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# Form .990-PF

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

OMB No	1545-0052
20	109

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

For	cale	ndar y	<u>/ear 2009, or ta</u>	x year beginning		and ending		<u>, ·</u>	
G	Che	ck all t	hat apply.	Initial return Initi	al Return of a former p	ublic charity		Fina	al return
				Amended return	Address o	hange Nar	ne d	change	
U	se th	e					Α	Employer identification nun	nber
IR:	lab	el.   S0		CHRISMAN FOUND	ATION			27-0096038	
	erwi orınt	7   34		ROOK DRIVE	0670		В	Telephone number (see the	
0	type	).   S	WAIN DAKE	ARA, CA 93108-2	.0/0			(805) 969-507	
	Spec						С	If exemption application is	•
				V C	(-)(2)	1-1	סן	1 Foreign organizations, chec	
Н	Cr C	_	pe of organiza		(c)(3) exempt private for rust Other taxable p			2 Foreign organizations meet here and attach computation	
$\overline{}$	— L Fai		t value of all assets		ounting method X Ca		Ε	If private foundation status	
•			II, column (c), line		Other (specify)	usii Maccidai	F	under section 507(b)(1)(A) If the foundation is in a 60	
	<b>&gt;</b> \$		139,		column (d) must be or	 n cash basis )	<b>"</b>	under section 507(b)(1)(B)	
Pa	τİ	Ana	alysis of Re		(a) Revenue and	(b) Net investme	nt	(c) Adjusted net	(d) Disbursements
		Ext	penses (The	total of amounts in	expenses per books	income	m	income	for charitable
		colu saril	ımns (b), (c), a Iv equal the an	and (d) may not neces- nounts in column (a)					purposes
		(see	e the instruction	ns))					(cash basis only)
	Ī		`	grants, etc, received (att sch)	252,500.				
	ļ			undn is not req to att Sch B					
}	İ		nterest on savi cash investmen	ings and temporary				N/A	
)				est from securities	43.	4	13.		
	ļ		Gross rents						
?		_ 0	Net rental income or (loss)						
. F			Net gain/(loss) from Gross sales price for	sale of assets not on line 10					
٠ ١	/	_ a	essets on line 6a						
• [			Japital gain net inco Net short-term	ome (from Part IV, line 2).					
į	j		ncome modific	, •				-	
	•	10a g	Gross sales less eturns and						
7	- 1	a	allowances. Less Cost of						
		~ g	goods sold	(11 - 1)	-				
			Gross profit/(loss)	(att sch) attach schedule)	<del></del>			-	***
Ø	}	11 (	Jaier income (	attaci i scriedule)					
		12 Ī	Total. Add lines	s 1 through 11	252,543.	4	13.		
				icers, directors, trustees, etc	0.				
			Other employee sala	· ·					
			•	employee benefits					
	A		_egal fees (attach s	-				· · · · —	
	M		Accounting fees (att Other prof fees (atta	· ·	1,000.				
0	Ň		otner pror rees (atti nterest	autisui) SEE SI I					
O P E R	S	_	Faxes (attach schedule)(se	ee instr )					
R A	Ŕ	19 E	Depreciation (a	ttach					
Ţ	Ţ		sch) and deplet	tion					
N G	V E		Occupancy Travel confere	nces, and meetings					
А	Ε		Printing and pu				-	<del> </del>	
N D	χ̈́P			s (attach schedule)					
	E	_		EE STATEMENT 2	60.				
	S E	24 ]	Total operating	and administrative	1 060				
	5			lines 13 through 23 grants paid PART XV	1,060. 233,500.				233,500.
	_								233,300.
	_H	EU	and thes 24 ar	and disbursements.	234,560.		0.		233,500.
T		<del>-27</del> 5	Subtract-line-26	င်းgam line 12:	-				
88	М	AY a [	Excess of reve and dispulsem	nue over expenses	17,983.				
44						4	13.		
- 0=	$\overline{}$	A PC A	Adjusted net incom	if negative, enter -0-)					
BΛ		~ b.k.	SAMA dall De	andayork Reduction A	t Notice, see the instru	ictions	TEE	A0504I 02/02/10	Form 990-PF (2009)

