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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 calendar year 2009, or tax year beginning , 2009, and ending Initial return Initial Return of a former public charity G Check all that apply Final return Amended return Address change Name change Employer identification number Use the NANCY AND GEOFFREY STACK FAMILY IRS label 71-1019812 Otherwise. FOUNDATION Telephone number (see the instructions) print 18802 BARDEEN AVE or type IRVINE, CA 92612-1521 See Specific С If exemption application is pending, check here Instructions D 1 Foreign organizations, check here 2 Foreign organizations meeting the 85% test, check Н |X| Section 501(c)(3) exempt private foundation Check type of organization here and attach computation Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation If private foundation status was terminated Fair market value of all assets at end of year J Accounting method X Cash under section 507(b)(1)(A), check here (from Part II, column (c), line 16) Other (specify) If the foundation is in a 60-month termination 1,477,975. (Part I, column (d) must be on cash basis ) under section 507(b)(1)(B), check here Part I Analysis of Revenue and (a) Revenue and (b) Net investment (c) Adjusted net (d) Disbursements Expenses (The total of amounts in expenses per books income ıncome for charitable columns (b), (c), and (d) may not neces purposes sarily equal the amounts in column (a) (cash basis only) (see the instructions)) Contributions, gifts, grants etc received (att sch) 75<u>,0</u>00 If the foundn is not req to att Sch B Interest on savings and temporary 41 41 41 cash investments 32,698 32,698 32,698 Dividends and interest from securities 5a Gross rents. **b** Net rental income or (loss) -913,019 6a Net gain/(loss) from sale of assets not on line 10 SCANNED JULIFFINATIF b Gross sales price for all 1,651,995 Capital gain net income (from Part IV line 2) 0. 0 Net short-term capital gain Income modifications 10 a Gross sales less returns and allowances **b** Less Cost of goods sold c Gross profit/(loss) (att sch) 11 Other income (attach schedule) 32.739 32,739 Total. Add lines 1 through 11 -805,280 13 Compensation of officers directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits 16 a Legal fees (attach schedule) **b** Accounting fees (attach sch) c Other prof fees (attach sch) OPERATI 17 Interest RECEIVED 3,079. 3,079 SEE STM 1 18 Taxes (attach schedule)(see instr.) Depreciation (attach 19 0 ത sch) and depletion <del>7 2010</del> JUL Occupancy Travel, conferences, and meetings 22 Printing and publications OGDEN. UT 23 Other expenses (attach schedule) SEE STATEMENT 2 174 174. 24 Total operating and administrative 3,253. expenses. Add lines 13 through 23 3,253 Contributions, gifts, grants paid STMT 3 870,000 870,000. Total expenses and disbursements. 873,2<u>53</u> 0 0. 873,253. Add lines 24 and 25 Subtract line 26 from line 12: a Excess of revenue over expenses -1,678,533and disbursements 32,739 **b** Net investment income (if negative enter 0) 32,739. C Adjusted net income (if negative enter 0)

Part	11	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End o	of year
raru	11	Balance Sheets column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	19,876.	-5,717.	-5,717.
	2	Savings and temporary cash investments		<del></del>	
	3	Accounts receivable			
		Less allowance for doubtful accounts			, ,
	4	Pledges receivable		Z.	
		Less allowance for doubtful accounts		and a recommendation of the	* * *
	5	Grants receivable			
	6	1			
		Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see the instructions)		<del></del>	
	7	Other notes and loans receivable (attach sch)			
S	ļ	Less allowance for doubtful accounts			
A S E T	8	Inventories for sale or use			
E	9	Prepaid expenses and deferred charges			
Ś	10 a	a Investments — U.S. and state government obligations (attach schedule)			
	l t	Investments corporate stock (attach schedule)			
	l	: Investments — corporate bonds (attach schedule)			
		Investments – land, buildings, and			
		equipment basis			
		Less accumulated depreciation (attach schedule)			
	12	Investments – mortgage loans			
	13	Investments – other (attach schedule) STATEMENT 4	3,438,029.	1,785,089.	1,483,692.
	14	Land, buildings, and equipment basis			
		Less accumulated depreciation (attach schedule)			
		Other assets (describe Total assets (to be completed by all filers—	3,457,905.	1,779,372.	1 477 975
	17	see instructions. Also, see page 1, item I)	3,437,903.	1,119,314.	1,477,975.
ī	17	Accounts payable and accrued expenses			
A B	18	' '			
B	19		·		
Ļ	20	Loans from officers, directors, trustees, & other disqualified persons			
ť	21	Mortgages and other notes payable (attach schedule)			,
- 1	22	Other liabilities (describe			
E S	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.			•
Ņ F	24	Unrestricted			
N F E U T N	25	Temporarily restricted			
, D	26	Permanently restricted			,
A S S A E T A		Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.			·
ELTA	27	Capital stock, trust principal, or current funds			-
SN	28	Paid-in or capital surplus, or land, building, and equipment fund			
O E	29	Retained earnings, accumulated income, endowment, or other funds	3,457,905.	1,779,372.	
RS	30	Total net assets or fund balances (see the instructions)	3,457,905.	1,779,372.	
	31	Total liabilities and net assets/fund balances (see the instructions)	3,457,905.	1,779,372.	
Part	III .	Analysis of Changes in Net Assets or Fund Balance		······································	
				-vac with	
1	end-	l net assets or fund balances at beginning of year – Part II, colu of-year figure reported on prior year's return)	iiii (a), iiile oo (must a)	gree with	3,457,905.
2		r amount from Part I, line 27a		2	-1,678,533.
3		increases not included in line 2 (itemize)		3	
4		lines 1, 2, and 3		4	1,779,372.
5		ases not included in line 2 (itemize)		5	
_		I net assets or fund balances at end of year (line 4 minus line 5)	- Part II. column (b)		1,779,372.
				·	

