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990-PF	Return of Private	Fou
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ndation or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation

2009

OMB No 1545-0052

G Check all that apply Indust return Indust element Address change Fall return Name change Name of foundation Address change Name of foundation Name of found			enue Service Note. The Toundation may t	be able to use a copy of this		rung requirements	
Use the IRIS Name of foundation Annual Annual Activity and Activity of the International Activity of the International Activity of the International Activity of the International Activity of Internati					, and ending		
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Description			Amended return	Address chan	ge 🔛		
Otherwise, LOUIS M AND LAURA K ALPERN FOUNDATION of type. 4171 N. MESA ST., BLDG. D, STE. 100 C (15) 545-2333 Sespetific (21) Fastor from stitis, and 21 code instructions (1) Fair matrix value of all sesses at earl of year J. Section 447(01) nonexempt characteristic transfer from securities (1) Fair matrix value of all sesses at earl of year J. Fair matrix value of all sesse	Use	the l	RS Name of foundation			A Employer Identificatio	n number
print in the print of the print part of the prin	1	abel.				T4 640004	-
ter types 171 N. MESA ST., BLDG. D, STE. 100 (915) 545-2333 Ses Specific Gry or town, state, and 2P code Instructions EL PASO, TX. 79902 Discourage of the state							
See Specific City or Lown, state, and 2P code EL PASO, TX 79902 H Check type of organization			· 1	•		•	0000
Instructions Consider the Control of			10- 11-11-11-11-11-11-11-11-11-11-11-11-11	G. D, STE. I	00	· · · · · · · · · · · · · · · · · · ·	
B. D. PARCO TA 79 79 79 79 79 79 79 7		-	City of towir, State, and ZIP Code				
Section 947/a(h)** nonexempt charatable trust			EL PASO, TX 79902			1. Foreign organization	s, check here
Fart market value of all assels at end of year Accounting method Cash Accrual Indicator Accounting method Accounting me	H_C	_				check here and attach of	omputation
### Analysis of Revenue and Expenses Analysis of Revenue and Expenses (a) Revenue and expenses (b) Net investment (c) Adjusted 507(b)(1)(18), theck here (c) Adjusted 607(b) (c) Adju							
S 335, 892 (Part I. column (c) must be on cash basis.) Part II nativisis of Revenue and Expenses The boat of amounts occurring 8, 16, and (c) may not receive and received and service and s				•	Accrual	under section 507(b)(1)(A), check here
Part Analysis of Revenue and Expenses (a) Royarus and expenses per book expenses expenses per book expenses expenses per book expenses expenses per book expenses per					L 1		
1 Contributions, gifts, grants, etc., received 25,000. N/A	Ť	-			oasis.)	ì	
2 Check P If the tourdation is not incorporately and the imposery cash investments and temporary cash investments and temporary so cash investment income of the cash of cash and the cash of	Pa	rt I	(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)				for charitable purposes
Interest on any and temporary		1	Contributions, gifts, grants, etc., received	25,000.		N/A	
Seash investments		2	· · · · · · · · · · · · · · · · · · ·				
Sa Gross rents b Net rental incorner or (loss) 68 Net spen or (loss) 69 Net spen or (loss) 60 Net spen or (loss) 70 Net spen or (loss) 71 Net spen or (loss) 71 Net spen or (loss) 71 Net spen or (loss) 72 Net spen or (loss) 73 Net spen or (loss) 74 Net spen or (loss) 75 Net spen or (loss) 76 Net spen or (loss) 77 Net spen or (loss) 78 Net spen or (los		3	Interest on savings and temporary cash investments				
b Net rental income or (loss) 6 Net gen or (loss) from sale of assets not on line 10 b Cross sales price for all desires on line 6 as less sales price for all desires on line 6 as less sales price for all desires on line 6 as less sales price for all desires on line 6 as less sales sales returns 9 Income modifications 10a and sales sales sales returns 11 Other income RECEIVED 12 Total: Add, income sales sales sales returns 13 Compensates for foreign epictory, incomes, etc. 14 Other empty less sales		4	Dividends and interest from securities	5.	5.		STATEMENT 1
Sa Net gain or (locs) from sale of assets not on line 10		5a	Gross rents				
b Gross sales price for all b Rests control from Part N, line 2) b Rests control from		b	Net rental income or (loss)				
8 Net short-term capital gain 9 Income modifications 10a and disvances b Less Cast of poods add c Gross profit or floss. 11 Other income RECEIVED 12 Total. Add these Titmough 11 25,005. 5. 13 Compensations for florge, directory, trustees, etc. 20 15 Pension/plants, employee benefits 16a Legal fees. OGDEN, UT b Accounting fees. c Other professional fees c Other professional fees 17 Interest 18 Taxes. STMT 2 11. 0. 0. 0. 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses 24 Total operating and administrative expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12 a Excess of memory over expenses and disbursements b Net Investment income (if negative, enter-0-) c Adjusted net income (if negative, enter-0-) b Net Investment income (if negative, enter-0-) c Adjusted net income (if negative, enter-0-) b N/A	anne	6a					
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8 Net short-term capital gain 9 Income modifications 10a and disvances b Less Cast of poods add c Gross profit or floss. 11 Other income RECEIVED 12 Total. Add these Titmough 11 25,005. 5. 13 Compensations for florge, directory, trustees, etc. 20 15 Pension/plants, employee benefits 16a Legal fees. OGDEN, UT b Accounting fees. c Other professional fees c Other professional fees 17 Interest 18 Taxes. STMT 2 11. 0. 0. 0. 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses 24 Total operating and administrative expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12 a Excess of memory over expenses and disbursements b Net Investment income (if negative, enter-0-) c Adjusted net income (if negative, enter-0-) b Net Investment income (if negative, enter-0-) c Adjusted net income (if negative, enter-0-) b N/A	eve	7	Capital gain net income (from Part IV, line 2)		0.		
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b Less Cost of goods sold c Gross profit or (loss) 11 Other income RECEIVED 12 Total. Add uries 1 through 11 13 Compensation of officers, directors, frustees, etc. 14 Other engaging salaries and wagge 10 15 Pension plans, amployee benefits 16 Legal fees 17 Interest 18 Taxes 17 Interest 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses 24 Total operating and administrative expenses. Add lines 13 through 23 25 Contributions, girts, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12 a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-)		g					
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11 Other income RECEIVED 12 Total. Add utgest through 111 13 Compensation brofficery, directors, trustees, etc. 80 14 Other empty se salaries and wages 10 15 Pension plants, employee benefits 16a Legal fees OGDEN, UT b Accounting fees c Other professional fees 17 Interest 18 Taxes STMT 2 1. 0. 0. 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses 24 Total operating and administrative expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12 a Excess of revenue over expenses and disbursements b Net investment income (if regative, enter -0-) c Adjusted met income (if regative, en		b	Less Cost of goods sold				
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14 Other engigives salarities and wages 10 10 10 10 10 10 10 10 10 10 10 10 10		13	Compensation of officers directors trustees, etc	0.	0.		0.
15 Pensioniplans, amployee benefits 16 Legal fees 17 Interest 18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses 24 Total operating and administrative expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12 a Excess of revenue over expenses and disbursements b Net investment income (if regative, enter -0-) c Adjusted net income (if regative, enter -0-)		14	Other emptoylee salaries and wages 10				
C Other professional fees 17 Interest 18 Taxes STMT 2 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses 24 Total operating and administrative expenses. Add lines 13 through 23 25 Contributions, grifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12 a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-)	S	15	Pensioninians employee penellis I or J				
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27 Subtract line 26 from line 12 a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) N/A		20	•	2 601	_		2.600
a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) N/A		27		2,001.			2,000.
b Net investment income (if negative, enter -0-) C Adjusted net income (if negative, enter -0-) N/A		l		22.404			
c Adjusted net income (if negative, enter -0-)		l	•	22/101.	5	[···
		l			<u> </u>	N/A	-
	9235	01		Act Notice see the instruc	tions.		Form 990-PF (2009)

