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Form 990-PF

Department of the Treasury Internal Revenue Service

Return of Private Foundation

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

Treated as a Private Foundation

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

2009

OMB No 1545-0052

For calendar year 2009, or tax year beginning , 2009, and ending							, 20
G	Check	all that apply X Initial return Initial re	turn of a former public	charity		Final return	
		Amended return Add	ress change	Name c	hange		
U	se the	IRS Name of foundation				dentification number	
	label	JIKES Foundation			26-422	6214	
Otherwise, Number and street (or P O box number if mail is not delivered to street address			ddress) Ro	om/suite	B Telephone	number (see page 10 of the in	nstructions)
	prin or typ	2398 California Avonuo					
Se	e Spec	The state of the s	- · · · · · · · · · · · · · · · · · · ·		C If exemption	on application is pending, chec	k here · • X
Ins	structio	ons. Signal Hill, CA 90755				organizations, check here	• • • • • □
H (Check	type of organization X Section 501(c)(3) exempt priv	/ate foundation		2. Foreign	organizations meeting the 859 ere and attach computation	6 test. ▶
Γ-	Sect	,	taxable private foundati	on	CHECKIN	ere and attach computation	
Ī	air ma	arket value of all assets at J Accounting method	X Cash	Accrual	E if private for	oundation status was terminate ion 507(b)(1)(A), check here	ed
	end of	year (from Part II, col. (c), Other (specify)			ļ		
	ine 16)	-	e on cash basis)		F If the found	dation is in a 60-month termina tion 507(b)(1)(B), check here	ation
_	art I	Analysis of Revenue and Expenses (The total of	,		under see	uon sor (b)(1)(b), ancar nere	(D. Diebumamente
	4161	amounts in columns (b) (c), and (d) may not necessarily equal	(a) Revenue and expenses per	(b) Net	nvestment	(c) Adjusted net	(d) Disbursements for chantable
		the amounts in column (a) (see page 11 of the instructions))	books	ın	come	income	purposes (cash basis only)
_	1	Contributions, gifts, grants, etc., received (attach schedule)	120,000	,		 	((((((((((((((((((((
	2	Check ▶ if the foundation is not_ required to attach Sch_B · ·				 	
	3	Interest on savings and temporary cash investments · · · ·				 	-
	4	Dividends and interest from securities				 	
	5a	Gross rents · · · · · · · · · · · · · · · · · · ·				 	
	b	Net rental income or (loss)					
R	6a	Net gain or (loss) from sale of assets not on line 10 · · · · ·					
e v					····		
е	, b	Gross sales price for all assets on line 6a				 	
n u	7	Capital gain net income (from Part IV, line 2)	·				
e	8	Net short-term capital gain				 	
	9	Income modifications · · · · · · · · · · · · · · · · · · ·					
	10a	Gross sales less returns and allowances					
	Ь	Less Cost of goods sold · · · · · · ·					
	C	Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule)	7/1-1) 100/000			<u></u>	
	12	Total. Add lines 1 through 11 · · · · · · · · · · · · · · · · · ·				<u> </u>	
	13	Compensation of officers, directors, trustees, etc	(8),000			 	
Ą	14	Other employee salaries and wages	2 2010 0			ļ	
d m	15	1 1	S			ļ	
i n	16a	Legal fees (attach schedule)					
Οï	Ь	Accounting fees (attach schedule) · · · · · · · · · · · · · · · · · · ·	N, UI				
permative Expe	С	Other professional fees (attach schedule)				<u> </u>	
r	17	Interest · · · · · · · · · · · · · · · · · · ·					
⊒ji	18	Taxes (attach schedule) (see page 14 of the instructions) •					
Ni N∨	19	Depreciation (attach schedule) and depletion • • • • • • •					
ge	20	Occupancy · · · · · · · · · · · · · · · · · · ·					
≃a E	21	Travel, conferences, and meetings · · · · · · · · · · · · · · · · · · ·		<u>. — — </u>			
i ×	22	Printing and publications					
	23	Other expenses (attach schedule)					
n S E	24	Total operating and administrative expenses.					
y e		Add lines 13 through 23 · · · · · · · · · · · · · · · · · ·	8,000			d	0
	25	Contributions, gifts, grants paid	9,441	_		, ,	0
ζ	26	Total expenses and disbursements. Add lines 24 and 25	17,441		(0
<u>_</u> _	27	Subtract line 26 from line 12					
U	а	Excess of revenue over expenses and disbursements · ·	102,559				
	ь	Net investment income (if negative, enter -0-)			(
	С	Adjusted net income (if negative, enter -0-)				d	
En		v Act and Panerwork Reduction Act Notice, see hage 30 of the in				<u> </u>	orm 990-PF (2009)

