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Form **990-PF**

Return of Private Foundation

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

Department of the Treasury Internal Revenue Service

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

OMB No 1545-0052

Ford	alen	dar year 2009, or tax yea	r beginning,			and e	nding				
G C	heck	all that apply:	Initial return		Initial return of a fo	rmer public c	harity		Final return	1	
Amended return					X Address change			Name change			
Use	the l	RS Name of foundation						A Emplo	yer identification	number	
label. Otherwise, EGG FOUNDATION								20	000000		
	erwis print	· 	O box number if mail is not de	livered to	street address)		Room/suite		-809028 <u>5</u>)	
	type	· ·	LIFF AVENUE	nva eu te	o street address)		Hoomisake		one number 15) 677-	E 2 0 1	
	Spec										$\overline{}$
Insti	uctio	SAN FRANCI		121					otion application is p BIGN Organizations	_	nere
ш с	hook		X Section 501(c)(3) ex		rivato foundation			2 Fore	ign organizations me k here and attach co	eting the 85% t	test,
	-	ction 4947(a)(1) nonexem			ixable private founda	tion					
		rket value of all assets at 6	·	_		X Accr	ual		ite foundation sta section 507(b)(1)		
		Part II, col (c), line 16)	, I —	her (spe		LAL ACCI	uai			• •	
<i>(''</i>		18 871	L , 576 . (Part I, colu			asis)			oundation is in a section 507(b)(1)		
	rt I	Analysis of Revenue an	d Expenses) Revenue and		vestment		Adjusted net		oursements
		(The total of amounts in colu- necessarily equal the amoun	mns (b), (c), and (d) may not	exp	penses per books	inco			income	for charital	ble purposes pasis only)
	1	Contributions, gifts, grant			400.				N/A	(444	//
		Check X If the foundation	· · ·								
	3	Interest on savings and tempo cash investments			48,944.	4	0,202.			STATEN	MENT 1
	4	Dividends and interest fro			9,250.		9,250.			STATE	
	5a	Gross rents					 				
	Ь	Net rental income or (loss)			-		<u> </u>				
4.	6a	Net gain or (loss) from sale of	assets not on line 10		0.						
Revenue	ь	Gross sales price for all assets on line 6a	6,130,000.								
eve	7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain						0.				
Œ											
	9	Income modifications								<u> </u>	
	10a	Gross sales less returns and allowances									
	b	Less Cost of goods sold						<u> </u>	-		
	C	Gross profit or (loss)									
	11	Other income			263.		<u>8,745.</u>			STATE	MENT 3
	12	Total Add lines 1 throug	ı <u>h 11</u>		58,857.	7	<u>8,197.</u>				
	13	Compensation of officers, dire			0.		0.				0.
	14	Other employee salaries a	•		-			Doscorran	TOCIV	En	
ý	15	Pension plans, employee	benefits					-	RECEIV	10	
nses	١.	Legal fees						11		1 1 -	
çbe	þ	Accounting fees						181	NOV 1 6	2010	Dt
ш o	_ C	Other professional fees						181		<u></u>	<u> </u>
ı₹	17	Interest						1 1	OGDEN	Tur	
ئۆ <u>ت</u>	18	Taxes Depreciation and depletion	nn						CIODE.		
	19 20	Occupancy	лі	<u> </u>				Constitution			-
ॢॗॾ	21	Travel, conferences, and	meetings	-	<u>-</u>						
~ <u>P</u>	22	Printing and publications					-				
≫ē	23	Other expenses	STMT 4		115,819.	1	1,582.			10	04,237.
SE SE	24	Total operating and adm					275020		-		<u> </u>
~ ē	- '	expenses. Add lines 13 t			115,819.	1	1,582.			10	04,237.
ĪŌ	25	Contributions, gifts, gran	-		789,257.		-, - •			78	39,257.
SCANNISPINING AND STREET STORE OF STREET STR	26	Total expenses and disb									
A	^	Add lines 24 and 25			905,076.	1	1,582.			89	93,494.
30	27	Subtract line 26 from line	: 12:								
U I		Excess of revenue over expen			-846,219.						
	b	Net investment income (if negative, enter -0-)			6	6,615.				
	С	Adjusted net income (if n	egative, enter -0-)						N/A		
9235 02-0	01 2-10	LHA For Privacy Act a	and Paperwork Reduction	Act Not	tice, see the instruct	ions		-		Form 99 0	0-PF (2009)