Par	(a) List and describe	the kind(s) of property sold (e.g., re, or common stock, 200 shares MI	eal estate,	(b) How acq P — Purch D — Donat	ase	(C) Date acquired (month, day year)	(d) Date sold (month, day, year)
1a BERNSTEIN GLOBAL WEALTH 71537 P						6/30/08	5/04/09
	CANTERBURY A/C 2210			P		5/12/09	12/21/09
c							
d							
е							
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other bar plus expense of sa			(h) Gain or (e) plus (f) m	
a	1,571,997.		2,49	4,646.			-922,649.
<u>b</u>	79,998.		7	0,368.			9,630.
c							
d							
e							
		ng gain in column (h) and owned by				(I) Gains (Coli	umn (h)
	(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column over column (j), if a		g tha	ain minus column (I in -0-) <b>or</b> Losses (fr	rom column (h))
a							-922,649.
b	)						9,630.
c	<u></u>		<del></del>				
d							
e		<u> </u>	L				
2	Capital gain net income or (net	capital loss) — If gain, also If (loss), en	enter in Part I, line 7 ter -0- in Part I, line 7		2_		-913,019.
3	Net short-term capital gain or (	loss) as defined in sections 1222(5)	and (6)				
		8, column (c) (see the instructions	) If (loss), enter -0-	-	_		012 010
	in Part I, line 8	C-+i 40.40(-) ( Di	-1.T. N 1.	1 1	3_		-913,019.
Par		Section 4940(e) for Reduce foundations subject to the section	· · ·			N/A	
Was		nis part blank tion 4942 tax on the distributable ar ify under section 4940(e). Do not co	* *	se period?		Yes	☐ No
1		n each column for each year, see the		g any entre	 es	•	
	(a)  Base period years  Calendar year (or tax year beginning in)	<b>(b)</b> Adjusted qualifying distributions	(c) Net value of noncharitable-use as:			(d) Distribution umn (b) divided	
	2008						
	2007						
	2006						
	2005						
	2004		_				
2	Total of line 1, column (d)				2		
3	Average distribution ratio for th	e 5-year base period — divide the to has been in existence if less than	otal on line 2 by 5, or by the		3		
_	•		,		_		
4	Enter the net value of nonchari	table-use assets for 2009 from Part	X, line 5	-	4_		
5	Multiply line 4 by line 3			-	5_		
6	Enter 1% of net investment inc	ome (1% of Part I, line 27b)		-	6_	·	
7	Add lines 5 and 6				7_		
8	Enter qualifying distributions from	om Part XII, line 4			8		
	If line 8 is equal to or greater the Part VI instructions	nan line 7, check the box in Part VI,	line 1b, and complete that	part using	a 1%	tax rate See t	he

Form 990-PF (2009) NANCY AND GEOD			<u>-1</u> 019812		F	age <b>4</b>
	vestment Income (Section 4940(a), 4940(b), 4940(e), 0	or 4948 — se	e the instruc	:tions)		
1 a Exempt operating foundations described in secti					· · · ·	
Date of ruling or determination letter	(attach copy of letter if necessary - see instr.)					
<b>b</b> Domestic foundations that meet the s			1		<del>(</del>	<u> 555.</u>
check here and enter 1% of P				· >		
c All other domestic foundations enter 2% of line	27b Exempt foreign organizations enter 4% of Part I, line 12, column (b)		1 1			~ Ì
2 Tax under section 511 (domestic sect	ion 4947(a)(1) trusts and taxable				2 ·	
foundations only Others enter -0-)			2			0.
3 Add lines 1 and 2	A047(-)(1) 111 1 - (1 - 1 - 1 - 1 - 0)		3			555.
	etion 4947(a)(1) trusts and taxable foundations only Others	s enter -U-)	4			0.
	btract line 4 from line 3 If zero or less, enter -0-		5	(MSQ-1, 2)		555.
6 Credits/Payments	aredited to 2000	0.00			**	, 3
a 2009 estimated tax pmts and 2008 overpayment		968			٠,	
<b>b</b> Exempt foreign organizations — tax w	-				*	
c Tax paid with application for extensio				`;'		. !
<b>d</b> Backup withholding erroneously withh	· · · · · · · · · · · · · · · · · · ·					1
7 Total credits and payments Add lines 8 Enter any penalty for underpayment of	of estimated tax. Check here $X$ if Form 2220 is attached		8			968.
9 Tax due If the total of lines 5 and 8 is more th			9			$\frac{1.}{0.}$
10 Overpayment If line 7 is more than the total of	•		10			312.
11 Enter the amount of line 10 to be Credited to 2	·	adad I	11			0.
Part VII-A Statements Regarding		ideu		<del></del>		<u> </u>
				, , , <u>, , , , , , , , , , , , , , , , </u>	Yes	No
participate or intervene in any politica	n attempt to influence any national, state, or local legislati il campaign?	on or did it		1 a	103	X
<b>b</b> Did it spend more than \$100 during the (see the instructions for definition)?	ne year (either directly or indirectly) for political purposes			1 b		X
If the answer is 'Yes' to 1a or 1b, atta	ach a detailed description of the activities and copies of an	y materials p	ublished			į
or distributed by the foundation in cor					^-	
c Did the foundation file Form 1120-PO	L for this year? Diffical expenditures (section 4955) imposed during the yea	r		1 c		X
(1) On the foundation >\$	0. (2) On foundation managers		0.			,
	by the foundation during the year for political expenditure	tax imposed	l on			
foundation managers   • \$	0.					
<b>2</b> Has the foundation engaged in any actif 'Yes,' attach a detailed description	ctivities that have not previously been reported to the IRS? of the activities			2		X
3 Has the foundation made any change	s, not previously reported to the IRS, in its governing instri	ument article	25			
of incorporation, or bylaws, or other s	imilar instruments? If 'Yes,' attach a conformed copy of th	e changes		3		X
4a Did the foundation have unrelated bus	siness gross income of \$1,000 or more during the year?			4a		X
<b>b</b> If 'Yes,' has it filed a tax return on <b>Fo</b>	rm 990-T for this year?			4b	N,	/A
5 Was there a liquidation, termination, dissolution	, or substantial contraction during the year?			5		X
If 'Yes,' attach the statement required						4
<ul> <li>6 Are the requirements of section 508(e</li> <li>By language in the governing instru</li> </ul>	e) (relating to sections 4941 through 4945) satisfied either					, ,
	·					
<ul> <li>By state legislation that effectively a with the state law remain in the gov</li> </ul>	amends the governing instrument so that no mandatory directions instrument?	ections that i	conflict	6		Х
5	s at any time during the year? If 'Yes,' complete Part II, column (c), and Par	t XV		7	Х	
	on reports or with which it is registered (see the instruction					
CAL						:
<b>b</b> If the answer is 'Yes' to line 7, has the foundation (or designate) of each state as required by <i>Gene</i>	on furnished a copy of Form 990-PF to the Attorney General bral Instruction G <sup>2</sup> If 'No,' attach explanation.			8b	Х	
9 Is the foundation claiming status as a for calendar year 2009 or the taxable	private operating foundation within the meaning of section year beginning in 2009 (see instructions for Part XIV)? If $^\prime$	n 4942(j)(3) c Yes,' comple	or 4942(j)(5) te Part XIV	9		X
10 Did any persons become substantial of and addresses.	contributors during the tax year? If 'Yes,' attach a schedule	listing their	names	10		Х
BAA		·	Fo	<b>10</b> rm <b>99</b>	0-PF (	

