ☒ No	
(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)?	☐ Yes ☒ No	
(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)	☐ Yes ☒ No	
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 page 20 of the instructions)? Organizations relying on a current notice regarding disaster assistance check here	N/A	1b
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 X
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))		
a 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 ☐ No	
If "Yes," list the years ► 2008		
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions)		2b X
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ►		
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	☐ Yes ☒ No	
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)	N/A	3b
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?		4b X

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Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)**5a** During the year did the foundation pay or incur any amount to

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?

☐ Yes ☒ No

(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?

☐ Yes ☒ No

(3) Provide a grant to an individual for travel, study, or other similar purposes?

☐ Yes ☒ 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)?

☐ Yes ☒ No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?

☐ Yes ☒ No**b** If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?

N/A

5b

Organizations relying on a current notice regarding disaster assistance check here

► ☐**c** If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?

N/A

☐ Yes ☐ No

If "Yes," attach the statement required by Regulations section 53.4945-5(d).

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?☐ Yes ☒ No**b** Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

6b

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 shelter transaction?☐ Yes ☒ No**b** If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?

N/A

7b

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**1** List all officers, directors, trustees, foundation managers and their compensation.

(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) Expense account, other allowances
SEE STATEMENT 10		7,912.	0.	0.

2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

Total number of other employees paid over \$50,000

► 0

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Part VIII**Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors** (continued)**3 Five highest-paid independent contractors for professional services. 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

0

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

	Expenses
1 N/A	
2	
3	
4	

Part IX-B Summary of Program-Related Investments

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

	Amount
1 N/A	
2	
All other program-related investments See instructions	
3	

Total. Add lines 1 through 3

0.

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Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
a	Average monthly fair market value of securities	1a	1,713,068.
b	Average of monthly cash balances	1b	55,088.
c	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	1,768,156.
e	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	1,768,156.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	26,522.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,741,634.
6	Minimum investment return. Enter 5% of line 5	6	87,082.

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

1	Minimum investment return from Part X, line 6	1	87,082.
2a	Tax on investment income for 2009 from Part VI, line 5	2a	638.
b	Income tax for 2009 (This does not include the tax from Part VI)	2b	
c	Add lines 2a and 2b	2c	638.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	86,444.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	86,444.
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	86,444.

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a	Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26	1a	77,905.
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., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
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, line 4	4	77,905.
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	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	77,905.

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

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Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI, line 7				86,444.
2 Undistributed Income, if any, as of the end of 2009				
a Enter amount for 2008 only			107,460.	
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 ▶ \$ 77,905.				
a Applied to 2008, but not more than line 2a			77,905.	
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.			
d Applied to 2009 distributable amount				0.
e Remaining amount distributed out of corpus	0.			
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:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
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			29,555.	
f Undistributed income for 2009 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2010				86,444.
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.			
9 Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a	0.			
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				

N/A

b Check box to indicate whether the foundation is a private operating foundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5)

(4) Gross investment income

KAM03 1

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Total

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

- | | | | |
|--|-------|-----|----|
| <p>1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?</p> <p>a Transfers from the reporting foundation to a noncharitable exempt organization of</p> <p>(1) Cash</p> <p>(2) Other assets</p> <p>b Other transactions</p> <p>(1) Sales of assets to a noncharitable exempt organization</p> <p>(2) Purchases of assets from a noncharitable exempt organization</p> <p>(3) Rental of facilities, equipment, or other assets</p> <p>(4) Reimbursement arrangements</p> <p>(5) Loans or loan guarantees</p> <p>(6) Performance of services or membership or fundraising solicitations</p> <p>c Sharing of facilities, equipment, mailing lists, other assets, or paid employees</p> <p>d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.</p> | | Yes | No |
| | | | |
| | 1a(1) | | X |
| | 1a(2) | | X |
| | | | |
| | 1b(1) | | X |
| | 1b(2) | | X |
| | 1b(3) | | X |
| | 1b(4) | | X |
| | 1b(5) | | X |
| | 1b(6) | | X |
| | 1c | | X |

[illegible]