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Page 2

Daid		Attached schedules and amounts in the description	Beginning of year	End o	f year
Part		Balance Sheets (See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			
	2	Savings and temporary cash investments .	121,572.	139,555.	139,555.
	3	Accounts receivable			
		Less allowance for doubtful accounts ►			
	4	Pledges receivable			
		Less: allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see the instructions)			
_	7	Other notes and loans receivable (attach sch)		· · · · · · · · · · · · · · · · ·	
A S E T		Less allowance for doubtful accounts ▶			
š	8	Inventories for sale or use			
E	9	Prepaid expenses and deferred charges			
Ś	10 a	a Investments — U.S. and state government obligations (attach schedule)			
	t	Investments — corporate stock (attach schedule)			
	(	: Investments — corporate bonds (attach schedule)			
	11	Investments – land, buildings, and equipment basis			
		Less accumulated depreciation (attach schedule).			
	12	Investments – mortgage loans			
	13	Investments - other (attach schedule)			
	14	Land, buildings, and equipment basis			
		Less: accumulated depreciation (attach schedule)			
		Other assets (describe)  Total assets (to be completed by all filers)			
		see instructions Also, see page 1, item I)	121,572.	139,555.	139,555.
Ļ	17	•		<del></del>	
A B	18	• •			
B	19	Deferred revenue			
Ĺ	20	Loans from officers, directors, trustees, & other disqualified persons.			-
ť	21	Mortgages and other notes payable (attach schedule)			-
ı	22	Other liabilities (describe			-
E S	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.			-
NF	24	Unrestricted			
N F E U T N	25	Temporarily restricted			
D	26	Permanently restricted		·	
A B A L A		Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.			
ĔĹ	27	Capital stock, trust principal, or current funds		_	
SN	28	Paid-in or capital surplus, or land, building, and equipment fund.			
O E	29	Retained earnings, accumulated income, endowment, or other funds	121,572.	139,555.	
O E R S	30	Total net assets or fund balances (see the instructions)	121,572.	139,555.	
	31	Total liabilities and net assets/fund balances (see the instructions)	121,572.	139,555.	
Part	Ш	Analysis of Changes in Net Assets or Fund Balanc	es		<u> </u>
1	Tota	I net assets or fund balances at beginning of year — Part II, colu of-year figure reported on prior year's return)	umn (a), line 30 (must aç	gree with	121,572.
2		r amount from Part I, line 27a		2	17,983.
3		increases not included in line 2 (itemize)		3	1,,505.
4		lines 1, 2, and 3			139,555.
5		ases not included in line 2 (itemize)		5	
		I net assets or fund balances at end of year (line 4 minus line 5)	) – Part II, column (b). I		139,555.
_			<u></u>		

(a) List and desc	ribe the kind(s) of property sold (e.g., recuse; or common stock, 200 shares Mil.	eal estate.	(b) How acquired P — Purchase D — Donation	(C) Date acquired (month, day, year)	(d) Date sold (month, day, year
1a N/A	-		D Donation	_	
b	-		<del> </del>	-	
d					
e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other b plus expense of s		(h) Gain or (e) plus (f) m	
a		<u> </u>			
b		<u> </u>			<del> </del>
C					
d		<del></del> -			
e		_			
	owing gain in column (h) and owned by	the foundation on 12/31/	69	(I) Gains (Col	umn (h)
(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of colum over column (j), if	nn (i)	gain minus column ( han -0-) or Losses (f	k), but not less
a					
b					
С					
d					_
e					
2 Capital gain net income or	(net capital loss) If gain, also	enter in Part I, line 7 er -0- in Part I, line 7			
3 Net short-term capital gain	or (loss) as defined in sections 1222(5)				
, ,			ı		
If gain, also enter in Part I,	line 8, column (c) (see the instructions)	. If (loss), enter -0-	├		
ın Part I, line 8  Part V Qualification Un	der Section 4940(e) for Reduce	d Tay on Not Invest		_	-
	vate foundations subject to the section 4			N/A	
Yes, the foundation does not o	section 4942 tax on the distributable am qualify under section 4940(e) Do not co	mplete this part	· 	Yes	No No
	nt in each column for each year, see th		ing any entries		
(a) Base period years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	(c) Net value of noncharitable-use a	assets (co	<b>(d)</b> Distribution Dlumn (b) divided	
2008			1		-
2007					
2006					
2005					
2004	-				-
			<del></del>	1	
2 Total of line 1, column (d)			2	1	
	or the 5-year base period – divide the to	stal on line 2 by 5, or by the			
number of years the founda	tion has been in existence if less than 5	years.	3		
4 Enter the net value of nonc	haritable-use assets for 2009 from Part	X, line 5	4		
5 Multiply line 4 by line 3			5		
6 Enter 1% of net investment	income (1% of Part I, line 27b)		6		
7 Add lines 5 and 6			7	-	
8 Enter qualifying distribution	s from Part XII, line 4		8		
If line 8 is equal to or great			-		

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Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see the instruc	ions)		
1 a 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 instr.)			
<b>b</b> Domestic foundations that meet the section 4940(e) requirements in Part V,			<u>1.</u>
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, column (b)			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable			
foundations only. Others enter -0-)			<u>0.</u>
3 Add lines 1 and 2			1.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			<u>0.</u>
5 Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-			1.
6 Credits/Payments			
a 2009 estimated tax pmts and 2008 overpayment credited to 2009 . 6a			
<b>b</b> Exempt foreign organizations — tax withheld at source			
c Tax paid with application for extension of time to file (Form 8868)			
d Backup withholding erroneously withheld			
7 Total credits and payments Add lines 6a through 6d			0.
8 Enter any <b>penalty</b> 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			<u>1.</u>
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.			
Part VII-A   Statements Regarding Activities			
1 a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	$\sqcup \downarrow$	Yes	No
participate or intervene in any political campaign?	1a		X
<b>b</b> Did it spend more than \$100 during the year (either directly or indirectly) for political purposes			
(see the instructions for definition) <sup>5</sup>	1 b		<u> X</u>
If the answer is 'Yes' to <b>1a</b> or <b>1b,</b> 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?	1 c		_X_
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
(1) On the foundation ►\$ 0. (2) On foundation managers ►\$ 0. e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on			
foundation managers > \$ 0.			į
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 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>b</b> If 'Yes,' has it filed a tax return on <b>Form 990-T</b> for this year?	4b	N	/A
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			
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either	1		:
Are the requirements of section society (relating to sections 4541 through 4545) satisfied either     By language in the governing instrument, or			
	1		!
<ul> <li>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?</li> </ul>	6	Χ	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV	7	X	
8a Enter the states to which the foundation reports or with which it is registered (see the instructions)	<del>- ' +</del>		
CA			
<b>b</b> If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by <i>General Instruction G? If 'No,' attach explanation</i> .	8ь	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? 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		х
	rm <b>99</b> 0	)-PF (	

