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

2009

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

For calendar year 2009, or tax year beginning

, and ending

G Check all that apply Initial return Initial return of a former public charity Final return
 Amended return Address change Name change

Use the IRS label. Otherwise, print or type. See Specific Instructions.	Name of foundation GANG FAMILY FOUNDATION			A Employer identification number 54-1922206	
	Number and street (or P O box number if mail is not delivered to street address) 11006 SWEET MEADOW DRIVE			B Telephone number (703) 359-4699	
City or town, state, and ZIP code OAKTON, VA 22124			<p>C If exemption application is pending, check here ► <input type="checkbox"/></p> <p>D 1. Foreign organizations, check here ► <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation ► <input type="checkbox"/></p> <p>E If private foundation status was terminated under section 507(b)(1)(A), check here ► <input type="checkbox"/></p> <p>F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ► <input type="checkbox"/></p>		
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation					
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ► \$ 713,931.		J Accounting method <input type="checkbox"/> Cash <input type="checkbox"/> Accrual <input checked="" type="checkbox"/> Other (specify) MODIFIED CASH			
Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	
Revenue	1 Contributions, gifts, grants, etc., received			N/A	
	2 Check ► <input checked="" type="checkbox"/> if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments	524.	524.	STATEMENT 1	
	4 Dividends and interest from securities	9,752.	9,752.	STATEMENT 2	
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10	238,550.			
	b Gross sales price for all assets on line 6a	656,709.			
	7 Capital gain net income (from Part IV, line 2)		238,550.		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales price for all assets on line 6a				
b less Cost of goods sold					
c Gross profit (or) loss	3 2010				
11 Other income	4,233.	4,233.	STATEMENT 3		
12 Total Add lines 1 through 11	253,059.	253,059.			
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc	0.	0.	0.	
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees				
	b Accounting fees	STMT 4	11,622.	0.	11,622.
	c Other professional fees				
	17 Interest				
	18 Taxes	STMT 5	848.	0.	25.
	19 Depreciation and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings		55,340.	0.	55,340.
	22 Printing and publications				
	23 Other expenses	STMT 6	4,810.	4,810.	0.
	24 Total operating and administrative expenses. Add lines 13 through 23		72,620.	4,810.	66,987.
25 Contributions, gifts, grants paid		86,228.		86,228.	
26 Total expenses and disbursements. Add lines 24 and 25		158,848.	4,810.	153,215.	
27 Subtract line 26 from line 12		94,211.			
a Excess of revenue over expenses and disbursements					
b Net investment income (if negative, enter -0-)		248,249.			
c Adjusted net income (if negative, enter -0-)			N/A		

Assets	Part II Balance Sheets	Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of year	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
1 Cash - non-interest-bearing			99,620.	624,317.	624,317.
	2 Savings and temporary cash investments				
	3 Accounts receivable ►				
	Less allowance for doubtful accounts ►				
	4 Pledges receivable ►				
	Less allowance for doubtful accounts ►				
	5 Grants receivable				
	6 Receivables due from officers, directors, trustees, and other disqualified persons				
	7 Other notes and loans receivable ►				
	Less allowance for doubtful accounts ►				
	8 Inventories for sale or use				
	9 Prepaid expenses and deferred charges				
	10a Investments - U S and state government obligations				
	b Investments - corporate stock	STMT 7	420,021.	0.	0.
	c Investments - corporate bonds				
11 Investments - land, buildings, and equipment basis					
	Less: accumulated depreciation ►				
	12 Investments - mortgage loans				
	13 Investments - other	STMT 8	93,779.	89,614.	89,614.
	14 Land, buildings, and equipment basis ►				
	Less: accumulated depreciation ►				
	15 Other assets (describe ►)				
	16 Total assets (to be completed by all filers)		613,420.	713,931.	713,931.
Liabilities	17 Accounts payable and accrued expenses				
	18 Grants payable				
	19 Deferred revenue			5,964.	
	20 Loans from officers, directors, trustees, and other disqualified persons				
	21 Mortgages and other notes payable				
	22 Other liabilities (describe ►)				
	23 Total liabilities (add lines 17 through 22)		0.	5,964.	
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ► <input type="checkbox"/>	and complete lines 24 through 26 and lines 30 and 31.			
	24 Unrestricted				
	25 Temporarily restricted				
	26 Permanently restricted				
	Foundations that do not follow SFAS 117, check here ► <input checked="" type="checkbox"/>	and complete lines 27 through 31.			
	27 Capital stock, trust principal, or current funds		0.	0.	
	28 Paid-in or capital surplus, or land, bldg , and equipment fund		0.	0.	
	29 Retained earnings, accumulated income, endowment, or other funds		613,420.	707,967.	
	30 Total net assets or fund balances		613,420.	707,967.	
	31 Total liabilities and net assets/fund balances		613,420.	713,931.	