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

(a) Name of organization	(b) Type of organization	(c) Description of relationship
N/A		

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

Sign Here	Signature of officer or trustee		Date		Title	
			11/12/10		PRESIDENT	
Paid Preparer's Use Only	Preparer's signature	Date	Check if self-employed	Preparer's identifying number		
		11/11/10	☐			
Firm's name (or yours if self-employed), address, and ZIP code				EIN		
SHEA LABACH DOBBERSTEIN P.C. 1700 S. EL CAMINO REAL, SUITE 500 SAN MATEO, CA 94402				650-579-7200		

Form **990-PF** (2009)

Morgan Stanley Smith Barney

CLIENT STATEMENT | For the Period December 1-31, 2009

THE KAMPE FAMILY FOUNDATION
PO BOX 98

Activity

MMF AND BANK DEPOSITS ACTIVITY

Date	Activity Type	Description	Bank Deposit Program/ Money Market Funds
12/2	Automatic Investment	MS ACTIVE ASSETS TAX FR TRUST	\$116.10
12/4	Automatic Investment	MS ACTIVE ASSETS TAX FR TRUST	220.80
12/8	Automatic Investment	MS ACTIVE ASSETS TAX FR TRUST	940.80
12/9	Automatic Redemption	MS ACTIVE ASSETS TAX FR TRUST	(14,698.16)
12/11	Automatic Investment	MS ACTIVE ASSETS TAX FR TRUST	562.10
12/15	Automatic Investment	MS ACTIVE ASSETS TAX FR TRUST	168.30
12/16	Automatic Investment	MS ACTIVE ASSETS TAX FR TRUST	159.30
12/17	Automatic Investment	MS ACTIVE ASSETS TAX FR TRUST	55.00
12/21	Automatic Investment	MS ACTIVE ASSETS TAX FR TRUST	259.00
12/24	Automatic Investment	MS ACTIVE ASSETS TAX FR TRUST	69.70
12/31	Automatic Investment	MS ACTIVE ASSETS TAX FR TRUST	775.69
NET ACTIVITY FOR PERIOD			\$(11,371.37)

REALIZED GAIN/(LOSS) DETAIL

Security Description	Date Acquired	Date Sold	Quantity	Sales Proceeds	Orig / Adj Total Cost	Realized Gain/(Loss)	Comments
AFLAC INCORPORATED	01/05/04	03/04/09	80.000	\$1,122.52	\$2,788.00	\$(1,665.48)	2
	05/26/06	03/04/09	270.000	3,788.51	12,611.70	(8,823.19)	2
	08/22/06	03/04/09	260.000	3,648.20	11,179.53	(7,531.33)	2
AMERICAN EXPRESS CO	06/25/07	03/04/09	520.000	5,991.20	32,571.86	(26,580.66)	2
	06/02/08	03/04/09	330.000	3,802.10	14,749.68	(10,947.58)	2
APACHE CORP	04/07/06	10/01/09	110.000	9,992.14	7,397.50	2,594.64	2
AUTOMATIC DATA PROCESSING INC	04/07/06	10/01/09	110.000	4,275.89	4,629.32	(353.43)	2
	05/26/06	10/01/09	150.000	5,830.75	6,220.58	(389.83)	2
BP PLC ADS	01/06/04	09/17/09	56.000	3,072.78	2,805.04	267.74	2
	01/26/05	09/17/09	16.000	877.94	956.02	(78.08)	2
	02/04/05	09/17/09	8.000	438.97	485.28	(46.31)	2
	02/28/05	09/17/09	26.000	1,426.65	1,706.64	(279.99)	2
	03/02/05	09/17/09	55.000	3,017.91	3,552.45	(534.54)	2
	04/07/06	09/17/09	59.000	3,237.39	4,200.72	(963.33)	2
CAMERON INTNL CORP	04/07/06	08/31/09	270.000	9,536.23	6,278.66	3,257.57	2
CISCO SYS INC	01/05/04	09/17/09	199.000	4,621.06	4,935.20	(314.14)	2
	03/01/05	09/17/09	75.000	1,741.60	1,315.50	426.10	2
	11/16/05	09/17/09	56.000	1,300.40	964.32	336.08	2
COMCAST CORP CL A SPECIAL NEW	04/07/06	10/01/09	540.000	7,980.99	9,918.00	(1,937.01)	2

