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EXTENSION GRANTED TO 08/16/2010

Return of Private Foundation

Form **990-PF**

or Section 4947(a)(1) Nonexempt Charitable Trust

OMB No 1545-0052

2009 Treated as a Private Foundation Department of the Treasury Note The foundation may be able to use a copy of this return to satisfy state reporting requirements. Internal Revenue Service For calendar year 2009, or tax year beginning and ending Initial return of a former public charity Final return G Check all that apply: Initial return Name change Amended return X Address change Name of foundation A Employer identification number Use the IRS label. 20-1366281 Otherwise, BOYLSTON FAMILY FOUNDATION Number and street (or P O box number if mail is not delivered to street address) Room/suite print **B** Telephone number or type. P.O. BOX 1888 (208)726-9079 See Specific City or town, state, and ZIP code C If exemption application is pending, check here Instructions. KETCHUM, ID 83340 1 Foreign organizations, check here 2 Foreign organizations meeting the 85% test, check here and attach computation Section 501(c)(3) exempt private foundation H Check type of organization: Section 4947(a)(1) nonexempt charitable trust _____ Other taxable private foundation E If private foundation status was terminated I Fair market value of all assets at end of year J Accounting method: X Cash Accrual under section 507(b)(1)(A), check here Other (specify) (from Part II, col. (c), line 16) If the foundation is in a 60-month termination, (Part I, column (d) must be on cash basis) ▶\$ 383,479. under section 507(b)(1)(B), check here Part | Analysis of Revenue and Expenses (d) Disbursements for charitable purposes (cash basis only) (a) Revenue and expenses per books (b) Net investment (c) Adjusted net (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) income income N/A Contributions, gifts, grants, etc., received 2 Check X If the foundation is not required to attach Sch. B Interest on savings and temporary cash investments 2,218. 2,218 STATEMENT Dividends and interest from securities 5a Gross rents b Net rental income or (loss) <27,277. 6a Net gain or (loss) from sale of assets not on line 10 Revenue Gross sales price for all 114,216. b assets on line 6a ____ 0. 7 Capital gain net income (from Part IV, line 2) 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 218 059. 12 Total Add lines 1 through 11 0. 13 0 0. Compensation of officers, directors, trustees, etc Other employee salaries and wages 15 Pension plans, employee benefits 3,058 STMT 2 1,529. 0. 16a Legal fees **b** Accounting fees c Other professional fees 17 Interest STMT 3 158. 128. 0. 18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses Total operating and administrative expenses. Add lines 13 through 23 1,657 3.216. O. 25 Contributions, gifts grant por 2010 16,700. 16,700. RS 26 Total expenses and disbursements. Add lines 24 and 25 19,916 1,657 16,700. 27 Subtract fine 26 from fine 12: <44,975. 2 Excess of revenue over expenses and disbursements 561 b Net investment income (if negative, enter -0-) N/A

c Adjusted net income (if negative, enter -0-)

2	\sim		1	2	_	_	2	0	4
2	U	_	1	.3	O	O	Z	ರ	1

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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		
	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value		
1	Cash - non-interest-bearing	51,502.	30,450.	<u>30,450.</u>		
2	Savings and temporary cash investments					
3	Accounts receivable >		•			
	Less; allowance for doubtful accounts					
4	Pledges receivable ►					
	Less: allowance for doubtful accounts					
5	 					
6	. , , ,					
	disqualified persons			•		
7	Other notes and loans receivable					
	Less: allowance for doubtful accounts					
ets 8	Inventories for sale or use	-		_		
Assets	· · · · ·					
10	a Investments - U.S. and state government obligations	205 252	201 025	252 222		
- 1	b Investments - corporate stock STMT 4	325,859.	301,936.	353,029.		
	c Investments - corporate bonds					
11	Investments - land, buildings and equipment basis					
	Less accumulated depreciation					
- 1	Investments - mortgage loans					
13						
14						
	Less accumulated depreciation					
15	Other assets (describe)			<u> </u>		
1.		277 261	222 206	202 470		
	Total assets (to be completed by all filers)	3//,361.	332,386.	383,479.		
- 1	_ Accounts payable and accrued expenses			-		
18	` ` ` F					
Liabilities 02 02 02 02 03 05 05 05 05 05 05 05 05 05 05 05 05 05						
를 20 21	Loans from officers, directors, trustees, and other disqualified persons					
.g 2,	Mortgages and other notes payable Other liabilities (describe ►)					
"	Other Habilities (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.		1.			
8 24	Unrestricted					
Fund Balanc	T-					
E 26	· · ·					
5	Foundations that do not follow SFAS 117, check here					
	and complete lines 27 through 31.					
ნ 27	·	377,361.	377,361.			
Net Assets		0.	0.			
¥ 29	Retained earnings, accumulated income, endowment, or other funds	0.	<44,975.>			
₹ 30	Total net assets or fund balances	377,361.	332,386.			
_						
31	Total liabilities and net assets/fund balances	377,361.	332,386.			
Par	Analysis of Changes in Net Assets or Fund Ba	alances				
			·			
	al net assets or fund balances at beginning of year - Part II, column (a), line 3	30				
	ust agree with end-of-year figure reported on prior year's return)		1	377,361.		
	er amount from Part I, line 27a		2	<u> </u>		
	er increases not included in line 2 (itemize)		3	0.		
	I lines 1, 2, and 3		4	332,386.		
	creases not included in line 2 (itemize)		5	0.		
6 Tot	al net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	lumn (b), line 30	6	332,386.		
				Form 990-PF (2009)		