Form 990-PF (2009)							
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			
	ait	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market V	/alue	
		Cash - non-interest-bearing				=	
		Savings and temporary cash investments	15,282,159.	18,650,501.	18,650,	501.	
	3	Accounts receivable ► 5,950.		5 050	-	050	
		Less: allowance for doubtful accounts ▶		5,950.	5,	<u>950.</u>	
	4	Pledges receivable ►	•				
		Less; allowance for doubtful accounts ▶					
	_	Grants receivable					
	6	Receivables due from officers, directors, trustees, and other					
	_	disqualified persons		-			
	7	Other notes and loans receivable					
		Less: allowance for doubtful accounts					
Assets	_	Inventories for sale or use					
Ass		Prepaid expenses and deferred charges Investments - U.S. and state government obligations					
	ŀ	Investments - corporate stock	3,430,000.		 ,	-	
	l	Investments - corporate stock	3,430,000.				
	l	Investments - Land, buildings, and equipment basis					
	'''	Less accumulated depreciation					
	12	Investments - mortgage loans			· · · · · · · · · · · · · · · · · · ·	-	
	13	Investments - other STMT 5	980,208.	215,125.	215.	125.	
		Land, buildings, and equipment: basis					
	'	Less accumulated depreciation			İ		
	15	Other assets (describe ►					
	16	Total assets (to be completed by all filers)	19,692,367.	18,871,576.	18,871,	<u>576.</u>	
	17	Accounts payable and accrued expenses	1,875.	2,500.			
	18	Grants payable					
Š	19	Deferred revenue					
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons					
iabi	21	Mortgages and other notes payable					
_	22	Other liabilities (describe >)					
	23	Total liabilities (add lines 17 through 22)	1,875.	2,500.			
		Foundations that follow SFAS 117, check here					
s		and complete lines 24 through 26 and lines 30 and 31.					
Ce	24	Unrestricted					
alar	25	Temporarily restricted					
Net Assets or Fund Balances	26	Permanently restricted					
Ë		Foundations that do not follow SFAS 117, check here					
ě	0.7	and complete lines 27 through 31.	19,690,492.	18,869,076.			
ets	27	Capital stock, trust principal, or current funds	19,090,492. Ü.	Û.			
188	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.			
et /	29	Retained earnings, accumulated income, endowment, or other funds Total net assets or fund balances	19,690,492.	18,869,076.			
Ž	30	Total net assets of lund dalances	19,090,492.	10,000,070.			
	31	Total liabilities and net assets/fund balances	19,692,367.	18,871,576.			
				20/0/2/0/			
LP	art	Analysis of Changes in Net Assets or Fund B	alances				
1	Tota	I net assets or fund balances at beginning of year - Part II, column (a), line	30				
	•	st agree with end-of-year figure reported on prior year's return)	1 2	19,690,			
	Ente	-846,					
		r increases not included in line 2 (itemize) UNREALIZED	GAIN ON INVEST			803.	
		lines 1, 2, and 3		4	18,869,		
		eases not included in line 2 (itemize)		5	10.000	0.	
6	Tota	I net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	viumn (d), line 30	6	18,869,	. U / D .	

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Form 990-PF (2009)

238,045.

893,494.

7 Add lines 5 and 6

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

8 Enter qualifying distributions from Part XII, line 4

Form	990-PF (2009) EGG FOUNDATION		80902			Page 4
Pa	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or	<u> 4948 -</u>	see in	stru	ctior	15)
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.					
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)					
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1%	1			6	66.
	of Part I, line 27b					
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2				0.
3	Add lines 1 and 2	3			6	66.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4				0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5			6	66.
6	Credits/Payments:	1				
a	2009 estimated tax payments and 2008 overpayment credited to 2009 6a 31,227	<u>. </u>				
b	Exempt foreign organizations - tax withheld at source 6b					
C	Tax paid with application for extension of time to file (Form 8868)					
d	Backup withholding erroneously withheld 6d	_				
7	Total credits and payments. Add lines 6a through 6d	7	_	3	<u>1,2</u>	<u> 27.</u>
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				<u>61.</u>
	Enter the amount of line 10 to be: Credited to 2010 estimated tax 2,000. Refunded	11		2	<u>8,5</u>	<u>61.</u>
Pa	rt VII-A Statements Regarding Activities					
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or interver	e in			Yes	
	any political campaign?		_	1a		<u>X</u>
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?			1b		<u> </u>
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials publish	ed or				
	distributed by the foundation in connection with the activities					
C	Did the foundation file Form 1120-POL for this year?		_	1c		<u> </u>
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			1		
	(1) On the foundation. \blacktriangleright \$ 0. (2) On foundation managers. \blacktriangleright \$ 0	<u>•</u>	1	İ		
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation					
	managers. ► \$O.					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		X
_	If "Yes," attach a detailed description of the activities					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation,	or				37
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		}	3		$\frac{x}{x}$
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	3.1	./.	4a		
	If "Yes," has it filed a tax return on Form 990-T for this year?	1/4	[/A	4D 5		
Ð	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		1	3		
c	If "Yes," attach the statement required by General Instruction T Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:					
U						
	 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. 	ita law				
	remain in the governing instrument?	IG IAW		6	Х	
7			ŀ	7	X	
'	Did the foundation have at least \$5,000 in assets at any time during the year?		ŀ			
Q٠	If "Yes," complete Part II, col. (c), and Part XV Enter the states to which the foundation reports or with which it is registered (see instructions)					
Ud	CA					
h	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)		I			
u	of each state as required by General Instruction G? If "No," attach explanation			8b	Х	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for ca	lendar	ŀ			-
•	year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," complete Part XIV		ŀ	9		x _
10	Did any persons become substantial contributors during the tax year? if "yes," attach a schedule listing their names and addresses		Ţ	10		X
			Form		-PF (