Part III Analysis of Changes in Net Assets or Fund Balances

1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	613,420.
2 Enter amount from Part I, line 27a	2	94,211.
3 Other increases not included in line 2 (itemize) ► UNREALIZED GAINS	3	336.
4 Add lines 1, 2, and 3	4	707,967.
5 Decreases not included in line 2 (itemize) ►	5	0.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	707,967.

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co.)			(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a PUBLIC TRADED SECURITIES			P		
b PUBLIC TRADED SECURITIES			P		
c					
d					
e					
(e) Gross sales price		(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)	
a	191,915.		178,231.		13,684.
b	464,794.		239,928.		224,866.
c					
d					
e					
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69				(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))	
(i) F M V as of 12/31/69		(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any		
a					13,684.
b					224,866.
c					
d					
e					
2 Capital gain net income or (net capital loss)		{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7		2	238,550.
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) If (loss), enter -0- in Part I, line 8		{ If gain, also enter in Part I, line 8, column (c) If (loss), enter -0- in Part I, line 8		3	N/A

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

 Yes No

If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part

1 Enter the appropriate amount in each column for each year, see instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2008	112,395.	1,033,470.	.108755
2007	280,328.	1,124,445.	.249303
2006	169,292.	1,181,057.	.143339
2005	363,350.	1,337,106.	.271744
2004	212,190.	1,434,152.	.147955

2 Total of line 1, column (d) .921096

3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years .184219

4 Enter the net value of noncharitable-use assets for 2009 from Part X, line 5 758,805.

5 Multiply line 4 by line 3 139,786.

6 Enter 1% of net investment income (1% of Part I, line 27b) 2,482.

7 Add lines 5 and 6 142,268.

8 Enter qualifying distributions from Part XII, line 4 153,215.

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate
See the Part VI instructions

Part VI | Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions)

1a	Exempt operating foundations described in section 4940(d)(2), check here ► <input type="checkbox"/> and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary-see instructions)	1 2,482.
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here ► <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b	
c	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)	
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	
3	Add lines 1 and 2	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	2,482.
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	0.
6	Credits/Payments	
a	2009 estimated tax payments and 2008 overpayment credited to 2009	6a
b	Exempt foreign organizations - tax withheld at source	6b
c	Tax paid with application for extension of time to file (Form 8868)	6c
d	Backup withholding erroneously withheld	6d
7	Total credits and payments Add lines 6a through 6d	7 0.
8	Enter any penalty for underpayment of estimated tax Check here <input checked="" type="checkbox"/> if Form 2220 is attached	8 56.
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed SEE STATEMENT 9 ►	9 2,538.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid ►	10
11	Enter the amount of line 10 to be Credited to 2010 estimated tax ►	Refunded ► 11

Part VII-A | Statements Regarding Activities

	Yes	No
1a	1a	X
b	1b	X
c	1c	X
2	2	X
3	3	X
4a	4a	X
4b	4b	X
5	5	X
6	6	X
7	7	X
8a		
b	8b	X
9	9	X
10	10	X

1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?

If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.

1b Did the foundation file Form 1120-POL for this year?

1c 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.

2 Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ► \$ 0.

3 Has the foundation engaged in any activities that have not previously been reported to the IRS?
If "Yes," attach a detailed description of the activities.

4 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

4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?

b If "Yes," has it filed a tax return on Form 990-T for this year?

5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?
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
• By language in the governing instrument, or
• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?