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BOYLSTON FAMILY FOUNDATION

20-1366281

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_	rt VI Excise Tax Based on Investment Income (Section 4940	0(0) 4040(4	1040/6	or 4		1 2 0 0			Page 4
				, or 4	940	- See i	nstru	Ctioi	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here and en			}					
	Date of ruling or determination letter: (attach copy of letter if nec								
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here	and ente	er 1%	}	1				<u>11.</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 1	2, col. (b)	ļ	ļ				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Other	hers enter -0-)			2				0.
3	Add lines 1 and 2				3_	<u> </u>			11.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Of	thers enter -0-)			4	<u></u>			0.
5	Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-				5	<u> </u>			11.
6	Credits/Payments:								
a	2009 estimated tax payments and 2008 overpayment credited to 2009	6a							
b	Exempt foreign organizations - tax withheld at source	6b			1	İ			
C	Tax paid with application for extension of time to file (Form 8868)	6c		•	1				
	Backup withholding erroneously withheld	6d			1				
	Total credits and payments. Add lines 6a through 6d				7				0.
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attack.	ched			8	1			
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed				9	1			11.
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid				10	1			
	Enter the amount of line 10 to be: Credited to 2010 estimated tax		Refund	led 🖢	11	-			
	rt VII-A Statements Regarding Activities		Include						
_	During the tax year, did the foundation attempt to influence any national, state, or local legisl	lation or did it o	articipate or in	ntervene	ın			Yes	No
	any political campaign?		ш. пограто от п				1a		X
h	Did it spend more than \$100 during the year (either directly or indirectly) for political purpos	ses (see instruct	hons for defin	ition\?			1b		X
_	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and	-			d or		1.5		
	distributed by the foundation in connection with the activities.	z copico o, am	, materials p	u.D.110110	u 0,				
	Did the foundation file Form 1120-POL for this year?						1c		x
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the	voor:					10		
u	(1) On the foundation. \$			0.					
_	Enter the reimbursement (if any) paid by the foundation during the year for political expendit				-				
E		tore tax impose	u on loundain	ווכ			1		ļ
9	managers. > \$	202					2		х
2	If "Yes," attach a detailed description of the activities	13'							
•	,		laa af .aaavaa						}
3	Has the foundation made any changes, not previously reported to the IRS, in its governing in		ies of incorpo	ration, t)I		,		v
4	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the change						3		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year	17			IN T	T / 7\	4a		
	If "Yes," has it filed a tax return on Form 990-T for this year? West has a liquidation temperature discoulting or substantial contraction discoulting are substantial contraction discoulting.	,			1/	1/A	4b		-
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?						5		X
_	If "Yes," attach the statement required by General Instruction T.	Ala							
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied eit	mer.							
	By language in the governing instrument, or								
	By state legislation that effectively amends the governing instrument so that no mandatory	y directions that	COUNTER MITH	ine state	aw		_		, .
_	remain in the governing instrument?						6	32	<u> </u>
7	Did the foundation have at least \$5,000 in assets at any time during the year?						7	X	
_	If "Yes," complete Part II, col (c), and Part XV						1		
8a	Enter the states to which the foundation reports or with which it is registered (see instruction	ns) 🟲							
	IL								
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the At	ttorney General	(or designate))					
	of each state as required by General Instruction G? If "No," attach explanation						8b_	<u> X</u>	
9	is the foundation claiming status as a private operating foundation within the meaning of sec			for cale	ndar				
	year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," co	•					9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedul	ile listing their nam	es and addresse	es			10	<u> </u>	X
						For	m 990	-PF ((2009)