_		0-PF(2009) LOUIS M AND LAURA K ALP			6422347 Page 2
P	ari	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	
_			(a) Book Value	(b) Book Value	(c) Fair Market Value
		Cash - non-interest-bearing	6,178.	12,829.	12,829.
		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			
ets	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
•	10a	Investments - U.S. and state government obligations	20 255	00 055	
	b	Investments - corporate stock STMT 4	28,055.	28,055.	0.
	C	Investments - corporate bonds			
	11	Investments - land, buildings, and equipment basis			
		Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other		·······	
	14	Land, buildings, and equipment basis			
		Less accumulated depreciation	150 505	106 050	202 262
	15	Other assets (describe STATEMENT 5)	170,505.	186,258.	323,063.
			004 700	005 140	225 222
_	16	Total assets (to be completed by all filers)	204,738.	227,142.	335,892.
	17	Accounts payable and accrued expenses			
	18	Grants payable			
es	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
iab	21	Mortgages and other notes payable			
_	22	Other liabilities (describe			
				0	
_	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here	,		
S		and complete lines 24 through 26 and lines 30 and 31.	204 720	227 142	
Net Assets or Fund Balances	24	Unrestricted	204,738.	227,142.	
ala	25	Temporarily restricted			
8	26	Permanently restricted			
Š		Foundations that do not follow SFAS 117, check here			
5	l	and complete lines 27 through 31.			
ţ	27	Capital stock, trust principal, or current funds			
SS	28	Paid-in or capital surplus, or land, bldg, and equipment fund		· · · · · · · · · · · · · · · · · · ·	
¥	29	Retained earnings, accumulated income, endowment, or other funds	204,738.	227 142	
ž	30	Total net assets or fund balances	204,730.	227,142.	
		The state of the s	204,738.	227,142.	
_	31	Total liabilities and net assets/fund balances		221,142.	
F	art	Analysis of Changes in Net Assets or Fund B	alances		
1	Tota	I net assets or fund balances at beginning of year - Part II, column (a), line		· · · · · · · · · · · · · · · · · · ·	
		st agree with end-of-year figure reported on prior year's return)		1	204,738.
2		r amount from Part I, line 27a		2	22,404.
3		r increases not included in line 2 (itemize)		3	0.
4		lines 1, 2, and 3		4	227,142.
5	Deci	reases not included in line 2 (itemize)		5	0.
6	Tota	I net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30	6	227,142.
_					Form 990-PF (2009)