7 Did the foundation have at least \$5,000 in assets at any time during the year?
If "Yes," complete Part II, col. (c), and Part XV

8a Enter the states to which the foundation reports or with which it is registered (see instructions) ►
VA

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? If "No," attach explanation

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

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

Part 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)	<input type="checkbox"/> 11 <input checked="" type="checkbox"/> X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?	<input type="checkbox"/> 12 <input checked="" type="checkbox"/> X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► N/A	<input type="checkbox"/> 13 <input checked="" type="checkbox"/> X
14	The books are in care of ► GANG FAMILY FOUNDATION Located at ► 11006 SWEET MEADOW DRIVE, OAKTON, VA	Telephone no ► (703) 359-4699 ZIP+4 ► 22124
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the year	► 15 N/A

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

		Yes	No
1a	During the year did the foundation (either directly or indirectly)		
(1)	Engage in the sale or exchange, or leasing of property with a disqualified person?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> X No	
(2)	Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
(3)	Furnish goods, services, or facilities to (or accept them from) a disqualified person?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> X No	
(4)	Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> 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)?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> X No	
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)? Organizations relying on a current notice regarding disaster assistance check here	► <input type="checkbox"/>	1b <input checked="" type="checkbox"/> X
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 <input checked="" type="checkbox"/> 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))		
a	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?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> X No	
	If "Yes," list the years ► _____		
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions)		N/A
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ► _____		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> X No	
b	If "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 approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2009.)		N/A
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		3b <input type="checkbox"/> 4a <input checked="" type="checkbox"/> X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2009?		4b <input type="checkbox"/> X

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)

5a During the year did the foundation pay or incur any amount to

- (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?
- (2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?
- (3) Provide a grant to an individual for travel, study, or other similar purposes?
- (4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)?
- (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?

 Yes No Yes No
 Yes No Yes No Yes No

b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?

► **X**

Organizations relying on a current notice regarding disaster assistance check here

c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?

N/A

 Yes No

If "Yes," attach the statement required by Regulations section 53.4945-5(d).

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?

 Yes No**X**

b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

If "Yes" to 6b, file Form 8870.

 Yes No**X**

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?

 Yes No**X**

b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?

N/A

X**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**

1 List all officers, directors, trustees, foundation managers and their compensation.

(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 account, other allowances
DAVID GANG 11006 SWEET MEADOW DRIVE OAKTON, VA 22124	MANAGER 3.00	0.	0.	0.
LYNNE GANG 11006 SWEET MEADOW DRIVE OAKTON, VA 22124	BOARD MEMBER 3.00	0.	0.	0.
CHARMAINE DITTMAR 11006 SWEET MEADOW DRIVE OAKTON, VA 22124	BOARD MEMBER 3.00	0.	0.	0.

2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."

(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 account, other allowances
NONE				

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

►

0

Part VIII **Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		

Total number of others receiving over \$50,000 for professional services


0

Part IX-A **Summary of Direct Charitable Activities**

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc

Expenses

1	N/A	
2		
3		
4		

Part IX-B **Summary of Program-Related Investments**

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2

Amount

1	N/A	
2		
3		
Total. Add lines 1 through 3		0.

Form 990-PF (2009)

Part X Minimum Investment Return (All domestic foundations must complete this part Foreign foundations, see instructions.)

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	1a	336,966.
b Average of monthly cash balances	1b	341,697.
c Fair market value of all other assets	1c	91,697.
d Total (add lines 1a, b, and c)	1d	770,360.
e Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	0.
2 Acquisition indebtedness applicable to line 1 assets	2	0.
3 Subtract line 2 from line 1d	3	770,360.
4 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	11,555.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	758,805.
6 Minimum investment return. Enter 5% of line 5	6	37,940.

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ► and do not complete this part)

1 Minimum investment return from Part X, line 6	1	37,940.
2a Tax on investment income for 2009 from Part VI, line 5	2a	2,482.
b Income tax for 2009 (This does not include the tax from Part VI)	2b	368.
c Add lines 2a and 2b	2c	2,850.
3 Distributable amount before adjustments Subtract line 2c from line 1	3	35,090.
4 Recoveries of amounts treated as qualifying distributions	4	0.
5 Add lines 3 and 4	5	35,090.
6 Deduction from distributable amount (see instructions)	6	0.
7 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	35,090.