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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		<u>X</u> _
12 Did the foundation acquire a direct or indirect interest in any applicable insurance contract before			
August 17, 2008?	12		<u>X</u>
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
Website address ► N/A			
14 The books are in care of ► JOHN G. BOYLSTON Telephone no. ► (208)	726-	9079	•
Located at ▶ P.O. BOX 1888, KETCHUM, ID ZIP+4 ▶8			
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	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?			
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
a disqualified person?			
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
(5) Transfer any income or assets to a disqualified person (or make any of either available			
for the benefit or use of a disqualified person)? Yes X 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 X 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)? N/A	_1b		
Organizations relying on a current notice regarding disaster assistance check here			
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			
before the first day of the tax year beginning in 2009?	10		<u>X</u>
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?			
If "Yes," list the years ,,,,			
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.) N/A	2b		
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?			
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			

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

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Part VII-B Statements Regarding Activities for Which	Form 4720 May Be F	Required (contin	ued)		
5a During the year did the foundation pay or incur any amount to:					
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	Ye	s X No		
(2) Influence the outcome of any specific public election (see section 4955); of	or to carry on, directly or indire	ectly,			
any voter registration drive?		Ye	s X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes	37	Y6	s X No	ŀ	
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section			ŀ	
509(a)(1), (2), or (3), or section 4940(d)(2)?		Ye	es X 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?	, , ,	☐ Y€	es X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify uni	der the exceptions described				
section 53.4945 or in a current notice regarding disaster assistance (see instru		•	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 f		ined			
expenditure responsibility for the grant?			es 🔲 No		
If "Yes," attach the statement required by Regulations section 53 494				ľ	
6a Did the foundation, during the year, receive any funds, directly or indirectly, to					
a personal benefit contract?	pay promisers on	☐ Ye	es X No	ļ	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a g	personal benefit contract?			5 b	х
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	shelter transaction?	□ ve	es X No		
b If yes, did the foundation receive any proceeds or have any net income attribut			. –	7b	
Information About Officers Directors Trust		nagers Highly		, u	
Part VIII Paid Employees, and Contractors	ooo, i oundation me	inagoro, riigini	•		
List all officers, directors, trustees, foundation managers and their	compensation.				
	(b) Title, and average	(c) Compensation	(d) Contributions to	(e) Exp	ense
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Exp account, allowa	other
JOHN G. BOYLSTON	PRESIDENT	enter o j	compensation	anoma	1000
PO BOX 1888	FKEDIDENI				
KETCHUM , ID 83340	0.25	0.	- o.	-	0.
SUSANNE B. KELLETT	VICE PRESIDEN		- 0.		<u> </u>
PO BOX 1888	VICE FRESIDER	" "			
KETCHUM, ID 83340	0.25	0.	0.		0.
DEBORAH T. BOYLSTON	SECRETARY	- 0.			<u> </u>
PO BOX 1888	BECKEIAKI				
KETCHUM, ID 83340	0.25	0.	0.		Λ
MICHAEL H BOYLSTON	TREASURER	ļ U.	0.		0.
PO BOX 1888	IKEASUKEK	}	l		
	0.25		0.		Λ
KETCHUM, ID 83340 Compensation of five highest-paid employees (other than those inc	<u> </u>	enter "NONE "	0.		0.
		I I I I I I I I I I I I I I I I I I I	(d) Contributions to	(e) Exn	ense
(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 deterred	(e) Exp account allowa	other
NONE	devoted to position		compensation	allowa	11062
NONE	+				
	1]		
		1		······································	
	-				
		 			
	1				
	-				
F. A. Laurehar of other ampleuses and our- 050,000	<u> </u>			<u> </u>	
Total number of other employees paid over \$50,000		<u></u>	<u> </u>	200 DE	0
			Form \$	990-PF (2009)

