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

OMB No 1545-0052 2009

		the Treasury	A I.a	An The foundation		as a Private						2003	
		ue Service Ir year 2009, or t				e to use a copy of this and ending	etum	to satisfy sta	te reporting	requirements			
		I that apply:	X Initial ret			lum of a former put	lic ct	narity		Final ref	hum.		
•	iicor ai	. п.с. орр.у.	Amende	_	$\overline{}$	ress change		Name change					
Heat	the IRS	Name of found							<u> </u>	cation numi	ber		
	abel.	'						26-3920368					
	erwise,	ARMSTR	ONG FOU	NDATION					B Tele;	of the instructions)			
p	rint	Number and st	reet (or P O, box	number if mail is no	t delivered	to street address)	R	Room/suite	36	360-387-3057			
	or type. see Specific City or town, state, and ZIP code								C If exc	emption applica	ation is pendi	ing, check here	
								D 1. F	oreign organiz	ations, check	here ▶ L		
Instr	uctions	FRIDAY	HARBOR			98520			2. F	oreign organiz	ations meetin	ig the	
$\overline{}$	-	pe of organization		n 501(c)(3) exemp					8:	5% test, check	here and att	ach computation 🕨 📙	
		4947(a)(1) nonex				e private foundation			1 '			terminated under	
		et value of all ass		J Accounting i		X Cash	Accn	uai		on 507(b)(1)(A		–	
	•	rom Part II, col. (c	·	Other (s					1	foundation is r section 507(i			
	e 16) ▶		Pavanua a	(Part I, column nd Expenses	(O) MUST I		. 1		1,	1 30000011 007(1	од г <u>д</u> ој, спе	_	
ra	### '	-) may not necessarily eq		(a) Revenue and expenses per	']	(b) Net in	vestment	(c) Adju	sted net	(d) Disbursements for chantable	
		the amounts in column			,	books		inco	me	inco	ome	purposes (cash basis only)	
	1	Contributions aiffs.	grants etc. rece	erved (attach schedu	le)		1	-38/ /	7.35	2.574	577,33 888	Casi pasis Orby	
				not required to attac		V 13 V	7	£(52)	,	1,727	**************************************		
		_		ary cash investme					<u></u>			2 6 . /	
		Dividends.and in	٠, ١	-									
	5a-	GressTells E	15070		•								
0	\b ~	Net cental income	e or (loss)	5/		S. 355 40	<i>.</i>		₹3, 6	37.0	₹Y^\\\	200 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
Ž	6 / 9	Net gain or (loss) from	ate of Branch not ph	the 10						[38/27]			
Revenue		Eloes taleOphoe in a		+ <u></u>		, , ,	2	(, ,	<i>,</i> ,	30005	,	~ ~ ~	
8	7 /8	Capital gain net i	ncome (from P	art V, line 2)		245 3	31		0	81 1/3	3:40	3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	8 \	Net short temos	ipital gain				î.	,44	// /5/// 		0	\$4.5	
	9 1	Income modifical	ions			dared per	<u></u> i		<u> </u>	<u> </u>		77,7 3	
	10a	Gross sales less re	turns & allowanc	es		(C) (S) (S)	<u> </u>		, , , , , , , , , , , , , , , , , , ,	25.00		3527754	
		Less. Cost of goo	•				_		(<u> </u>		44	
		Gross profit or (k		•••			-	Mar 1	<u> </u>	1			
	11	Other income (at	,				+					3 6 4 4	
	12	Total. Add lines					0		0	<u> </u>	0	87	
80	13	•		tors, trustees, etc.	•		-			 			
euses	14 15	Other employee : Pension plans, e		· · · ·			+						
ο.		Legal fees (attac	• •	ц5 .	• •		-						
X		Accounting fees	-	 de)			\dashv			 			
8	i .	Other professional	-	• • •			7						
ati	17	Interest	,										
Operating and Administrative	ł	Taxes (attach schedule) (see page 14 of the	e instructions)			一						
ij	1	Depreciation (attacl											
d L	20	Occupancy			•								
٧		Travel, conference					\bot						
ğ	22	Printing and publ	ications				\perp						
ğ	23	Other expenses (att. sc	•			ļ	_	· · · · · · · · · · · · · · · · · · ·		ļ			
ij	24			rative expenses.									
973		Add lines 13 thro			-		0		<u> </u>	, , , , ,		0	
Õ	25	Contributions, gif	-	• • • • • •		ļ	0	y' - 3	<u>, , , , , , , , , , , , , , , , , , , </u>	18.77	· 30 · 149	0	
_	26			nts. Add lines 24 an	d 25	<u> </u>	ᇬ		0		0	O	
	27	Subtract line 26 f				1378 (0		39. S		19226			
			•	es and disburseme	ents .		이	Q20 TQ 38	<u>0 } 13 z</u>	13.44	<u> </u>	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	1	Net investment					-:1	73 ,	0	12.	<u></u>		
	С	Adjusted net inc	come (if negati	ive, enter -0-)		5 3 65			<u> </u>	1	0	L. <u>A. 286. N.</u>	

For Privacy Act and Paperwork Reduction Act Notice, see page 30 of the instructions.