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Part VII-A Statements Regarding Activities Continued			
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	X
12 Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?		12	x
13 Did the foundation comply with the public inspection requirements for its annual returns and exempt Website address ► N/A	ion application?	13	Х
14 The books are in care of ► GEOFFREY STACK Telepho			
Located at ► 18802 BARDEEN AVE IRVINE CA ZIP + 4		 21	~
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check her		N/A	
and enter the amount of tax-exempt interest received or accrued during the year	<b>►</b>   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.	<u></u>		Yes No
1 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	1 1	
(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?	Yes X No		
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes X No	1 1	
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	Yes X No		
(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		no chaga ma sa pramata de caracita de cara
<b>b</b> If any answer is 'Yes' to 1a(1)-(6), did <b>any</b> of the acts fail to qualify under the exceptions described Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see the instruc	n ctions)?	1 b	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 ac that were not corrected before the first day of the tax year beginning in 2009?	s,	1 c	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?	Yes X No		
If 'Yes,' list the years ► 20, 20, 20		l i	i .
<b>b</b> Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 49 (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 494 <b>all</b> years listed, answer 'No' and attach statement — see the instructions)		2 b	N/A
c If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the year	s here	20	INTA
► 20, 20, 20	s riere		1 2 4 4
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 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 approby the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, o (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)	ved	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>b</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
BAA	F	orm <b>990</b>	-PF (2009)

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Part VII-B   Statements Regarding Activit	<u>ies for Which Forn</u>	<u>1 4720 May Be Req</u>	uired (continued)		
5a During the year did the foundation pay or incu	ir any amount to				
(1) Carry on propaganda, or otherwise attemp	ot to influence legislation	n (section 4945(e))?	Yes X	No	
(2) Influence the outcome of any specific pub on, directly or indirectly, any voter registra	lic election (see section ation drive?	1 4955), or to carry	Yes X	No	
(3) Provide a grant to an individual for travel,	study, or other similar	purposes?	Yes X	No	
(4) Provide a grant to an organization other the in section 509(a)(1), (2), or (3), or section	han a charitable, etc, o 14940(d)(2)? (see instri	rganization described uctions)	Yes X	No	A COLUMN TO A COLU
(5) Provide for any purpose other than religio educational purposes, or for the prevention			Yes X	No	
<b>b</b> If any answer is 'Yes' to 5a(1)-(5), did <b>any</b> of described in Regulations section 53 4945 or in (see instructions)?	the transactions fail to a current notice regar	qualify under the exceptions disaster assistance	tions	- <del></del>	N/A
Organizations relying on a current notice rega	rding disaster assistan	ce check here	▶ 🗌		
c If the answer is 'Yes' to question 5a(4), does tax because it maintained expenditure respon If 'Yes,' attach the statement required by Reg.	sibility for the grant?	•	N/A Yes	No S	2
6a Did the foundation, during the year, receive ar on a personal benefit contract?			Yes X	No No	
<b>b</b> Did the foundation, during the year, pay prem If 'Yes' to 6b, file Form 8870	iums, directly or indirec	tly, 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	ibited tax shelter transa	ction? Yes X	No	
<b>b</b> If yes, did the foundation receive any proceed				7b	N/A
Part VIII Information About Officers, D and Contractors	irectors, Trustees,	Foundation Manag	gers, Highly Paid E	mployees	,
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 (lf not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred	(e) Expense other allo	
	devoted to position		compensation		
NANCY STACK	DIRECTOR	0.	0.	İ	0.
18802 BARDEEN AVE	0				
IRVINE, CA 92612					
GEOFFREY L. STACK	DIRECTOR	0.	0.		0.
18802 BARDEEN	0			ļ	
IRVINE, CA 92612				İ	
2 Compensation of five highest-paid employee	es (other than those inc	luded on line 1— see in	structions). If none, e	nter '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 other allo	
NONE			compensation		
			<u> </u>		
					·
			<u>.</u>		
Total number of other employees paid over \$50,000	<u> </u> 		<b>•</b>		0