Form 990-PF (2009) BOYLSTON FAMILY FOUNDATION	20-13	366281 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundat 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	1-1, 21	
TOTAL		
	-	
	4	
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 statistic number of organizations and other beneficiaries served, conferences convened, research papers produ		Expenses
	000, 010.	
1 <u>N/A</u>		
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 his	nes 1 and 2	Amount
1 N/A		
1N/A		
		<u></u>
2		
		· · · · · · · · · · · · · · · · · · ·
All other program-related investments. See instructions.	1	
3		

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Total. Add lines 1 through 3

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations, se	e 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	297,572. 53,108.
b	Average of monthly cash balances	1b	53,108.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1 <u>d</u>	350,680.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)1e0 .		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	<u>3</u> 50,680.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	5,260.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4	5	345,420.
6	Minimum investment return Enter 5% of line 5	6	17,271.
Р	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations check here and do not complete this part.)	id certain	
1	Minimum investment return from Part X, line 6	1	17,271.
2a	Tax on investment income for 2009 from Part VI, line 5		
b	Income tax for 2009. (This does not include the tax from Part VI.)		
	Add lines 2a and 2b	2c	11.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	17,260.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	17,260.
6	Deduction from distributable amount (see instructions)	6	Ü.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	17,260.
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	1a	16,700.
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:		
а	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	16,700.
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	16,700.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of 4940(e) reduction of tax in those years.	qualifies for th	e section

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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				17,260.
2 Undistributed income, if any, as of the end of 2009				2,72000
a Enter amount for 2008 only			0.	
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: ► \$ 16,700.				
a Applied to 2008, but not more than line 2a			0.	
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				16,700.
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'		0.		
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.			0.	
f Undistributed income for 2009. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2010				560.
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			. ,	

Part XIV Private Operating F	OUNDATIONS (SOC IN		II A guestion (I)	20-13	66281 Page II
				N/A	
1 a If the foundation has received a ruling of					
foundation, and the ruling is effective for	•	•	· · · ▶ └──		
b Check box to indicate whether the found		ng foundation described		4942(j)(3) or 49	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	(5) 2000	Prior 3 years	(d) 2006	(-) T-4-1
income from Part I or the minimum	(a) 2009	(b) 2008	(c) 2007	(0) 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					
for active conduct of exempt activities.					
Subtract line 2d from line 2c			ļ		<u> </u>
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, dividends, rents, payments on		_	_	_	
securities loans (section					
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	(01	A 18.* A 1	'Caller Consideration	- 1 - 1 OF 000	
Part XV Supplementary Info at any time during t			it the foundati	on nad \$5,000 or mo	ore in assets
		mstructions.j			
 Information Regarding Foundation List any managers of the foundation who 	•	than 20/ of the total cor	stributions received by	the foundation before the elec-	on of any tay
year (but only if they have contributed in			ilinoutions received by	the foundation before the clos	se of any tax
NONE	.,,,	(// //			
b List any managers of the foundation wh	o own 10% or more of th	ne stock of a cornoration	/or an equally large of	ortion of the ownership of a n	artnership or
other entity) of which the foundation has			i (oi aii cquaily iai gc pi	ortion of the ownership of a pr	artificially of
NONE					
2 Information Regarding Contributi	on, Grant, Gift, Loan	. Scholarship, etc., F	Programs:		
Check here ► X if the foundation o			_	es not accept unsolicited requ	ests for funds. If
the foundation makes gifts, grants, etc.					
a The name, address, and telephone num	ber of the person to who	m applications should b	e addressed;		
,	·				
b The form in which applications should b	e submitted and informa	ition and materials they	should include;		
Annah manan da di man					
c Any submission deadlines:					
d Any restrictions or limitations on awards	s, such as by geographic	al areas, charitable field	s, kinds of institutions,	or other factors:	

923611 02-02-10

Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount status of contribution any foundation manager Name and address (home or business) or substantial contributor recipient a Paid dunng the year 826 SEATTLE NONE PUBLIC CONTRIBUTION 3,000. PO BOX 30764 SEATTLE, WA 98113 EMERALD CITY ROTARY -NONE PUBLIC CONTRIBUTION 4,000. FOUNDATION FOR AFGHAN GIRLS SCHOOL - PO BOX 21943 SEATTLE, WA 98111 LOTUS HUMANITARIAN AID NONE PUBLIC CONTRIBUTION 2,600. FOUNDATION PO BOX 83340 KETCHUM, ID 83340 IDAHO CONSERVATION LEAGUE NONE PUBLIC 2,500. CONTRIBUTION PO BOX 83701 BOISE, ID 83701 WILDLIFE ALLIANCE NONE PUBLIC CONTRIBUTION 2,600. 1150 107TH ST NW #403 WASHINGTON, DC 20036 WASHINGTON TRAILS NONE PUBLIC CONTRIBUTION 2,000. ASSOCIATION 2019 THIRD AVE SUITE 100 SEATTLE, WA 98121 16,700. Total ▶ 3a b Approved for future payment NONE **▶** 3b 0. Total