Part XII Qualifying Distributions (see instructions)

1 Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes	1a	153,215.
a Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1b	0.
b Program-related investments - total from Part IX-B	2	
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc , purposes	3a	
3 Amounts set aside for specific charitable projects that satisfy the	3b	
a Suitability test (prior IRS approval required)	4	153,215.
b Cash distribution test (attach the required schedule)	5	2,482.
4 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	6	150,733.
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b		
6 Adjusted qualifying distributions. Subtract line 5 from line 4		

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

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI, line 7				35,090.
2 Undistributed income, if any, as of the end of 2009			0.	
a Enter amount for 2008 only				
b Total for prior years		0.		
3 Excess distributions carryover, if any, to 2009				
a From 2004	141,791.			
b From 2005	298,061.			
c From 2006	111,992.			
d From 2007	225,807.			
e From 2008	58,581.			
f Total of lines 3a through e	836,232.			
4 Qualifying distributions for 2009 from Part XII, line 4 ► \$ 153,215.			0.	
a Applied to 2008, but not more than line 2a				
b Applied to undistributed income of prior years (Election required - see instructions)		0.		
c Treated as distributions out of corpus (Election required - see instructions)	0.			
d Applied to 2009 distributable amount				35,090.
e Remaining amount distributed out of corpus	118,125.			0.
5 Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			
6 Enter the net total of each column as indicated below	954,357.			
a Corpus Add lines 3f, 4c, and 4e Subtract line 5		0.		
b Prior years' undistributed income Subtract line 4b from line 2b				
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		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 instr			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)	0.			
8 Excess distributions carryover from 2004 not applied on line 5 or line 7	141,791.			
9 Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a	812,566.			
10 Analysis of line 9				
a Excess from 2005	298,061.			
b Excess from 2006	111,992.			
c Excess from 2007	225,807.			
d Excess from 2008	58,581.			
e Excess from 2009	118,125.			

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
SEE STATEMENT 12				
Total			► 3a	86,228.
b Approved for future payment				
NONE				
Total			► 3b	0.

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income
	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	
1 Program service revenue					
a					
b					
c					
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments					
4 Dividends and interest from securities			14	524.	
5 Net rental income or (loss) from real estate			14	9,752.	
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income			18	4,233.	
8 Gain or (loss) from sales of assets other than inventory			18	238,550.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue					
a					
b					
c					
d					
e					
12 Subtotal Add columns (b), (d), and (e)		0.		253,059.	0.
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations)				13	253,059.

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

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

1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

	Yes	No
1a(1)		X
1a(2)		X
1b(1)		X
1b(2)		X
1b(3)		X
1b(4)		X
1b(5)		X
1b(6)		X
1c		X

a Transfers from the reporting foundation to a noncharitable exempt organization or

- (1) Cash .
- (2) Other assets

- b Other transactions**
 - (1) Sales of assets to a noncharitable exempt organization
 - (2) Purchases of assets from a noncharitable exempt organization
 - (3) Rental of facilities, equipment, or other assets
 - (4) Reimbursement arrangements
 - (5) Loans or loan guarantees
 - (6) Performance of services or membership or fundraising solicitation
- c Sharing of facilities, equipment, mailing lists, other assets, or paid employees**
- d If the answer to any of the above is "Yes," complete the following section**

or services given by the reporting foundation If the foundation received
column (d) the value of the goods, other assets, or services received

d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?

Yes No

b If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship
N/A		

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 taxpayer or fiduciary) is based on all information of which preparer has any knowledge

11-15-10

MANAGER

Date

Title

Sign Here

Sign Here		Preparer's signature	Date	Check if self-employed	Preparer's identifying number
Paid Preparer's Use Only	Xatuea Ad. Mallayc PA		11/15/10	<input type="checkbox"/>	
Firm's name (or yours if self-employed), address, and ZIP code	RUBINO & MCGEEHIN, CHARTERED 6903 ROCKLEDGE DRIVE, SUITE 1200 BETHESDA, MD 20817			EIN	
				Phone no	301-564-3636

FORM 990-PF INTEREST ON SAVINGS AND TEMPORARY CASH INVESTMENTS STATEMENT 1

SOURCE	AMOUNT
ATLAS ENERGY RESOURCES NEW BOSTON INSTITUTIONAL FUND, LP V	4. 520.
TOTAL TO FORM 990-PF, PART I, LINE 3, COLUMN A	524.