Form 990-PF (2009)

		Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year	End e	of year
۲	art #	should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
\top	1	Cash—non-interest-bearing			
-	2	Savings and temporary cash investments			
	3	Assessment manifestal N	87 33" "3" 3 74	7 8 7 XXX	
	,	Less: allowance for doubtful accounts		, , , , , , , , , , , , , , , , , , , ,	1
	4	Pledges receivable ▶	1 34 F. AS	85444 33	25 22 85
	-	Less: allowance for doubtful accounts	r * ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	077 7000 770	16.00
- [_	• • • • • • • •			
-	э e	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see page 16 of the			Ī
		instructions)		\$ 4.6.75.75. 282.3	
	7	Other notes and loans receivable (att. schedule)	1.4811 KI	F 1 4487) 2 15/2/889	387 30,000,3
-		Less' allowance for doubtful accounts			
\$5	8	Inventones for sale or use			
Assets	9	Prepaid expenses and deferred charges			
۲	10a	Investments—U.S. and state government obligations (attach schedule)		<u> </u>	
	b	Investments—corporate stock (attach schedule)			
	C	Investments—corporate bonds (attach schedule)			
- 1	11	Investments—land, buildings, and equipment basis	1.00		tro communic
		Less: accumulated depreciation (attach sch.)			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)			
	14	Land, buildings, and equipment basis	8.03.00 800	<u>. 1908/00 68</u>	10 July 1 1
1		Less. accumulated depreciation (attach sch.)	·		
l	15	Other assets (describe ▶			
	16	Total assets (to be completed by all filers—see the			
- [instructions Also, see page 1, item I)	0	c	<u> </u>
+	17	Accounts payable and accrued expenses			
1	18	Grants payable			
es	19	Deferred revenue			1 .38 .34 * * * * * * * * * * * * * * * * * * *
≅		Loans from officers, directors, trustees, and other disqualified persons			🌃 🗦 sail
Liabilities	20				
	21	Mortgages and other notes payable (attach schedule)			11.000000000000000000000000000000000000
	22	Other liabilities (describe)	0		1 .1.6 次分
-	23	Total liabilities (add lines 17 through 22)	+		
		Foundations that follow SFAS 117, check here			13 10 20
es		and complete lines 24 through 26 and lines 30 and 31.	1		18 3 July 18 19 19 19 19 19 19 19 19 19 19 19 19 19
alance	24	Unrestricted			极物 支票
	25	Temporanly restricted			1 9 / 3 - 331
m	26	Permanently restricted			1 3 (3 / 1, 7 / 1
밀		Foundations that do not follow SFAS 117, check here ▶ 🗵	1		医塞兰尔
Z.		and complete lines 27 through 31.			Production (C)
or Fund	27	Capital stock, trust principal, or current funds			
2	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
Se	29	Retained earnings, accumulated income, endowment, or other funds			- 1455/31/00
Assets	30	Total net assets or fund balances (see page 17 of the			F 455/96 6 -
Net /		instructions)	0	(
ž	31	Total liabilities and net assets/fund balances (see page 17			1 303 8 6 5
ļ		of the instructions)	0		
	art				
		 	aama with	T	
•		net assets or fund balances at beginning of year—Part II. column (a), line 30 (must	artice will		•
	Tota	net assets or fund balances at beginning of year—Part II, column (a), line 30 (must	agree will	4	
^	Total end-	of-year figure reported on prior year's return)		1	
2	Total end- Ente	of-year figure reported on prior year's return) r amount from Part I, line 27a		2	
3	Total end- Ente Othe	of-year figure reported on prior year's return) r amount from Part I, line 27a r increases not included in line 2 (itemize)	agiee will	3	
3	Total end- Ente Othe Add	of-year figure reported on prior year's return) r amount from Part I, line 27a r increases not included in line 2 (itemize)		3	
3 4 5	Total end- Ente Othe Add Decr	of-year figure reported on prior year's return) r amount from Part I, line 27a r increases not included in line 2 (itemize)		3	