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelated	business income		ded by section 512, 513, or 514	(e)
	(a) Business	(b)	(c) Exclu- sion	(d)	Related or exempt
1 Program service revenue:	code	Amount	code	Amount	function income
a	_				
b	-				ļ <u>.</u>
c	_				
d	_			· · · · · · · · · · · · · · · · · · ·	
e	_		 	· - · · · ·	
f	_		 		<u> </u>
g Fees and contracts from government agencies	-		 		
2 Membership dues and assessments	-		╂		
3 Interest on savings and temporary cash					
investments	-		1 1	0.010	
4 Dividends and interest from securities	ļ		14	2,218.	,
5 Net rental income or (loss) from real estate:			┼		
a Debt-financed property					
b Not debt-financed property	-		 	······································	
6 Net rental income or (loss) from personal					
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other				05.055	
than inventory	- 		18	<27,277.	<u> </u>
9 Net income or (loss) from special events	 -				
10 Gross profit or (loss) from sales of inventory	<u> </u>		 		<u> </u>
11 Other revenue:					
a		-		-	-
b	1		+		
C			 		
d	-				
e 12 Subtotal. Add columns (b), (d), and (e)	-	0.	+	<25,059.	. 0
13 Total Add line 12, columns (b), (d), and (e)	!			13	<pre></pre>
(See worksheet in line 13 instructions to verify calculations.)					(23/035)
Part XVI-B Relationship of Activities		mplishment of Ex	kemp	t Purposes	
Line No. Explain below how each activity for which inc	come is reported in	column (e) of Part XVI-A	A contrib	outed importantly to the acco	mplishment of
▼ the foundation's exempt purposes (other than the foundation) is exempt purposes.			_		·
8 LOSS IS A RESULT OF SA 8 INVESTMENT ACCOUNT	ALES OF S	SECURITIES H	IELD	IN THE WILL	AM BLAIR & CO
8 INVESTMENT ACCOUNT					
	-				
					
					
	 				
					.
		<u></u>		· · · · · · · · · · · · · · · · · · ·	
	· · · · · · · · · · · ·				
-					
					
					
		·			
			•		
					_
					_
923821 02-02-10					Form 990-PF (2009)
02-02-10					(2009)

BOYLSTON FAMILY FOUNDATION 20-1366281 Page 13 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable **Exempt Organizations** Yes No 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? a Transfers from the reporting foundation to a noncharitable exempt organization of: (1) Cash 1a(1) (2) Other assets 1a(2) b Other transactions: (1) Sales of assets to a noncharitable exempt organization 1b(1) (2) Purchases of assets from a noncharitable exempt organization 1b(2) (3) Rental of facilities, equipment, or other assets 1b(3) (4) Reimbursement arrangements 1b(4) (5) Loans or loan guarantees 1b(5) (6) Performance of services or membership or fundraising solicitations 1b(6) c Sharing of facilities, equipment, mailing lists, other assets, or paid employees d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (b) Amount involved (c) Name of noncharitable exempt organization (a) Line no (d) Description of transfers, transactions, and sharing arrangements N/A

						<u> </u>		
2a	Is the	foundation directly or indirect	ly affiliated with, o	r related to, on	e or more tax-exempt organiza	ations described		
	ın sec	tion 501(c) of the Code (other	than section 501((c)(3)) or in sec	ction 527?		Yes	XN
b	If "Yes	s," complete the following sche	dule.					
		(a) Name of orga	anization		(b) Type of organization		(c) Description of relationship	
		N/A						
	-	-			1 -			
		enalties of perjury, I declare that I han plete Declaration of preparer (other	than taxpayer or fidu	iciary) is based o		•	of my knowledge and belief, it is true, correc	et,

