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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

2009

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 cal	endar year 2009, or tax year beginning	, 2009	, and ending	,	
G Che	eck all that apply. Initial return Initial	al Return of a former p	oublic charity	Fin	al return
	Amended return	Address		change	
			A		mhor
Use t		NI.	"		IIIDEI
IRS lal Otherw			<u> </u>	31-1756682	
prin	, locoo d obbrino bit, bid it	00	B	•	instructions)
or typ				480-860-2500	-
See Spe			l c	If exemption application is	pending, check here
Instruct	ions.		0	1 Foreign organizations, che	ck here . 🕨 🗌
H C	heck type of organization: X Section 501	(c)(3) exempt private	foundation	2 Foreign organizations mee	ting the 85% test, check
Г	Section 4947(a)(1) nonexempt charitable t			here and attach computati	on P
I Fa		ounting method: X C			
	, 6 , 4 , 4 , 4 , 4 , 5 , 7 , 1 , 5	Other (specify)		under section 507(b)(1)(A	
► ċ			F		
ر د		column (d) must be o	ii casii basis.)	under section 507(b)(1)(B), check here
Part I		(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
	Expenses (The total of amounts in columns (b), (c), and (d) may not neces-	expenses per books	income	income	for charitable
	sarily equal the amounts in column (a)			{	purposes (cash basis only)
	(see the instructions))				(casii basis biliy)
	1 Contributions, gifts, grants, etc, received (att sch)	177.			
	2 Ck ► X if the foundn is not req to att 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)				<u></u>
R	6a Net gain/(loss) from sale of assets not on line 10				
R E V	b Gross sales price for all assets on line 6a			-	
	7 Capital gain net income (from Part IV, line 2)				
	8 Net short-term capital gain .				
∞ู้ กิ	9 Income modifications				
O DE SINDE	10 a Gross sales less returns and	• ,		•	
	allowances	· ·	• •	·	
N ¬	b Less Cost of goods sold	•	,		
J	c Gross profit/(loss) (att sch)				- 1
20	11 Other income (attach schedule)				
	` '				
<u>.9</u>	12 Total. Add lines 1 through 11	177	PECENTER	. 0.	
7	13 Compensation of officers, directors, trustees, etc	0	ALUSIVEU	·	
	14 Other employee salaries and wages			S S	 -
2010	15 Pension plans, employee benefits	2	961 1 8 2010	löl	
∄ ,	16a Legal fees (attach schedule)	1,3	· • • • • • • • • • • • • • • • • • • •	is a second	******
Ĝ	b Accounting fees (attach sch)			₹	
M	c Other prof fees (attach sch)		AGDEN, UT	- k	
0 1	17 Interest				
O I P S E T	17 Interest 18 Taxes (attach schedule)(see instr.)	·			
RR	19 Depreciation (attach			 	
A A	sch) and depletion				
N V	20 Occupancy				
G É	21 Travel, conferences, and meetings			1	
A E	22 Printing and publications			-	
A E X D P	23 Other expenses (attach schedule)		<u> </u>	T	
AND EN					
	24 Total operating and administrative		· · · · · · · · · · · · · · · · · · ·		
S E S	expenses. Add lines 13 through 23				
	25 Contributions, gifts, grants paid PART XV	161,680.			161,680.
	26 Total expenses and disbursements.				
	Add lines 24 and 25	161,680.	0	0.	161,680.
]	27 Subtract line 26 from line 12:				
	a Excess of revenue over expenses	-161 502			}
	and disbursements	-161,503.	^	<u> </u>	
	b Net investment income (if negative, enter -0-)		0		• -
	C Adjusted net income (if negative, enter -0-)			0.	



end-of-year figure reported on prior year's return) 496,067. Enter amount from Part I, line 27a 2 -161,503Other increases not included in line 2 (itemize) 3 Add lines 1, 2, and 3 4 334,564 Decreases not included in line 2 (itemize). 5 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 6 6 334,564