CONTINUED

THE KAMPE FAMILY FOUNDATION
PO BOX 98

Activity

REALIZED GAIN/(LOSS) DETAIL (CONTINUED)

Security Description	Date Acquired	Date Sold	Quantity	Sales Proceeds	Orig / Adj Total Cost	Realized Gain/(Loss)	Comments
CVS CAREMARK CORP	04/07/06	03/12/09	340 000	8,765.83	10,556.39	(1,790.56)	2
	04/07/06	10/01/09	140 000	5,002.28	4,346.75	655.53	2
	05/26/06	10/01/09	110 000	3,930.37	3,130.20	800.17	2
DANAHER CORP	04/07/06	10/01/09	150 000	9,870.64	9,824.73	45.91	2
EMERSON ELECTRIC CO	04/07/06	09/17/09	280 000	11,502.66	11,459.64	43.02	2
GENERAL MILLS INC	06/05/08	08/17/09	370 000	21,308.68	23,415.82	(2,107.14)	
GLAXOSMITHKLINE PLC ADS	08/23/06	10/16/09	240 000	9,890.74	12,938.40	(3,047.66)	2
GOLDMAN SACHS GRP INC	01/09/04	09/17/09	20 000	3,628.31	1,961.40	1,666.91	2
	10/13/04	09/17/09	25 000	4,535.38	2,373.53	2,161.85	2
	10/20/04	09/17/09	15 000	2,721.23	1,386.75	1,334.48	2
GOOGLE INC-CL A	11/17/08	10/01/09	20 000	9,798.34	6,107.68	3,690.66	
HEWLETT PACKARD	06/01/06	05/06/09	160 000	5,779.37	5,175.84	603.53	2
ISHARES MSCI EAFE FUND	07/11/06	05/06/09	410 000	18,224.69	26,604.90	(8,380.21)	2
	06/06/08	05/06/09	140 000	6,223.06	10,510.98	(4,287.92)	
JOHNSON & JOHNSON	01/09/04	10/16/09	107 000	6,465.84	5,526.55	939.29	2
	10/19/05	10/16/09	22 000	1,329.43	1,386.68	(57.25)	2
	01/18/06	10/16/09	11 000	664.71	676.68	(11.97)	2
LABORATORY CP AMER HLDGS NEW	12/19/07	05/06/09	130 000	8,324.46	9,649.50	(1,325.04)	2
MICROSOFT CORP	04/07/06	05/06/09	520 000	10,344.19	14,237.60	(3,893.41)	2
	05/26/06	05/06/09	40 000	795.71	946.80	(151.09)	2
MIRANT CORP ESC	09/18/09	09/18/09	1,865 000	233.20	0.00	233.20	1
NIKE INC B	04/07/06	05/06/09	200 000	10,924.11	8,378.82	2,545.29	2
NOKIA CP ADR	05/11/06	08/28/09	930 000	13,123.82	20,356.77	(7,232.95)	2
	06/02/08	08/28/09	320 000	4,515.72	8,876.16	(4,360.44)	
NOVARTIS AG ADR	04/07/06	05/06/09	300 000	11,532.30	17,064.00	(5,531.70)	2
	05/26/06	05/06/09	10 000	384.41	561.50	(177.09)	2
	05/26/06	10/16/09	360 000	18,332.09	20,214.00	(1,881.91)	2
	08/22/06	10/16/09	40 000	2,036.90	2,273.60	(236.70)	2
NUCOR CORPORATION	10/07/08	10/16/09	130 000	5,880.09	4,541.99	1,338.10	
PEPSICO INC NC	04/07/06	09/17/09	250 000	14,707.49	14,494.10	213.39	2
	05/26/06	09/17/09	10 000	588.30	605.48	(17.18)	2
PROCTER & GAMBLE	04/07/06	04/07/09	130 000	6,384.52	7,475.83	(1,091.31)	2
	05/26/06	04/07/09	240 000	11,786.81	13,207.20	(1,420.39)	2
	11/06/06	04/07/09	60 000	2,946.70	3,811.80	(865.10)	2
STRYKER CORP	11/28/06	09/17/09	230 000	10,881.09	11,862.14	(981.05)	2
TARGET CORPORATION	04/07/06	10/01/09	50 000	2,302.54	2,602.91	(300.37)	2
	05/26/06	10/01/09	160 000	7,368.13	7,780.22	(412.09)	2
U S BANCORP COM NEW	04/07/06	10/01/09	470 000	10,142.47	14,358.50	(4,216.03)	2