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 on page 18

Pa	T VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instruction	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ and enter "N/A" on line 1.	이 없는 기를 먹
	Date of ruling or determination letter: (attach copy of letter if necessary—see instructions)	સ્થાનો ફેર્ડિંગ કરો છે. જો
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check	
	here ▶ ☐ and enter 1% of Part I, line 27b	35° 4564° -
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of	Br. D. Call Car
	Part I, line 12, col. (b)	
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	0
3	Add lines 1 and 2	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	0
5	Tax based on investment Income. Subtract line 4 from line 3. If zero or less, enter -0-	0
6	Credits/Payments:	
а	2009 estimated tax payments and 2008 overpayment credited to 2009 6a 6a	373-783. JULY
b	Exempt foreign organizations—tax withheld at source	XJ\$ ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
c	Tax paid with application for extension of time to file (Form 8868)	23/44
d	Backup withholding erroneously withheld 6d	
7	Total credits and payments. Add lines 6a through 6d	
8	Enter any penalty for underpayment of estimated tax. Check here	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	
11	Enter the amount of line 10 to be: Credited to 2010 estimated tax ▶ Refunded ▶ 11	
Pa	irt 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	∵ Yes No
	participate or intervene in any political campaign?	1a X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19	
	of the instructions for definition)?	1b X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials	
	published or distributed by the foundation in connection with the activities.	
С		/A 1c
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year	1. 3 37
	(1) On the foundation > \$ (2) On foundation managers. > \$	
Θ	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed	
_	on foundation managers. > \$	
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	324, 3
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of	
-	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3 X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a X
b		/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.	(38 97 53)
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:	
	By language in the governing instrument, or	
	By state legislation that effectively amends the governing instrument so that no mandatory directions that	
	conflict with the state law remain in the governing instrument?	a X
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7 X
8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the	1 348
	instructions) > WA	
ь	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General	
_		/A 8b
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or	23 58 5
_	4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV on page	
	27)? If "Yes," complete Part XIV	9 X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	
. •	names and addresses	10 X