(a) List and description 2-story brick wareho	be the kind(s) of property sold (e.g., rebuse; or common stock, 200 shares MLC	C Company)	b) How acquired P — Purchase D — Donation	(C) Date acquired (month, day, year)	(d) Date sold (month, day, year)
1a N/A					
<u>b</u>				<u> </u>	
_ с					
d				 	ļ
	1000			4) 0	
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	5	(h) Gain or (e) plus (f) m	
a					
b					
<u> </u>					
_ <u>d</u>					
Complete only for accets she	wing gain in column (h) and owned by	the foundation on 12/21/60			
(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column (i) over column (j), if any	ti	(I) Gains (Coli gain minus column (F nan -0-) or Losses (fr	(), but not less
a					
b					
С					
d					
e					
2 Capital gain net income or (n	let capital loss) If gain, also ente	enter in Part I, line 7 er -0- in Part I, line 7	2		
3 Net short-term capital gain of	r (loss) as defined in sections 1222(5) a	and (6)			
If gain, also enter in Part I, Ii in Part I, line 8	ne 8, column (c) (see the instructions).	If (loss), enter -0-	3		
Partive Qualification Und	er Section 4940(e) for Reduced	Tax on Net Investmen	t Income		
'Yes,' the foundation does not qu	ection 4942 tax on the distributable amo	plete this part		Yes	X No
	t in each column for each year, see the	instructions before making a	any entries		
(a) Base period years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	s (col	(d) Distribution umn (b) divided	
2008	156,500.	565,	702.		0.276647
2007	168,760.	725,			0.232486
2006	303,735.	958,	597.	-	0.316854
2005	262,210.	320,			0.818000
2004	253,760.	501,	259.		0.506245
2 Total of line 1, column (d)			2		2.150232
• • • • • • • • • • • • • • • • • • • •	the 5-year base period - divide the total	al on line 2 by 5, or by the			
number of years the foundation	on has been in existence if less than 5	years	_ 3		0.430046
			1		0.430040
4 Enter the net value of noncha	aritable-use assets for 2009 from Part X	K, line 5 .	. 4		
4 Enter the net value of noncha5 Multiply line 4 by line 3	ırıtable-use assets for 2009 from Part X	ζ, line 5 .	5		409,086.
		K, line 5 .			409,086.
5 Multiply line 4 by line 3		(, line 5 .	5		409,086. 175,926.
Multiply line 4 by line 3Enter 1% of net investment in	ncome (1% of Part I, line 27b)	(, line 5 .	5		409,086 175,926

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Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 49	48 – see	the instru	ctions		
1 a Exempt operating foundations described in section 4940(d)(2), check here .	7				
Date of ruling or determination letter: (attach copy of letter if necessary - see instr.)					
b Domestic foundations that meet the section 4940(e) requirements in Part V,		1			0.
check here ► and enter 1% of Part I, line 27b			1	•	
c All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, column (b)	ا لـ		,	-	
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable		-1 -			
foundations only Others enter -0-).		2			0.
3 Add lines 1 and 2	_	3			0.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others ent	er -0-)	4			<u>0.</u>
5 Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-		5 .			<u>0.</u>
6 Credits/Payments			·	;	
a 2009 estimated tax pmts and 2008 overpayment credited to 2009 6 a		, -	``, ;		:
b Exempt foreign organizations — tax withheld at source 6b		'	• .	. *	•
c Tax paid with application for extension of time to file (Form 8868) d Backup withholding erroneously withheld 6 d			-		
d Backup withholding erroneously withheld 7 Total credits and payments Add lines 6a through 6d		_	-		- (_)-
· · ·	ŀ	7			0.
8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached. 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed.		8			
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		9			0.
11 Enter the amount of line 10 to be: Credited to 2010 estimated tax	•	11			
Part VII-A Statements Regarding Activities					
			Ţ., ·	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or participate or intervene in any political campaign?	did it		1 a		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?			_ 1 b		х
If the answer is 'Yes' to 1a or 1b , attach a detailed description of the activities and copies of any mail or distributed by the foundation in connection with the activities.	erıals pul	blished	では		
c Did the foundation file Form 1120-POL for this year?			1c	-2-26-24	X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			. ` ;	2.0	
(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 if foundation managers ►\$ 0.	mposea c	on	1. 5	, ⊋h	4 .
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				6.5	١.
·			, ,	1 2	4.
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrumen of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the cha	i, articies inges		3		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	J		4a		Х
b If 'Yes,' has it filed a tax return on Form 990-T for this year?			4b	N	/A
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		Х
If 'Yes,' attach the statement required by General Instruction T			,		1
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either.			<u>-</u>	تر.	1 .1
By language in the governing instrument, or					· ~]
 By state legislation that effectively amends the governing instrument so that no mandatory direction 	is that co	nflict		×.11.	ست
with the state law remain in the governing instrument?.	•		6	Х	<u></u>
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_	<u>X</u>	<u> </u>
8a Enter the states to which the foundation reports or with which it is registered (see the instructions)	-		920	d: ".	. : 1
AZ			4,		
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 General Instruction G ² If 'No,' attach explanation				X	أمستقسما
		•	8b	Δ. 	- 4
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942 for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If 'Yes,'	(j)(3) or 4	4942(j)(5)	9		1 X
			اثا		
10 Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing and addresses	g their na	ames	10		х
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Par	t 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 instructions)		11		х
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?	,	12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption Website address N/A	n application?	13	X	<u> </u>
14	The books are in care of ► MICHAEL NICHOLAS Located at ► 8080 E GELDING DR, STE 108 SCOTTSDALE AZ ZIP + 4 ►	e no. ► (480) 85260	505	-460	00
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		N/A		
D	and enter the amount of tax-exempt interest received or accrued during the year	▶ 15			N/A
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			V	T No
۹.	File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.		-	Yes	No
ıa	a 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?	Yes X No	,		-
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes X No			
	(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		-	-
	(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 the instructi	ons)?	1 b	N N	/A
	Organizations relying on a current notice regarding disaster assistance check here	▶ 🗍	,		
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2009?		1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):				
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?	Yes XNo			#
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942 (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942)	!(a)(2) (a)(2) to			-
	all years listed, answer 'No' and attach statement — see the instructions) If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years		2b	N	/A
C	► 20, 20, 20	nere			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	Yes X No		,	
b	olf 'Yes,' did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approve 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 foundation had excess business holdings in 2009)	d	3b	 N	/A
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4a		х
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