Form 990-PF (2009) ' EGG FOUNDATION			20-80902	85	Page 6
Part VII-B Statements Regarding Activities for Which F	orm 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	4945(e))?	Ye	s X No		
(2) Influence the outcome of any specific public election (see section 4955); or	r to carry on, directly or indire		<u></u>		
any voter registration drive?			s X No	İ	
(3) Provide a grant to an individual for travel, study, or other similar purposes?		Ye	s X No	1	1
(4) Provide a grant to an organization other than a charitable, etc., organization	i described in section				
509(a)(1), (2), or (3), or section 4940(d)(2)?		Ye	s X No	ì	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f				
the prevention of cruelty to children or animals?		 :-	s X No	- 1	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und		in Regulations			
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 hi					
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr			_		
expenditure responsibility for the grant?		I/A L Ye	s No	1	
If "Yes," attach the statement required by Regulations section 53.4945					
6a Did the foundation, during the year, receive any funds, directly or indirectly, to p	pay premiums on		I	1	
a personal benefit contract?		\Ye	s X No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?		-	6b	<u> </u>
If "Yes" to 6b, file Form 8870.	_	<u> </u>	-,		
7a At any time during the tax year, was the foundation a party to a prohibited tax s		Ye			
b If yes, did the foundation receive any proceeds or have any net income attribute			N/A	7b	
Part VIII Information About Officers, Directors, Truster Paid Employees, and Contractors	es, Foundation Ma	inagers, Highly	<i>'</i>		
List all officers, directors, trustees, foundation managers and their officers.	compensation.				
	(b) Title, and average	(c) Compensation	(d) Contributions to	(e) l	Expense
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation	accou	unt, other wances
DEREK SCHRIER	DIRECTOR	enter-0-)	compensation	4110	wantes
230 SEA CLIFF AVENUE	DIRECTOR				
SAN FRANCISCO, CA 94121	2.00	0.	0.		0.
	DIRECTOR		•		
230 SEA CLIFF AVENUE	DINECTON				
SAN FRANCISCO, CA 94121	2.00	0.	0.		0.
DIA TIGHTOIDGO CIT JIIII	2100				
· · · · · · · · · · · · · · · · · · ·					
					<u></u>
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none,	enter "NONE."			
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average	(a) Companyation	(d) Contributions to employee benefit plans and deferred	(e)	Expense unt, other
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	and deferred compensation	allo	wances
NONE					
				<u></u>	
				<u></u>	
Total number of other employees paid over \$50,000	-		•		0

All other program-related investments. See instructions.

Total. Add lines 1 through 3

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign	gn four	ndations,	, 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	2,291,149.
b	Average of monthly cash balances		1b	16,708,690.
c	Fair market value of all other assets	Ì	1c	0.
d		Ì	1d	18,999,839.
e	Reduction claimed for blockage or other factors reported on lines 1a and	Ì		
Ī	1c (attach detailed explanation)	0.		
2	Acquisition indebtedness applicable to line 1 assets		2	0.
3	Subtract line 2 from line 1d		3	18,999,839.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)		4	284,998.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4		5	18,714,841.
6	Minimum investment return Enter 5% of line 5		6	935,742.
P	postributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations or provided in the provid	tions an	d certain	
1	Minimum investment return from Part X, line 6		1	935,742.
2a	Tax on investment income for 2009 from Part VI, line 5	66.		
b	Income tax for 2009. (This does not include the tax from Part VI.)			
С	Add lines 2a and 2b		2c	666.
3	Distributable amount before adjustments. Subtract line 2c from line 1		3	935,076.
4	Recoveries of amounts treated as qualifying distributions		4	0.
5	Add lines 3 and 4		5	935,076.
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	935,076.
P	art XII Qualifying Distributions (see instructions)			
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:			
а			1a	<u>893,494.</u>
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	, , ,		3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4		4	893,494.
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	666.
6	Adjusted qualifying distributions. Subtract line 5 from line 4		6	892,828.
	Note. The amount on line C will be used in Dort V, column (b), in subsequent years when galaulating whether the four	dation of	aughtine f	or the cention

4940(e) reduction of tax in those years.