D	4 11	Balance Sheets Attached schedules and amounts in the description column	beginning of year		בוום טוי	year
Pa	<u>rt II</u>	should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value		(c) Fair Market Value
	1	Cash - non-interest-bearing · · · · · · · · · · · · · · · · · · ·	_	102,5	59	102,559
	2	Savings and temporary cash investments				
	3	Accounts receivable >				
		Less allowance for doubtful accounts				
	4	Pledges receivable				
		Less allowance for doubtful accounts				
	5	Grants receivable • • • • • • • • • • • • • • • • • • •		<u></u>		· · · · · · · · · · · · · · · · · · ·
	6	Receivables due from officers, directors, trustees, and other			$\overline{}$	
		disqualified persons (attach schedule) (see page 16 of the				
A s		instructions) · · · · · · · · · · · · · · · · · · ·			i	
	7	Other notes and loans receivable (attach schedule)			-	
S e	•	Less allowance for doubtful accounts				
t	8	Inventories for sale or use · · · · · · · · · · · · · · · · · · ·			-+	
s	9	Prepaid expenses and deferred charges				
	1.1	Investments - U S and state government obligations (attach schedule)			\rightarrow	
	10a				\rightarrow	
	b	,				
	i	Investments - corporate bonds (attach schedule)			\rightarrow	
	11	Investments - land, buildings, and equipment basis		، با نا خامدیک دیکست	~-	
	١	Less accumulated depreciation (attach schedule)				
	12	Investments - mortgage loans · · · · · · · · · · · · · · · · · · ·				
	13	Investments - other (attach schedule)			\rightarrow	
	14	Land, buildings, and equipment basis				
		Less accumulated depreciation (attach schedule)			\rightarrow	
	15	Other assets (describe)		<u></u>	\rightarrow	
	16	Total assets (to be completed by all filers - see the				
		ınstructions Also, see page 1, item I) • • • • • • • • • • • • • • • • • •		102,5	59	102,559
Ļ	17	Accounts payable and accrued expenses				
a	18	Grants payable				
b	19	Deferred revenue · · · · · · · · · · · · · · · · · · ·				
į	20	Loans from officers, directors, trustees, and other disqualified persons				
t	21	Mortgages and other notes payable (attach schedule) · · · · · ·				
i	22	Other liabilities (describe ▶)				
e S	23	Total liabilities (add lines 17 through 22) · · · · · · · · ·			0	
		Foundations that follow SFAS 117, check here		-		
		and complete lines 24 through 26 and lines 30 and 31.				•
NF	24	Unrestricted · · · · · · · · · · · · · · · · · · ·			1	
e u	25	Temporarily restricted • • • • • • • • • • • • • • • • • • •			\neg	
t n	l	Permanently restricted			\neg	
A		Foundations that do not follow SFAS 117, check here		. =	一	
s B	Ì	and complete lines 27 through 31.				
Sa	27	Capital stock, trust principal, or current funds		120,0	00	1
e i	28	Paid-in or capital surplus, or land, bldg , and equipment fund • • •			\neg	•
` a s n	1	Retained earnings, accumulated income, endowment, or other funds		(17,4	141)	
C	30	Total net assets or fund balances (see page 17 of the				
0 8	30			102,5	50	
rs		instructions) · · · · · · · · · · · · · · · · · · ·	<u>-</u>	102,3	" ⊢	
	31	Total liabilities and net assets/fund balances (see page 17	0	102 5	E0	
_	ļ	of the instructions)		102,5	29	
P	art II	Analysis of Changes in Net Assets or Fund Balance				
1		net assets or fund balances at beginning of year - Part II, column (a), line				
	end-	of-year figure reported on prior year's return) • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • • •	• • • • • • • •	1	400 000
		r amount from Part I, line 27a	• • • • • • • • • • • • • • • • • • • •	• • • • • • •	2	102,559
3	Othe				3	
4	Add	lines 1, 2, and 3 • • • • • • • • • • • • • • • • • •		• • • • • • • •	4	102,559
		eases not included in line 2 (itemize)			5	
6	Total	net assets or fund balances at end of year (line 4 minus line 5) - Part II, o	column (b), line 30 - · -		6	102,559