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

		ATION				Page o
P	art VII-B Statements Regarding A	ctivities for Which Form 4	720 May Be Re	quired (contin	nued)	
5a	During the year did the foundation pay or incur a	ny amount to				94 77 77
	(1) Carry on propaganda, or otherwise attempt	•	5(e))?	Π Υ	es X No	33 34 350
	(2) Influence the outcome of any specific public			_		
	directly or indirectly, any voter registration dr		,	Пу	es 🗓 No	33 34 <u>48</u> 2
	(3) Provide a grant to an individual for travel, sti			· · · · 一	es X No	731 d d.
	-	· · · · · · · · · · · · · · · · · · ·		🗀 .		
	(4) Provide a grant to an organization other than	<u>-</u>		\Box	es X No	
	section 509(a)(1), (2), or (3), or section 4940			Ш т	es 🔀 No	
	(5) Provide for any purpose other than religious	•	rucational	п.	. Бө	
	purposes, or for the prevention of cruelty to			., 🖵	es 🗓 No	
þ	If any answer is "Yes" to 5a(1)-(5), did any of the	e transactions fail to qualify under t	he exceptions descr	ribed in	/-	. 四十2漢字分
	Regulations section 53.4945 or in a current notice	æ regarding disaster assistance (s	ee page 22 of the in	istructions)?	N/A	5b
	Organizations relying on a current notice regards	_			▶ 📙	
C	If the answer is "Yes" to question 5a(4), does the	foundation claim exemption from	the tax	. —	_	134 1888 199
	because it maintained expenditure responsibility	for the grant?	, ,	_ N/A ∐ Y	'es 📙 No	
	If "Yes," attach the statement required by Regula	ations section 53.4945-5(d).				
6a	Did the foundation, during the year, receive any	funds, directly or indirectly, to pay j	oremiums		_	· 46647
	on a personal benefit contract?			Y	'es 🗶 No	404
b	Did the foundation, during the year, pay premiun	ns, directly or indirectly, on a perso	nal benefit contract	? —	_	6b X
-	If "Yes" to 6b, file Form 8870					5 3 4 5 4 5 5
7a	At any time during the tax year, was the foundati	ion a party to a prohibited tax shelt	er transaction?	П	'es 🗓 No	? 1" 1"
	If yes, did the foundation receive any proceeds of		• •		N/A	7b
	art VIII Information About Officers				aid Employe	9s.
•	and Contractors	,		J,,		•
1	List all officers, directors, trustees, foundation	managers and their compensati	on (see page 22 of	f the Instructions).	
•	Elot an onicoro, anatoro, nacione, no en elot				(d) Contributions to	I
	for Normal addresses		(b) Title, and average hours per week	(c) Compensation (if not paid, enter	employee benefit	(e) Expense account,
	(a) Name and address	•	devoted to position	-0-)	plans and deferred compensation	other allowances
					our parameter	
	ANE ARMSTRONG		PRESIDENT			
		FRIDAY HARBOR	0.00			
	. O. BOX 2233	WA 98250	0.00	0	0	0
	O. BOX 2233 ACQUELYN ARMSTRONG	WA 98250 FRIDAY HARBOR	SECRETARY	0	0	0
- 2	. O. BOX 2233	WA 98250		0	0	0
	O. BOX 2233 ACQUELYN ARMSTRONG	WA 98250 FRIDAY HARBOR	SECRETARY	0	0	0
	O. BOX 2233 ACQUELYN ARMSTRONG	WA 98250 FRIDAY HARBOR	SECRETARY	0	0	0
	O. BOX 2233 ACQUELYN ARMSTRONG	WA 98250 FRIDAY HARBOR	SECRETARY	0	0	0
	O. BOX 2233 ACQUELYN ARMSTRONG O. BOX 2233	WA 98250 FRIDAY HARBOR WA 98250	SECRETARY 0.00	0		0
2	O. BOX 2233 ACQUELYN ARMSTRONG O. BOX 2233 Compensation of five highest-paid employee	WA 98250 FRIDAY HARBOR WA 98250	SECRETARY 0.00	0 0 23 of the instructi		0
	O. BOX 2233 ACQUELYN ARMSTRONG O. BOX 2233	WA 98250 FRIDAY HARBOR WA 98250	SECRETARY 0.00	0 0 23 of the instructi	ons).	0
	O. BOX 2233 ACQUELYN ARMSTRONG O. BOX 2233 Compensation of five highest-paid employed If none, enter "NONE."	WA 98250 FRIDAY HARBOR WA 98250 es (other than those included on	SECRETARY 0.00 line 1—see page 2 (b) Title, and average			
	O. BOX 2233 ACQUELYN ARMSTRONG O. BOX 2233 Compensation of five highest-paid employee	WA 98250 FRIDAY HARBOR WA 98250 es (other than those included on	SECRETARY 0.00 line 1—see page 2 (b) Tite, and average hours per week	0 0 23 of the instructi	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other allowances
2	O. BOX 2233 ACQUELYN ARMSTRONG O. BOX 2233 Compensation of five highest-paid employee If none, enter "NONE."	WA 98250 FRIDAY HARBOR WA 98250 es (other than those included on	SECRETARY 0.00 line 1—see page 2 (b) Title, and average		ons). (d) Contributions to employee benefit	(e) Expense account,
2	O. BOX 2233 ACQUELYN ARMSTRONG O. BOX 2233 Compensation of five highest-paid employed If none, enter "NONE."	WA 98250 FRIDAY HARBOR WA 98250 es (other than those included on	SECRETARY 0.00 line 1—see page 2 (b) Tite, and average hours per week		(d) Contributions to employee benefit plans and deferred	(e) Expense account,
2	O. BOX 2233 ACQUELYN ARMSTRONG O. BOX 2233 Compensation of five highest-paid employee If none, enter "NONE."	WA 98250 FRIDAY HARBOR WA 98250 es (other than those included on	SECRETARY 0.00 line 1—see page 2 (b) Tite, and average hours per week		(d) Contributions to employee benefit plans and deferred	(e) Expense account,
2	O. BOX 2233 ACQUELYN ARMSTRONG O. BOX 2233 Compensation of five highest-paid employee If none, enter "NONE."	WA 98250 FRIDAY HARBOR WA 98250 es (other than those included on	SECRETARY 0.00 line 1—see page 2 (b) Tite, and average hours per week		(d) Contributions to employee benefit plans and deferred	(e) Expense account,
2	O. BOX 2233 ACQUELYN ARMSTRONG O. BOX 2233 Compensation of five highest-paid employee If none, enter "NONE."	WA 98250 FRIDAY HARBOR WA 98250 es (other than those included on	SECRETARY 0.00 line 1—see page 2 (b) Tite, and average hours per week		(d) Contributions to employee benefit plans and deferred	(e) Expense account,
2	O. BOX 2233 ACQUELYN ARMSTRONG O. BOX 2233 Compensation of five highest-paid employee If none, enter "NONE."	WA 98250 FRIDAY HARBOR WA 98250 es (other than those included on	SECRETARY 0.00 line 1—see page 2 (b) Tite, and average hours per week		(d) Contributions to employee benefit plans and deferred	(e) Expense account,
2	O. BOX 2233 ACQUELYN ARMSTRONG O. BOX 2233 Compensation of five highest-paid employee If none, enter "NONE."	WA 98250 FRIDAY HARBOR WA 98250 es (other than those included on	SECRETARY 0.00 line 1—see page 2 (b) Tite, and average hours per week		(d) Contributions to employee benefit plans and deferred	(e) Expense account,
2	O. BOX 2233 ACQUELYN ARMSTRONG O. BOX 2233 Compensation of five highest-paid employee If none, enter "NONE."	WA 98250 FRIDAY HARBOR WA 98250 es (other than those included on	SECRETARY 0.00 line 1—see page 2 (b) Tite, and average hours per week		(d) Contributions to employee benefit plans and deferred	(e) Expense account,
2	O. BOX 2233 ACQUELYN ARMSTRONG O. BOX 2233 Compensation of five highest-paid employee If none, enter "NONE."	WA 98250 FRIDAY HARBOR WA 98250 es (other than those included on	SECRETARY 0.00 line 1—see page 2 (b) Tite, and average hours per week		(d) Contributions to employee benefit plans and deferred	(e) Expense account,
2	O. BOX 2233 ACQUELYN ARMSTRONG O. BOX 2233 Compensation of five highest-paid employee If none, enter "NONE."	WA 98250 FRIDAY HARBOR WA 98250 es (other than those included on	SECRETARY 0.00 line 1—see page 2 (b) Tite, and average hours per week		(d) Contributions to employee benefit plans and deferred	(e) Expense account,