2 Undistributed income, if any, as of the end of 2009 a Enter amount for 2008 only b Total for prior years: 0. 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 4 Qualifying distributions for 2009 from Part XII, line 4: ▶\$ 893,494. a Applied to 2008, but not more than line 2a b Applied to undistributed income of prior years (Election required - see instructions) c Treated as distributions out of corpus (Election required - see instructions) d Applied to 2009 distributable amount e Remaining amount distributed out of corpus	Part XIII Undistributed Income (see	instructions)			
Inte 7 2 Undatabuted receme, if any, as of the end of 2009 a Enter amount for 2008 only b Total for prox years: 0. 3 Excess distributions carryover, if any, to 2009; a From 2006 b From 2006 c From 2006 d From 2007 e From 2008 1 Total of line is a through e 4 Qualifying distributions for 2009 from Part IXI, line x* \times				• ,	
a Enter amount for 2008 only b Total for pror years; D. 3 Excess distributions carryover, if any, to 2009; a From 2006 d From 2006 d From 2007 e From 2008 f Total of lines 3a through e O. 4 Qualifying distributions for 2009 from part IXI, Inex ** \mathbb{N} = 893, 494. a Appleed to 2008, but not more than line 2a Appleed to 2008, but not more than line 2a Appleed to 2008 subtracts used in success to the subtract but of corpus (Election required - see instructions) d Appleed to 2009 distributions out of corpus (Election required - see instructions) d Appleed to 2009 distributions out of corpus (Election required - see instructions) d Appleed to 2009 distributions out of corpus (Election required - see instructions) d Appleed to 2009 distributions out of corpus (Election required - see instructions) d Appleed to 2009 distributions out of corpus (Election required - see instructions) d Appleed to 2009 distributions out of corpus (Election required - see instructions) d Appleed to 2009 distributions out of corpus (Election required - see instructions) d Appleed to 2009 distributions out of corpus 5 Bross distributions carpyover applied to 2009 (in a mount of prover applied to 2009 (in a mount of prover applied to 2009 (in a mount of prover years' undistributed income. Subtract line 40 from line 20 E Enter the amount of prover years' undistributed income for which it is a company to the section 4942(pix kn absection applied) Subtract line 60 from line 60. Taxable amount - see instructions Undistributed income for which it is a company to the section 4942(pix kn absection from 1004 Total form line 20. Excess first prover from 2004 Total form line 20. Subtract lines 4d and 5 from line 1. This amount must be distributions carryover from 2004 Total form line 20. Subtract lines 4d and 5 from line 1. This amount must be distributions carryover from 2004 Total form line 20. Subtract lines 4d and 5 from line 1. This amount must be distributed income. Subtract lines 4d and 5 from line 1. This amount must be dis	·				935,076.
b Total for prior years: 3 Excess distributions carryover, if any, to 2009; a From 2004 b From 2005 e From 2006 d From 2007 e From 2008 1 Total of lines 3a through e 1 Oualitying distributions for 2009 from Part XII, line 4: ▶ \$ 893, 494 a Applied to 2008, but not more than ine 2a A popiled to 2008, but not more than ine 2a A popiled to 2008, but not more than ine 2a A popiled to undistributed income of prior years (Election required - see instructions) c Treated as distributions out of corpus (Election required - see instructions) a Capital Color of the State of t	2 Undistributed income, if any, as of the end of 2009				
S Excess distributions carryover, if any, to 2009: a From 2006 from 2006 from 2007 e From 2008 Total of lines 3a through e 4. Qualifying distributions fro 2009 from Part IXI, Innet Line Line S 8 93 , 494 A Applied to 2008, but not more than line 2a b Applied to undistributed income of prior years (Return required - see instructions) Cification required - see instructions of Applied to 2009 distributable amount e Remaining amount distributed out of corpus (Retout in required - see instructions) 0 . 5 Treated as distributions out of corpus (Retout in required - see instructions) 0 . 6 Applied to 2009 distributable amount e Remaining amount distributed out of corpus for the seed in the seed of the seed o	a Enter amount for 2008 only			490,423.	
3 Excess distributions carryover, if any, to 2009: a From 2006 b From 2006 c From 2006 d Total of lines 3a through e 4 Qualifying distributions for 2009 from Part XII, line 4: ► ► \$ 893, 494. a Applied to undistribution income of prior years (Electrion required - see instructions) c Freated as distributions out of corpus (Election required - see instructions) c Freated as distributions out of corpus (Election required - see instructions) d Applied to 2009 distributible amount a Remaining amount distributed out of corpus (Election required - see instructions) d Applied to 2009 distributible amount a Remaining amount distributed out of corpus (Election required - see instructions) d Applied to 2009 distributible amount a Remaining amount distributed out of corpus (Election required - see instructions) d Applied to 2009 distributible amount a Remaining amount distributed out of corpus d Remaining amount distributed out of corpus d Corpus Apatiena 3(4,6, and 4 Subtract line 3 d Corpus Apatiena 3(4,6, and 4 Subtract line 4 d from line 2b. C Enter the mount of prior years' undistributed income for which a notice of deficiency has been insued, or on which this section 494(2) is tax has been previously assessed 3 Subtract line 6 from line 6b. Taxable amount - see instructions 0 . Undistributed income for 2008. Subtract line 4 a from line 2a. Taxable amount - see instructions 0 . Undistributed income for 2009. Subtract line 4 d and 5 from line 1. This amount must be distributed morn for 2009. Subtract lines 4d and 5 from line 1. This amount must be distributed morn for 100 . 7 Amounts treated as distributions out of corpus to saskity requirements imposed by section 170(b) (1)(F) or 4942(a)(3) 0 . 8 Excess distributions carryover from 2004 not applied on line 5 of line 7 0 . 9 Excess distributions carryover to 2010. Subtract lines 47 and 8 from line 6a 10 Analyses of line 9: a Excess from 2006	b Total for prior years:				
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b Excess from 2006	1 i				
C EXCESS HUIII 2007 (
d Excess from 2008					
e Excess from 2009					