-#). === A	KES Foundation s and Losses for Tax on Inve	etmont Incom		26-422	6214 Page
(a) List and descr	the the kind(s) of property sold (e.g., real estate, ehouse, or common stock, 200 shs MLC Co.)	sunent incom	(b) How acquired P-Purchase D-Donation	(c) Date acquired (yr, mo, day)	(d) Date sold (yr, mo, day)
1a '					
b					
<u>c</u>			<u> </u>		
e e			_		
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or ot plus expens		(h) Gair (e) plus (f)	or (loss) minus (g)
a					
b					
С					
<u> </u>					
<u>e</u>		<u> </u>			
Complete only for assets sh	nowing gain in column (h) and owned b	y the foundation on	12/31/69	(f) Gains (Co	I (h) gain minus
(1) FMV as of 12/31/69	(i) Adjusted basis as of 12/31/69	(k) Excess over col (j)		col (k), but not le Losses (fro	
<u>a</u>					
<u>b</u>					
d					
e					
If gain, also enter in Part I, if (loss), enter -0- in Part I, I	or (loss) as defined in sections 1222(5) line 8, column (c) (see pages 13 and 1	7 of the instructions).::}	3 ant Income	
	rivate foundations subject to the section				
f section 4940(d)(2) applies, leave Vas the foundation liable for th	•	amount of any year		·	Yes No
	int in each column for each year, see p		ctions before mal	king any entries	
(a) Base penod years Calendar year (or lax year beginning	(b) Adjusted qualifying distributions	Net value of no	(c) onchantable-use asset		(d) abution ratio avided by col (c))
2008					
2007					
2006			· -		
2005			- -		
					
•	or the 5-year base period - divide the to ation has been in existence if less than	· ·	by the	2	
4 Enter the net value of nonc	haritable-use assets for 2009 from Pari	t X, line 5		4	
5 Multiply line 4 by line 3 •				5	0

Part VI instructions on page 18

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

7

orm	990-PF (2009) JIKES Foundation 26-	4226	214	P	age 4
	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of the i	nstruct	ions)		
	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 ▶ and enter 1% 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-)				
3	Add lines 1 and 2				
1	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) • 4				- 1
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-				- 1
6	Credits/Payments	1			
а	2009 estimated tax payments and 2008 overpayment credited to 2009 • • 6a				
þ	Exempt foreign organizations - tax withheld at source 6b				
С	Tax paid with application for extension of time to file (Form 8868) · · · · · 6c				
d	Backup withholding erroneously withheld 6d 6d				
7	Total credits and payments Add lines 6a through 6d				
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	\rightarrow			
)	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid				
1	Enter the amount of line 10 to be Credited to 2010 estimated tax	1			
Pa	rt VII-A Statements Regarding Activities		т—	T.,	
la	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		<u> </u>	Yes	No
	participate or intervene in any political campaign?		1a	<u> </u>	X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19		١	1	١
	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				
C	Did the foundation file Form 1120-POL for this year?		1c	-	X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year				
	(1) On the foundation \$\\$ (2) On foundation managers \$\\$			-	
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed				
_	on foundation managers \$		2	~	·
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	• • •	-	1	<u> X</u>
_	If "Yes," attach a detailed description of the activities			٤	
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of		3	• • •	·
4	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		4a	 	X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4b		^
b	If "Yes," has it filed a tax return on Form 990-T for this year?		5		X
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		-	1	_^ <u>^</u>
e	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			ļ	
6	•				, -
	 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? · · · · · · · · · · · · · · · · · · ·		6	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	
7 8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the		<u> </u>	,	
8a					
L	Instructions) CA If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			1	
b	(or designate) of each state as required by General Instruction G? If "No," attach explanation		8b	X	
				· **	\vdash
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			1	1

10

Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their

Form	990-PF (2009) JIKES Foundation 26-4226	5214	P	age 5			
Pa	rt 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 page 20 of the instructions)	11		_X_			
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before						
	August 17, 2008? * · · · · · · · · · · · · · · · · · ·	12		_X_			
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 ▶ Sellinger Telephone no ▶ 888-		465				
	Located at ▶ 2398 California Avenue Signal Hill, CA ZIP+4 ▶ 90	755					
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						
Pa	rt 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? · · · · · · Yes X No						
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a						
	disqualified person? · · · · · · · · · · · · · · · · · · ·			1			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? \cdots Yes X No			i			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? · · · · · Yes X No		1				
	(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		Ì				
	(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)? • • • • • • • • • • • • • • • • • • •	- 1b		'			
	Organizations relying on a current notice regarding disaster assistance check here						
_	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that	۶					
С	were not corrected before the first day of the tax year beginning in 2009? • • • • • • • • • • • • • • • • • • •	1c		X			
,	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	"		A			
2	operating foundation defined in section 4942(j)(3) or 4942(j)(5))	ŀ		;			
_	• • • • • • • • • • • • • • • • • • • •						
а	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 ,		ľ	`			
D	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	2b		·			
	all years listed, answer "No" and attach statement - see page 20 of the instructions) · · · · · · · · · · · · · · · · · ·	20	├	X			
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here						
		-		٠.			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise						
	at any time during the year?	İ					
b	If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or		ł				
	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		ļ <u>.</u>	<u> </u>			
	foundation had excess business holdings in 2009) · · · · · · · · · · · · · · · · · ·	3b	 	<u> </u>			
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? • • • •	4a	1	X			
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its						
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2009?	4b		X			