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Part VII-B Statements Regarding Activit	ies for Which Forn	n 4720 May Be Req	uired (continue	d)			
5a During the year did the foundation pay or incu	ir any amount to			X No	7		
(1) Carry on propaganda, or otherwise attempt(2) Influence the outcome of any specific pub			Yes	V MO			•4.
on, directly or indirectly, any voter registra	ation drive? .		Yes	X No	2.7	.	
(3) Provide a grant to an individual for travel,	•	, .	∐ Yes	X No	:	Í	
(4) Provide a grant to an organization other the in section 509(a)(1), (2), or (3), or section	i 4940(d)(2)7 (see instri	uctions)	Yes	X No		ش د م	g Karo Karo
(5) Provide for any purpose other than religio educational purposes, or for the prevention	us, charitable, scientific n of cruelty to children	c, literary, or or animals?	Yes	X No			and See
b If any answer is 'Yes' to 5a(1)-(5), did any of described in Regulations section 53.4945 or in (see instructions)?	the transactions fail to a current notice regard	qualify under the exception disaster assistance	tions e		5b	N	/ <u>A</u>
Organizations relying on a current notice rega	rding disaster assistan	ce check here	. •		THE P	145 1875	1
c If the answer is 'Yes' to question 5a(4), does tax because it maintained expenditure respon If 'Yes,' attach the statement required by Regi	sibility for the grant?		N/A Yes	No	A STATE OF THE STA	が	る
6a Did the foundation, during the year, receive an		• •	_				3
on a personal benefit contract?		•]Yes	X No	1500		
b Did the foundation, during the year, pay premi	iums, directly or indirec	ctly, on a personal bene	fit contract?		6b		X
7a At any time during the tax year, was the found	dation a party to a proh	nibited tax shelter transa	action? Yes	X No		7	
b If yes, did the foundation receive any proceed					7b	N	'A
Part VIII Information About Officers, Diand Contractors	rectors, Trustees,	Foundation Manag	gers, Highly Pai	d Empl	oyees,	,	
1 List all officers, directors, trustees, foundation	n managers and their	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 employee benefi plans and deferre compensation	it otl	xpense her allov	acco	ount, es
MICHAEL NICHOLAS	DIRECTOR	0.).			0
8080 E GELDING DR, STE 108 SCOTTSDALE, AZ 85260	0						
PRISCILLA NICHOLAS	DIRECTOR	0.		<u>, </u>			0
7120 EAST OAKMONT	0	Ţ.					Ū
PARADISE VALLEY, AZ 85253							
MICHELLE BLINCOE	DIRECTOR	0.	C).			0
9157 NORTH 115TH STREET	0						
SCOTTSDALE, AZ 85259				- 1			
TANYA RIETZ	DIRECTOR	0.	C).			0
12133 EAST GOLD DUST AVENUE	0						
SCOTTSDALE, AZ 85259	- (-1111 11						
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 employee benefi plans and deferre compensation	ıt `oth	Expense her allov		
NONE						· · · ·	
			<u> </u>				
				_			
Total number of allers are less as a constant of the constant				_			
Total number of other employees paid over \$50,000		7/05/00	<u> </u>	For	rm 990-l	DE C	0