Form 990-PF (2009) EGG FOU	NDATION				090285 Page 10
Part XIV Private Operating F			I-A, question 9)	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 4	1942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	(1) 0000	Prior 3 years	(4) 0000	(.)
income from Part I or the minimum	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total
investment return from Part X for					
each year listed			ļ		
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		1			
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the					
alternative test relied upon; a "Assets" alternative test - enter:					
(1) Value of all assets					
(2) Value of assets qualifying					
under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter			†	<u> </u>	
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)		 	 	ļ. <u> </u>	-
(3) Largest amount of support from					
an exempt organization				 	
(4) Gross investment income		de Abie mant embr	if the foundation	- had \$5,000 as a	
Part XV Supplementary Info			ir the foundation	i nad \$5,000 or ii	iore ili assets
		msu dodons.,			<u> </u>
1 Information Regarding Foundation	-	then 90/ of the total can	tributions reserved by the	a foundation hafara tha a	logo of any tay
a List any managers of the foundation wh year (but only if they have contributed n			indutions received by the	e iouildation before the c	iose of any lax
SEE STATEMENT 6	φοίο σολι (ο σο τ				
b List any managers of the foundation wh	o own 10% or more of th	he stock of a cornoration	for an equally large port	on of the ownership of a	nartnership or
other entity) of which the foundation ha			tor an equally large port	on or the ownership or a	partition of
NONE					
2 Information Regarding Contribut	ion Grant Gift Loan	Scholarshin etc. P	rngrams		
Check here ► X if the foundation of				not accent unsolicited re	nuests for funds. If
the foundation makes gifts, grants, etc.					
a The name, address, and telephone num	` · _ · 			<u> </u>	
,,	Faragu 1111				
b The form in which applications should t	e submitted and informa	ation and materials they s	should include:		
c Any submission deadlines:					
d Any restrictions or limitations on award	s, such as by geographic	al areas, charitable fields	, kinds of institutions, or	other factors:	
, seemend of annual of annual	., o, goog.apino	,,	,,		

Part AV Supplementary information				
3 Grants and Contributions Paid During the Ye	ear or Approved for Future	Payment	 	
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
a Paid during the year	or substantial contributor	recipient		
SEE STATEMENT 7			<u></u>	700 057
Total	T .		▶ 3a	789,257.
b Approved for future payment				
NONE				
Total		<u></u>	▶ 3b	0.
1 V(U)			- 00	

Part XVI-A	cing Activities	
Enter gross amounts	unless otherwise indicated	Unrelated bus

Enter gross amounts unless otherwise indicated.	Unrelated	business income		by section 512, 513, or 514	(e)
g	(a) Business	(b)	(c) Exclu-	(d)	Related or exempt
1 Program service revenue:	code	Amount	sion code	Amount	function income
a					
b					
C					
d					
e	_				
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments			14	48,944.	
4 Dividends and interest from securities			14	9,250.	
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			14	263.	
8 Gain or (loss) from sales of assets other than inventory			18	:	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:		· —			
a					
b					
c					
d					
e					
12 Subtotal. Add columns (b), (d), and (e)		().	58,457.	0.
13 Total Add line 12, columns (b), (d), and (e)				13	58,457.
(See worksheet in line 13 instructions to verify calculations	.)			<u> </u>	<u>.</u>

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).
+	

923821

Pa	art XVII Information Regarding Transfers To a Exempt Organizations	and Transactions ar	nd Relationships With Nonch	aritable	•	
1	Did the organization directly or indirectly engage in any of the followin	n with any other organization	described in section 501(c) of		Yes	No
'	the Code (other than section 501(c)(3) organizations) or in section 52	= -				
a	Transfers from the reporting foundation to a noncharitable exempt org					
•	(1) Cash	3		1a(1)		X
	(2) Other assets			1a(2)		Х
b	Other transactions:					
	(1) Sales of assets to a noncharitable exempt organization			1b(1)		X
	(2) Purchases of assets from a noncharitable exempt organization			1b(2)		X
	(3) Rental of facilities, equipment, or other assets			1b(3)		X
	(4) Reimbursement arrangements			1b(4)	<u> </u>	X
	(5) Loans or loan guarantees			1b(5)		X
	(6) Performance of services or membership or fundraising solicitation	ins		16(6)	ļ <u>.</u>	X
	Sharing of facilities, equipment, mailing lists, other assets, or paid em			1c		X
d	If the answer to any of the above is "Yes," complete the following sche				sets,	
	or services given by the reporting foundation. If the foundation receive		in any transaction or sharing arrangement	, show in		
	column (d) the value of the goods, other assets, or services received.		(4)			
(a)	Line no (b) Amount involved (c) Name of noncharitable	e exempt organization	(0) Description of transfers, transactions, at	nd sharing ar	rangem	ents
_	N/A					
		·				
					•	
_				-		
		-				
2 a	Is the foundation directly or indirectly affiliated with, or related to, one	or more tax-exempt organiz	ations described			
	in section 501(c) of the Code (other than section 501(c)(3)) or in sec	tion 527?		Yes	X	No
	b If "Yes," complete the following schedule.					
	(a) Name of organization	(b) Type of organization	(c) Description of relation	nship		
	N/A					
_						
_			and to the heet of my knowledge and heliof	t ie true corr	ect.	
	Under penalties of perjury, I declare that I have examined this return, including account and complete Declaration of preparer (other than taxpayer or fiduciary) is based on			is age, con	eot,	
		11/9/10	$C \in \mathcal{O}$			
ē	Signature of officer or trustee	Date	Title			
Sign Here	Propagate A		ate Check if Pres	parer's identif	fying nu	mber
igi	Preparer's Signature Maleud Bon		self- employed ►			
S	I-EDI DOLOZODO DAN TID		EIN ►			
	Firm's name (or yours DELOTTE TAX LLP of self-employed).		2			
	address, and ZIP code SAN FRANCISCO, CA 9	4105	Phone no (41	5) 78	33-4	1000
_	, , , , , , , , , , , , , , , , , , , ,			Form 990)-PF	(2009)