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

Form!	990-PF (2009) ARMSTRONG FOUNDATION	26-3920368	Page 7
Par	t VIII Information About Officers, Directors, Trustees, Foundation	n Managers, Highly Paid Empl	oyees,
3	and Contractors (continued) Five highest-paid independent contractors for professional services (see page 23 of the	ne instructions). If none, enter "NONE."	
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NO		(4, 4, 4, 4, 4, 4, 4, 4, 4, 4, 4, 4, 4, 4	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
110	•		
			
Total	number of others receiving over \$50,000 for professional services		<u> </u>
		· · · · · · · · · · · · · · · · · · ·	
, Pai	t IX-A Summary of Direct Charitable Activities		
	ne foundation's four largest direct chantable activities during the tax year. Include relevant statistical inform sizations and other beneficianes served, conferences convened, research papers produced, etc.	ation such as the number of	Expenses
	MANTE COANING TOD ANY CHADIMANTE COTTANTET	C OB	
	TO MAKE GRANTS FOR ANY CHARITABLE, SCIENTIFI		
	EDUCATIONAL PURPOSE IN ORDER TO BENEFIT MANK	IŅD.	
2		·	
_			
3			
4			
Pai	t IX-B Summary of Program-Related Investments (see page 24 of	of the instructions)	<u> </u>
	ribe the two largest program-related investments made by the foundation during the tax year on lines 1 and		Amount
	N/A		
		• • • • • • • • • • • • • • • • • • • •	
2			
All of	her program-related investments. See page 24 of the instructions		
3			
Total	Add lines 1 through 3		
· vai.	ruu moo i unough o		

Form 99	O-PF (2009) ARMSTRONG FOUNDATION 26-3920368	Page 8
Part		n foundations,
1 F	air market value of assets not used (or held for use) directly in carrying out charitable, etc.	
p	urposes.	
a A	verage monthly fair market value of securities	1a 0
b A	verage of monthly cash balances	1b 0
c F	air market value of all other assets (see page 24 of the instructions)	1c 0
d T	otal (add lines 1a, b, and c)	1d 0
e R	eduction claimed for blockage or other factors reported on lines 1a and	3-1
10	c (attach detailed explanation)	<i>*</i> .
2 A	equisition indebtedness applicable to line 1 assets	2 0
3 S	ubtract line 2 from line 1d	3 0
4 C	ash deemed held for charitable activities. Enter 1½ % of line 3 (for greater amount, see page 25 of	
th	e instructions)	4 0
5 N	et value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5 0
6 N	inimum investment return. Enter 5% of line 5	б О
Part	Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) private operations	ating
	foundations and certain foreign organizations check here	
1 N	Inimum investment return from Part X, line 6	1
2a T	ax on investment income for 2009 from Part VI, line 5	250 4 250
b ir	come tax for 2009. (This does not include the tax from Part VI.)	<i>3</i>
c A	dd lines 2a and 2b	2c
3 D	sstributable amount before adjustments. Subtract line 2c from line 1	3
4 R	ecoveries of amounts treated as qualifying distributions	4
5 A	dd lines 3 and 4	5
6 D	eduction from distributable amount (see page 25 of the instructions)	6
	istributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,	
lsi	ne 1	7 0
Pharma	Viii Ouglif in Distributions (see norse 25 of the instructions)	
Part	Qualifying Distributions (see page 25 of the instructions)	
1 A	mounts paid (including administrative expenses) to accomplish chantable, etc., purposes	
a E	xpenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a 0
b P	rogram-related investments—total from Part IX-B	1b
2 A	mounts paid to acquire assets used (or held for use) directly in carrying out chantable, etc.,	İ
р	urposes	2
3 A	mounts set aside for specific chantable projects that satisfy the.	· ,
a S	uitability test (pnor IRS approval required)	3a
b C	ash distribution test (attach the required schedule)	3b
	ualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4 0
	oundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.	
	nter 1% of Part I, line 27b (see page 26 of the instructions)	5 0
	djusted qualifying distributions. Subtract line 5 from line 4	6
	ote. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation	