		N/A				
					_	
	_					
	,					
4.	and com	enalties of perjury, I declare that I have examined this return, including a plete Deparation of preparer (other than taxpayer or fiduciary) is based.		arer has any knowledo		belief, it is true, correct,
Here	Sı	gnature of officer or trustee	Date	Title		
Sign H	. s	Preparer's signature Ruc Care	J	Date / 18/18	Check if self- employed	Preparer's identifying number
	Paid Preparer' Use Only	Firm's name (or yours CLOTHIER & HEAD,]	P.S.	,	EIN ►	
	Us	if self-employed). 1301 FIFTH AVENUE	, SUITE 2800			
		address, and ZIP code SEATTLE, WA 9810:	1		Phone no.	(206)622-1326
				•		Form 990-PF (2009)

BOYLSTON FAMILY FOUNDATION

Part IV | Capital Gains and Losses for Tax on Investment Income

Farcia Capital Gains and Los	ses for Tax on investment income			
	describe the kind(s) of property solo ick warehouse; or common stock, 20		(b) How acquired P - Purchase D - Donation	d (c) Date acquired (d) Date sold (mo., day, yr.)
1a 170 AIRGAS INC	STOCK		P	07/03/0801/13/09
b 230 FASTENAL CO	O STOCK		P	12/22/0801/15/09
c 80 RESMED INC S	STOCK		P	12/22/0802/06/09
d 350 KNIGHT TRAN	NSPORTATION INC		P	12/22/0802/26/09
e 196 STATE STREE			P	12/22/0803/03/09
f 170 GILEAD			P	12/22/08/04/22/09
9 400 HOLOGIC INC	2		P	10/24/0705/21/09
h 20 CARDIONET IN			P	04/24/0907/01/09
	INC	· · · · ·	P	04/24/0907/01/09
200 CARDIONET			P	04/24/0907/01/09
k 200 GENOPTIX IN			P	12/22/08/07/02/09
	JTOMOTIVE INC		P	01/15/0908/19/09
m 60 DANAHER CORI			- P	
	ASTPARTS CORP			12/22/08/08/28/09
	ASTPARTS CORP		P	03/11/08/08/28/09
0 800 INTUIT INC			P	12/22/08/10/15/09
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		h) Gain or (loss) plus (f) minus (g)
a 6,588.		10,063.		<u> </u>
b 7,226.		7,622.		<u> </u>
<u>c</u> 3,325.		2,853.		472.
d 4,462.		5,197.		<735.>
e 4,068.	-	7,503.		<3,435.>
f 7,862.		8,526.		<664.>
g 4,541.		13,591.		<9,050.>
h 198.		412.		<214.>
989.		1,975.		<986.>
1,978.		3,972.		<1,994.>
k 5,499.		6,106.		<607.>
7,474.		5,803.		1,671.
m 3,616.		3,252.		364.
n 3,676.		4,084.		<408.>
0 23,329.		18,154.		5,175.
	g gain in column (h) and owned by t		(1) Lo	esses (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 col. (h) gain over col. (k), not less than "-0-")
a				<3,475.>
b				<396.>
С				472.
d			•	<735.>
е	-			<3,435.>
f				<664.>
g				<9,050.>
h				<214.>
ï				<986.>
-				<1,994.>
k			-	<607.>
1			 	1,671.
<u></u>			· -	
m				364.
<u>n</u>			.	<408.>
0				5,17 <u>5.</u>
2 Capital gain net income or (net cap	pital loss) { If gain, also enter "-0	in Part I, line 7 -" in Part I, line 7	2	
3 Net short-term capital gain or (loss if gain, also enter in Part I, line 8, or if (loss), enter "-0-" in Part I, line 8	s) as defined in sections 1222(5) an column (c).		3	