'Form	990-PF (2009) JIKES Foundation						26-4226	214	Page 6
Pa	t VII-B Statements Regarding Activitie	s for	Which Forr	n 4720	May Be	Require	d (continued)		
5a	During the year did the foundation pay or incur any a								
	(1) Carry on propaganda, or otherwise attempt to inf	luence le	egislation (sect	ion 4945	5(e))? · ·	• • • [Yes X No		
	(2) Influence the outcome of any specific public elec	tion (see	section 4955)	, or to ca	arry on,		_		
	directly or indirectly, any voter registration drive?				• • • • •	• • • [Yes X No		
	(3) Provide a grant to an individual for travel, study,	or other:	sımılar purpose	es? • •	• • • • •	• • • [_	Yes X No		
	(4) Provide a grant to an organization other than a cl	haritable	, etc , organiza	tion des	cribed in				
	section 509(a)(1), (2), or (3), or section 4940(d)(2	2)? (see	page 22 of the	instructi	ions) • • •	• • • [Yes X No	1 1	
	(5) Provide for any purpose other than religious, cha	ritable, s	cientific, litera	y, or ed	ucational				
	purposes, or for the prevention of cruelty to child	ren or ar	ıımals? • •		• • • • • •	• • • [Yes X No		
þ	If any answer is "Yes" to 5a(1)-(5), did any of the tran	sactions	fail to qualify i	inder the	e exceptions	described	ın		
	Regulations section 53 4945 or in a current notice reg							5b	
	Organizations relying on a current notice regarding d	ısaster a	ssistance ched	k here	• • • • • •	• • • • •	• • ▶ 📋		
С	If the answer is "Yes" to question 5a(4), does the four	ndation (claim exemptio	n from ti	he tax			1 1	
	because it maintained expenditure responsibility for t	he grant	?	• • • •	• • • • •	• • • [Yes No		
	If "Yes," attach the statement required by Regulations	s section	53 4945-5(d)						
6a	Did the foundation, during the year, receive any fund		•						
	on a personal benefit contract? • • • • • • • • • • • • • • • • • • •	• • • •	• • • • • •	• • • •	• • • • • •	• • • [Yes X No		
b	Did the foundation, during the year, pay premiums, d	rectly or	indirectly, on a	person	al benefit co	ntract?	• • • • • • • •	6b	X
	If "Yes" to 6b, file Form 8870					_	. —		
7a	At any time during the tax year, was the foundation a	party to	a prohibited ta	x shelte	r transaction	? .	Yes X No		
b_	If yes, did the foundation receive any proceeds or har	ve any n	et income attri	outable t	to the transa	ction? •	• • • • • • • • •	7b	
Pa	rt VIII Information About Officers, Dire	ectors,	, Trustees,	Found	dation Ma	nagers,	Highly Paid	Emplo	yees,
	and Contractors						 		
_1 L	ist all officers, directors, trustees, foundation manag	ers and	their compens			f the instru	uctions).		
	(a) Name and address		e, and average rs per week		mpensation paid, enter		ntributions to benefit plans		nse account, llowances
		devote	d to position		-0-)		d compensation	outer a	ilowances
	ve Sellinger	Presi	dent						
	3 California Avenue, CA 90755		0		0		0		0
	perly Sellinger	Vice	President	STMA					
239	3 California Avenue, CA 90755		0		8,000		0		. 0
		<u> </u>				ļ <u>.</u>			
	compensation of five highest-paid employees (other t	han thos	se included on	line 1 -	see page 23	of the inst	ructions).		
	none, enter "NONE."					· · · · · · · · · · · · · · · · · · ·			
			(b) Title, and a	verage			n) Contributions to employee benefit	(e) Eyne	nse account,
	(a) Name and address of each employee paid more than \$50,000		hours per we devoted to pos		(c) Compe		ans and deferred		llowances
			devoted to pos				compensation		
NON	3								
					<u> </u>				
					ļ		j		
					ļ				
			<u> </u>		ļ <u></u>				
			J		}				
					ļ				
					1				
Tata	number of other employees and eyes 650 000		L		L				
ıotal	number of other employees paid over \$50,000 · · ·					- · · ·	· · · · • • •		