FORM 990-PF DIVIDENDS AND INTEREST FROM SECURITIES STATEMENT 2

SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	COLUMN (A) AMOUNT
BT ALEX BROWN	9,752.	0.	9,752.
TOTAL TO FM 990-PF, PART I, LN 4	9,752.	0.	9,752.

FORM 990-PF OTHER INCOME STATEMENT 3

DESCRIPTION	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
ATLAS ENERGY RESOURCES	4,233.	4,233.	
TOTAL TO FORM 990-PF, PART I, LINE 11	4,233.	4,233.	

FORM 990-PF ACCOUNTING FEES STATEMENT 4

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING FEES	11,622.	0.		11,622.
TO FORM 990-PF, PG 1, LN 16B	11,622.	0.		11,622.

FORM 990-PF

TAXES

STATEMENT

5

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
STATE TAXES PAID	450.	0.		0.
EXCISE TAX	373.	0.		0.
STATE CORP COMMISSION	25.	0.		25.
TO FORM 990-PF, PG 1, LN 18	848.	0.		25.

FORM 990-PF

OTHER EXPENSES

STATEMENT

6

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ANNUAL FEES NEW BOSTON INSTITUTIONAL FUND	125.	125.		0.
TO FORM 990-PF, PG 1, LN 23	4,685.	4,685.		0.
	4,810.	4,810.		0.

FORM 990-PF

CORPORATE STOCK

STATEMENT

7

DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
CORPORATE STOCKS	0.	0.
TOTAL TO FORM 990-PF, PART II, LINE 10B	0.	0.

FORM 990-PF

OTHER INVESTMENTS

STATEMENT

8

DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
INVESTMENT-NEW BOSTON INSTITUTIONAL FUND, LP V	COST	89,614.	89,614.
TOTAL TO FORM 990-PF, PART II, LINE 13		89,614.	89,614.

FORM 990-PF

GRANTS AND CONTRIBUTIONS
PAID DURING THE YEAR

STATEMENT 12

RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT	RECIPIENT STATUS	AMOUNT
ABIGAIL MCDONALD 93 BRAMHILL COURT EAST AMHERST, NY 14051	NONE SCHOLARSHIP	STUDENT	1,000.
ANGELICA OGIBA 413 GLEN OAK DRIVE EAST AMHERST, NY 14051	NONE SCHOLARSHIP	STUDENT	1,000.
AMY LOUD 121 FORESTGLEN CIRCLE WILLIAMSVILLE, NY 14221	NONE SCHOLARSHIP	STUDENT	1,000.
BRIANNA STEEL 2960 ROSEMARIE CIRCLE NEWFANE, NY 14108	NONE SCHOLARSHIP	STUDENT	2,000.
BRYAN RIDALL 59 APPLEFIELD DRIVE WILLIAMSVILLE, NY 14221	NONE SCHOLARSHIP	STUDENT	500.
CARRIE MALLISON 179 DAVEN DR. GETZVILLE, NY 14068	NONE SCHOLARSHIP	STUDENT	500.
ERIN VAN PATTER 8075 COUNTRY ROAD EAST AMHERST, NY 14051	NONE SCHOLARSHIP	STUDENT	500.
ERIN WILLIS 75 N PARISH DRIVE AMHERST, NY 14051	NONE SCHOLARSHIP	STUDENT	500.

GANG FAMILY FOUNDATION

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HARLAND KRUPP 7175 RIDGE ROAD	LOCKPORT, NY 14094	NONE SCHOLARSHIP	STUDENT	500.
JACK JAGODZINSKI 28 FAWN MEADOWS COURT	GETZVILLE, NY 14068	NONE SCHOLARSHIP	STUDENT	500.
JESSICA SCHERMAHORN 3690 LOCKPORT-OLCOTT RD.	LOCKPORT, NY 14094	NONE SCHOLARSHIP	STUDENT	2,000.
JOSEPH NEIDLINGER 1700 WEST CREEK ROAD	BURT, NY 14028	NONE SCHOLARSHIP	STUDENT	1,000.
KENDZIE WHOLEBEN 5655 WEST BLUFF	OLCOTT, NY 14126	NONE SCHOLARSHIP	STUDENT	1,000.
KELLY MULVIHILL 2 FOREST GLEN CIRCLE	WILLIAMSVILLE, NY 14221	NONE SCHOLARSHIP	STUDENT	500.
MARI ROGERS 14 STABLE CT. WEST	EAST AMHERST, NY 14051	NONE SCHOLARSHIP	STUDENT	500.
MARIA MASTRIOANNI 26 STABLE RUN	EAST AMHERST, NY 14051	NONE SCHOLARSHIP	STUDENT	500.
MARISSA MORFORD 2043 LOCKPORT OLCOTT ROAD	BURT, NY 14028	NONE SCHOLARSHIP	STUDENT	2,000.
MELISSA LONG 43 SOUTH CASTLEROCK LANE	EAST AMHERST, NY 14051	NONE SCHOLARSHIP	STUDENT	500.