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Part X   Minimum Investment Return (All domestic foundations must complete this part. F see instructions.)	oreign foun	idations,
1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes a Average monthly fair market value of securities	 1 a	
<b>b</b> Average of monthly cash balances	1 b	
c Fair market value of all other assets (see instructions)	1 c	
d Total (add lines 1a, b, and c)	1 d	0.
e Reduction claimed for blockage or other factors reported on lines 1a and 1c		
(attach detailed explanation)		
2 Acquisition indebtedness applicable to line 1 assets	2	
3 Subtract line 2 from line 1d	3	
4 Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	
5 Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	0.
6 Minimum investment return. Enter 5% of line 5	6	0.
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operand certain foreign organizations check here ► ☐ and do not complete this part XI ☐ and XI ☐ and		ations
1 Minimum investment return from Part X, line 6	1	
2a Tax on investment income for 2009 from Part VI, line 5	. 4.	
b Income tax for 2009 (This does not include the tax from Part VI)		
c Add lines 2a and 2b	2 c	655.
3 Distributable amount before adjustments Subtract line 2c from line 1	3	-655.
4 Recoveries of amounts treated as qualifying distributions	4	
5 Add lines 3 and 4	5	-655.
6 Deduction from distributable amount (see instructions)	6	
7 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	0.
Part XII Qualifying Distributions (see instructions)		
1 Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes a Expenses, contributions, gifts, etc — total from Part I, column (d), line 26	1a	873,253.
<b>b</b> Program-related investments — total from Part IX-B	1 b	
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc. purposes	2	

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

4 Qualifying distributions Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 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)

BAA

3 Amounts set aside for specific charitable projects that satisfy the a Suitability test (prior IRS approval required)

6 Adjusted qualifying distributions. Subtract line 5 from line 4

**b** Cash distribution test (attach the required schedule)

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873,253.

873,253.

3 a

3ь

4

5

6

Part XIII Undistributed Income (see instructions)

	<b>(a)</b> Corpus	<b>(b)</b> Years prior to 2008	<b>(c)</b> 2008	<b>(d)</b> 2009
1 Distributable amount for 2009 from Part XI, line 7				0.
2 Undistributed income, if any, as of the end of 2009				
a Enter amount for 2008 only		· · · · · · · · · · · · · · · · · · ·	0.	
<b>b</b> Total for prior years 20, 20, 20		0.		
3 Excess distributions carryover, if any, to 2009				
<b>a</b> From 2004	, ,	•.3		i i
<b>b</b> From 2005	,	<i>"</i>		`
c From 2006				
d From 2007	<b>Y</b>	«,		′
e From 2008 788,170.	700 170	***		
f Total of lines 3a through e	788,170.		· · · · · · · · · · · · · · · · · · ·	
4 Qualifying distributions for 2009 from Part XII, line 4 ► \$ 873, 253.	₹ 🔏	·		
a Applied to 2008, but not more than line 2a	<b>₹</b> *	`	~	\$
a Applied to 2008, but not more than line 2a			0.	
<b>b</b> Applied to undistributed income of prior years (Election required – see instructions)		0.		
c Treated as distributions out of corpus				i
(Election required – see instructions)	0.			
d Applied to 2009 distributable amount	·	_		0.
e Remaining amount distributed out of corpus	873,253.			
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) )			*	^
				b.
6 Enter the net total of each column as indicated below:				, 
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,661,423.	*	,	
	1,001,425.			
<b>b</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		İ	v	
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.			ļ	0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed				t 1
by section 170(b)(1)(F) or 4942(g)(3) (see instructions)	0.			
, , , , , , , , , , , , , , , , , , ,				
8 Excess distributions carryover from 2004 not applied on line 5 or line 7 (see instructions)	0.			
9 Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a	1,661,423.		;	
10 Analysis of line 9				
a Excess from 2005				
<b>b</b> Excess from 2006				
c Excess from 2007				
<b>d</b> Excess from 2008 788,170.				,
<b>e</b> Excess from 2009 873, 253.				•

Form 990-PF (2009) NANCY AND GEOFFREY STACK FAMILY 71-1019812								
Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)  N/A								
1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2009, enter the date of the ruling								
b Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)								
2a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years					
investment return from Part X for each year listed	(a) 2009	<b>(b)</b> 2008	(c) 2007	(d) 2006	(e) Total			
<b>b</b> 85% of line 2a								
c Qualifying distributions from Part XII, line 4 for each year listed								
d Amounts included in line 2c not used directly for active conduct of exempt activities								
<ul> <li>Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c</li> </ul>								
3 Complete 3a, b, or c for the alternative test relied upon								
a 'Assets' alternative test — enter								
(1) Value of all assets					L			
(2) Value of assets qualifying under section 4942(j)(3)(B)(i).								
b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed								
c 'Support' alternative test — enter								
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)								
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)								
(3) Largest amount of support from an exempt organization			·					
(4) Gross investment income								
Part XV Supplementary Information	(Complete this	part only if the	organization ha	d \$5,000 or moi	re in			
assets at any time during the	nè year — see in	structions.)	J	* - ,				
Information Regarding Foundation Mana a List any managers of the foundation who close of any tax year (but only if they have SEE STATEMENT 5	have contributed me	ore than 2% of the t than \$5,000) (See	lotal contributions re section 507(d)(2))	eceived by the foun	dation before the			
<b>b</b> List any managers of the foundation who a partnership or other entity) of which the NONE	own 10% or more of foundation has a 1	of the stock of a corp 0% or greater intere	ooration (or an equa est	ally large portion of	the ownership of			
2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc, Programs:  Check here X if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc, (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d								
<b>a</b> The name, address, and telephone numb	a The name, address, and telephone number of the person to whom applications should be addressed							
<b>b</b> The form in which applications should be	submitted and infor	mation and materia	ls they should inclu	de				
c Any submission deadlines								
d Any restrictions or limitations on awards,	such as by geograp	hical areas, charitat	ole fields, kinds of i	nstitutions, or other	factors			