Form 990-PF (2009) JIKES Foundation	26	5-4226214 Page
Information About Officers, Directors, Trustees and Contractors (continued)	s, Foundation Managers, Highly	Paid Employees,
3 Five highest-paid independent contractors for professional services (see p	page 23 of the instructions). If none, enter	"NONE."
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services · · ·		>
PaintixeA Summary of Direct Charitable Activities		
List the foundation's four largest direct chantable activities during the tax year. Include relevant statis organizations and other beneficianes served, conferences convened, research papers produced, etc.		Expenses
1 Journal Buddy Project with local elementary schools	3	
		4,44:
2		
3		
4		
Partix B. Summary of Program-Related Investments (se	e page 24 of the instructions)	

Pa	Minimum Investment Return (All domestic foundations must complete this part. Foreign fou	ndation	S,
	see page 24 of the instructions)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,	; ,	
	purposes .		
а	Average monthly fair market value of securities	1a	0
b	Average of monthly cash balances	1b	0
С	Fair market value of all other assets (see page 24 of the instructions)	1c	0
đ	Total (add lines 1a, b, and c)	1d	0
e	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) · · · · · · · · · · · · · · · · · · ·		
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d · · · · · · · · · · · · · · · · · ·	3	0
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see page 25 of	Π	
	the instructions)	4	_0
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4 · ·	5	0
6	Minimum investment return. Enter 5% of line 5	6	0
Pa	Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) private op	erating	
	foundations and certain foreign organizations check here and do not complete this part)		
1	Minimum investment return from Part X, line 6	1	
2a	Tax on investment income for 2009 from Part VI, line 5 · · · · · · · 2a		
b	Income tax for 2009 (This does not include the tax from Part VI) • • • • 2b].	
¢	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions • • • • • • • • • • • • • • • • • • •	4	
5	Add lines 3 and 4 · · · · · · · · · · · · · · · · · ·	5	
6	Deduction from distributable amount (see page 25 of the instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1 · · · · · · · · · · · · · · · · · ·	7	0
=			
<u>Ra</u>	Qualifying Distributions (see page 25 of the instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26 · · · · · · · · · · · · · · · · · ·	1a	0
b	Program-related investments - total from Part IX-B	1b	
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		
a	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	
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 (see page 26 of the instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether to	he four	ndation

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

26-4226214

1	Distributable amount for 2009 from Part XI,	(a) Corpus	(b) Years pnor to 2008	(c) 2008	(d) 2009
_	line 7				0
2	Undistributed income, if any, as of the end of 2009				į
a	Enter amount for 2008 only · · · · · · · ·				
ь	Total for prior years				
3	Excess distributions carryover, if any, to 2009				
a	From 2004 • • • • • • •				,
b	From 2005 • • • • • • • •				'
С	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 > \$			** * *	
а	Applied to 2008, but not more than line 2a				
þ	Applied to undistributed income of prior years				
	(Election required - see page 26 of the instructions)				
C	Treated as distributions out of corpus (Election				
_	required - see page 26 of the instructions) · · ·		_		
d	Applied to 2009 distributable amount				
е _	Remaining amount distributed out of corpus				
5	Excess distributions carryover applied to 2009 •				
	(If an amount appears in column (d), the same				
_	amount must be shown in column (a))				
6	Enter the net total of each column as				
	Indicated below:				
a	Corpus Add lines 3f, 4c, and 4e Subtract line 5 -				•
b	· · · · · · · · · · · · · · · · · · ·				:
	line 4b from line 2b · · · · · · · · · · · · · · · · · ·				
С	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)				
	tax has been previously assessed · · · · · ·				
d	Subtract line 6c from line 6b Taxable				
	amount - see page 27 of the instructions · · · ·				
е	Undistributed income for 2008 Subtract line				
	4a from line 2a Taxable amount - see page				
	27 of the instructions · · · · · · · · · · · · · · · · · · ·				
f	Undistributed income for 2009 Subtract lines				
	4d and 5 from line 1. This amount must be]
_	distributed in 2010 · · · · · · · · · · · · · · · · · ·				ļ
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (see page 27 of the				
	instructions) · · · · · · · · · · · · · · · · · · ·				
8	Excess distributions carryover from 2004 not				
	applied on line 5 or line 7 (see page 27 of the				
	instructions) · · · · · · · · · · · · · · · · · · ·				
9	Excess distributions carryover to 2010.				
	Subtract lines 7 and 8 from line 6a · · · · · ·			<u></u>	
0	Analysis of line 9				
а	Excess from 2005 · · · ·				
b	Excess from 2006 · · · · ·				
c	Excess from 2007 · · · · ·				
d	Excess from 2008 · · · · ·				
е	Excess from 2009 · · · ·				