orm	990-PF	(2009) SCHLINGER CHRISMAN FOUNDATION	27-00960	38	Р	age <b>5</b>
art	VII-A	Statements Regarding Activities Continued				
11	At any within t	time during the year, did the foundation, directly or indirectly, own a controlled entity the meaning of section 512(b)(13)? If 'Yes', attach schedule (see instructions)		11		Х
12	Did the August	foundation acquire a direct or indirect interest in any applicable insurance contract before 17, 2008?	ore	12		Χ_
13	Did the	foundation comply with the public inspection requirements for its annual returns and ex	xemption application?	13	X	
		e address . • N/A		_ <b></b>		
14	The bo		elephone no 🕨 🔔			
		· · ·	P + 4 ► <u>93108-2</u> 6		- <b></b>	<del></del>
15		n 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> – Chec		N/A	<b>&gt;</b>	
		ter the amount of tax-exempt interest received or accrued during the year	▶ 15			N/A
Parl		Statements Regarding Activities for Which Form 4720 May Be Requi	red			
		rm 4720 if any item is checked in the 'Yes' column, unless an exception applies.			Yes	No
1 a	-	the year did the foundation (either directly or indirectly)	□ ₪			
	<b>(1)</b> Eng	gage in the sale or exchange, or leasing of property with a disqualified person?	Yes X No			
	<b>(2)</b> Box	rrow money from, lend money to, or otherwise extend credit to (or accept it from) a				
		equalified person?	Yes X No			
		rnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes X No			
	(4) Pay	y compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes X No			
	<b>(5)</b> Tra	ansfer any income or assets to a disqualified person (or make any of either available the benefit or use of a disqualified person)?	Yes X No			
	fou	ree to pay money or property to a government official? ( <b>Exception.</b> Check 'No' if the undation agreed to make a grant to or to employ the official for a period after termination government service, if terminating within 90 days)	n Yes XNo			
t	If any a	answer is 'Yes' to 1a(1)-(6), did <b>any</b> of the acts fail to qualify under the exceptions descr ations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see the i	ribed in			/2
			instructions)	1b	111	/A
	Organi	zations relying on a current notice regarding disaster assistance check here				
C	Did the that we	e foundation engage in a prior year in any of the acts described in 1a, other than except ere not corrected before the first day of the tax year beginning in 2009?	ed acts,	1c		Х
2	Taxes private	on failure to distribute income (section 4942) (does not apply for years the foundation we operating foundation defined in section 4942(j)(3) or 4942(j)(5))	vas a			
a	and 6e	end of tax year 2009, did the foundation have any undistributed income (lines 6d e, Part XIII) for tax year(s) beginning before 2009?  'Ist the years 20, 20, 20, 20	Yes X No			
t	(relatin	ere any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section to incorrect valuation of assets) to the year's undistributed income? (If applying section to the provision of the	on 4942(a)(2) on 4942(a)(2) to	2b	N	/A
(	: If the p	ors listed, answer 'No' and attach statement — see the instructions) provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the, 20, 20, 20	e years here	20	IN	
3	Did the	e foundation hold more than a 2% direct or indirect interest in any business rise at any time during the year?	Yes X No	,		
t	or disq	,' did it have excess business holdings in 2009 as a result of (1) any purchase by the four qualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequired.	approved est, or			
	(3) the determ	lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule Č, Form 472 nine if the foundation had excess business holdings in 2009.)	∠U, ₹O	3ь	N	/A

**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? BAA

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4a

4b

Χ

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

orm 990-PF (2009) SCHLINGER CHRISMAN		<del></del>	27-009	96038	Page <b>6</b>	
Part VII-B   Statements Regarding Activiti	es for Which Form	<u>1 4720 May Be Requ</u>	uired (continued)			
5a During the year did the foundation pay or incu	<del>-</del>				1	
(1) Carry on propaganda, or otherwise attemp	t to influence legislatio	n (section 4945(e))? .	Yes X	No		
(2) Influence the outcome of any specific publion, directly or indirectly, any voter registra	lic election (see section ition drive?	n 4955); or to carry 		No		
(3) Provide a grant to an individual for travel, study, or other similar purposes?						
(4) Provide a grant to an organization other the in section 509(a)(1), (2), or (3), or section	nan a charitable, etc, or 4940(d)(2)? (see instru	rganization described uctions)	Yes X	No		
(5) Provide for any purpose other than religion educational purposes, or for the prevention	us, charitable, scientific n of cruelty to children	c, literary, or or animals?	Yes X	No		
<b>b</b> If any answer is 'Yes' to 5a(1)-(5), did <b>any</b> of described in Regulations section 53 4945 or in (see instructions)?	the transactions fail to a current notice regard	qualify under the except ding disaster assistance	cions	5 b	N/A	
Organizations relying on a current notice rega	rding disaster assistand	ce check here	▶ 🗌			
c If the answer is 'Yes' to question 5a(4), does to tax because it maintained expenditure response	the foundation claim ex	emption from the	N/A Yes	No		
If 'Yes,' attach the statement required by Regi		5-5(d)				
6a Did the foundation, during the year, receive ar on a personal benefit contract?			∐Yes [X]	No		
<b>b</b> Did the foundation, during the year, pay premi If 'Yes' to 6b, file Form 8870	ums, directly or indirec	ctly, on a personal benef	nt contract?	6b	X	
7a At any time during the tax year, was the found	dation a party to a prob	uhitad tav shaltar transa	ction? Yes X	No		
<b>b</b> If yes, did the foundation receive any proceed	, , ,			7b	N/A	
Part VIII Information About Officers, D				1 1		
and Contractors						
1 List all officers, directors, trustees, foundation	n managers and their o	compensation (see inst	ructions).			
(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense other allow		
SARAH SCHLINGER CHRISMAN	TRUSTEE	0.	0.		0.	
426 ENNISBROOK DRIVE	0					
SANTA BARBARA, CA 93108						
ROGER PACKARD CHRISMAN	TRUSTEE	0.	0.		0.	
426 ENNISBROOK DRIVE	0					
SANTA BARBARA, CA 93108						
	<u> </u>					
2 Compensation of five highest-paid employee						
(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense other allow	account, wances	
NONE						
			· · · · · · · · · · · · · · · · · · ·	_		
Total number of other and the control of the contro	<u> </u>			<del> </del>		
Total number of other employees paid over \$50,000	)	2705700		Form QQ0	DE (2009)	