Page **11** 

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	Purpose of grant or contribution	Amount			
	substantial contributor	recipient					
Name and address (home or business)  a Paid during the year	any foundation manager or substantial contributor	recipient	contribution	Amount			
Total		L	<u> </u>				
h Approved for future payment	<u> </u>		► 3a	<u> </u>			
b Approved for future payment			<b>▶</b> 21.	•			
Total			► 3b				

ter gross amounts unless otherwise indicated	Unrelated business income Excluded to			section 512, 513, or 514	
	(a) Business code	<b>(b)</b> Amount	(c) Exclu- sion	<b>(d)</b> Amount	(e) Related or exemption income
Program service revenue			code		(see the instruction
ab					
С					
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
Interest on savings and temporary cash investments					4
Dividends and interest from securities					32,69
5 Net rental income or (loss) from real estate					
a Debt-financed property	<u> </u>	<del></del>			
<b>b</b> Not debt-financed property			<del>  </del>		
6 Net rental income or (loss) from personal property					
7 Other investment income					010 01
8 Gain or (loss) from sales of assets other than inventory			-		-913,01
9 Net income or (loss) from special events					
Gross profit or (loss) from sales of inventory					
1 Other revenue					
a					
b	1				
cd	1 1		<del> </del>		
de			<del>                                     </del>		
2 Subtotal Add columns (b), (d), and (e)	· · · · · · · · · · · · · · · · · · ·				-880,28
3 Total. Add line 12, columns (b), (d), and (e)	L			13	-880,28
	calculations )				
⇒e worksneer in the instructions for line 13 to verity (	calculations )				
· · · · · · · · · · · · · · · · · · ·			nt Piirnac		
rt XVI-B Relationship of Activities to th			· · · · · · · · · · · · · · · · · · ·		tly to the
art XVI-B Relationship of Activities to the line No.  Explain below how each activity for which accomplishment of the foundation's exemptions. ■			· · · · · · · · · · · · · · · · · · ·		tly to the the instructions )
art XVI-B Relationship of Activities to th			· · · · · · · · · · · · · · · · · · ·		tly to the he instructions )
ine No. Explain below how each activity for which accomplishment of the foundation's exemp			· · · · · · · · · · · · · · · · · · ·		tly to the he instructions)
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ine No. Explain below how each activity for which accomplishment of the foundation's exemp			· · · · · · · · · · · · · · · · · · ·		tly to the he instructions )

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

	-				<del>"</del>				V	N1 -
1	desci	he organization directly ribed in section 501(c) on ng to political organizal	of the Code (c	engage in any of the other than section 50	following wit 1(c)(3) organ	h any other organ izations) or in sec	iization ction 527,		Yes	No
	a Trans	sfers from the reporting	foundation to	a noncharitable exe	empt organiza	ation of				İİ
	(1)	Cash						1 a (1)		X
	(2)	Other assets						1 a (2)		X
	<b>b</b> Other	r transactions								]]
	٠,,	Sales of assets to a non						1 b (1)		X
	<b>(2)</b> F	Purchases of assets from	m a noncharit	able exempt organiz	ation			1 b (2)		Χ_
	(3) F	Rental of facilities, equip	oment, or othe	er assets				1b (3)		Χ_
		Reimbursement arrange						1 b (4)		_X
		oans or loan guarantee						1 b (5)		Х
		Performance of services						1 b (6)		_X
	<b>c</b> Shari	ing of facilities, equipm	ent, mailing li	sts, other assets, or	paid employe	ees		1c		_X_
	the a	answer to any of the a oods, other assets, or s ransaction or sharing a	services diven	by the reporting four	indation. If th	e foundation rece	ived less than fair m.	arket value in	ue of	
(a)	Line no	(b) Amount involved		of noncharitable exempt o			of transfers, transactions,		nement	
N/			(0)		- gam <u>-</u>	(a) Decempary	or danistro, transactions,	and onlaring arran	<u>igo.non</u>	<del></del>
						-				
			<u> </u>							
				<del></del>		······································				
							<del></del>			
							<del> </del>			
				<u> </u>						
			<u> </u>							
			<u> </u>							
	desci	e foundation directly or ribed in section 501(c) on es,' complete the following	of the Code (c	ated with, or related ther than section 50	I to, one or m 1(c)(3)) or in	ore tax-exempt o section 527?	rganizations	Yes	X	No
	D II TO	(a) Name of organizati		(b) Type of	organization		(c) Description of	relationshin		
N/	Α	(a) traine of organizati	<u> </u>	(2) 1900 01	organization:		(c) Bescription of	relationship		
		, , , , , , , , , , , , , , , , , , , ,								
							·-··			
U	nder pen omplete	allies of perjury. I declare that Declaration of preparer (other to the control of the control o	I have examined the large of the lax payer or fix	nis return including accomp duciary) is based on all info	panying schedules ormation of which	and statements and to preparer has any knowl	the best of my knowledge a edge	and belief, it is true	e correc	t and
١.		1.11.	11/	-046		1.71.60	10 N TRUS	-66		
S P G N	<b>Y</b>	July 1.	mock	TeusiEE		X ////20	· /	sie E		
G	/ Sign	nature of Africer or trustee	<u> </u>			Date /	/Title	Dranger + 1d11		
	aıd re-	Preparer's signature	My		CIN	6/21/M	Check if	Preparer s Identify (See <b>Signature</b> in N/A	ing num the insti	s)
- 1 1	arer's		· · · · · · · · · · · · · · · · · · ·	LICK & COMPA	NY	1 7,0	EIN ► N/A			
	Ise Only	yours if self employed) > 5951								
		address and ZIP code WOOD	LAND HILI	S, CA 91367			Phone no ►	(818) 999	-696	7
BA	١							Form <b>99</b>	0-PF	2009)