•	
Form 990-PF	(2009)
F Ville	D :

JIKES	Foundation	r

26-4226214

Page 10

<u>Părt</u>	XIX. Private Operating Foun				on 9)	
1a	If the foundation has received a ruling o	r determination letter	that it is a private ope	rating		
	foundation, and the ruling is effective for	r 2009, enter the date	of the ruling · · ·		•	
b	Check box to indicate whether the found	dation is a private ope	rating foundation des	cribed in section	4942(j)(3) or 4	942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years	<u> </u>	
	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	_ (u) 2000	(0) 2000	(4) 2001	(4) 2000	
b	85% of line 2a			 	 	
	 			 	 	
С	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					
е	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					
а	"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				1	
	organizations as provided in section 4942(j)(3)(B)(iii) · · · ·					
	section 4942()(3)(B)(III) • • • •					
	(3) Largest amount of support from					
	an exempt organization • • • • (4) Gross investment income • • •					
					1 65 000	
Part.		•	•		a \$5,000 or more I	n assets at
	any time during the year		<u>of the instruction</u>	ıs.)		
1	Information Regarding Foundation Mar	-				
а	List any managers of the foundation who					
	before the close of any tax year (but onl	y ii they have contribu	itea more than \$5,000) (See section 507(a)(2))	
	List any managers of the foundation who	o own 10% or more of	f the stock of a corpor	ration (or an equally lare	ge portion of the	_
_	ownership of a partnership or other entit				,	
			ū			
2	Information Regarding Contribution, G	rant Gift Loan Saba	larehin etc. Program	ne.		
4	- <u>-</u> -					
	Check here ▶ X if the foundation only	makes contributions	to preselected charita	able organizations and	does not accept	
	unsolicited requests for funds If the fou		-	28 of the instructions) t	o individuals or	
	organizations under other conditions, co					
а	The name, address, and telephone num	ber of the person to v	vhom applications sho	ould be addressed		
b	The form in which applications should b	e submitted and infor	mation and materials	they should include		
	• •					
	Any submission deadlines					
С	Ally submission deadines					
	A	ough on his access	neel erope shartelle	Sielde kinde of metalis	ana ar aibar	
đ	Any restrictions or limitations on awards factors	, such as by geograpi	ncar areas, charitable	neids, kinds of instituti	ons, or other	
	140,019					

Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to any foundation manager Foundation Recipient Purpose of grant or status of contribution Amount recipient Name and address (home or business) or substantial contributor a Paid during the year Human Options Charitable Use General Operating Orange County CA None 501 (c) 3 5,000 5,000 Total 3a b Approved for future payment 3b Total

Enter gross amounts unless otherwise indicated		business income(b)	Excluded by sec	tion 512, 513, or 514	(e) Related or exempt function income		
1 Program service revenue	Business code	Amount	Exclusion code	Amount	(See page 28 of the instructions)		
a b							
С .							
d	-		 - 				
0			1				
f	-		+		 		
g Fees and contracts from government agencies · ·			+		 		
2 Membership dues and assessments · · · · · · ·			- -				
3 Interest on savings and temporary cash investments	<u> </u>				- 		
4 Dividends and interest from securities · · · · · · ·							
5 Net rental income or (loss) from real estate	1		 - 				
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 than inventory			+				
•			+	 	 		
9 Net income or (loss) from special events							
10 Gross profit or (loss) from sales of inventory			 				
11 Other revenue a	- }				ļ		
b							
c			1				
d	-				 		
0					ļ		
12 Subtotal Add columns (b), (d), and (e) · · · · ·	L				<u> </u>		
(2), (2), (2)			• • • • • • • • •	13			
(See worksheet in line 13 instructions on page 28 to verify of					 		
Part XVI-B Relationship of Activities to the							
Line No. Explain below how each activity for which i							
accomplishment of the foundation's exemp	t purposes (other	er than by providir	ng funds for such	purposes) (See pag	je 29 of the		
instructions)							
							