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Total. Add lines 1 through 3

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Adjusted qualifying distributions. Subtract line 5 from line 4

Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) باکو ماکستا 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 1 b 415,316. **b** Average of monthly cash balances 1 c c Fair market value of all other assets (see instructions) 1 d 415,316. d Total (add lines 1a, b, and c) e Reduction claimed for blockage or other factors reported on lines 1a and 1c 0. (attach detailed explanation) . 1 e 2 0. 2 Acquisition indebtedness applicable to line 1 assets 3 415,316. Subtract line 2 from line 1d Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions) 6,230. 5 409,086. Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4. Minimum investment return. Enter 5% of line 5 20,454. 6 Partix | Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and do not complete this part.) and certain foreign organizations check here 20,454 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 2 c c Add lines 2a and 2b 3 Distributable amount before adjustments. Subtract line 2c from line 1 3 20,454 4 Recoveries of amounts treated as qualifying distributions 4 5 Add lines 3 and 4 20,454 6 Deduction from distributable amount (see instructions) Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 20,454 RankXIII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc. purposes a Expenses, contributions, gifts, etc - total from Part I, column (d), line 26 161,680. 1 a 1 b **b** Program-related investments - total from Part IX-B Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes 2 Amounts set aside for specific charitable projects that satisfy the a Suitability test (prior IRS approval required) 3 a **b** Cash distribution test (attach the required schedule) 3 b Qualifying distributions Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 161,680 4 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 instructions) 5

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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161,680.

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Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
Distributable amount for 2009 from Part XI, line 7				20,454.
2 Undistributed income, if any, as of the end of 2009:				20, 131.
a Enter amount for 2008 only			0.	
b Total for prior years: 20, 20, 20		0.		
3 Excess distributions carryover, if any, to 2009				•
a From 2004				
b From 2005 246, 206.				
c From 2006 255, 805. d From 2007 132, 465.				-
e From 2008 128, 215.				
f Total of lines 3a through e	991,388.			
4 Qualifying distributions for 2009 from Part	3317300.			
XII, line 4: ► \$ 161, 680.				
a Applied to 2008, but not more than line 2a			<u>-</u> 0.	-
b Applied to undistributed income of prior years (Election required – see instructions)		0.		
c Treated as distributions out of corpus		0.		
(Election required — see instructions)	0.			
d Applied to 2009 distributable amount				20,454.
e Remaining amount distributed out of corpus	141,226.			
5 Excess distributions carryover applied to 2009. (If an amount appears in column (d), the	0.			0.
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	1,132,614.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.	·	·-
c Enter the amount of prior years' undistributed income for which a notice of deficiency	1		~ 5	* ,
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				
corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3)				
(see instructions)	0.			· · · · · · · · · · · · · · · · · · ·
8 Excess distributions carryover from 2004 not	222 623		-	1
applied on line 5 or line 7 (see instructions)	228,697.			· · · · · · · · · · · · · · · · · · ·
9 Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a	903,917.			:
10 Analysis of line 9				_
a Excess from 2005 246, 206.			-	
b Excess from 2006 255, 805.		İ		-
c Excess from 2007 . 132, 465.				1
d Excess from 2008		ļ		
e Excess from 2009 . 141, 226.				

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Part XIV Private Operating Foundation		tions and Part	VII-A, question 9		N/A
1a if the foundation has received a ruling or is effective for 2009, enter the date of the	determination letter ruling .	that it is a private	operating foundatio	n, and the ruling	
b Check box to indicate whether the founda	-	rating foundation	described in section	4942(j)(3) or	4942(j)(5)
2a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum investment return from Part X for each year listed	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					<u></u>
d Amounts included in line 2c not used directly for active conduct of exempt activities					
 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	·	Î			
a 'Assets' alternative test — enter			1	}	
(1) Value of all assets(2) Value of assets qualifying under section 4942(j)(3)(B)(i)			<u> </u>		
b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					· · · · · · · · · · · · · · · · · · ·
c 'Support' alternative test — enter					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942()(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					
PartXV Supplementary Information assets at any time during the	(Complete this	part only if the	organization ha	d \$5,000 or more	e in
1 Information Regarding Foundation Manage		structions.)		 ,	
a List any managers of the foundation who had close of any tax year (but only if they have MICHAEL NICHOLAS	nave contributed mo	re than 2% of the han \$5,000) (See	total contributions re section 507(d)(2).)	eceived by the found	ation before the
b List any managers of the foundation who ca partnership or other entity) of which the NONE	own 10% or more of foundation has a 10	the stock of a cor 1% or greater inter	poration (or an equa est	ally large portion of the	he ownership of
2 Information Regarding Contribution, Gran Check here if the foundation only m requests for funds. If the foundation makes complete items 2a, b, c, and d a The name, address, and telephone numbe	nakes contributions s gifts, grants, etc, (to preselected cha (see instructions) t	ritable organizations o individuals or orga	nizations under othe	et unsolicited er conditions,
	,	FF22.00110			
SEE STATEMENT 1		<u>.</u>	·····		
b The form in which applications should be s	submitted and inform	nation and materia	als they should includ	de	
SEE STATEMENT FOR LINE 2A		-			
c Any submission deadlines.					
SEE STATEMENT FOR LINE 2A	uch ac hu ac-es	uppl proper about	blo fields liveds of	antitutions as attack	201010
d Any restrictions or limitations on awards, s	uun as oy geograph	ncar areas, charita	vie lielas, kinas of il	isitutions, or other f	actors
SEE STATEMENT FOR LINE 2A					
BAA	TEE	A0310L 07/06/09		Fo	rm 990-PF (2009)