qualifies for the section 4940(e) reduction of tax in those years.

Fe	Ondistributed income (see page 20 or		T		
		(a)	(b)	(c) 2008	(d)
1	Distributable amount for 2009 from Part XI,	Corpus	Years prior to 2008		2009
	line 7	<u> </u>			,,, ,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
2	Undistributed income, if any, as of the end of 2009:		146 3 (1957).	Jan 2007	1
а	Enter amount for 2008 only		100 100 m		31/155 541
b	Total for pnor years: 20 , 20 , 20	4.33 B			
3	Excess distributions carryover, if any, to 2009		*/ // // // /	2.71	. 2. 252 3
	From 2004	1, 19 (19) (4)	1697 - C 1990 - 1		
- L	From 2005	(35) April 20			
		55 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	1886 (M. 1938)		
C	From 2006		Day 638. 7		
d	From 2007		138. Set7		
0	From 2008	\$1.58 A\$\$() \$2	### 6 8 8 8 8 8 8 8 K K K	Brancia (Bolinia)	1130 2667 12
f	Total of lines 3a through e		(1/4 s. 1/3/48 \$ 6 s 4)	3 ,54 (11 5)532, 112	(* 3.2 × 2 × 1 × 2 × 2 × 2 × 2 × 2 × 2 × 2 ×
4	Qualifying distributions for 2009 from Part XII,	19 x 1 / 38 20 1	1993 Begin 1	12 07 S4C	1.3734
	line 4· ▶ \$				**************************************
а	Applied to 2008, but not more than line 2a		1 √3 - ₩~4	```	18 1 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	Applied to undistributed income of prior years	333		CO. 1 388 42	4 5835 7
D	• •				\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
	(Election required—see page 26 of the instructions)	<u> </u>	SOM 1/28/2017 1	220 St. 1 32 32	- 1000 (1000 -
С	Treated as distributions out of corpus (Election		122 Mag :	46 1 1984	
	required—see page 26 of the instructions)		1 85 0000	1974 18 1 1985 DE	17. 1884
đ	Applied to 2009 distributable amount		33 4232	100 B 300 B	.,
9	Remaining amount distributed out of corpus		G84 777 KV		22834 ()
5	Excess distributions carryover applied to 2009		6) (335.5)	28 24. 24 h 3	
	(If an amount appears in column (d), the same	· ((,()(,	U. 1 21 39 3	30 32 026.5	C 40, 553
	amount must be shown in column (a).)				1 1 3 1 5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
6	Enter the net total of each column as	8 (B) 19 (17 / George		
•		S 1 1 1 1 1			23.753
	indicated below:	1 4 14 7			
а	Corpus Add lines 3f, 4c, and 4e. Subtract line 5		<u> </u>		
b	Prior years' undistributed income. Subtract			* 300 3888	
	line 4b from line 2b			M. M. MAN	14,-1 3,50, 3
C	Enter the amount of prior years' undistributed			35 3 356 36	San Carlo
	income for which a notice of deficiency has	1 ':	İ	le Alisa - de la Alisa	16 G3
	been issued, or on which the section 4942(a)	li Yê (dê ji			
	tax has been previously assessed	15 See 10		1.44 (G) (A) (M)	1. 838 32
	Subtract line 6c from line 6b, Taxable	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		i i i i i i i i i i i i i i i i i i i	225 S 2 E 2
u					657 - 357
	amount—see page 27 of the instructions	\	7 7	1	3 3 3325
0	Undistributed income for 2008. Subtract line			1	
	4a from line 2a. Taxable amount—see page	Maria Marie			
	27 of the instructions	3 3 min 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	(200, 200 m) 200 (2)		33, 55,80
f	Undistributed income for 2009, Subtract lines	B. 3 125 6 17 6	₹ ~ 28 49 ° 5,		
	4d and 5 from line 1. This amount must be		િ સ્ક્રી ફેંક છે		
	distributed in 2010	239 Boldwy	K. 28 J. (2)	1.68824 8	
7	Amounts treated as distributions out of corpus		, 12 00	7 () 3	د په
	to satisfy requirements imposed by section	ĺ			3330 (1574
	170(b)(1)(F) or 4942(g)(3) (see page 27 of the				
				111.6623.77	1.35
	instructions)			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	332.
8	Excess distributions carryover from 2004 not				
	applied on line 5 or line 7 (see page 27 of the		1 95 S S	[8800 WW77]	
	instructions)		1 3 4 56	355 5 5 555	23323
9	Excess distributions carryover to 2010.		K. S.	Big 1 South	
	Subtract lines 7 and 8 from line 6a		N. 1877		
10	Analysis of line 9	, ts	1 3 3 3 3 3 3 3 3	कुर्य ६ ६६	S 33 53
	Excess from 2005		1	ાય છે જેવા (
a	•			36 12	k (k) (;
b	Excess from 2006	.	tak `vy		
C	Excess from 2007	1 2 2 2 2 2 2	10 55		5 5 50 7
d	Excess from 2008		1188 ここうと		, ,
е	Excess from 2009 .	Strategie	<u> </u>	(0 2 (0)	`