							
			-	_			
		·					
					 		
							
							
			·				
							

Pa	in XV		tion Reg Organiz		ransfers To and	Transa	ctions an	d Relation	nships W	ith Noncl	harita	able	<u> </u>
1	Did t				age in any of the follo	owing with	any other or	ganization de	escribed		A A	Yes	No
in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political						77.13							
	orga	nizations?									1 1		57
а	Tran	sfers from the re	porting fou	ndation to a	noncharitable exemp	t organiza	tion of				1 1 2		
					· • • • • • • • • • •						1a(1)		X
		Other assets •									1a(2)		X
b	Othe	er transactions									 	-	2.2
_			o a noncha	ritable exemi	pt organization • •						1b(1)		X
					e exempt organizatio						1b(2)		X
					ssets • • • • • •						1b(3)		
								• • • • •				 -	X
			-		• • • • • • • • • • • • • • • • • • • •				• • • • • •	• • • • •	1b(4)		X
									• • • • • •		1b(5)		X
					or fundraising solicita					• • • • •	1b(6)		X
С		-		_	, other assets, or paid						1c	L	X
d		-			emplete the following			-					
	value	e of the goods, o	ther assets	s, or services	given by the reporting	g foundati	on If the fou	ndation recei	ved less tha	n fair marke	t		
	value	e in any transact	ion or shari	ing arrangem	nent, show in column	(d) the val	lue of the god	ods, other ass	sets, or servi	ces receive	d		
(a) i	ine no	(b) Amount involve	ed	(c) Name of no	nchantable exempt organiz	ation	(d) Des	cription of transf	ers, transactions	s, and shanng a	arrangen	nents	
	İ												
			_		· · · · · · · · · · · · · · · · · · ·								
			_		·····								
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	Î								*****				
	-												
2a	Is the	e foundation dire	ctly or indir	rectly affiliate	ed with, or related to,	one or mo	re tax-exemp	t organizatio	ns				-
			•	,	er than section 501(c		•	•			Ye	s X	No
h		es," complete the			01 (11411 0001011 00 1(0	,(0,, 0	000					(2)	<u></u>
	11 16	··		Scriedule	T								
		(a) Name of or	rganization		(b) Type of	organization	<u> </u>		(c) Descript	on of relations	hip		
					<u> </u>								
					 								
				<u></u>									
_		_ (/	フノ						_				
	Under	penalties of perjury	declare that	have examined	this return, including accor	mpanying sch	nedules and state	ements, and to the	ne best of my kn	owledge and			
	belief,	it is true, confect, and	complete De	eclaration of pre	arer (other than taxpayer	or fiduciary) is	s based on all inf	prmation of whic	h preparer has a	any knowledge			
S				/			-14.11	810	Presid	dent			
i			7				Date		Title	·			
9 n	▼ Sigi	nature of officer or tn	isies.	-		Date	Date		1100	Preparer's id	entifiana		-
	Paid					Date	1 1			number (see			
Н	Prepa	ır.		8	/		ا ـ ا	Check if		page 30 of th			
e r	er's	Preparer's		1) ~		-111	15/10	self-employe	ed 🕨 📙				
e	Use	signature		\mathbb{Z}/\mathbb{Z}			110						
	Only	Firm's name (Deni	A Douglas CF	s CPA			EIN ►				
		self-employed and ZIP code), address,	Hunti	ngton Beach, C	A 9264	7		Phone no	714-842	2-127	70	
_				- ()			EEA			F	orm 99	0-PF ((2009)

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury
Internal Revenue Service
Name of the organizat

Schedule of Contributors

▶ Attach to Form 990, 990-EZ, and 990-PF.

OMB No 1545-0047

2009

Name of the organization		Employer identification number
JIKES Foundation		26-4226214
Organization type (check o	ne)	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private four	ndation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundat	lion
	501(c)(3) taxable private foundation	
• •	s covered by the General Rule or a Special Rule. (7), (8), or (10) organization can check boxes for both the General Rule and a	Special Rule See
General Rule		
•	i filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or i one contributor. Complete Parts I and II	more (in money or
Special Rules		
sections 509(a)(1)	c)(3) organization filing Form 990 or Form 990-EZ that met the 33 1/3% support and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1	contribution of the greater
the year, aggregate	e)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any e contributions of more than \$1,000 for use exclusively for religious, charitable, es, or the prevention of cruelty to children or animals. Complete Parts I, II, and	, scientific, literary, or
the year, contribution aggregate to more year for an exclusive applies to this organization.	c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any ons for use exclusively for religious, charitable, etc., purposes, but these contributions that street is selected, enter here the total contributions that were rely religious, charitable, etc., purpose. Do not complete any of the parts unles inization because it received nonexclusively religious, charitable, etc., contributions.	ibutions did not received during the s the General Rule tions of \$5,000 or more
990-EZ, or 990-PF), but it n	at is not covered by the General Rule and/or the Special Rules does not file S nust answer "No" on Part IV, line 2 of its Form 990, or check the box on line H PF, to certify that it does not meet the filing requirements of Schedule B (Form	of its Form 990-EZ,