raitiv Capital Gains and Lo	sses for Tax on investment income		100.11		
(a) List and	d describe the kind(s) of property sol	d, e.g., real estate,	P - Purchase	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
2-story thick warehouse, or continion stock, 200 sits. MEC Co			D - Donation		
1a 245,000 SHS OF		P P	04/03/09		
b 245,000 SHS OF c 245,000 SHS OF			P	12/18/08	$03/30/09 \\ 04/24/09$
d 245,000 SHS OF		R CO	P		$04/24/09 \\ 02/26/09$
e 245,000 SHS OF			P		$\frac{02/26/09}{02/26/09}$
f 245,000 SHS OF			P	03/09/09	
g 245,000 SHS OF		R WEST	P	04/01/09	
h 245,000 SHS OF			P		$\frac{00/13/09}{02/26/09}$
1 245,000 SHS OF		O DEL	P	12/26/08	
1 245,000 SHS OF		TR CO ELKIN N C	P	03/10/09	
k	TABILIN VI BIL Q	IN CO BENIN N C		03/10/02	00/13/03
m					
n					
0	·				
/a) Crago colos prios	(f) Depreciation allowed	(g) Cost or other basis	(h) Gain or (loss)	
(e) Gross sales price	(or allowable)	plus expense of sale	(e)	plus (f) minus (g)	
a 245,000.		245,000.		•	0.
b 245,000.		245,000.			0.
c 245,000.		245,000.		<u>-</u>	0.
d 245,000.		245,000.			0.
e 245,000.		245,000.			0.
f 245,000.		245,000.			0.
g 245,000.		245,000.			0.
h 245,000.		245,000.			0.
1 245,000.		245,000.			0.
1 245,000.		245,000.			0.
<u>k</u>					
1					
<u>m</u>					
n					
Complete eath for exacts above	and the second s	the foundation on 10/21/CO			
Complete only for assets snowi	ng gain in column (h) and owned by			sses (from col. (h)) of col. (h) gain ovei	
(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		not less than "-0-")	COI. (K),
	as 01 120 1/03	over cor. (j), ii arry		·	
<u>a</u>					<u> </u>
<u>b</u>					0.
d d					0.
e					0.
f					0.
ÿ					0.
h					0.
1					0.
1					0.
k				··· · · · · · · · · · · · · · · · ·	
I					
m				· -	
n				•	
0					
	If non-place coto	r in Part I line 7			
2 Capital gain net income or (net c	apıtal loss) { If gaın, also enter If (loss), enter "-()-" in Part I, line 7)	2		0.
3 Net short-term capital gain or (lo	ss) as defined in sections 1222(5) ar	, I			
If gain, also enter in Part I, line 8	, column (c).)			
If (loss), enter "-0-" in Part I, line	8	J	3_	N/A_	

FORM 990-PF INTEREST ON SAVI	NGS AND TEM	PORARY CASI	H INVESTMENTS	STATEMENT	1
SOURCE				TUOMA	
FIRST REPUBLIC BANK #906 MERILL LYNCH #0744				43,30	
TOTAL TO FORM 990-PF, PART I,	LINE 3, CO	LUMN A		48,94	14.
FORM 990-PF DIVIDEND	S AND INTER	EST FROM S	ECURITIES	STATEMENT	2
SOURCE	GROSS	AMOUNT	CAPITAL GAINS DIVIDENDS	COLUMN (A))
CHARLES SCHWAB #2938 FIRST REPUBLIC BANK #906		8,856. 394.	0.	8,85	56. 94.
TOTAL TO FM 990-PF, PART I, L	N 4	9,250.	0.	9,25	50.
FORM 990-PF	OTHER I	NCOME		STATEMENT	3
DESCRIPTION		(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME		
FCOI II MISC FIRST REPUBLIC BANK #906	<u></u>	26	0. 27,877 3. 0).	
TOTAL TO FORM 990-PF, PART I,	LINE 11	26	28,745	; .	
FORM 990-PF	OTHER E	XPENSES		STATEMENT	4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVES MENT INCO			
DUDCITITION					
ADMINISTRATIVE EXPENSE	115,819.	11,5	82.	104,23	37.