Form 990-PF (2009) SCHLINGER CHRISMAN FOUNDATION

27-0096038

**BAA** Form **990-PF** (2009)

0.

All other program-related investments. See instructions

Total. Add lines 1 through 3

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Part X Minimum Investment Return (All domestic foundations must complete this pa see instructions.)	rt. Foreign fo	
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	1 a	
<b>b</b> Average of monthly cash balances .	1 b	
c Fair market value of all other assets (see instructions) .	1 c	
d Total (add lines 1a, b, and c)	1 d	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	
3 Subtract line 2 from line 1d	. 3	
4 Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	
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.
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private and certain foreign organizations check here ► and do not complete the		undations
1 Minimum investment return from Part X, line 6	1	
2a Tax on investment income for 2009 from Part VI, line 5.	1.	
b Income tax for 2009 (This does not include the tax from Part VI)		
c Add lines 2a and 2b	2c	1.
3 Distributable amount before adjustments Subtract line 2c from line 1	3	-1.

## Part XII Qualifying Distributions (see instructions)

4 Recoveries of amounts treated as qualifying distributions

Deduction from distributable amount (see instructions)

7 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1

Add lines 3 and 4

1 Amounts paid (including administrative expenses) to accomplish charitable, etc, pu a Expenses, contributions, gifts, etc $-$ total from Part I, column (d), line 26	rposes.	233,500.
<b>b</b> Program-related investments — total from Part IX-B	16	
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charit	able, etc, purposes 2	
3 Amounts set aside for specific charitable projects that satisfy the a Suitability test (prior IRS approval required)		
<b>b</b> Cash distribution test (attach the required schedule)	3ь	
4 Qualifying distributions Add lines 1a through 3b Enter here and on Part V, line 8	, and Part XIII, line 4	233,500.
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net in Enter 1% of Part I, line 27b (see instructions)	vestment income 5_	
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	233,500.

<u>4</u> 5

6

-1.

0.

Note: 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.

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Part XIII Undistributed Income (see instructions)

	<b>(a)</b> Corpus	(b) Years prior to 2008	<b>(c)</b> 2008	<b>(d)</b> 2009
1 Distributable amount for 2009 from Part XI, line 7				0.
2 Undistributed income, if any, as of the end of 2009:				
a Enter amount for 2008 only			0.	
<b>b</b> Total for prior years. 20 , 20 , 20		0.		
3 Excess distributions carryover, if any, to 2009:				
<b>a</b> From 2004				
<b>b</b> From 2005				
<b>c</b> From 2006				,
<b>d</b> From 2007				
<b>e</b> From 2008 129,000.				
f Total of lines 3a through e	129,000.			
4 Qualifying distributions for 2009 from Part				
XII, line 4 ► \$ 233,500.				
a Applied to 2008, but not more than line 2a			0.	
<b>b</b> Applied to undistributed income of prior years (Election required – see instructions)	t <sub>q</sub>	0.		
c Treated as distributions out of corpus (Election required – see instructions)	0.			
<b>d</b> Applied to 2009 distributable amount	```			0.
e Remaining amount distributed out of corpus	233,500.			*
5 Excess distributions carryover applied to 2009	0.			0.
(If an amount appears in column (d), the same amount must be shown in column (a) )				
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	362,500.			<u></u>
<b>b</b> Prior years' undistributed income. Subtract line 4b from line 2b	* *	0.		
c Enter the amount of prior years' undistribut-				
ed income for which a notice of deficiency has been issued, or on which the section				
4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b Taxable		_		
amount - see instructions		0.		
e Undistributed income for 2008 Subtract line 4a from				
line 2a Taxable amount — see instructions.			0.	
f Undistributed income for 2009 Subtract lines				
4d and 5 from line 1. This amount must be distributed in 2010.				0.
7 Amounts treated as distributions out of	<u> </u>			
corpus to satisfy requirements imposed				
by section 170(b)(1)(F) or 4942(g)(3) (see instructions)	250,000.			
` ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	250,000.			
8 Excess distributions carryover from 2004 not applied on line 5 or line 7 (see instructions).	0.			
9 Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a	112,500.			
10 Analysis of line 9				
a Excess from 2005				
<b>b</b> Excess from 2006				
c Excess from 2007				
d Excess from 2008				
<b>e</b> Excess from 2009 112, 500.				