		AND LAURA K			TI	NC		7.	4-642	2347	Page 3
		sses for Tax on Inve		income	(h) h	low 20	quired	/=\ D=4-		/4\ 5	
(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.)			l P	- Purc - Don	hase '	(c) Date a (mo , da		(d) Da ^r (mo , d	te sold ay, yr)		
1a			۳	.0011	ation				 		
b NON	1E									· -	
С			· · ·								
d					ļ						
<u>e</u>					Ц,						
(e) Gross sales price	(f) I	Depreciation allowed (or allowable)		st or other basis expense of sale			·		ain or (loss) (f) minus (
a											
b								<u> </u>			
C	_										
de											<u> </u>
Complete only for assets showing	gain in	column (h) and owned by the	foundation	on 12/31/69			(1)	Gains (C	ol (h) gain	minus	
(I) F M V as of 12/31/69		(j) Adjusted basis as of 12/31/69		cess of col. (1) col. (j), if any			còl	(k), but n	ot less than (from col. (I	-0-) ar	
a											
b											
C											
<u>d</u>											
<u>e</u>					_		<u> </u>			· · · · · · · · · · · · · · · · · · ·	
2 Capital gain net income or (net cap	oital loss	If gain, also enter in If (loss), enter -0- ir	i Part I, line i Part I, line	7 7	}	2					
3 Net short-term capital gain or (los	s) as defi	•									
If gain, also enter in Part I, line 8, o						_					
If (loss), enter -0- in Part I, line 8 Part V Qualification U	- d C	2ti 4040/a) far [2	l Toy on Not	-	3	nont Inc	· · · ·		*****	
							Herit IIIC	Jille			
(For optional use by domestic private	toundati	ons subject to the section 494	4U(a) tax on	i net investment it	ncome	•)					
If section 4940(d)(2) applies, leave th	ıs part bi	ank									
Was the foundation liable for the sect	on 4042	tay on the distributable amou	int of any vi	ear in the hase ne	nod?					☐ Yes	X No
If "Yes," the foundation does not quali					iiou ·						
1 Enter the appropriate amount in e					es						
(a) Base period years		(b)		_	(c)				Distrib	(d) ution ratio	
Calendar year (or tax year beginning	ıg ın)	Adjusted qualifying distri		Net value of no	oncha				(col (b) div	ided by col	
2008			,999.				6,896				87136
2007			,998. ,999.	·			1,358				44215 44921
2006			,999.				9,884				45474
2005 2004	-		,100.				0,540				32014
2004			,	· · · · · · · · · · · · · · · · · · ·			- 1	1			
2 Total of line 1, column (d)								2		. 2	53760
3 Average distribution ratio for the 5	-year ba	se period - divide the total on	line 2 by 5,	or by the numbe	r of ye	ars					
the foundation has been in exister	-				•			3		.0	50752
4 Enter the net value of noncharitab	le-use as	sets for 2009 from Part X, lin	e 5					4	_	314	,826.
								1_		1 0	070
5 Multiply line 4 by line 3								5		13	<u>,</u> 978.
6 Enter 1% of net investment incom	ia /1% of	Part I line 27h\						6			0.
6 Enter 1% of net investment incom	IC (170 U	1 alt 1, mie 270)						-	 	•	
7 Add lines 5 and 6								7		15	,978.
8 Enter qualifying distributions from	Part YII	line 4						8		2	,600.
If line 8 is equal to or greater than			h and comi	niete that nart usu	ng a 1	% tax	rate	<u></u> _			
See the Part VI instructions			., and com	pioto tilut part usii	u	,, tax					
923521 02-02-10									F	orm 990 -	PF (2009