FORM 990-PF OTHE	R INVESTMENTS		STATEMENT	5
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET	ŗ
FCOI II HOLDINGS, L.P.	FMV	215,125.	215,12	25.
TOTAL TO FORM 990-PF, PART II, LINE	13	215,125.	215,12	25.
	V - LINE 1A NDATION MANAGE	RS	STATEMENT	6

NAME OF MANAGER

DEREK SCHRIER CECILY CAMERON

STATEMENT 7

FORM 990-PF

RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT	RECIPIENT STATUS	AMOUNT
AFRICAN LEADERSHIP FOUNDATION P.O. BOX 7408 NEW YORK, NY 10150	GENERAL SUPPORT	PUBLIC CHARITY	153,300.
COMPASS COMMUNITY SERVICES 49 POWELL STREET SAN FRANCISCO, CA 94102	GENERAL SUPPORT	PUBLIC CHARITY	10,000.
DOCTORS WITHOUT BORDERS 333 SEVENTH AVENUE NEW YORK, NY 10001	GENERAL SUPPORT	PUBLIC CHARITY	50,000.
EDGEWOOD 1801 VICENTE STREET SAN FRANCISCO, CA 94115	GENERAL SUPPORT	PUBLIC CHARITY	5,000.
J. DAVID GLADSTONE INSTITUTE 43 CORPORATE PARK, STE 102 IRVINE, CA 92606	GENERAL SUPPORT	PUBLIC CHARITY	50,000.
KIPP (BAYVIEW ACADEMY) 1060 KEY AVENUE SAN FRANCISCO, CA 94124	GENERAL SUPPORT	PUBLIC CHARITY	5,000.
LEADERSHIP PUBLIC SCHOOLS 2601 MISSION STREET, 9TH FLOOR SAN FRANCISCO, CA 94110	GENERAL SUPPORT	PUBLIC CHARITY	10,000.
SCHWAB DONOR ADVISED FUND 101 MONTGOMERY STREET SAN FRANCISCO, CA 94104	GENERAL SUPPORT	PUBLIC CHARITY	45,000.

GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

EGG FOUNDATION			20-8090285
SMART 1345 MISSION STREET SAN FRANCISCO, CA 94103	GENERAL SUPPORT	PUBLIC CHARITY	5,000.
SUMMER SEARCH 620 DAVIS STREET SAN FRANCISCO, CA 94111	GENERAL SUPPORT	PUBLIC CHARITY	5,000.
TEAM UP FOR YOUTH 310 EIGHTH STREET OAKLAND, CA 94607	GENERAL SUPPORT	PUBLIC CHARITY	10,000.
PRINCETON IN AFRICA P.O. BOX 226 PRINCETON, NJ 08542	GENERAL SUPPORT	PUBLIC CHARITY	19,724.
GATEWAY 1401 20TH ST S BIRMINGHAM, AL 35205-4913	GENERAL SUPPORT	PUBLIC CHARITY	46,333.
STANFORD LAW SCHOOL 559 NATHAN ABBOTT WAY STANFORD, CA 94305-8610	GENERAL SUPPORT	PUBLIC CHARITY	100,000.
INTERNATIONAL SOCIETY OF NEPHROLOGY 12100 SUNSET HILLS RD, SUITE 130 RESTON, VA 20190	GENERAL SUPPORT	PUBLIC CHARITY	80,000.
MAPENDO INTERNATIONAL 689 MASSACHUSETTS AVENUE, 2ND FL. CAMBRIDGE, MA 02139	GENERAL SUPPORT	PUBLIC CHARITY	5,000.
UBUNTU EDUCATION FUND 32 BROADWAY, SUITE 414 NEW YORK, NY 10004	GENERAL SUPPORT	PUBLIC CHARITY	25,000.
MANDELA RHODES FOUNDATION 405 E. LINCOLN ST ITHACA, NY 14850	GENERAL SUPPORT	PUBLIC CHARITY	132,000.

· · EGG FOUNDATION			20-8090285
HOMELESS PRENATAL PROGRAM 2500 18TH ST SAN FRANCISCO, CA 94110	GENERAL SUPPORT	PUBLIC CHARITY	5,000.
GIRL VENTURES 3543 18TH STREET #18 SAN FRANCISCO, CA 94110	GENERAL SUPPORT	PUBLIC CHARITY	2,500.
KUCETEKELA 1220 PARK AVENUE, SUITE 1B NEW YORK, NY 10128	GENERAL SUPPORT	PUBLIC CHARITY	5,000.
RAYMOND WENTZ FOUNDATION P.O. BOX 9039 DENVER, CO 80209	GENERAL SUPPORT	PUBLIC CHARITY	5,000.
TEACH FOR AMERICA 315 WEST 36TH ST., 7TH FLOOR NEW YORK, NY 10018	GENERAL SUPPORT	PUBLIC CHARITY	10,000.
CEGA 207 GIANNINI HALL BERKELEY, CA 94720-3310	GENERAL SUPPORT	PUBLIC CHARITY	5,400.
TOTAL TO FORM 990-PF, PART XV, LI	NE 3A		789,257.

