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Short Form Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

2009

OMB No. 1545-1150

Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 at the end of the year may use this form

Open to Public Inspection

▶ The organization may have to use a copy of this return to satisfy state reporting requirements 2009, and ending 20 09 A For the 2009 calendar year, or tax year beginning October 28 December 31 D Employer identification number Check if applicable C Name of organization Please ise IRS Address change 27-1310545 **Kurt+Peter Foundation** abel or 7 Name change Number and street (or P O box, if mail is not delivered to street address) E Telephone number orint or Initial return lvoe. 650-743-0690 Terminated Specific City or town, state or country, and ZIP + 4 F Group Exemption Amended return Instruc-Menlo Park, CA 94026-0691 Application pending Number ▶ Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach G Accounting Method: ✓ Cash ☐ Accrual a completed Schedule A (Form 990 or 990-EZ). Other (specify) ▶ H Check ▶ ☐ if the organization is not www.kurtpeterfoundation.org required to attach Schedule B (Form 990, J Tax-exempt status (check only one) — 🗹 501(c) (3) ◀ (insert no.) 🗌 4947(a)(1) or 🔲 527 990-EZ, or 990-PF). If the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A Form 990-EZ or Form 990 return is not required, but if the organization chooses to file a return, be sure to file a complete return. Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts; if \$500,000 or more, file Form 990 instead of Form 990-EZ Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I.) Part I 16000 1 0 2 Program service revenue including government fees and contracts 2 0 3 3 Investment income 4 4 0 5a Gross amount from sale of assets other than inventory 5a 5b b Less: cost or other basis and sales expenses c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) . . . 5c 0 Special events and activities (complete applicable parts of Schedule G). If any amount is from gaming, check here ▶ □ Gross revenue (not including \$ _____ 16000 of contributions 0 reported on line 1) 0 Less: direct expenses other than fundraising expenses 6b Net income or (loss) from special events and activities (Subtract line 6b from line 6a) . 0 Gross sales of inventory, less returns and allowances 7a 7a b Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) . 7с C 8 8 Other revenue (describe ▶ 16000 9 **Total revenue.** Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8 9 10 Grants and similar amounts paid (attach schedule) 10 0 0 11 Benefits paid to or for members 11 0 12 Salaries, other compensation, and employee benefits . . . 12 0 13 Professional fees and other payments to independent contractors . 13 0 14 14 15 15 0 16 Other expenses (describe ▶ 16 17 17 Total expenses. Add lines 10 through 16 16000 18 Assets Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with 19 19 0 0 Other changes in net assets or fund balances (attach explanation) . . . 20 20 Net assets or fund balances at end of year. Combine lines 18 through 20 21 Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ. Part II (A) Beginning of year (See the instructions for Part II.) (B) End of year 16000 0 22 22 Cash, savings, and investments 0 23 0 23 Land and buildings 0 24 0 24 Other assets (describe ▶ 16000 25 0 25 Total assets 0 26 0 26 Total liabilities (describe ▶ 16000 Net assets or fund balances (line 27 of column (B) must agree with line 21) 0 27

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Cat. No 106421

Form 990-EZ (2009)