orm	990-PF(2009) LOUIS M AND LAURA K ALPERN FOUNDATION	74_	6422	3/17		ann A
	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4					age 4
1a	Exempt operating foundations described in section 4940(d)(2), check here \(\bigcup \) and enter "N/A" on line 1					
•	Date of ruling or determination letter (attach copy of letter if necessary-see instructions)					
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%	1				0.
	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-)	2_				0.
3	Add lines 1 and 2	3				0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4				0.
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5		-		0.
6	Credits/Payments					
а	2009 estimated tax payments and 2008 overpayment credited to 2009 6a					
b	Exempt foreign organizations - tax withheld at source					
C	Tax paid with application for extension of time to file (Form 8868)					
d	Backup withholding erroneously withheld 6d					
7	Total credits and payments Add lines 6a through 6d	7				0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8				
g	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9				0.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10				
	Enter the amount of line 10 to be Credited to 2010 estimated tax ▶ Refunded ▶	11				
Pa	rt VII-A Statements Regarding Activities					
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene	ın			Yes	No
	any political campaign?			1a		<u>X</u>
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?			1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published	d or				
	distributed by the foundation in connection with the activities.					
C	Did the foundation file Form 1120-POL for this year?			10		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year					
	(1) On the foundation \blacktriangleright \$ (2) On foundation managers \blacktriangleright \$ 0 .					
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation					
	managers > \$O.					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		<u>X</u>
	If "Yes," attach a detailed description of the activities.					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, of	ſ				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3_		<u>X</u>
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	**	/ 7	4a		<u>X</u>
	If "Yes," has it filed a tax return on Form 990-T for this year?	IN	/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		<u>X</u>
_	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	iaw				v
_	remain in the governing instrument?			6	X	<u>X</u>
7	Did the foundation have at least \$5,000 in assets at any time during the year?			7	^	
_	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)					
	TX If the account of Every to the 7 has the foundation formulation account Form 000 RE to the Atternor Constal (or decimate)					
D	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)			0.	Х	
^	of each state as required by General Instruction G? If "No," attach explanation	nde-		8b	^	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for cale	nuar		0		Х
10	year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," complete Part XIV			10	Х	
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses			_ IU	Λ	

