

## See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



CIC	GS4		
	( - 54	WK	'RII
$\sim$	-	4 4 I 7	

Form 990-PF (2009) ZACCARIA FAMILY				26-3639918	
Part XIV Private Operating Foundation					N/A
1a If the foundation has received a ruling or do is effective for 2009, enter the date of the r	etermination letter t uling		perating toundation,		
b Check box to indicate whether the foundati	on is a private oper			4942(j)(3) or	4942(j)(5)
2a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum investment return from Part X for	(a) 2009	(ь) 2008	(c) 2007	<b>(d)</b> 2006	(e) Total
each year listed	<del></del>				<del></del>
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					
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)		<u></u>			
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					
Part XV Supplementary Information	(Complete this	part only if the	e organization h	ad \$5,000 or mo	re in
assets at any time during th		structions.)			
Information Regarding Foundation Manage a List any managers of the foundation who h close of any tax year (but only if they have None	ers: ave contributed mo contributed more the	re than 2% of the t han \$5,000) (See	otal contributions red section 507(d)(2).)	eived by the founda	tion before the
b List any managers of the foundation who o a partnership or other entity) of which the f None	wn 10% or more of oundation has a 10	the stock of a corp % or greater intere	ooration (or an equal st.	y large portion of th	e ownership of
2 Information Regarding Contribution, Grant Check here X II if the foundation only in	akes contributions	to preselected cha	ritable organizations	and does not accep	t unsolicited
requests for funds. If the foundation makes complete items 2a, b, c, and d	gifts, grants, etc. (	(see instructions) to	individuals or organ	nizations under other	conditions,
a The name, address, and telephone numbe	r of the person to w	hom applications s	should be addressed:		
		·			
b The form in which applications should be s	ubmitted and inform	nation and materia	is they should include	<b>:</b> :	
c Any submission deadlines			····		
d Any restrictions or limitations on awards, s	uch as hy apparent	nical areas obserts	ble fields kinds of in	clitutions or other to	notore .
army restrictions or initiations on awards, s	ucii as uy geograpr	ncai areas, criafila	vie lielus, Kings of in	smouvis, or other te	sciuls.
ВАА	ΤE	EA0310L 07/06/09			Form <b>990-PF</b> (2009)

CISGS4WRRD

n 990-PF (2009) ZACCARIA FAMILY art XV Supplementary Information	on (continued)	26-363	9918 Pag
Grants and Contributions Paid During the	e Year or Approved for Future Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor recipient	Purpose of grant or contribution	Amount
Name and address (home or business)	substantial contributor recipient	Contribution	
Name and address (home or business) a Paid during the year ,	substantial contributor		
Total b Approved for future payment		► 3a	
Total			-
Total		<u></u> <u>.</u> ▶ 3b	700.