MONNEY DUNNING

om 9	990-EZ (2009)					Page 2
Par	Statement of Program Service Accomp	lishments (See the instru	ctions for Part III.	.)		Expenses
What		Funding research for treatme				red for section
Desc	501(c)(3) and 501(c)(4) organizations and section					
	ribe what was achieved in carrying out the organer, describe the services provided, the number of					zations and section a)(1) trusts; optional
each	program title.	•			for oth	
28	The organization was formed in October 2009, existen	d for only approximately two	months, and was		\vdash \vdash	
	funded with an initial donation from its founders. The			2010		
			operations during		i Ì	
	(Grants \$) If this amount	includes foreign grants, che	ock horo		28a	0
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		includes foreign grants, che		<u>. ▶ Ц</u>	30a	0
31	Other program services (attach schedule)					
-	(Grants \$) If this amount				31a	
	Total program service expenses (add lines 28a t				32	0
Par	t IV List of Officers, Directors, Trustees, and Key					
	(a) Name and address	(b) Title and average hours per week	(c) Compensation (If not paid,	(d) Contribute employee benefi	t plans &	
		devoted to position	enter -0)	deferred compe	ensation	other allowances
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	rlotte Drew	Secretary, 10			_	
	Claremont Way, Menlo Park, CA 94025	•	0'		0	0
	t Frewing	Treasurer, 10	_		_	_
	Noren Street, La Canada Flintridge, CA 91011		0	<u> </u>	0	0
	c Bodnick	Director, (quarterly mtg)	_	1		_
	k Lane, Atherton, CA	3,0,	0		0	0
	in Drucker	Director, (quarterly mtg)				
Eas	t Creek Drive, Menlo Park, CA 94025		0		0) <u> </u>
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d Total number of other employees paid over \$100,000 ▶ None 1 Total number of other employees paid over \$100,000 ▶ None 1 Total number of other independent contractors each receiving over \$100,000 . ▶ None 1 Total number of other independent contractors each receiving over \$100,000 . ▶ None 1 Total number of other independent contractors each receiving over \$100,000 . ▶ None 1 Total number of other independent contractors each receiving over \$100,000 . ▶ None 1 Total number of other independent contractors each receiving over \$100,000 . ▶ None 2 Total number of other independent contractors each receiving over \$100,000 . ▶ None 3 Total number of other independent contractors each receiving over \$100,000 . ▶ None 4 Total number of other independent contractors each receiving over \$100,000 . ▶ None 5 Total number of other independent contractor paid more than \$100,000 . ▶ None 5 Total number of other independent contractor paid more than \$100,000 . ▶ None 5 Total number of other independent contractor paid more than \$100,000 . ▶ None 5 Total number of other independent contractor paid more than \$100,000 . ▶ None 5 Total number of other independent contractor paid more than \$100,000 . ▶ None 5 Total number of other independent contractor paid more than \$100,000 . ▶ None 5 Total number of other independent contractor paid more than \$100,000 . ▶ None 5 Total number of other independent contractor paid more than \$100,000 . ▶ None 5 Total number of other independent contractor paid more than \$100,000 . ▶ None 5 Total number of other independent contractor paid more than \$100,000 . ▶ None 5 Total number of other independent contractor paid more than \$100,000 . ▶ None 5 Total number of other independent contractor paid more than \$100,000 . ▶ None 5 Total number of other independent contractor paid more than \$100,000 . ▶ None 5 Total number of other independent contractor paid more than \$100,000 . ▶ None 5 Total number of other independent contractor paid more than \$100,000 . ▶ None 6 Total numb					or in opposition to	Ye	s No
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99a 10 14 he organization make any transfers to an exempt non-charitable related organization? 49a 49b 14* Yes," was the related organization as earlier 527 organization? 49b 15* Yes." was the related organization as earlier 527 organization? 49b 15* Yes." was the related organization as earlier 527 organization? 49b 15* Yes. 49b 15			•				1
b If "Yes," was the related organization a section 527 organization? Complete this table for the organization of the highest compensated employees (other than officers, directors, trustees and the employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None." (a) Name and address of each employee paid more than \$100,000 of compensation from the organization. If there is none, enter "None." (b) Name and address of each employee paid more than \$100,000 of compensation from the organization. If there is none, enter "None." (c) Compensation from the organization is the present of the organization. If there is none, enter "None." (d) Name and address of each independent contractor paid more than \$100,000 of compensation from the organization. If there is none, enter "None." (e) Name and address of each independent contractor paid more than \$100,000 of compensation. (e) Name and address of each independent contractor paid more than \$100,000 of compensation. (e) Name and address of each independent contractor paid more than \$100,000 of (b) Type of service (c) Compensation. (e) Total number of other independent contractors each receiving over \$100,000 of (b) Type of service (c) Compensation. (e) Name and address of each independent contractors each receiving over \$100,000 of (b) Type of service (c) Compensation. (f) Total number of other independent contractors each receiving over \$100,000 of (b) Type of service (c) Compensation. (g) Name and address of each independent contractors each receiving over \$100,000 of (b) Type of service (c) Compensation. (g) Type of service (c) Compensation of the best of my knowledge (c) Compensation of the best of my knowledge (c) Compensation of the best of my knowledge (c) Compensation of the paid of the best of my knowledge (c) Compensation of the paid							1
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Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. April 20 April 20 Signature of officer Scott Frewing, President Type or print name and title Preparer's signature Preparer's signature Preparer's identifying number (See instructions See instructions See instructions Phone no Way the IRS discuss this return with the preparer shown above? See instructions Signature Preparer's identifying number (See instructions Preparer's identifying number (See instructions Phone no Pyes N	None	(a) Name and address of each independent contractor	paid more than \$100,000	(b)	Type of service	(c) Compe	nsation
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CERTIFICATE OF AMENDMENT OF ARTICLES OF INCORPORATION

The undersigned certify that:

- 1. They are the President and Secretary, respectively, of Kurt's Fund, a California corporation.
- 2. Article I of the Articles of Incorporation of this corporation is amended to read as follows: The name of this corporation is The Kurt+Peter Foundation ("Corporation").
- 3. The foregoing amendment of the Articles of Incorporation has been duly approved by the board of directors.
- 4. The corporation has no members.
- 5. We further declare under penalty of perjury under the laws of the State of California that the matters set forth in this certificate are true and correct of our own knowledge.

DATE: April 8, 2010

Scott H. Frewing, President

Charlotte Drew, Secretary