BOYLSTON FAMILY FOUNDATION

Part IV | Capital Gains and Losses for Tax on Investment Income

	JCO TOT TAX OIL TITY COLLICITE HILDOING				
(a) List and (2-story brid	describe the kind(s) of property solo ck warehouse; or common stock, 20	i, e.g., real estate, 00 shs. MLC Co.	(b) How acquired	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo , day, yr.)
		70 3113. INEO 00.	D - Donation	(,,,,,,	(, 543), 3.13
1a 300 ADOBE SYSTE			P	10/16/07	
b 50 EXPRESS SCRI			P	12/22/08	
c 190 CVS CAREMAR			P	10/04/07	
d 167 CVS CAREMAR			P	12/22/08	11/10/09
e 230 GAMESTOP CO)RP		P	11/06/07	12/02/09
f					
g					
h					-
1					
1					
k					
1					
m					
					
n			-		
0	(D.D. and an alliand	() 0 - 1 1		1	
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(e) t (u) Gain or (loss) Dlus (f) minus (g)	
a 9,839.		13,946.			<4,107.>
b 3,970.		2,982.			988.
c 5,697.		7,490.		•	<1,793.>
d 5,007.		4,427.			580.
e 4,872.		13,535.			<8,663.>
f ±,072.		13,333.		<u></u>	
	·				
g h				.	
"			•		
-	-				
k				· · · · · · · · · · · · · · · · · · ·	
1					
m					
n			 		
0		· · · · · · · · · · · · · · · · · · ·	<u></u>		-
	gain in column (h) and owned by t	he foundation on 12/31/69	(1) Los	sses (from col. (h))	
	(j) Adjusted basis	(k) Excess of col. (i)	Gains (excess	of col. (h) gain over	col. (k),
(i) F.M.V. as of 12/31/69	as of 12/31/69	over col (j), if any	` but r	ot less than "-0-")	
a					<4,107.>
b					988.
С					<1,793.>
d					580.
е					<8,663.>
f					
g					
h					
1					
1					·
k					_
I					
m _					
п					
0					
	, If norm also onter	ın Part I lina 7			
2 Capital gain net income or (net cap	ital loss) { if gain, also enter file (loss), enter file (loss), enter file (loss).	"in Part I, line 7	2		<27,277.>
3 Net short-term capital gain or (loss If gain, also enter in Part I, line 8, c		d (6):			
If (loss), enter "-0-" in Part I, line 8	ownii (6).	f	3	N/A	
				,	

FORM 990-PF DIVIDENT	OS AND	INTER	EST FROM	SECUE	RITIES	STATEMENT	1
SOURCE		GROSS	AMOUNT		ITAL GAINS IVIDENDS	COLUMN (A AMOUNT)
WILLIAM BLAIR & CO	•		2,218.		0.	2,2	18.
TOTAL TO FM 990-PF, PART I, 1	LN 4		2,218.		0.	2,2	18.
FORM 990-PF		LEGAL	FEES			STATEMENT	2
DESCRIPTION	EXPE					CHARITA	
LEGAL FEES		3,058.	1	,529.			0.
TO FM 990-PF, PG 1, LN 16A		3,058.	1	,529.			0.
· -							
FORM 990-PF		TAX	ES			STATEMENT	3
DESCRIPTION	EXPE	A) NSES BOOKS	NET INV		ADJUSTED	CHARITA	
FEDERAL INCOME TAX STATE FILING FEE FOREIGN TAX WITHHELD		15. 15. 128.		0. 0. 128.			0. 0. 0.
TO FORM 990-PF, PG 1, LN 18		158.		128.			0.
FORM 990-PF	СО	RPORAT	E STOCK			STATEMENT	4
DESCRIPTION				вос	OK VALUE	FAIR MARKE VALUE	т
WM BLAIR & CO INVESTMENTS					301,936.	353,0	29.
TOTAL TO FORM 990-PF, PART I	[, LIN	E 10B			301,936.	353,0	29.

Form **8868**

(Rev April 2009)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return

OMB No 1545-1709

Form 8868 (Rev. 4-2009)