3 Grants and Contributions Paid During the	Year or Approved for Fut	ure Paymer	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
Name and address (home or business)	substantial contributor	recipient		<u> </u>
a Paid during the year				
SEE STATEMENT 2			1	
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Total		<u></u> .	► 3a	161,680.
b Approved for future payment				
				ĺ
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				{
Total		•	> 3b	1

Form 990-PF (2009)

Part XVI-A Analysis of Income-Producing Activities	Part XVI-A	Ana	ysis of	Income-	Producing	Activities
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BAA

Enter gro	ss amounts unless otherwise indicated	Unrelat	ed business income	Exclude	d by sec	tion 512, 513, o	r 514	
		(a) Business code	(b) Amount	(c) Exclu- sion	! :	(d) Amount		(e) Related or exempt function income
	gram service revenue			code				(see the instructions)
		 		1	 			
		 		 	 -	· - -		
				 	-			
		1		†				<u> </u>
f								
g Fee	s and contracts from government agencies							
2 Men	nbership dues and assessments							
3 Inter	est on savings and temporary cash investments							
4 Divi	dends and interest from securities			ļ			<u>.</u>	
	rental income or (loss) from real estate:		Contract of the second	1 2	٠.٠	* -	- 1	The state of the state of
	t-financed property	-		<u> </u>				
	debt-financed property			<u> </u>				
	ental income or (loss) from personal property							
	er investment income	ļ	<u> </u>	 				
	or (loss) from sales of assets other than inventory							
	income or (loss) from special events.							
	ss profit or (loss) from sales of inventory	Frath, 1 or	是金州十二年166年			ن جاری در	, .	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	er revenue:	1.141.22	A. 2. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	1 2 2	1 67		7 /	Salvaha Jah B But were models
				 				
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12 Sub	total Add columns (b), (d), and (e)	Total The state of the		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
	total Add columns (b), (d), and (e)	The Part of the last		- The state of the			13	0.
13 Tota				**************************************			13	0.
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13 Tota See work	II. Add line 12, columns (b), (d), and (e), sheet in the instructions for line 13 to verify c	alculations.) Accompl	ishment of Exemp	t Purpo				
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13 Tota See work Part:XV Line No.	II. Add line 12, columns (b), (d), and (e), sheet in the instructions for line 13 to verify c	alculations.) Accompl	ishment of Exemp	t Purpo				
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13 Tota See work Part XV Line No.	II. Add line 12, columns (b), (d), and (e), sheet in the instructions for line 13 to verify c	alculations.) Accompl	ishment of Exemp	t Purpo				
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TEEA0502L 07/06/09

Form 990-PF (2009) NICHOLAS FAMILY FOUNDATION 31-1756682 Part'XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

