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Schedule B (Form 990, 990-EZ,

OMB No 1545-0047

or 990-PF)	Schedule of Contributors	2009			
Department of the Treasury Internal Revenue Service	► Attach to Form 990, 990-EZ, or 990-PF	2009			
Name of the organization	Emp	ployer identification number			
THE KIRBY-JONES	FOUNDATION 20	-8067676			
Organization type (check	one).				
Filers of:	Section				
Form 990 or 990-EZ	501(a)() (enter number) organization 4945 (a)(1) nonexempt charitable trust <b>not</b> treated as a priva 527 political organization				
Form 990-PF	X 501(c)(3) exempt private foundation 494: (a)(1) nonexempt charitable trust treated as a private f 501(c)(3) taxable private foundation	oundation			
Note: Only a section 501(c	is covered by the <b>General Ru</b> le or a <b>Special Rule</b> . (2)(7), (8), or (10) organization can check boxes for both the General Fule and a Special Rule of the General Fule and a Special Rule of the General Full of the Gene				
Special Rules –  For a section 501 (c) (3) 509(a) (1)/170(b) (1) (A) (M) amount on (i) Form 998	organization filing Form 990 or 990-EZ, that met the 33-1/3% support test of the reg and received from any one contributor, during the year, a contribution of the greater of (1) \$5,0 0, Part VIII, line 1h or (ii) Forr 990-EZ, line 1. Complete Parts I and II.	ulations under sections 000 or (2) 2% of the			
For a section 501(c)(7)	, (8), or (10) organization filing Form 990 or 990-EZ, that received from any one cont s of more than \$1,000 for use <i>exclusively</i> for religious, charitable, scientific, literary, or schildren or animals. Complete Parts I, II, and III.				
this box is checked, en purpose. Do not comple	, (8), or (10) organization filing Form 990 or 990-EZ, that received from any one cont ecclusively for religious, charitable, etc., purposes, but these contributions did not aggri- ter here the total contributions that were received during the year for an <i>exclusively</i> rete any of the parts unless the <b>General Rule</b> applies to this organization because it rec., contributions of \$5,000 or inore during the year	egate to more than \$1,000. If eligious, charitable, etc, eceived nonexclusively			
JJU-FF) DUCH MUSI ANSWEI	nat is not covered by the Ger.eral Rule and/or the Special Rules does not file Schedu r 'No' on Part IV, line 2 of their Form 990, or check the box on line H of its Form 990 es not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).	le B (Form 990, 990-EZ, or -EZ, or on line 2 of its Form			
BAA For Privacy Act and for Form 990, 990EZ, or 99	Paperwork Reduction Act Notice, see the Instructions Schedule B (F	orm 990, 990-EZ, or 990-PF) (2009)			

	<b>18</b> (Form 990, 990-EZ, or 990-PF) (2009)	Page 1	of 1 of Part I
Vame of org	anization TRBY-JONES FOUNDATION		067676
	Contributors (see instructions.)		
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	THE KIRBY FAMILY TRUST		Person Payroll
	SANTA BARBARA, CA 93108	\$475,080.	Noncash  (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
2_	THE KIRBY FAMILY TRUST	050 000	Person X Payroll
	SANTA BARBARA, CA 93108	\$950,000.	Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash  (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		6	Person Payroli
		Y	(Complete Part II if there is a noncash contribution.)
RAA	TESANTA AS (22/02	Saladula P (Farm 000	900 E7 ** 000 DE) (2000)

Schedule E	(Form 990, 990-EZ, or 990-PF) (2009)			Page 1		
Name of organ	Ization					Ification number
THE KIR	BY-JONES FOUNDATION		_		20-8067	676
Randin	Noncash Property (see instructions.)					· · · · · · · · · · · · · · · · · · ·
(a) No. from Part I	(b) Description of none is	sh property given		(c) FMV (or estimate) (see instructions)		(d) Date received
1	28,060 SHARES FROM CHARLES 50	HWAB INVESTMENTS				
			\$_	4	75,080.	7/27/09
(a) No. from Part I	(b) Description of none as	sh property given		(c FMV (or e (see instr	estimate) ructions)	(d) Date received
			\$_			
(a) No. from Part I	(½) Description of nonc as	sh property given		(c FMV (or e (see instr	) estimate) uctions)	(d) Date received
			}			
			\$_			
(a) No. from Part l	(t ) Description of notic as	h property given		(c FMV (or e (see instr	) estimate) ructions)	(d) Date received
			\$_			
(a) No. from Part I	(i) Description of none as	h property given		(c FMV (or e (see instr	) stimate) uctions)	(d) Date received
			\$_			
(a) No. from Part I	(i) Description of non as	h property given		(c) FMV (or e (see instr	) stimate) uctions)	(d) Date received
					ĺ	
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BAA		Siched	ule	B (Form 9	990, 990-EZ.	or 990-PF) (2009)

0425869705 Oct. 31, 2012 LTR 2697C O R 20-8067676 200912 44 00022746

THE KIRBY-JONES FOUNDATION 82188 W LINDERO CANYON RD #208 WESTLAKE VILLAGE CA 91 161



## DECLARATION

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Under ponalties of parjury, I declare that I have examined the return identified in this letter, including any accompanying schedules and statements, and to the best of my knowledge and belief; it is true, correct and complete. I understand that this declaration will become a permanent part of that return.

Signature of Office, or Trustee

December 12, 2012 Date

Secretary

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