CONTINUED

MorganStanley SmithBarney

CLIENT STATEMENT | For the Period December 1-31, 2009

THE KAMPE FAMILY FOUNDATION
PO BOX 98

Activity

REALIZED GAIN/(LOSS) DETAIL (CONTINUED)

Security Description	Date Acquired	Date Sold	Quantity	Sales Proceeds	Orig / Adj Total Cost	Realized Gain/(Loss)	Comments
UGI CORPORATION NEW COM	05/26/06	10/01/09	40,000	863.19	1,240.40	(377.21)	2
	04/07/06	10/01/09	150,000	3,722.15	3,205.29	516.86	2
	05/26/06	10/01/09	40,000	992.57	924.74	67.83	2
VODAFONE GP PLC ADS NEW	08/20/07	10/01/09	280,000	6,286.53	8,692.68	(2,406.15)	2
WALT DISNEY CO HLDG CO	06/02/08	09/17/09	290,000	8,183.58	9,621.74	(1,438.16)	
XILINX INC	05/26/06	04/06/09	740,000	14,386.70	16,775.80	(2,389.10)	2
	05/26/06	04/06/09	329,000	6,396.25	8,655.99	(2,259.74)	2
Net Realized Gain/(Loss) This Period				\$0.00	\$0.00	\$0.00	
Net Realized Gain/(Loss) Year to Date				\$399,710.81	\$499,064.48	\$(99,353.67)	

Gain / loss information is provided for informational purposes only and should not be used for tax preparation. Please refer to the gain / loss section of the disclosures for important information about gain / loss reporting.

- 1 - This information reflects your requested adjustments to the transaction details
2 - You, or a third party, have provided the transaction details for this position

FORM 990-PF INTEREST ON SAVINGS AND TEMPORARY CASH INVESTMENTS STATEMENT 1

SOURCE	AMOUNT
MORGAN STANLEY #036156	8.
MORGAN STANLEY #036171	141.
MORGAN STANLEY VARIOUS	1.
TOTAL TO FORM 990-PF, PART I, LINE 3, COLUMN A	150.

FORM 990-PF DIVIDENDS AND INTEREST FROM SECURITIES STATEMENT 2

SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	COLUMN (A) AMOUNT
MORGAN STANLEY #036156	1.	0.	1.
MORGAN STANLEY #036171	40,011.	0.	40,011.
TOTAL TO FM 990-PF, PART I, LN 4	40,012.	0.	40,012.

FORM 990-PF OTHER INCOME STATEMENT 3

DESCRIPTION	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
REBATES RECEIVED	90.	0.	
OTHER INVESTMENT INCOME	830.	0.	
TOTAL TO FORM 990-PF, PART I, LINE 11	920.	0.	

FORM 990-PF ACCOUNTING FEES STATEMENT 4

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING	4,975.	746.		4,229.
TO FORM 990-PF, PG 1, LN 16B	4,975.	746.		4,229.

FORM 990-PF	TAXES			STATEMENT	5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
TAXES & LICENSES	10.	10.		0.	
TO FORM 990-PF, PG 1, LN 18	10.	10.		0.	