If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box	ightharpoons
 If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 	of this form)
Do not complete Part II unless you have already been granted an automatic 3-month extension on a previous	ously filed Form 8868
Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed)	
A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box an	nd complete
Part I only	▶ □
All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to requ to file income tax returns	uest an extension of time
Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic exnoted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 ele (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electrowww.irs.gov/efile and click on e-file for Chanties & Nonprofits.	ectronically if (1) you want the additional or consolidated Form 990-T Instead,
Type or Name of Exempt Organization	Employer identification number
BOYLSTON FAMILY FOUNDATION	20-1366281
File by the due date for Number, street, and room or suite no. If a P.O. box, see instructions	1 20 1300201
return See Instructions City, town or post office, state, and ZIP code For a foreign address, see instructions	74.10
KETCHUM, ID 83340	
Check type of return to be filed (file a separate application for each return)	
Form 990 Form 990-T (corporation)	orm 4720
	orm 5227
TOTAL SOUTE TOTAL SOUTH (TRUST OTHER THAN ADOVE)	orm 6069
X Form 990-PF	orm 6069 orm 8870
JOHN G. BOYLSTON The books are in the care of ▶ P.O. BOX 1888 - KETCHUM, ID 83340-18 Telephone No ▶ (208)726-9079 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)	orm 8870 888 ▶ □ If this is for the whole group, check this
JOHN G. BOYLSTON The books are in the care of ▶ P.O. BOX 1888 - KETCHUM, ID 83340-18 Telephone No ▶ (208)726-9079 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)	orm 8870 888 ▶ □ If this is for the whole group, check this
JOHN G. BOYLSTON The books are in the care of ▶ P.O. BOX 1888 - KETCHUM, ID 83340-18 Telephone No ▶ (208)726-9079 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)	orm 8870 888 If this is for the whole group, check this is of all members the extension will cover me until
JOHN G. BOYLSTON The books are in the care of ▶ P.O. BOX 1888 - KETCHUM, ID 83340-18 Telephone No ▶ (208) 726-9079 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) box ▶ If it is for part of the group, check this box ▶ and attach a list with the names and EINs 1 request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of times and EINs AUGUST 15, 2010, to file the exempt organization return for the organization is for the organization's return for ▼ X calendar year 2009 or	orm 8870 B 88 If this is for the whole group, check this is of all members the extension will cover me until aimed above. The extension
JOHN G. BOYLSTON The books are in the care of ▶ P.O. BOX 1888 - KETCHUM, ID 83340-18 Telephone No ▶ (208)726-9079 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) box ▶ ☐ If it is for part of the group, check this box ▶ ☐ and attach a list with the names and EINs 1 I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of times and EINs 1 I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of times and EINs 1 I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of times and EINs 1 I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of times and EINs 2 If this tax year beginning	If this is for the whole group, check this is of all members the extension will cover me until amed above. The extension. Change in accounting period.
JOHN G. BOYLSTON The books are in the care of ▶ P.O. BOX 1888 - KETCHUM, ID 83340-18 Telephone No ▶ (208) 726-9079 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) box ▶ ☐ If it is for part of the group, check this box ▶ ☐ and attach a list with the names and EINs 1 I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of tin AUGUST 15, 2010 , to file the exempt organization return for the organization is for the organization's return for ▶ X calendar year 2009 or ▶ ☐ tax year beginning , and ending 2 If this tax year is for less than 12 months, check reason ☐ Initial return ☐ Final return 3a 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	orm 8870 888 If this is for the whole group, check this is of all members the extension will cover me until aimed above. The extension
JOHN G. BOYLSTON The books are in the care of ▶ P.O. BOX 1888 - KETCHUM, ID 83340-18 Telephone No ▶ (208) 726-9079 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) box ▶ If it is for part of the group, check this box ▶ and attach a list with the names and EINs 1 I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of tine AUGUST 15, 2010 to file the exempt organization return for the organization is for the organization's return for ▶ X calendar year 2009 or ▶ tax year beginning , and ending 2 If this tax year is for less than 12 months, check reason Initial return Final return 3a 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 b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated	If this is for the whole group, check this of all members the extension will cover me until amed above. The extension. Change in accounting period.
JOHN G. BOYLSTON The books are in the care of ▶ P.O. BOX 1888 - KETCHUM, ID 83340-18 Telephone No ▶ (208)726-9079 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) box ▶ ☐ If it is for part of the group, check this box ▶ ☐ and attach a list with the names and EINs 1 I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of tin AUGUST 15, 2010 , to file the exempt organization return for the organization is for the organization's return for ▶ X calendar year 2009 or ▶ ☐ tax year beginning , and ending 2 If this tax year is for less than 12 months, check reason ☐ Initial return ☐ Final return 3a 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 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	If this is for the whole group, check this is of all members the extension will cover me until amed above. The extension. Change in accounting period.
JOHN G. BOYLSTON The books are in the care of ▶ P.O. BOX 1888 - KETCHUM, ID 83340-18 Telephone No ▶ (208) 726-9079 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) box ▶ ☐ If it is for part of the group, check this box ▶ ☐ and attach a list with the names and EINs 1	If this is for the whole group, check this of all members the extension will cover me until amed above. The extension. Change in accounting period.
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