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orm	990-PF (2009) LOUIS M AND LAURA K ALPERN FOUNDATION 74-6	422347	 F	Page 5
	rt 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		
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?	12	х	
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?			_
4.4	Website address ► N/A The books are in care of ► LOUIS M. ALPERN, M.D. Telephone no ► (91)	5) 545	-23	17
	Located at ► 4171 N. MESA ST., BLDG. D, STE. 100, EL PASO, TX ZIP+4	▶ 79902		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		, ▶	\Box
-	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
Pe	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required		Vaa	NIa
4.	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	NO
12	During the year did the foundation (either directly or indirectly) (1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X	No.		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)	""		
	a disqualified person?	No		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	- 1 3		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(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)?	No		
	(5) 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)	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)?	'A 1b		
	Organizations relying on a current notice regarding disaster assistance check here			
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			
	before the first day of the tax year beginning in 2009?	10		<u>X</u>
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)) 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			
ď	before 2009?	No		
	If "Yes," list the years	""		
F	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)	'A 2b	[]	
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?	No		
t	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.)	'A 3b		
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
t	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			v
	had not been removed from jeopardy before the first day of the tax year beginning in 2009?	- 4b		<u>X</u>
		Form 990	-rr ()	2009)

orm 990-PF-(2009) LOUIS_M_AND_LAURA_K_ALPE	RN_FOUNDATION		74 = 64223	4-7 Page 6
Part VII-B Statements Regarding Activities for Which I	orm 4720 May Be F	Required (contin	ued)	
5a During the year did the foundation pay or incur any amount to				
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	1 4945(e))?	Ye	es X No	
(2) Influence the outcome of any specific public election (see section 4955), o	r to carry on, directly or indire			
any voter registration drive?			s X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	Y6	es X No	
(4) Provide a grant to an organization other than a charitable, etc., organizatio	n described in section			
509(a)(1), (2), or (3), or section 4940(d)(2)?		Ye	s X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f			
the prevention of cruelty to children or animals?			es X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und		n Regulations	27/2	
section 53 4945 or in a current notice regarding disaster assistance (see instru			N/A	5b
Organizations relying on a current notice regarding disaster assistance check h				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f		. /		
expenditure responsibility for the grant?		/A Ye	es L No	
If "Yes," attach the statement required by Regulations section 53.494				
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on	<u></u>		
a personal benefit contract?		Ye	es X No	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?		ļ	6b X
If "Yes" to 6b, file Form 8870.			s X No	
7a At any time during the tax year, was the foundation a party to a prohibited tax s		Y6	т н	7b
b If yes, did the foundation receive any proceeds or have any net income attribut		nogovo Highli		/0
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors	ees, roundation wa	inagers, nigni	y	
List all officers, directors, trustees, foundation managers and their	compensation.			
, , , , , , , , , , , , , , , , , , , ,	(b) Title, and average	(c) Compensation	(d) Contributions to	(e) Expense
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation	account, other allowances
LOUIS M. ALPERN	TRUSTEE	enter -0-j	compensation	anowances
4171 N. MESA ST., BLDG. D, STE. 100	11100122			
EL PASO, TX 79902	0.00	0.	0.	0.
LAURA K. ALPERN	TRUSTEE			
4171 N. MESA ST., BLDG. D, STE. 100				
EL PASO, TX 79902	0.00	0.	٥.	0.
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none,	enter "NONE."		
(-) Name and address of each amployee paid more than \$50,000	(b) Title, and average	(a) Componentian	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	and deferred compensation	allowances
NONE				
			1	
]			
	<u> </u>		<u> </u>	<u> </u>
Total number of other employees paid over \$50,000			>	0
			E	990 DE (2000)

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Part VIII Information About Officers, Directors, Trustees, Four Paid Employees, and Contractors (continued)	ındation Managers, Highly	···
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		
		
	<u>-</u> _i	
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 number of organizations and other beneficiaries served, conferences convened, research paper		Expenses
1 N/A	3 produced, etc	
2		
3		
<u> </u>		
<u> </u>		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax y	ear on lines 1 and 2	Amount
1 <u>N/A</u>		
2		-
All the second s		
All other program-related investments See instructions 3		
		·
Total Add lines 1 through 3	>	0.