	990-PF (2009) SCHLINGER CHRISMA			V(I) A	27-009603	
	If the foundation has received a ruling or d					<u> </u>
ıa	is effective for 2009, enter the date of the	ruling	triat it is a private	operating foundation	n, and the ruling .	
b	Check box to indicate whether the foundat	ion is a private ope	rating foundation of	described in section	4942(j)(3) or	4942(j)(5)
2 a	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years		
	investment return from Part X for each year listed	(a) 2009	<b>(b)</b> 2008	(c) 2007	(d) 2006	(e) Total
b	85% of line 2a .			<u> </u>	· <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				-	
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:					
a	'Assets' alternative test — enter					
	(1) Value of all assets					
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i).		ļ			
	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					
Par	<u>t XV</u> Supplementary Information assets at any time during th			organization ha	ıd \$5,000 or mo	re in
1	Information Regarding Foundation Manage		structions.)			
	List any managers of the foundation who have close of any tax year (but only if they have NONE	nave contributed me	ore than 2% of the than \$5,000) (See	total contributions resection 507(d)(2))	eceived by the foun	dation before the
t	List any managers of the foundation who can partnership or other entity) of which the NONE	own 10% or more of foundation has a 1	of the stock of a co 0% or greater inter	rporation (or an equ rest	ally large portion of	the ownership of
2	Information Regarding Contribution, Gran Check here • X if the foundation only n requests for funds If the foundation make complete items 2a, b, c, and d	nakes contributions	to preselected cha	arıtable organızatıon		
а	The name, address, and telephone numbe	er of the person to v	whom applications	should be addressed	d	
t	The form in which applications should be s	submitted and infor	mation and materi	als they should inclu	de.	
	Any submission deadlines		· · · · · · · · · · · · · · · · · · ·		_	_
C	Any restrictions or limitations on awards, s	such as by geograp	hical areas, charita	able fields, kinds of i	nstitutions, or other	factors
BAA		TE	EA0310L 07/06/09		F	Form <b>990-PF</b> (2009)

Part XV   Supplementary Information (				
3 Grants and Contributions Paid During the Yo	ear or Approved for Fut	ure Paymen	nt	
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
	Substantial contributor	Todipidin		
Name and address (home or business)  a Paid during the year  SEE STATEMENT 3	substantial contributor	recipient		
Total		,	► 3a	233,500.
b Approved for future payment  Total			► 3b	

## Part XVI-A Analysis of Income-Producing Activities

er gross amounts unless otherwise indicated	<del></del>	d business income		by section 512, 513, or 514	
Program convec revenue	(a) Business code	<b>(b)</b> Amount	(c) Exclu- sion	<b>(d)</b> Amount	(e) Related or exemp function income
Program service revenue	-		code		(see the instruction
ab	+		<del>                                     </del>		
b C		· .	+ +	<del></del>	
d	<del>                                     </del>	<del>-</del>	+ +		
e	1 1				
f					
g Fees and contracts from government agencies				_	
Membership dues and assessments.					
Interest on savings and temporary cash investments					
Dividends and interest from securities			14	43.	
Net rental income or (loss) from real estate					
a Debt-financed property					
<b>b</b> Not debt-financed property					
Net rental income or (loss) from personal property			-1		
Other investment income	<u> </u>			<del> </del>	
Gain or (loss) from sales of assets other than inventory					
Net income or (loss) from special events			++	<del>-</del> -	
Gross profit or (loss) from sales of inventory			<u> </u>		
Other revenue:	<u> </u>			<u> </u>	
a	<del></del>	<del></del>			
b	<del> </del>				
cd	+		1		
<u> </u>	+		-		
	ž I		1 1		1
eSubtotal_Add columns (b) (d) and (e)			-	43	
Subtotal Add columns (b), (d), and (e)				43.	<del></del>
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)	calculations )				
Subtotal Add columns (b), (d), and (e) <b>Total.</b> Add line 12, columns (b), (d), and (e) e worksheet in the instructions for line 13 to verify of		shment of Fyem	nt Purno	13	<del></del>
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e) e worksheet in the instructions for line 13 to verify one  TXVI-B Relationship of Activities to the	e Accompli			13 ses	4
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e) e worksheet in the instructions for line 13 to verify one  TXVI-B Relationship of Activities to the	e Accompli			13 ses	4
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  e worksheet in the instructions for line 13 to verify out XVI-B  Relationship of Activities to the me No.  Explain below how each activity for which is accomplishment of the foundation's exemption.	e Accompli			13 ses	4
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  e worksheet in the instructions for line 13 to verify out XVI-B  Relationship of Activities to the me No.  Explain below how each activity for which is accomplishment of the foundation's exemption.	e Accompli			13 ses	4
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  e worksheet in the instructions for line 13 to verify out XVI-B  Relationship of Activities to the me No.  Explain below how each activity for which is accomplishment of the foundation's exemption.	e Accompli			13 ses	4
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  worksheet in the instructions for line 13 to verify of  XVI-B Relationship of Activities to the  Below how each activity for which is accomplishment of the foundation's exemption.	e Accompli			13 ses	4
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  worksheet in the instructions for line 13 to verify of  XVI-B Relationship of Activities to the  Below how each activity for which is accomplishment of the foundation's exemption.	e Accompli			13 ses	4
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  worksheet in the instructions for line 13 to verify of  t XVI-B Relationship of Activities to the  Below how each activity for which is accomplishment of the foundation's exemption.	e Accompli			13 ses	4
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  worksheet in the instructions for line 13 to verify of  XVI-B Relationship of Activities to the  Below how each activity for which is accomplishment of the foundation's exemption.	e Accompli			13 ses	4
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  worksheet in the instructions for line 13 to verify of  XVI-B Relationship of Activities to the  Below how each activity for which is accomplishment of the foundation's exemption.	e Accompli			13 ses	4
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  e worksheet in the instructions for line 13 to verify out XVI-B  Relationship of Activities to the me No.  Explain below how each activity for which is accomplishment of the foundation's exemption.	e Accompli			13 ses	4
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  e worksheet in the instructions for line 13 to verify of  TXVI-B Relationship of Activities to the  me No. Explain below how each activity for which is accomplishment of the foundation's exemption.	e Accompli			13 ses	4
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  worksheet in the instructions for line 13 to verify of  t XVI-B Relationship of Activities to the  Below how each activity for which is accomplishment of the foundation's exemption.	e Accompli			13 ses	4
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  worksheet in the instructions for line 13 to verify of  t XVI-B Relationship of Activities to the  Below how each activity for which is accomplishment of the foundation's exemption.	e Accompli			13 ses	4
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  worksheet in the instructions for line 13 to verify of  XVI-B Relationship of Activities to the  Below how each activity for which is accomplishment of the foundation's exemption.	e Accompli			13 ses	4
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  worksheet in the instructions for line 13 to verify of  t XVI-B Relationship of Activities to the  Below how each activity for which is accomplishment of the foundation's exemption.	e Accompli			13 ses	4
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  worksheet in the instructions for line 13 to verify of  XVI-B Relationship of Activities to the  Below how each activity for which is accomplishment of the foundation's exemption.	e Accompli			13 ses	4
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  e worksheet in the instructions for line 13 to verify of  TXVI-B Relationship of Activities to the  me No. Explain below how each activity for which is accomplishment of the foundation's exemption.	e Accompli			13 ses	4
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  e worksheet in the instructions for line 13 to verify of  TXVI-B Relationship of Activities to the  me No. Explain below how each activity for which is accomplishment of the foundation's exemption.	e Accompli			13 ses	4
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  e worksheet in the instructions for line 13 to verify of  TXVI-B Relationship of Activities to the  me No. Explain below how each activity for which is accomplishment of the foundation's exemption.	e Accompli			13 ses	4
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  e worksheet in the instructions for line 13 to verify out XVI-B  Relationship of Activities to the me No.  Explain below how each activity for which is accomplishment of the foundation's exemption.	e Accompli			13 ses	4
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Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  e worksheet in the instructions for line 13 to verify out  TXVI-B Relationship of Activities to the  ne No. Explain below how each activity for which is accomplishment of the foundation's exemption.	e Accompli			13 ses	4
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  e worksheet in the instructions for line 13 to verify out XVI-B  Relationship of Activities to the me No.  Explain below how each activity for which is accomplishment of the foundation's exemption.	e Accompli			13 ses	4
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e) e worksheet in the instructions for line 13 to verify out XVI-B  Relationship of Activities to the	e Accompli			13 ses	

# Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

								Yes	No
	1 Did th	e organization directly	y or indirectly e	ngage in any of the following	ig with any o	ther organization		.,	
	descri	ibed in section 501(c) ng to political organiza	of the Code (or ations?	ther than section 501(c)(3)	organizations	s) or in section 527,			
		• .		a noncharitable exempt org	nanization of		·		
	(1) Ca	•	g roundation to	a nondiantable exempt of	garnzation or		1a (1)		X
		ther assets	•	•••		,	1a (2)		X
				• • •			14(2)		
		transactions:					1   (1)		
	• •	ales of assets to a no				• • •	1b (1)		X
	• •			ible exempt organization			1b (2)		X
	` '	ental of facilities, equ	•	r assets	•	•	1 b (3)		X
	` '	eimbursement arrang			•		1 b (4)		X
		oans or loan guarante					1 b (5)		X
				ip or fundraising solicitation			1 b (6)		X
	<b>c</b> Sharır	ng of facilities, equipr	ment, mailing lis	sts, other assets, or paid en	nployees	+	1c		X
	مطلقا الم	anamar ta anu af tha	ahaya is IVas I	nomalata tha fallowing coh	adula Calum	n (h) should always show the four n	aarkat val		
	the ac	answer to any or the oods, other assets, or	above is fes, services diven	by the reporting foundation	. If the found	n <b>(b)</b> should always show the fair n lation received less than fair marke	t value in	ue or	
	any tr	ansaction or sharing	arrangement, s	how in column (d) the value	of the good	s, other assets, or services received	<u> </u>		
(8	a) Line no.	(b) Amount involved	(c) Name	of noncharitable exempt organizatio	n <b>(d</b> )	Description of transfers, transactions, and	sharing arrar	ngemen	is
V	/A								
				· <u>-</u> · ·					
				-					
				•					
_						<del>-</del>			
-									
-	-								
-									
			<del></del>	<del></del>					
-									
_									
	2a Is the	foundation directly o	r indirectly affili	ated with, or related to, one	or more tax	-exempt organizations		v	INI-
				ther than section 501(c)(3))	or in section	1 52/?	∐ Yes	X	INO
_		s,' complete the follow				1		_	
_		(a) Name of organiza	ition	(b) Type of organiz	ation	(c) Description of rela	itionship		
N	/A					· · · · · · · · · · · · · · · · · · ·			
			<b></b>						
_			<u> </u>						
	Under pena	alties of perjury, I declare that	at I have examined the	is return, including accompanying so	hedules and state	ements, and to the best of my knowledge and b has any knowledge	elief, it is trui	e, corre	ct, and
	Complete	V	7		man property.	1 ,			
		South	<i>X</i> . ~	سنر ہر کا ک	4	$\sqrt{7/10}$ > TRUSTEE			
		ature of officer or trustee			Date	<del></del>		_	
i	Signa	ature or officer of trustee				<del></del>	rorle Idontif		
ı	Da: -1	Preparer's		Maria K. K.	Date	Check if (See	rer's Identify <b>Signature</b> in	the inst	rs)
	Paid Pre-		ENE L. PIN	DROH UMW J	MUM_5	705/10 self employed ► N/A	<u> </u>		
	parer's	Firm's name (or LUC.	AS, HORSFA	LL, MURPHY & PIND	ROH, LLP	EIN N/A			
	Use Only	Linux of colf		ON ST, SUITE 200					
	Ciliy			91103-3841		Phone no ► (62	6) 744	-510	0
2	ΔΔ	·	-				Form <b>99</b>		

#### Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

## **Schedule of Contributors**

► Attach to Form 990, 990-EZ, or 990-PF

OMB No 1545-0047

2009

Name of the organization		Employer identification number
SCHLINGER CHRISMAN FOUNDATION	· · · · · · · · · · · · · · · · · · ·	27-0096038
Organization type (check one):		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust <b>not</b> treated a	as a private foundation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a	private foundation
	501(c)(3) taxable private foundation	
Check if your organization is covered by the GNote: Only a section 501(c)(7), (8), or (10) org	eneral Rule or a Special Rule. Janization can check boxes for both the General Rule and	d a Special Rule. See instructions.
General Rule –		
[X] For an organization filing Form 990, 990-E. contributor (Complete Parts I and II)	Z, or 990-PF that received, during the year, \$5,000 or m	ore (in money or property) from any one
Special Rules –		
509(a)(1)/170(b)(1)(A)(vi) and received from any	Form 990 or 990-EZ, that met the 33-1/3% support test on the contribution of the greater or (ii) Form 990-EZ, line 1 Complete Parts I and II	of the regulations under sections of (1) \$5,000 or (2) 2% of the
For a section 501(c)(7), (8), or (10) organizaggregate contributions of more than \$1,00 prevention of cruelty to children or animals	zation filing Form 990 or 990-EZ, that received from any 00 for use <i>exclusively</i> for religious, charitable, scientific, complete Parts I, II, and III	one contributor, during the year, literary, or educational purposes, or the
For a section 501(c)(7), (8), or (10) organiz	zation filing Form 990 or 990-EZ, that received from any	one contributor, during the year,
this box is checked, enter here the total co	us, charitable, etc, purposes, but these contributions did ontributions that were received during the year for an <i>exc</i> unless the <b>General Rule</b> applies to this organization bed	clusively religious, charitable, etc.
religious, charitable, etc, contributions of \$	5,000 or more during the year.	<b>►</b> \$
990-PF) but it <b>must</b> answer 'No' on Part IV, lin	y the General Rule and/or the Special Rules does not file the 2 of their Form 990, or check the box on line H of its f ag requirements of Schedule B (Form 990, 990-EZ, or 99	Form 990-EZ, or on line 2 of its Form
BAA For Privacy Act and Pananyork Paducti	ion Act Notice, see the Instructions Sch	adula R (Form 990, 990 F7, or 990 PF) (2009

**Schedule B** (Form 990, 990-EZ, or 990-PF) (2009)

	<b>B</b> (Form 990, 990-EZ, or 990-PF) (2009)	Page 1	of 1 of Part I
Name of org	anization IGER CHRISMAN FOUNDATION	! ' *	dentification number
Part !	Contributors (see instructions )		
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	W & K SCHLINGER FOUNDATION  3835 SHADOW GROVE ROAD  PASADENA, CA 91107	\$250,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
<del></del>		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		- -\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		- \$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)

(a) (b) (c) (d)
No. from Description of noncash property given Part I (see instructions)

Date réceived (see instructions)

Date réceived

Schedule **B** (Form 990, 990-EZ, or 990-PF) (2009)

	Transferee's name, address	, and ZIP + 4	Relationship of transferor to transferee
(a)	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
Part I			
_		(e)	

(e)