_		Exempt Organ	izauoiis								
	desc	he organization directly ribed in section 501(c) of ing to political organization	of the Code (ot	ngage in any her than secti	of the following wion 501(c)(3) orga	vith any ot anizations	ther organization	on 527,		Yes	No
		sfers from the reporting		a noncharitab	ole exempt organi	zation of:				3	7
	(1)	Cash		•			•		1 a (1)		X
	(2)	Other assets							1 a (2)		Χ
	b Othe	r transactions								200	
	(1) 5	Sales of assets to a non	charitable exe	mpt organizat	ion				. 1b(1)		X
	(2) F	Purchases of assets from	n a noncharita	ble exempt or	rganization				. 1b(2)		X
	(3) F	Rental of facilities, equip	ment, or other	assets					1 b (3)		X
	(4) F	Reimbursement arrange	ments				•		1 b (4)		X
	(5) L	oans or loan guarantee.	s		•		•		1 b (5)		Х
	(6) F	Performance of services	or membershi	p or fundraisi	ng solicitations				1 b (6)		Х
	c Shar	ing of facilities, equipme	ent, mailing lis	ts, other asse	ts, or paid emplo	yees.		•	1c		X
	d If the the g any t	answer to any of the a oods, other assets, or s ransaction or sharing a	bove is 'Yes,' of services given l rrangement, st	complete the by the reporting now in column	following scheduling foundation If	e. Columr the founda the goods	n (b) should alvation received s, other assets,	ways show the less than fair or services r	e fair market val market value in eceived	ue of	
(a) Line no	(b) Amount involved			empt organization				ns, and sharing arra		ts
N	I/A										
_											
_											
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		e foundation directly or in tibed in section 501(c) on s,' complete the following	-	ited with, or re her than secti	elated to, one or on 501(c)(3)) or i	more tax- n section	exempt organi: 527? .	zations	Yes	X	No
		(a) Name of organization	on	(b) Ty	pe of organization	n i	(0) Description	of relationship		
N	/A										
				···							
											
_											
•	Under pen- complete	alties of perjury, I declare that I Declaration of pregarer other th	have examined this nan taxpayer or fidu	return including icians is based on	accompanying schedule all information of which	es and staten h preparer ha	ments, and to the beas any knowledge	_	ge and belief, it is true	e, correc	t, and
S G Z	Sign	ature of officer or trustee	<u> </u>	1		Date	/1.40	Title	/31		
	Paid	Preparer's signature		awy		Date	10/10	Check if	Preparer's Identify (See Signature in	ng num the instr	ber 's)
HERE	Pre-	DADD:	RNARD BARI 7 & MOORE,				10 / 10	employed N	N/A		
_	parer's Use	yours if self-		P.C. BACK RD.	STE 370			EIN - N/	A		
	Only	address, and			215 3/0			Dhans	(602) 277	-5 <i>16</i>	.3
H R	L AA	ZIP code PHOEI		7710				Phone no	Form 99		
رر	~								1 01111 33	U-1-1- (

2009

FEDERAL STATEMENTS

PAGE 1

CLIENT 14315

NICHOLAS FAMILY FOUNDATION

31-1756682

8/05/10

04:29PM

STATEMENT 1 FORM 990-PF, PART XV, LINE 2A-D APPLICATION SUBMISSION INFORMATION

NAME OF GRANT PROGRAM:

NAME:

MICHAEL NICHOLAS

CARE OF:

STREET ADDRESS:

8080 E GELDING DR, STE 108

CITY, STATE, ZIP CODE:

SCOTTSDALE, AZ 85260

TELEPHONE:

FORM AND CONTENT:

APPLICATIONS MAY BE SUBMITTED IN ANY FORM. APPLICATIONS

SHOULD INCLUDE INFORMATION THE APPLICANT DEEMS APPROPRIATE

FOR SUCH GRANTS, CONTRIBUTIONS, ETC.

SUBMISSION DEADLINES:

N/A

RESTRICTIONS ON AWARDS: N/A

STATEMENT 2 FORM 990-PF, PART XV, LINE 3A RECIPIENT PAID DURING THE YEAR

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	 AMOUNT
HOMEBASE YOUTH SERVICES 931 E DEVONSHIRE AVE PHOENIX, AZ 85014	NONE	EXEMPT	CHARITABLE	\$ 100,000.
SCOTTSDALE HEALTHCARE 10001 NORTH 92ND ST STE 121 SCOTTSDALE, AZ 85258	NONE	EXEMPT	CHARITABLE	10,000.
PHOENIX ART MUSEUM 1625 N CENTRAL AVE PHOENIX, AZ 85004	NONE	EXEMPT	CHARITABLE	22,000.
PHOENIX SEMINARY 13402 N SCOTTSDALE ROAD SCOTTSDALE, AZ 85254	NONE	EXEMPT	CHARITABLE	2,000.
SHEPHERD OF DESERT LUTHERAN 9590 E SHEA BLVD SCOTTSDALE, AZ 85260	NONE	EXEMPT	CHARITABLE	1,000.
AMERICAN HEART ASSOCIATION 2929 S 48TH STREET TEMPE, AZ 85282	NONE	EXEMPT	CHARITABLE	5,000.
ST. MARIA GORETTI 6261 N GRANITE REEF SCOTTSDALE, AZ 85250	NONE	EXEMPT	CHARITABLE	500.
ST. MARY'S FOOD BANK 2831 N 31ST AVENUE PHOENIX, AZ 85009	NONE	EXEMPT	CHARITABLE	2,000.