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MICHAEL COLETTI 8 SCHIMWOOD DRIVE 14068	GETZVILLE, NY	NONE SCHOLARSHIP	STUDENT	500.
MICHELLE HERBERGER 855 HEIM RD	GETZVILLE, NY 14068	NONE SCHOLARSHIP	STUDENT	500.
NATHAN STERN 7079 ELLICOTT ROAD	LOCKPORT, NY 14094	NONE SCHOLARSHIP	STUDENT	1,000.
RICHARD BOTTOM 2990 COOMER RD.	NEWFANE, NY 14108	NONE SCHOLARSHIP	STUDENT	2,000.
RYAN DELAMERE 1989 DODGE RD.	EAST AMHERST, NY 14051	NONE SCHOLARSHIP	STUDENT	4,000.
RYAN RIEGEL 178 SCHIMWOOD CT.	GETZVILLE, NY 14068	NONE SCHOLARSHIP	STUDENT	500.
SAMANTHA SERVISI PO BOX 102	NEWFANE, NY 14108	NONE SCHOLARSHIP	STUDENT	4,000.
SARAH MIKULSKI 58 MILL VALLEY DR.	EAST AMHERST, NY 14051	NONE SCHOLARSHIP	STUDENT	500.
SHALVI D'ARCHGELO 12 MILLER ROAD	GETZVILLE, NY 14068	NONE SCHOLARSHIP	STUDENT	500.
STEPHEN STOECKI 3240 TONAWANDA CREEK RD.	AMHERST, NY 14228	NONE SCHOLARSHIP	STUDENT	2,000.

GANG FAMILY FOUNDATION

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ROBERT NOVAK 105 LABELLE TERRACE AMHERST, NY 14228	NONE SCHOLARSHIP	STUDENT	1,000.
TELLURIDE ADAPTIVE SPORTS PROGRAM PO BOX 2254 TELLURIDE, CO 81435	NONE ANNUAL APPEAL	501(C)(3)	2,500.
TULLURIDE MEDICAL CENTER FOUNDATION 500 WEST PACIFIC AVENUE TELLURIDE, CO 81435	NONE GENERAL	501(C)(3)	3,500.
TOLULOPE ORDUNSKI 14 EMERALD TRAIL WILLIAMSVILLE, NY 14221	NONE SCHOLARSHIP	STUDENT	500.
MEMORIAL HOSPITAL FOUNDATION PO BOX 1846 EASTON, MD 21601	NONE 2009 SPRING APPEAL FOR EXPANSION OF THE BREAST CENTER	501(C)(3)	2,500.
TIGER WOODS FOUNDATION 121 INNOVATION DRIVE, STE 150 IRVINE, CA 92617	NONE GENERAL	501(C)(3)	14,978.
CATHY FLAGLER 4803 G CAMBRIDGE DRIVE LOCKPORT, NY 14094	NONE SCHOLARSHIP	STUDENT	500.
MARYBETH TITUS 4524 LILI DRIVE LAWRENCE, KS 66049	NONE SCHOLARSHIP	STUDENT	3,000.
TROY BENSON 2361 COOMER ROAD BURT, NY 14028	NONE SCHOLARSHIP	STUDENT	1,000.
CEDARS-SINAI MEDICAL CENTER PO BOX 48750, ROOM 2416 LOS ANGELES, CA 90048	NONE GENERAL	501(C)(3)	2,500.

GANG FAMILY FOUNDATION

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VENTURA COUNTY COMMUNITY
FOUNDATION
1317 DEL NORTE ROAD, #150
CAMARILLO, CA 93010

NONE
GENERAL

501(C)(3) 5,000.