FORM 990-PF	OTHER EXPENSES			STATEMENT	6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
ADMINISTRATION FEES	23,384.	6,500.		16,884.	
MISCELLANEOUS	4,734.	0.		4,734.	
FOREIGN TAXES	382.	382.		0.	
SUPPLIES	3,925.	0.		3,925.	
INSURANCE	1,751.	0.		1,751.	
WEBSITE	44.	0.		44.	
TO FORM 990-PF, PG 1, LN 23	34,220.	6,882.		27,338.	

FORM 990-PF	CORPORATE STOCK		STATEMENT	7
DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE		
WELLS FARGO BANK	1,719,985.	1,903,793.		
TOTAL TO FORM 990-PF, PART II, LINE 10B	1,719,985.	1,903,793.		

FORM 990-PF	OTHER INVESTMENTS	STATEMENT	8
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DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
WELLS FARGO BANK	COST	172,907.	140,168.
TOTAL TO FORM 990-PF, PART II, LINE 13		172,907.	140,168.

FORM 990-PF	DEPRECIATION OF ASSETS NOT HELD FOR INVESTMENT	STATEMENT	9
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DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE
COMPUTER EQUIPMENT	2,364.	1,104.	1,260.
TOTAL TO FM 990-PF, PART II, LN 14	2,364.	1,104.	1,260.

FORM 990-PF	PART VIII - LIST OF OFFICERS, DIRECTORS TRUSTEES AND FOUNDATION MANAGERS	STATEMENT	10
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NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
ANASTACIA GAIL PO BOX 3453 HALF MOON BAY, CA 94019	PRESIDENT 5.00	7,912.	0.	0.
DIANE R. KAMPE PO BOX 98 VERDI, NV 89439	SECRETARY 5.00	0.	0.	0.
AMANDA LUJAN PO BOX 3453 HALF MOON BAY, CA 94019	CHIEF FINANCIAL OFFICER 5.00	0.	0.	0.
ANDREW KAMPE PO BOX 98 VERDI, NV 89439	TREASURER 5.00	0.	0.	0.

TOTALS INCLUDED ON 990-PF, PAGE 6, PART VIII	7,912.	0.	0.
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FORM 990-PF

GRANTS AND CONTRIBUTIONS
PAID DURING THE YEAR

STATEMENT 11

RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT	RECIPIENT STATUS	AMOUNT
CALTECH 1200 EAST CALIFORNIA BLVD. PASADENA, CA 91125	NONE CHARITABLE - EDUCATION	IRC 501(C)(3)	4,000.
PENINSULA HUMANE SOCIETY SPCA 12 AIRPORT BLVD. SAN MATEO, CA 94401	NONE CHARITABLE	IRC 501(C)(3)	1,700.
ST. JUDE HOSPITAL P.O. BOX 1893 MEMPHIS, TN 38101	NONE CHARITABLE - MEDICAL	IRC 501(C)(3)	1,700.
VARIOUS ORGANIZATIONS VARIOUS VARIOUS	NONE CHARITABLE	IRC 501(C)(3)	6,418.
WESTERN COLORADO FOOD AND AGRICULTURE COUNCIL 2775 US HWY 50 GRAND JUNCTION, CO 81503	NONE CHARITABLE	IRC 501(C)(3)	1,000.
WISCONSIN EVANGELICAL LUTHERAN SYNOD 2929 N. MAYFAIR ROAD MILWAUKEE, WI 53222	NONE CHARITABLE	IRC 501(C)(3)	2,100.
JAYCEE DUGARD TRUST FUND P.O. BOX 596 ATWOOD, CA 92811	NONE CHARITABLE	IRC 501(C)(3)	1,700.
PICKIN PRODUCTIONS P.O. BOX 1690 PAONIA, CO 81428	NONE CHARITABLE	IRC 501(C)(3)	2,000.