Name of organization Employer identification number JIKES Foundation 26-4226214 Parti Contributors (see instructions) (d) (a) (b) (c) No. Name, address, and ZIP + 4 Aggregate contributions Type of contribution 1 Steve Sellinger X Person **Pavroli** 120,000 2398 California Avenue Noncash (Complete Part II if there is Signal Hill, CA 90755 a noncash contribution) (d) (a) (b) (c) Aggregate contributions No. Name, address, and ZIP + 4 Type of contribution Person **Payroll** Noncash (Complete Part II if there is a noncash contribution) (c) (d) (a) (b) Aggregate contributions Type of contribution <u>No.</u> Name, address, and ZIP + 4 Person **Payroll** Noncash (Complete Part II if there is a noncash contribution) (a) (b) (c) (d) Name, address, and ZIP + 4 Aggregate contributions Type of contribution No. Person **Payroll** Noncash (Complete Part II if there is a noncash contribution) (c) (d) (a) (b) Aggregate contributions Type of contribution Name, address, and ZIP + 4 No. Person **Payroll** Noncash (Complete Part II if there is a noncash contribution) (c) (d) (a) (b) Name, address, and ZIP + 4 Aggregate contributions Type of contribution No. Person Payroll Noncash \$

(Complete Part II if there is a noncash contribution)

Federal Supporting Statements Name(s) as shown on return	2009 FEIN
•	
Kimberly Sellinger	
Explanation Journal Buddy Project Management	
Journal Buddy Project Management	

Form 8868 (Re	ev 4-2009)			Page 2			
If you are fi	ling for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this box			· • ▶ X			
Note. Only cor	nplete Part II if you have already been granted an automatic 3-month extension on a previously filed f	Form 8868					
If you are fi	ling for an Automatic 3-Month Extension, complete only Part I (on page 1)						
Partil	Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no c	opies neede	d)				
Type or		nployer identification number					
print	26-4226214						
File by the	File by the Number street and more or suite on if a P.O. box, see instructions.						
extended due date for	2398 California Avenue	, and the decomy					
filing the	g the City, town or post office state, and ZIP code. For a foreign address, see instructions						
retum See instructions	Signal Hill, CA 90755]			
	return to be filed (File a separate application for each return)						
Form 990		Form 6069					
☐ Form 990			Form 8870				
Form 990-E	Form 990-T (trust other than above) Form 5227						
STOP! Do not	complete Part II if you were not already granted an automatic 3-month extension on a previously fi	led Form 880	58.				
• The books	are in the care of Sellinger						
	No ▶888-997-9465 FAX No ▶						
	ization does not have an office or place of business in the United States, check this box			▶□			
	a Group Return, enter the organization's four digit Group Exemption Number (GEN)	If this is					
	group, check this box •• If it is for part of the group, check this box •• I and attach a						
	mes and EINs of all members the extension is for						
4 reques	t an additional 3-month extension of time until 11-15, 2010						
5 For cale							
6 If this ta	x year is for less than 12 months, check reason X Initial return Final return Change	in accountii	ng period	_			
7 State in	detail why you need the extension						
	ayer needs additional time to gather the informati	on					
	ssary for a complete and accurate return						
8a If this ap	oplication is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax,						
less any	8a	\$	0				
b If this an	oplication is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and	* - *** #:					
	ed tax payments made. Include any prior year overpayment allowed as a credit and any						
	8b	\$	0				
amount paid previously with Form 8868 c Balance Due. Subtract line 8b from line 8a Include your payment with this form, or, if required, deposit			_ <u>-</u>	<u> </u>			
	O coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions	8c	\$	0			
	Signature and Verification penury, I declare the those examined this form including accompanying schedules and statements, and to the best of my knowled and complete, and that I am authorized to trepare this form	edge and belief,					
Signature	Date 🕨						
EEA		For	m 8868 (Rev	4-2009)			