Transfer of gift

Transferee's name, address, and ZIP + 4

Relationship of transferor to transferee

BAA

Part I

009	FEDERAL STA	TEMENT	S	PAGE 1
	SCHLINGER CHRISMA	N FOUNDAT	ION	27-009603
STATEMENT 1 FORM 990-PF, PART I, LINE 16C OTHER PROFESSIONAL FEES				
ACCOUNTING FEES-LHMP	(A) EXPENSES PER BOOK \$ 1,00 TOTAL \$ 1,00	S INCO	MENT ADJUSTED	(D) CHARITABLE PURPOSES  \$ 0.
STATEMENT 2 FORM 990-PF, PART I, LINE 23 OTHER EXPENSES				
FILING FEE-CHARITABLE TRUST FILING FEE-STATE OF CALIFOR	NIA 1	S INVEST	MENT ADJUSTED	(D) CHARITABLE PURPOSES  \$ 0.
STATEMENT 3 FORM 990-PF, PART XV, LINE 3A RECIPIENT PAID DURING THE YE	<b>AR</b> DONEE	FOUND- ATION	PURPOSE OF	
NAME AND ADDRESS  ANACAPA SCHOOL 814 SANTA BARBARA ST			GRANT UNRESTRICTED EDUCATIONAL	<u>AMOUNT</u> \$ 3,000
PART XV, LINE 3A RECIPIENT PAID DURING THE YE  NAME AND ADDRESS  ANACAPA SCHOOL	DONEE RELATIONSHIP	ATION STATUS	GRANT UNRESTRICTED	\$ 3,000
NAME AND ADDRESS  ANACAPA SCHOOL 814 SANTA BARBARA ST SANTA BARBARA, CA 93101  CAMA 111 E. YANONALI	DONEE RELATIONSHIP NONE NONE	ATION STATUS 501 (C) 3	GRANT UNRESTRICTED EDUCATIONAL SUPPORT SUPPORT FOR	\$ 3,000
NAME AND ADDRESS  ANACAPA SCHOOL 814 SANTA BARBARA ST SANTA BARBARA, CA 93101  CAMA 111 E. YANONALI SANTA BARBARA, CA 93103  CATALINA ISLAND CONSERVANCY PO BOX 2739	DONEE RELATIONSHIP NONE NONE	ATION STATUS 501 (C) 3 501 (C) 3	GRANT UNRESTRICTED EDUCATIONAL SUPPORT SUPPORT FOR PERFORMING ARTS SUPPORT ISLAND	\$ 3,000 2,500 5,000
NAME AND ADDRESS  ANACAPA SCHOOL 814 SANTA BARBARA ST SANTA BARBARA, CA 93101  CAMA 111 E. YANONALI SANTA BARBARA, CA 93103  CATALINA ISLAND CONSERVANCY PO BOX 2739 AVALON, CA 90704  HEAL THE OCEAN PO BOX 90106	DONEE RELATIONSHIP NONE NONE NONE	ATION STATUS 501 (C) 3 501 (C) 3	GRANT  UNRESTRICTED EDUCATIONAL SUPPORT  SUPPORT FOR PERFORMING ARTS  SUPPORT ISLAND CONSERVATION  SUPPORT PREVENTION OF	

20	09
20	UJ

## **FEDERAL STATEMENTS**

PAGE 2

**SCHLINGER CHRISMAN FOUNDATION** 

27-0096038

#### STATEMENT 3 (CONTINUED) FORM 990-PF, PART XV, LINE 3A RECIPIENT PAID DURING THE YEAR

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	AMOUNT
S B CTR FOR PERFORMING ARTS 1216 STATE STREET, #201 SANTA BARBARA, CA 93101	NONE	501 (C) 3	GRANADA THEATRE RESTORATION	\$ 93,592.
SANTA BARBARA MARITIME MUSEUM 113 HARBOR WAY, SUITE 190 SANTA BARBARA, CA 93109	NONE	501 (C) 3	SUPPORT FOR MARITIME MUSEUM	11,080.
SANTA BARBARA RESCUE MISSION 535 E. YANONALI ST SANTA BARBARA, CA 93101	NONE	501 (C) 3	HOMELESS RELIEF	1,078.
SANTA BARBARA SYMPHONY 1900 STATE STREET, SUITE G SANTA BARBARA, CA 93101	NONE	501 (C) 3	SUPPORT FOR PERFORMING ARTS	10,000.
SANTA BARBARA YOUTH FOUNDATION 130 HARBOR WAY SANTA BARBARA, CA 93109	NONE	501 (C) 3	SUPPORT FOR YOUTH	5,000.
SCHOLARSHIP FND OF SANTA BARBARA PO BOX 3620 SANTA BARBARA, CA 93130	NONE	501 (C) 3	EDUCATIONAL SUPPORT - SCHOLARSHIPS	10,000.
STATE STREET BALLET 322 STATE STREET SANTA BARBARA, CA 93101	NONE	501 (C) 3	SUPPORT FOR PERFORMING ARTS	5,000.
UNIVERSITY OF SOUTHERN CA UNIVERSITY PARK LOS ANGELES, CA 90089	NONE	501 (C) 3	EDUCATIONAL SUPPORT	25,000.
VISITING NURSE & HOSPICE CARE 222 E. CANON PERDIDO SANTA BARBARA, CA 93101	NONE	501 (C) 3	SERVICES TO HOSPICE PATIENTS	1,000.
S B NAVY LEAGUE P O BOX 4007 SANTA BARBARA, CA 93140		501 (C) 3	TO SUPPORT MEN AND WOMEN AT SEA	1,000.
UC REGENTS 2336 SANTA MONICA BLVD SANTA MONICA, CA 90404	NONE	501 (C) 3	RESTRICTED TO UNDERGRADUATE SCHOLARSHIP IN THE SCHOOL OF ANMINATION	2,500.

2009

## **FEDERAL STATEMENTS**

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#### **SCHLINGER CHRISMAN FOUNDATION**

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STATEMENT 3 (CONTINUED) FORM 990-PF, PART XV, LINE 3A RECIPIENT PAID DURING THE YEAR

NAME AND ADDRESS HABITAT FOR HUMANITY-SB 5960 MANDRIN DRIVE GOLETA, CA 93117	DONEE RELATIONSHIP NONE	FOUND- ATION STATUS 501 (C) 3	PURPOSE OF GRANT GENERAL SUPPORT	\$ <u>AMOUNT</u> 1,500.
SANTA BARBARA ZOOLOGICAL FDT 500 NINOS DRIVE SANTA BARBARA, CA 93103	NONE	501 (C) 3	GENERAL PROGRAM SUPPORT TOTAL	\$ 1,000.