YOUTH GARDEN PROJECT 530 SOUTH 400 EAST MOAB, UT 84532	NONE CHARITABLE - EDUCATION	IRC 501(C)(3)	3,500.
NORTH FORK COMMUNITY MONTESSORI SCHOOL 397 BULLDOG STREET HOTCHKISS, CO 81419	NONE CHARITABLE - EDUCATION	IRC 501(C)(3)	5,000.
MANCOS CONSERVATION DISTRICT 841 EAST SECOND AVENUE DURANGO, CO 81301	NONE CHARITABLE	IRC 501(C)(3)	2,500.
FAT CITY FARMERS P.O. BOX 995 BASALT, CO 81621	NONE CHARITABLE	IRC 501(C)(3)	6,000.

TOTAL TO FORM 990-PF, PART XV, LINE 3A

37,618.

- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** and check this box ☒

Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** (on page 1).

Part II	Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).	
Type or print File by the extended due date for filing the return. See instructions.	Name of Exempt Organization	Employer identification number
	KAMPE FAMILY FOUNDATION	20-0512724
	Number, street, and room or suite no. If a P.O. box, see instructions.	For IRS use only
	390 SYLVAN COURT	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions.	
	VERDI, NV 89439	

Check type of return to be filed (File a separate application for each return):

- ☐ Form 990
 ☐ Form 990-EZ
 ☐ Form 990-T (sec. 401(a) or 408(a) trust)
 ☐ Form 1041-A
 ☐ Form 5227
 ☐ Form 8870
☐ Form 990-BL
☒ Form 990-PF
☐ Form 990-T (trust other than above)
☐ Form 4720
☐ Form 6069

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

ANDREW KAMPE

- The books are in the care of ☒ 390 SYLVAN COURT - VERDI, NV 89439

Telephone No. ☒ 775-345-7638

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) ☐. If this is for the whole group, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for.

4 I request an additional 3-month extension of time until NOVEMBER 15, 2010.

5 For calendar year 2009, or other tax year beginning _____, and ending _____.

6 If this tax year is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☐ Change in accounting period

7 State in detail why you need the extension

ADDITIONAL TIME IS NEEDED TO GATHER INFORMATION NECESSARY FOR A COMPLETE AND ACCURATE TAX RETURN

8a	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.	8a	\$	638.
b	If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	8b	\$	3,138.
c	Balance Due. Subtract line 8b from line 8a. 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.	8c	\$	0.

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form

Signature ☐

Title ☐

Date ☐

Form 8868 (Rev 4-2009)

- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** and check this box ☒ **X**

Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** (on page 1).

Part II	Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).	
Type or print File by the extended due date for filing the return. See instructions.	Name of Exempt Organization	Employer identification number
	KAMPE FAMILY FOUNDATION	20-0512724
	Number, street, and room or suite no. If a P.O. box, see instructions. 390 SYLVAN COURT	For IRS use only
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. VERDI, NV 89439	

Check type of return to be filed (File a separate application for each return):

- | | | | | | |
|--------------------------------------|--------------------------------------|--|---|------------------------------------|------------------------------------|
| ☐ Form 990 | ☐ Form 990-EZ | ☐ Form 990-T (sec 401(a) or 408(a) trust) | ☐ Form 1041-A | ☐ Form 5227 | ☐ Form 8870 |
| ☐ Form 990-BL | ☐ Form 990-PF | ☐ Form 990-T (trust other than above) | ☒ Form 4720 | ☐ Form 6069 | |

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

ANDREW KAMPE

- The books are in the care of ☒ **390 SYLVAN COURT - VERDI, NV 89439**

Telephone No. ☒ **775-345-7638**

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) ☐. If this is for the whole group, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for.

4 I request an additional 3-month extension of time until **NOVEMBER 15, 2010.**

5 For calendar year **2009**, or other tax year beginning _____, and ending _____

6 If this tax year is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☐ Change in accounting period

7 State in detail why you need the extension

ADDITIONAL TIME IS NEEDED TO GATHER INFORMATION NECESSARY FOR A COMPLETE AND ACCURATE TAX RETURN

8a 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.	8a	\$ 8,867.
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	8b	\$ 8,867.
c Balance Due. Subtract line 8b from line 8a. 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.	8c	\$ 0.

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form

Signature ☐

Title ☐

Date ☐

Form **8868** (Rev 4-2009)