SPECIAL OLYMPICS
1133 19TH STREET, NW
WASHINGTON, DC 20036

NONE
WEBSITE DESIGN

501(C)(3) 17,750.

TOTAL TO FORM 990-PF, PART XV, LINE 3A

86,228.

Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

► File a separate application for each return.

- If you are filing for an **Automatic 3-Month Extension**, complete **only Part I** and check this box
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete **only Part II** (on page 2 of this form).

►

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only

►

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns

Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Charities & Nonprofits

Type or print	Name of Exempt Organization	Employer identification number
	GANG FAMILY FOUNDATION	54-1922206
File by the due date for filing your return. See instructions	Number, street, and room or suite no. If a P O box, see instructions 11006 SWEET MEADOW DRIVE	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions OAKTON, VA 22124	

Check type of return to be filed (file a separate application for each return)

<input type="checkbox"/> Form 990	<input type="checkbox"/> Form 990-T (corporation)	<input type="checkbox"/> Form 4720
<input type="checkbox"/> Form 990-BL	<input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust)	<input type="checkbox"/> Form 5227
<input type="checkbox"/> Form 990-EZ	<input type="checkbox"/> Form 990-T (trust other than above)	<input type="checkbox"/> Form 6069
<input checked="" type="checkbox"/> Form 990-PF	<input type="checkbox"/> Form 1041-A	<input type="checkbox"/> Form 8870

GANG FAMILY FOUNDATION

- The books are in the care of ► 11006 SWEET MEADOW DRIVE - OAKTON, VA 22124
Telephone No ► (703) 359-4699 FAX No ►

►

- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____ If this is for the whole group, check this box ► If it is for part of the group, check this box ► and attach a list with the names and EINs of all members the extension will cover

1 I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time until
AUGUST 15, 2010, to file the exempt organization return for the organization named above. The extension
is for the organization's return for
► calendar year 2009 or
► tax year beginning _____, and ending _____

2 If this tax year is for less than 12 months, check reason Initial return Final return Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions	3a	\$	0.
b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit	3b	\$	0.
c Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions	3c	\$	0.

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions

LHA For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

Form 8868 (Rev. 4-2009)

- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only Part II and check this box

Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868

- If you are filing for an **Automatic 3-Month Extension**, complete only Part I (on page 1).

Part II: Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed)		
Type or print File by the extended due date for filing the return. See Instructions	Name of Exempt Organization GANG FAMILY FOUNDATION	Employer identification number 54-1922206
	Number, street, and room or suite no. If a P.O. box, see instructions. 11006 SWEET MEADOW DRIVE	For IRS use only
	City, town or post office, state, and ZIP code For a foreign address, see instructions. OAKTON, VA 22124	

Check type of return to be filed (File a separate application for each return)

<input type="checkbox"/> Form 990	<input type="checkbox"/> Form 990-EZ	<input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust)	<input type="checkbox"/> Form 1041-A	<input type="checkbox"/> Form 5227	<input type="checkbox"/> Form 8870
<input type="checkbox"/> Form 990-BL	<input checked="" type="checkbox"/> Form 990-PF	<input type="checkbox"/> Form 990-T (trust other than above)	<input type="checkbox"/> Form 4720	<input type="checkbox"/> Form 6069	

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

GANG FAMILY FOUNDATION

- The books are in the care of ► **11006 SWEET MEADOW DRIVE - OAKTON, VA 22124**
Telephone No ► **(703) 359-4699** FAX No. ►
- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box ► . If it is for part of the group, check this box ► and attach a list with the names and EINs of all members the extension is for.

- 4 I request an additional 3-month extension of time until **NOVEMBER 15, 2010**
- 5 For calendar year **2009**, or other tax year beginning , and ending
- 6 If this tax year is for less than 12 months, check reason: Initial return Final return Change in accounting period
- 7 State in detail why you need the extension

ADDITIONAL TIME IS REQUIRED TO GATHER THE NECESSARY INFORMATION FROM EXTERNAL THIRD PARTIES TO ALLOW FOR A COMPLETE AND ACCURATE FILING.

8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions	8a \$ 0.
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868	8b \$ 0.
c Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	8c \$ 0.

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form

Signature ► *Patrick W. O'Malley* Title ► C.P.A.

Date ► **8/2/10**

Form 8868 (Rev. 4-2009)