2009	FEDERAL STATEMENTS	PAGE 2	
CLIENT 14315	NICHOLAS FAMILY FOUNDATION	31-1756682	
8/05/10		04 29PM	
STATEMENT 2 (CONTIN	IUED)		

FORM 990-PF, PART XV, LINE 3A RECIPIENT PAID DURING THE YEAR

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE GRANT	OFAMOUNT	Γ
CHRYSALIS SHELTER 1010 E MCDOWELL ROAD STE 301 PHOENIX, AZ 85006	NONE	EXEMPT	CHARITABLE	\$ 2,	000.
CHILDHELP USA 15757 N 78TH STREET SCOTTSDALE, AZ 85260	NONE	EXEMPT	CHARITABLE	5,0	000.
TRENDS CHARITABLE FOUNDATION 6045 N SCOTTSDALE RD. SCOTTSDALE, AZ 85250	NONE	EXEMPT	CHARITABLE	2,	500.
BOYS AND GIRLS CLUB 10515 E LAKEVIEW DR. SCOTTSDALE, AZ 85258	NONE	EXEMPT	CHARITABLE	5,0	000.
PHOENIX THEATRE 100 EAST MCDOWELL PHOENIX, AZ 85004	NONE	EXEMPT	CHARITABLE	•	650.
ARIZONA KIDNEY FOUNDATION 4203 E INDIAN SCHOOL STE 140 PHOENIX, AZ 85018	NONE	EXEMPT	CHARITABLE	3,(000.
RYAN HOUSE 110 W MERRELL ST PHOENIX, AZ 85013	NONE	EXEMPT	CHARITABLE	5	730.
THE CENTERS FOR HABILITATION 215 W LODGE DRIVE TEMPE, AZ 85283	NONE	EXEMPT	CHARITABLE	3	300.
				TOTAL \$ 161,6	580.

Form **8868**

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No 1545-1709

If you are	filing for an Automatic 3-Mont	h Extension, complete only Part I and check this box	κ .	: ► X
•	<u> </u>	tomatic) 3-Month Extension, complete only Part II(
Do not comp	olete Part II unless you have alre	ady been granted an automatic 3-month extension of	on a previously f	iled Form 8868.
Part I	Automatic 3-Month Exten	sion of Time. Only submit original (no copi	es needed).	
	•	d requesting an automatic 6-month extension — chec		, _
All other corp income tax re		s), partnerships, REMICS, and trusts must use Form	7004 to request	an extension of time to file
the additiona	I (not automatic) 3-month exten Instead, you must submit the fu	electronically file Form 8868 if you want a 3-month a ion required to file Form 990-T) However, you cannous sion or (2) you file Forms 990-BL, 6069, or 8870, gro lly completed and signed page 2 (Part II) of Form 88 e-file for Charities & Nonprofits	oup returns, or a	composite or consolidated
	Name of Exempt Organization			Employer identification number
Type or				
print	NICHOLAS FAMILY FOU			31-1756682
File by the due date for	Number, street, and room or suite number	r If a P O box, see instructions		
filing your return See	8080 E GELDING DR,	STE 108		
instructions		ode For a foreign address, see instructions		
	SCOTTSDALE, AZ 8526			
	of return to be filed (file a separa		□ -	
Form 990		Form 990-T (corporation)	Form 472	
Form 990		Form 990-T (section 401(a) or 408(a) trust)	Form 522	
X Form 990		Form 990-T (trust other than above) Form 1041-A	Form 606	
Telephone If the orga If this is f check this the extens	anization does not have an offic or a Group Return, enter the org s box ► ☐ If it is for part of sion will cover	FAX No e or place of business in the United States, check the ganization's four digit Group Exemption Number (GEI the group, check this box and attach a list withs for a corporation required to file Form 990-T) ext	ns box N) If ith the names a	
	8/15 , 20 10 , to file ension is for the organization's	e the exempt organization return for the organization return for	named above.	
► X	calendar year 20 <u>09</u> or			
▶ 📗	tax year beginning	, 20, and ending, 20		
	ax year is for less than 12 month			hange in accounting period
3a If this a nonrefu	pplication is for Form 990-BL, 9 ndable credits See instructions	90-PF, 990-T, 4720, or 6069, enter the tentative tax,	less any	3a \$ 0.
b If this a made. It	pplication is for Form 990-PF or nclude any prior year overpaym	990-T, enter any refundable credits and estimated to ent allowed as a credit	ax payments	3ь\$ 0.
deposit	Due. Subtract line 3b from line with FTD coupon or, if required, tructions	3a. Include your payment with this form, or, if required by using EFTPS (Electronic Federal Tax Payment S	red, system)	3c \$ 0.
Caution. If yo payment instr		nic fund withdrawal with this Form 8868, see Form 84	153-EO and For	m 8879-EO for
BAA For Priv	acy Act and Paperwork Reduct	ion Act Notice, see instructions.		Form 8868 (Rev. 4-2009)