	Fivale Operating Fou					/// / \que		<u> </u>
1a	If the foundation has received a ruling or d			ig		ł		10/17/00
	foundation, and the ruling is effective for 2009, enter the date of the ruling Check box to indicate whether the foundation is a private operating foundation described in section 49							12/17/08
b	Check box to indicate whether the foundat		ing foundation describe	ed in section	49	942(j)(3) or	$\perp \perp$	4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years				(e) Total
	income from Part I or the minimum	(a) 2009	(b) 2008	(c) 2007		(d) 20	<u> </u>	(1,
	investment return from Part X for							
	each year listed					Ĺ		
b	85% of line 2a							
c	Qualifying distributions from Part XII,					j		1
	line 4 for each year listed							
ď	Amounts included in line 2c not used directly						_	
	for active conduct of exempt activities					ł		
0	Qualifying distributions made directly							
	for active conduct of exempt activities.							
	Subtract line 2d from line 2c			<u> </u>		[
3	Complete 3a, b, or c for the							
	alternative test relied upon:]		}		
а	"Assets" alternative test—enter:							
	(1) Value of all assets							
	(2) Value of assets qualifying under	 						
	section 4942(j)(3)(B)(i)			.l				
ь	"Endowment" alternative test-enter 2/3							
	of minimum investment return shown in					[1
	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					ł		
	securities loans (section 512(a)(5)), or royalties)							
	(2) Support from general public							**
	and 5 or more exempt							
	organizations as provided in		•			1		
	section 4942(j)(3)(B)(III)							
	(3) Largest amount of support from							
	an exempt organization .			ļ		<u> </u>		
	(4) Gross investment income					L	_	
P	srt XV Supplementary Inform	•	•		ha	d \$5,000 o	r mo	ore in assets at
	any time during the ye		of the instruction	ns.)				
1	Information Regarding Foundation Man List any managers of the foundation who h	-	than 20/ of the total or	atabutions reserved	.	ho foundation		
а	before the close of any tax year (but only if				•	ine loundation		
	N/A	uley have contributed	i more man 40,000). (See Section 507 (u)(2	-))			
	List any managers of the foundation who o	own 10% or more of th	e stock of a comporation	n (or an equally lam	e no	rtion of the		
~	ownership of a partnership or other entity)		•		po	41 410		
	N/A	o	a re to or greate					
2	Information Regarding Contribution, G	rant, Gift, Loan. Scho	plarship, etc., Program	ns:				· ··································
			o preselected charitable		doe	s not accept		
	unsolicited requests for funds. If the found		·	-		-		
_	organizations under other conditions, com		· · ·					
а	The name, address, and telephone number			be addressed.				
	N/A	•						
b	The form in which applications should be s	submitted and informat	tion and materials they	should include:				
	N/A			···				
_ C	Any submission deadlines:							
d	Any restrictions or limitations on awards, s	uch as by geographic	al areas, chantable fiel	ds, kinds of institution	ns, e	or other factor	s.	
	N/A							

3 Grants and Contributions Paid During the	Year or Approved for Fu	ture Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year N/A				
Total			▶ 3a	
b Approved for future payment N/A				
Total .		·	. > 3b	