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

Department of the Treasury Internal Revenue Service

### **Schedule of Contributors**

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

OMB No 1545 0047

2009

Name of the organization NANCY AND GEOFFR	EY STACK FAMILY	Employer identification number
FOUNDATION		71-1019812
Organization type (check one)		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust <b>not</b> trea	ted as a private foundation
	527 political organization	
Form 990-PF	$\overline{X}$ 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated	as a private foundation
	501(c)(3) taxable private foundation	
Check if your organization is covered by the C Note: Only a section 501(c)(7), (8), or (10) or	General Rule or a Special Rule ganization can check boxes for both the General Rule	e and a Special Rule See instructions
General Rule –  X For an organization filing Form 990, 990-E contributor (Complete Parts I and II)	EZ, or 990-PF that received, during the year, \$5,000 o	or more (in money or property) from any one
Special Rules —		
509(a)(1)/170(b)(1)(A)(vi) and received from ar	Form 990 or 990-EZ, that met the 33-1/3% support to ny one contributor, during the year, a contribution of the gre or (ii) Form 990-EZ, line 1 Complete Parts I and II	est of the regulations under sections eater of (1) \$5,000 or (2) 2% of the
	ization filing Form 990 or 990-EZ, that received from 000 for use <i>exclusively</i> for religious, charitable, scient Is Complete Parts I, II, and III	
contributions for use exclusively for religion this box is checked, enter here the total contributions for use exclusively for religion this box is checked, enter here the total contributions for use exclusively for religion to the contributions for use exclusively for religion to the contributions for use exclusively for religion to the contributions for use exclusively for religion to the contributions for use exclusively for religion to the contributions for use exclusively for religion to the contributions for use exclusively for religion to the contribution to the contribution of the contribution to the contribution to the contribution to the contribution to the contribution of the contribution to the contributi	ization filing Form 990 or 990-EZ, that received from ous, charitable, etc, purposes, but these contributions ontributions that were received during the year for an s unless the <b>General Rule</b> applies to this organization	s did not aggregate to more than \$1,000 If nexclusively religious, charitable, etc,
religious, charitable, etc, contributions of	\$5,000 or more during the year	<b>►</b> \$
990-PF) but it must answer 'No' on Part IV, Ii	by the General Rule and/or the Special Rules does not not 2 of their Form 990, or check the box on line H of ing requirements of Schedule B (Form 990, 990-EZ, or	its Form 990-EZ, or on line 2 of its Form

BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990, 990EZ, or 990-PF.

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

	<b>B</b> (Form 990, 990-EZ, or 990-PF) (2009)	Page 1	of 1 of Part I
Name of org	r identification number 019812		
Part I	Contributors (see instructions )		
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	GEOFFREY AND NANCY STACK  18802 BARDEEN AVE  IRVINE, CA 92612	\$75,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II if there is a noncash contribution Part II if there
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)

Part II	Noncash Property (see instructions )			
(a) No. from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
	N/A	$\top$		
		١,		
		- \$ -		
(a) No. from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
		_		
		$\dashv$		
		\$_		
(a) No. from Part I	(b)  Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
		_	-	
		_		
		\$		
(a) No. from Part I	(b)  Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
		_		
		\$_		
		1		
(a) No. from Part I	(b)  Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
			<del></del>	
		4		
		\$		
		- `-		
(a) No. from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
		4		
		<b>⊣</b> ~-		

BAA

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

NANCY AND GEOFFREY STACK FAMILY

Employer identification number

	AND GEOFFREY STACK FAMILY		71-10198	12		
Part III	Exclusively religious, charitable, etc organizations aggregating more than	, individual contributions to 1 \$1,000 for the year.(Comple	o section 501(c)(7), (8), or (1 te cols (a) through (e) and the follo	<b>0)</b> owing line entry)		
	For organizations completing Part III, enter to contributions of \$1,000 or less for the year (E	tal of <i>exclusively</i> religious, charita inter this information once — see i	ole, etc, nstructions) > \$	N/A		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gıft	(d) Description of how			
, aici	N/A					
	Turnofouncia nome addunce	(e) Transfer of gift	Deletion show of the control of the			
	Transferee's name, address,	and ZIP + 4	Relationship of transferor to tr	ansieree		
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how	gift is held		
Part I	T dipose of gift	OSC OF GITE	Description of now	girt is neid		
		(e)				
	Transferee's name, address,	Transfer of gift and ZIP + 4	Relationship of transferor to transferee			
(a)	(b)	(6)	(d)			
No. from Part I	Purpose of gift	(c) Use of gift	Description of how	gift is held		
	Transferee's name, address,	(e) Transfer of gift and ZIP + 4	Relationship of transferor to to	ansferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how	gift is held		
	Transferee's name, address,	(e) Transfer of gift and ZIP + 4	Relationship of transferor to transferee			
			<del></del>			

# **FEDERAL STATEMENTS**

PAGE 1

NANCY AND GEOFFREY STACK FAMILY **FOUNDATION** 

71-1019812

STATEMENT 1	
FORM 990-PF, PART I, LINE	18
TAXES	

	(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
FEDERAL TAXES STATE TAXES TAXES & LICENSES	\$ 2,994. 10. 75. TOTAL \$ 3,079.	\$ 0.	\$ 0.	\$ 2,994. 10. 75. \$ 3,079.

### STATEMENT 2 FORM 990-PF, PART I, LINE 23 OTHER EXPENSES

				(A)	(1	B) NET		(C)	(D)
			EXE	ENSES	INV	ESTMENT	ADJ	USTED	CHARITABLE
			PER	<u>BOOKS</u>		INCOME	_NET	INCOME	 <u>PURPOSES</u>
BANK CHARGES			\$	46.					\$ 46.
MERCHANT ACCOUNT	FEES			128.					128.
		TOTAL	\$	174.	\$	0.	\$	0.	\$ 174.