Form **8868**

(Rev April 2009)

Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

Department of the Treasury

File a separate application for each return.

III CEITIBLI I CEVETIO	SELVICE	The a separate approaches for the				
If you ar	e filing for an Automatic 3-Month	Extension, complete only Part I and che	eck this box		► X	
If you ar	e filing for an Additional (Not Aut	omatic) 3-Month Extension, complete or	nly Part II (on page 2 of the	s form).	_	
Do not com	<i>plete Part II unless</i> you have alrea	dy been granted an automatic 3-month o	extension on a previously f	iled Form 8868.		
Pärt l∰	Automatic 3-Month Extens	ion of Time. Only submit original	(no copies needed).			
A corporatio	n required to file Form 990-T and	requesting an automatic 6-month extens	sion — check this box and o	complete Part I on	ly . ► 📋	
All other cor income tax i		, partnerships, REMICS, and trusts must	t use Form 7004 to request	an extension of t	ıme to file	
returns note the additional Form 990-T.	d below (6 months for a corporation of the corporat	lectronically file Form 8868 if you want a on required to file Form 990-T). However ion or (2) you file Forms 990-BL, 6069, o y completed and signed page 2 (Part II) e-file for Charities & Nonprofits.	r, you cannot file Form 886 or 8870, group returns, or a	B electronically if a composite or con	(1) you want solidated	
	Name of Exempt Organization			Employer identificatio	n number	
Type or print						
	NICHOLAS FAMILY FOUN			31-1756682		
File by the due date for	Number, street, and room or suite number.	Number, street, and room or suite number. If a P.O. box, see instructions				
filing your return See instructions.	15990 N GREENWAY HAY					
insuucions.	City, town or post office, state, and ZIP cod	e. For a foreign address, see instructions				
Observation to the same of	SCOTTSDALE, AZ 85260					
Form 99	of return to be filed (file a separat		П г 470	0		
Form 99		Form 990-T (corporation)	Form 472 rust) Form 522			
Form 99	<u> </u>	Form 990-T (section 401(a) or 408(a) t	Form 606			
X Form 990	<u></u>	Form 990-T (trust other than above) Form 1041-A	Form 887			
M LOUIT 330)-F-F	J FORM 1041-A		<u> </u>		
• The books	s are in the care of . <u>MICHAEL</u>	NICHOLAS				
Telenhone	e No. ► 480-860-2500	FAX No. ►				
-		or place of business in the United States	s check this box		▶ □	
		inization's four digit Group Exemption Nu		his is for the who	le group.	
		ne group, check this box				
	sion will cover.					
		s for a corporation required to file Form	990-T) extension of time			
until _	8/15, 20 <u>10</u> _, to file	the exempt organization return for the or	•			
	ension is for the organization's re	turn for:				
	calendar year 20_09_ or	20	00			
	tax year beginning	, 20, and ending	·, ²⁰ ·			
2 If this ta	ax year is for less than 12 months	, check reason.	Final return Ch	nange in accountir	ng period	
3a If this a nonrefu	pplication is for Form 990-BL, 990 ndable credits. See instructions	0-PF, 990-T, 4720, or 6069, enter the ten		3a \$	0.	
b If this a made. I	pplication is for Form 990-PF or 9 nclude any prior year overpaymer	90-T, enter any refundable credits and ent allowed as a credit		3b\$	0.	
c Balance deposit See ins	• Due. Subtract line 3b from line 3 with FTD coupon or, if required, b	la. Include your payment with this form, on using EFTPS (Electronic Federal Tax I	Payment System).	3c \$	0.	
	u are going to make an electronic	c fund withdrawal with this Form 8868, se			· · · · ·	
						

BAA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form 8868 (Rev 4-2009)