Form 8868 /	(Rev 4-2009)			Page 2
If you are Note. Only	e filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this complete Part II if you have already been granted an automatic 3-month extension on a previously file e filing for an Automatic 3-Month Extension, complete only Part I (on page 1)		8868	► X
Part II	Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no	copies r	needed)	
_	Name of Exempt Organization	Emp	loyer identi	fication number
Type or				
	EGG FOUNDATION	2	<u>0-8090</u>	285
File by the extended	Number, street, and room or suite no If a P O box, see instructions	For II	RS use only	
due date for filing the	230 SEA CLIFF AVENUE			
return See	City, town or post office, state, and ZIP code For a foreign address, see instructions			
	SAN FRANCISCO, CA 94121			
Form	e of return to be filed (File a separate application for each return) 1 990 Form 990-EZ Form 990-T (sec 401(a) or 408(a) trust) Form 1041-A 1 990-BL X Form 990-PF Form 990-T (trust other than above) Form 4720		orm 5227 orm 6069	Form 8870
STOP! Do	not complete Part II if you were not already granted an automatic 3-month extension on a previous	ously file	d Form 88	68.
	CECILY CAMERON, DEREK SCHRIER bks are in the care of ► 230 SEA CLIFF AVENUE - SAN FRANCISCO, tone No ► (415) 677-5300 FAX No ► (415) 677-5		4121	
•	· · · · · · · · · · · · · · · · · · ·	308		▶ □
	rganization does not have an office or place of business in the United States, check this box for a Group Return, enter the organization's four digit Group Exemption Number (GEN)	this is fo	r 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 ElNs of			
	uest an additional 3-month extension of time until NOVEMBER 15, 2010	<u> </u>		
	calendar year 2009, or other tax year beginning, and ending	i		
	s tax year is for less than 12 months, check reason Initial return Final return		Change in a	accounting period
7 State	e in detail why you need the extension			
ADI	DITIONAL TIME IS REQUIRED TO GATHER THE NECESSARY	NFOR	MATION	TO TO
PR	EPARE A COMPLETE AND ACCURATE RETURN.		,	
8a If this	s application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any			
	refundable credits. See instructions	8a	\$	4,500.
	s application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated			
tax p	payments made Include any prior year overpayment allowed as a credit and any amount paid		1	
	viously with Form 8868	8b	\$	31,227.
	ince 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 instruction	ns 8c	\$	0.
	Signature and Verification			
	lties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to rrect, and complete, and that I am authorized to prepare this form.	tne best (or my knowle	age and beliet,

Title 🕨

923832

Signature ►

.

Form 8868 (Rev. 4-2009)

Date 🕨

Form a	3868 (Rev. 4-2009)			Page 2
– ● Ify	ou are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this b	OX .		→ X
	Only complete Part II if you have already been granted an automatic 3-month extension on a previously file		3868	
	ou are filing for an Automatic 3-Month Extension, complete only Part I (on page 1).			
Par	t II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no	copies r	eeded).	
Туре	Name of Exempt Organization	Emp	oyer iden	tification number
print	EGG FOUNDATION	2	0-809	0285
File by extended due dated filing the	Number, street, and room or suite no. If a P.O. box, see instructions.	For If	RS use on	у
return	See City, town or post office, state, and ZIP code. For a foreign address, see instructions.			
Chec	k 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 990-BL Form 990-PF Form 990-T (trust other than above) Form 4720	=	orm 5227 orm 6069	Form 8870
STO	P! Do not complete Part II if you were not already granted an automatic 3-month extension on a previous	usly file	d Form 8	868.
Te ● If	the books are in the care of 2737 DIVISADERO STREET - SAN FRANCISCO Rephone No (415) 677-5300 FAX No. (415) 677-5 the organization does not have an office or place of business in the United States, check this box this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)	308 his is fo	the wholers the ex	e group, check this
,	State in detail why you need the extension ADDITIONAL TIME IS REQUIRED TO GATHER THE NECESSARY I	NFOR	MATIC	N TO
	PREPARE A COMPLETE AND ACCURATE 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	\$	4,500.
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	\$	31,227.
С	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 instruction	s. 8c	\$	0.
	Signature and Verification			
Unde rt is t	r penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to ue, correct, and complete, and that I am authorized to prepare this form.		of my know	edge and belief,
Signa	ture Mules Surect, San Francisco, CA	LLP 14105 Date	≥ 8	19/10
			For	m 8868 (Rev. 4-2009)

923832 05-26-09