### STATEMENT 3 FORM 990-PF, PART I, LINE 25 CONTRIBUTIONS, GIFTS, AND GRANTS

CASH GRANTS AND ALLOCATIONS

CLASS OF ACTIVITY:

DONEE'S NAME:

DONEE'S ADDRESS:

PUBLIC AID ACRES OF LOVE

4695 MACARTHUR COURT, 11TH FL,

NEWPORT BEACH, CA 92660

RELATIONSHIP OF DONEE: NONE

ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

PUBLIC CHARITY

CLASS OF ACTIVITY:

DONEE'S NAME:

DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE: AMOUNT GIVEN:

PUBLIC AID

NEWPORT SPORTS MUSEUM

100 NEWPORT CENTER DRIVE #100

NEWPORT BEACH, CA 92660

NONE

PUBLIC CHARITY

5,000.

1,500.

CLASS OF ACTIVITY:

DONEE'S NAME:

DONEE'S ADDRESS:

EDUCATIONAL SUPPORT

GEORGETOWN SCHOLARSHIP PROGRAM

P.O. BOX 571239

WASHINGTON, DC 20007

NONE

ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

EDUCATIONAL INSTITUTION 25,000.

CLASS OF ACTIVITY:

RELATIONSHIP OF DONEE:

DONEE'S NAME:

PUBLIC AID THE UNITED WAY

DONEE'S ADDRESS: 18012 MITCHELL AVENUE, SOUTH

# FEDERAL STATEMENTS

NANCY AND GEOFFREY STACK FAMILY **FOUNDATION** 

71-1019812

500,000.

25,000.

10,000.

5,000.

20,000.

10,000.

**STATEMENT 3 (CONTINUED) FORM 990-PF, PART I, LINE 25** CONTRIBUTIONS, GIFTS, AND GRANTS

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

NONE PUBLIC CHARITY

IRVINE, CA 92614

PUBLIC AID

ST ANTHONY FOUNDATION 121 GOLDEN GATE AVENUE SAN FRANCISCO, CA 94102

NONE

NONE

RELATIONSHIP OF DONEE:

CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:

ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

PUBLIC CHARITY

PUBLIC AID

CLASS OF ACTIVITY: DONEE'S NAME:

DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE: PUBLIC CHARITY

AMOUNT GIVEN:

ACHIEVE

ONE LOMBARD STREET #202 SAN FRANCISCO, CA 94111

NONE

CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

PUBLIC AID

MARINE CORPS-LAW ENFORCEMENT FOUNDATION

P.O. BOX 12566

SAN DIEGO, CA 92112

NONE

PUBLIC CHARITY

CLASS OF ACTIVITY:

DONEE'S NAME:

DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE: PUBLIC CHARITY

AMOUNT GIVEN:

PUBLIC AID

ORANGE COUNTY PERFORMING ARTS

600 TOWN CENTER DRIVE COSTA MESA, CA 92626

NONE

CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE: PUBLIC CHARITY

AMOUNT GIVEN:

PUBLIC AID

OVER THE RAINBOW 2040 BROWN AVE EVANSTON, IL 60201

NONE

CLASS OF ACTIVITY:

DONEE'S NAME:

DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE: EDUCATIONAL INSTITUTION

AMOUNT GIVEN:

EDUCATIONAL SUPPORT

TRUSTEES OF THE UNIV. OF PENNSYLVANIA

P.O. BOX 785326

PHILADELPHIA, PA 19178

25,000.

CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:

MEDICAL RESEARCH

MDA-ALS ORANGE COUNTY

756 WEST TOWN AND COUNTRY DR

ORANGE, CA 92868

PAGE 2

### FEDERAL STATEMENTS

NANCY AND GEOFFREY STACK FAMILY **FOUNDATION** 

PAGE 3 71-1019812

STATEMENT 3 (CONTINUED) FORM 990-PF, PART I, LINE 25 CONTRIBUTIONS, GIFTS, AND GRANTS

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE: PUBLIC CHARITY

AMOUNT GIVEN:

NONE

10,000.

CLASS OF ACTIVITY:

DONEE'S NAME:

DONEE'S ADDRESS:

UNIVERSITY OF CALIFORNIA, IRVINE FOUNDAT

555 ALDRICH HALL IRVINE, CA 92797

EDUCATIONAL SUPPORT

NONE

RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DONEE: EDUCATIONAL INSTITUTION

AMOUNT GIVEN:

160,000.

CLASS OF ACTIVITY:

DONEE'S NAME:

DONEE'S ADDRESS:

PUBLIC AID

BOY SCOUTS OF AMERICA, ORANGE CTY

1211 EAST DYER RD SANTA ANA, CA 92705

NONE

RELATIONSHIP OF DONEE:

RELATIONSHIP OF DONEE:

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

PUBLIC CHARITY

20,000.

CLASS OF ACTIVITY:

DONEE'S NAME:

DONEE'S ADDRESS:

MEDICAL RESEARCH

JUVENILE DIABETES RESEARCH FOUNDATION

17992 MITCHELL SOUTH

IRVINE, CA 92614

NONE

ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

PUBLIC CHARITY

5,000.

CLASS OF ACTIVITY:

DONEE'S NAME:

DONEE'S ADDRESS:

PUBLIC AID

ORANGEWOOD CHILDREN'S FOUNDATION

1575 E. 17TH ST SANTA ANA, CA 92705

NONE ORGANIZATIONAL STATUS OF DONEE: PUBLIC CHARITY

5,000.

CLASS OF ACTIVITY:

DONEE'S NAME:

AMOUNT GIVEN:

DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:

SAGE HILL HIGH SCHOOL 20402 NEWPORT COAST DR NEWPORT COAST, CA 92657

EDUCATIONAL SUPPORT

NONE

ORGANIZATIONAL STATUS OF DONEE: EDUCATIONAL INSTITUTION

25,000.

CLASS OF ACTIVITY:

DONEE'S NAME:

AMOUNT GIVEN:

DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

PUBLIC AID

EAST MEETS WEST FOUNDATION

1611 TELEGRAPH AVE OAKLAND, CA 94612

NONE

PUBLIC CHARITY

1,000.