	Enter gross amounts unless otherwise indicated.			i business income	Excluder	1 by section 512, 513, or 514	(e)	
			(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See page 28 of the instructions)	
1	•	vice revenue:					are madecoons y	
	в				 			
					1			
							· · · · ·	
	f							
	g Fees an	d contracts from government agencies		•				
2		dues and assessments						
3	Interest on s	avings and temporary cash investments						
4		nd interest from securities						
5		come or (loss) from real estate:	مراك القراراة	* * * * * * * * * * * * * * * * * * * *	7 ((/ >) M	
		anced property						
		l-financed property						
6		come or (loss) from personal property						
	Other invest							
8	Gain or (loss	s) from sales of assets other than inventory						
		or (loss) from special events						
		or (loss) from sales of inventory		· · · · · · · · · · · · · · · · · · ·				
		ue a				-	,	
	-							
	е							
12		d columns (b), (d), and (e)	75 775)	0	0	
		ne 12, columns (b), (d), and (e)	<u> </u>		111111111111111111111111111111111111111	13 _	0	
		in line 13 instructions on page 28 to verify calculations	s)					
	Part XVI-B	Relationship of Activities to the Ac	complishme	ent of Exempt Pu	urposes	3		
	Line No.	Explain below how each activity for which income is	s reported in colu	ımn (e) of Part XVI-A	contribute	ed importantly to the		
	▼	accomplishment of the foundation's exempt purpos	es (other than by	y providing funds for s	such purpo	oses). (See page 29 of	the	
_		instructions)						
_	N/A							
_								
_	<u> </u>							
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		l						

		Exempt Organiza	tions								
1	Did the org	anization directly or indire	ectly engage	in any of the follow	wing with any othe	er organization de:	scnbed	-		Yes	No
	in section 5	501(c) of the Code (other	than section	501(c)(3) organiz	ations) or in section	on 527, relating to	political		- 3	86 %	***
	organizatio					_					199
а	•	rom the reporting founda	tion to a non	chantable exempt	organization of:				1/1		1 3 3
_	(1) Cash	· · · · · · · · · · · · · · · · · · ·							1a(1)	```	X
	• •	· · · ·							1a(2)		x
	(2) Other									733	7.3
Đ	Other trans								355	545	? ≀ • ∀
		of assets to a noncharital	-						1b(1)		X
		ises of assets from a nor			1				1b(2)		X
	(3) Rental	of facilities, equipment, of	or other asse	ts					1b(3)		X
	(4) Reimb	ursement arrangements							1b(4)		X
	(5) Loans	or loan guarantees						<i>.</i>	1b(5)		X
	(6) Perfort	nance of services or me	mbership or	fundraising solicita	tions				1b(6)		X
c	Shanng of	facilities, equipment, mai	ling lists, oth	er assets, or paid	employees				1c		X
d	If the answ	er to any of the above is	"Yes," comp	lete the following s	schedule. Column	(b) should always	s show the fair marke	 ≥t			
		e goods, other assets, or		•		• •					
		y transaction or sharing	_								
	(a) Line no	(b) Amount involved		of nonchantable exer			on of transfers, transac		ло аптапое	ments	
N/	<u></u>	(5)7	(0) !!!!			(4) 5554					
	<u> </u>					 					
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		 				L	·- <u>-</u>				
							 				
		<u>.</u>									
		<u> </u>									
2a	is the foun	dation directly or indirect	y affiliated w	ith, or related to, o	ne or more tax-ex	empt organization	ıs				
	described	in section 501(c) of the C	ode (other th	nan section 501(c)	(3)) or in section 5	527?			Ye	s X	No
b	If "Yes." co	mplete the following sch	edule			•			_		
		a) Name of organization		(b) Type of	organization		(c) Description of	of relationship			
	N/A	·,			<u> </u>			·			
	41/ 44	·····									
					·	<u> </u>			•		
				<u> </u>		<u> </u>					
		ties of penjury, I declare that									
- 1	beller, it is	ue, correct, and complete, D	ecraration or gr	eparer (outer than ta			lation of which preparer	nas any known	eage		
- 1	<u> </u>	1)	11-1	1-10	PRESID	ent			
9	Signatu	re of officer or trustee		,	Date	_ .	Title				
更						Date			parer's identif		
ᆲ		Preparer's	20	10			Check if		iber (see Sig : e 30 of the ins		
Sign Here	Paid Preparer's Use Only	signature	4/9	Sur.	-0-	11/1:	self-employed		00526		
တ	1 2 2 2 1		LOVERI	DGE HUNT	& CO., C	PA'S	-, - v _i			330	
	# E 2	Firm's name (or yours if			,		10	EN E O1	1_124	767	c
		self-employed), address, and ZIP code		NE EIGHT		SUITE 4	10		L-134		
		and AIF COUCE 7	BELLE	VUE, WA	98004-44	41		Phone no. 42			
									Form 99	0-PF	(2009)