CLASS OF ACTIVITY:

DONEE'S NAME:

DONEE'S ADDRESS:

EDUCATIONAL SUPPORT

DANIEL MURPHY SCHOLARSHIP FUND

ONE NORTH FRANKLIN CHICAGO, IL 60606

NONE

RELATIONSHIP OF DONEE:

# **FEDERAL STATEMENTS**

NANCY AND GEOFFREY STACK FAMILY **FOUNDATION** 

PAGE 4

71-1019812

**STATEMENT 3 (CONTINUED)** FORM 990-PF, PART I, LINE 25 CONTRIBUTIONS, GIFTS, AND GRANTS

ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

PUBLIC CHARITY

2,500.

CLASS OF ACTIVITY:

DONEE'S NAME: DONEE'S ADDRESS: PUBLIC AID

HEART OF JESUS RETREAT CENTER

2927 S. GREENVILLE ST SANTA ANA, CA 92704

NONE

RELATIONSHIP OF DONEE:

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

PUBLIC CHARITY

5,000.

CLASS OF ACTIVITY:

DONEE'S NAME:

DONEE'S ADDRESS:

PUBLIC AID

SPIN

6449 INDEPENDENCE AVE WOODLAND HILLS, CA 91367

NONE

ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

PUBLIC CHARITY

5,000.

CLASS OF ACTIVITY:

DONEE'S NAME: DONEE'S ADDRESS: PUBLIC AID

SAINT JOSEPH BALLET 1810 NORTH MAIN ST SANTA ANA, CA 92760

NONE

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

PUBLIC CHARITY

5,000.

870,000.

TOTAL \$

**STATEMENT 4** FORM 990-PF, PART II, LINE 13 **INVESTMENTS - OTHER** 

VALUATION METHOD

BOOK VALUE FAIR MARKET VALUE

OTHER INVESTMENTS

CANTERBURY/BERNSTEIN FUNDS

COST

\$ 1,785,089. \$ 1,483,692.

TOTAL \$ 1,785,089. \$ 1,483,692.

**STATEMENT 5** FORM 990-PF, PART XV, LINE 1A FOUNDATION MANAGERS - 2% OR MORE CONTRIBUTORS

NANCY STACK GEOFFREY L. STACK

# Form **8868** (Rev April 2009)

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

-	_	Extension, complete only Part I and check this box	► [X]		
-	•	omatic) 3-Month Extension, complete only Part II (on page 2			
		dy been granted an automatic 3-month extension on a previo			
Partil .	Automatic 3-Month Extens	ion of Time. Only submit original (no copies need	ed).		
			I July Brott sale N		
-		requesting an automatic 6-month extension — check this box			
All other corp income tax r		), partnerships, REMICS, and trusts must use Form 7004 to re	quest an extension of time to file		
Electronic Fi	i <b>ling <i>(e-file).</i></b> Generally, you can el	lectronically file Form 8868 if you want a 3-month automatic e on required to file Form 990-T) However, you cannot file Forn	xtension of time to file one of the		
the additiona	il (not automatic) 3-month extens	ion or (2) you file Forms 990-BL, 6069, or 8870, group returns	, or a composite or consolidated		
Form 990-1 this form, vis	Instead, you must submit the full sit <i>www.irs.gov/efile</i> and click on <i>e</i>	y complétéd and signed page 2 (Part II) of Form 8868 For mo e-file for Charities & Nonprofits	ore details on the electronic filing of		
	Name of Exempt Organization		Employer identification number		
Type or		TACK FAMILY			
print	NANCY AND GEOFFREY S FOUNDATION	TACK FAMILY	71-1019812		
File by the due date for	Number, street, and room or suite number	If a P O box, see instructions			
filing your return See	18802 BARDEEN AVE				
instructions	City, town or post office, state, and ZIP cod	de For a foreign address, see instructions			
	IRVINE, CA 92612-152	1			
	of return to be filed (file a separat				
Form 990	<b>—</b>	<b>→</b> · · · · · · · · · · · · · · · · · · ·	m 4720		
Form 990	<u></u>	1, (c (c (c. , (c.	m 5227		
Form 990	<u></u>	<b></b>	n 6069		
X Form 990	J-PF	Form 1041-A Form	n 8870		
The books	are in the care of CEOFEDE	יע כידאריני			
• The books	sale in the case of - GEOFFRE	Y STACK	<del>-</del> –		
Telephone	a No. ►	FAX No. ►			
•		e or place of business in the United States, check this box			
•		anization's four digit Group Exemption Number (GEN)	If this is for the whole group.		
		he group, check this box   and attach a list with the nar			
	nsion will cover				
1 I reque	st an automatic 3-month (6 montl	hs for a corporation required to file Form 990-T) extension of	time		
until _	$8/15$ , 20 $10$ _, to file	the exempt organization return for the organization named at	oove		
The ext	tension is for the organization's re	eturn for			
► <u>X</u>	calendar year 20_09_ or				
▶	tax year beginning	, 20, and ending, 20			
2 If this t	ax year is for less than 12 months	s, check reason	Change in accounting period		
	application is for Form 990-BL, 99 undable credits. See instructions	0-PF, 990-T, 4720, or 6069, enter the tentative tax, less any	3a \$ 522.		
<b>b</b> If this a made	application is for Form 990-PF or Include any prior year overpayme	990-T, enter any refundable credits and estimated tax payment allowed as a credit	3b \$ 968.		
deposit	e Due. Subtract line 3b from line with FTD coupon or, if required, structions.	3a Include your payment with this form, or, if required, by using EFTPS (Electronic Federal Tax Payment System)	3c \$ 0.		
	ou are going to make an electron	ic fund withdrawal with this Form 8868, see Form 8453-EO ar			
<del></del>	<del> </del>	ion Act Notice, see instructions.	Form <b>8868</b> (Rev 4-2009)		