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P	art X . Minimum Investment Return (All domestic foundations must complete this part. Foreign fou	ndations, se	e 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	0.
b	Average of monthly cash balances	1b	9,238.
C	Fair market value of all other assets	10	310,382. 319,620.
d	Total (add lines 1a, b, and c)	1d	319,620.
е	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	319,620.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	4,794.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	314,826.
6	Minimum investment return. Enter 5% of line 5	6	15,741.
p	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part.)	nd certain	
1	Minimum investment return from Part X, line 6	1	15,741.
2a	Tax on investment income for 2009 from Part VI, line 5		
b	Income tax for 2009 (This does not include the tax from Part VI)		
C	Add lines 2a and 2b	2c	0.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	15,741.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	15,741.
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	15,741.
P	art XII Qualifying Distributions (see instructions)	F	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		2 622
a	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	2,600.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	2,600.
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	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	2,600.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation	qualifies for th	ie section

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4940(e) reduction of tax in those years

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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				15,741.
2 Undistributed income, if any, as of the end of 2009				
a Enter amount for 2008 only			2,583.	
b Total for prior years				
		0.	·····	**************************************
3 Excess distributions carryover, if any, to 2009	1			
a From 2004	į			
b From 2005				
c From 2006	1			
d From 2007				
e From 2008	0.			
f Total of lines 3a through e	V •	·····	·····	
4 Qualifying distributions for 2009 from				
Part XII, line 4 ► \$ 2,600.			2 502	
a Applied to 2008, but not more than line 2a			2,583.	
b Applied to undistributed income of prior		0.		
years (Election required - see instructions)		U •		
c Treated as distributions out of corpus	0.			
(Election required - see instructions)	V•		-'	17.
d Applied to 2009 distributable amount	0.			1/•
e Remaining amount distributed out of corpus	0.	-ii	HI-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1	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:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
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 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				15,724.
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	0.			
9 Excess distributions carryover to 2010.				
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9				
a Excess from 2005				
b Excess from 2006			1	

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c Excess from 2007 d Excess from 2008 e Excess from 2009

<u> </u>	AND LAURA				22347 Page 10
Part XIV Private Operating F	oundations (see in:	structions and Part VI	I-A, question 9)	N/A	
1 a If the foundation has received a ruling o	r determination letter that	it is a private operating			
foundation, and the ruling is effective fo	r 2009, enter the date of t	the ruling			
b Check box to indicate whether the found	lation is a private operatir	ng foundation described	ın section	4942(j)(3) or4	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total
investment return from Part X for					
each year listed					
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					
e Qualifying distributions made directly					
for active conduct of exempt activities					
Subtract line 2d from line 2c			ļ		
3 Complete 3a, b, or c for the alternative test relied upon					
a "Assets" alternative test - enter					
(1) Value of all assets					
(2) Value of assets qualifying					
under section 4942(j)(3)(B)(i)					
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)	<u> </u>				
(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 Info	rmation (Comple	te this part only	if the foundatio	n had \$5,000 or m	ore in assets
at any time during t					
1 Information Regarding Foundation	on Managers:				
a List any managers of the foundation wh	_	than 2% of the total con	tributions received by th	e foundation before the cl	ose of any tax
year (but only if they have contributed r					
SEE STATEMENT 6					
b List any managers of the foundation wh	o own 10% or more of the	ne stock of a corporation	(or an equally large nor	tion of the ownership of a	nartnership or
other entity) of which the foundation ha			(or an equally large per	tion of the officiality of a	partitioning of
NONE	ū				
	in Orant City Loop	Cabalambia ata D			
2 Information Regarding Contribut					aata far fiiada 16
Check here \(\sum \big \text{X} \) if the foundation of the foundation makes gifts, grants, etc.					
				Complete items 2a, b, c, ai	
a The name, address, and telephone num	iber of the person to who	m applications should be	e addressed		
			· · · · · · · · · · · · · · · · · · ·		
b The form in which applications should l	be submitted and informa	ition and materials they s	should include		
		,	<u> </u>		<u> </u>
c Any submission deadlines					
				<u> </u>	<u> </u>
d Any restrictions or limitations on award	s, such as by geographic	al areas, charitable fields	, kinds of institutions, o	r other factors	
-	, , , , ,				
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	LAURA K ALPERN	FOUNDATION	74-6422	34 / Page 11
Part XV Supplementary Information				
3 Grants and Contributions Paid During the		Payment		
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
a Paid during the year EMILIO NARES FOUNDATION 1811 FORT STOCKTON DR SAN DIEGO, CA 92103-1603	N/A	-	SUPPORT SVCS TO FAMILIES WITH CANCER PATIENTS	2,600.
				2 600
Total b Approved for future payment		T	<u>▶ 3a</u>	2,600.
NONE				
		1		
Total			▶ 3b	0.

Page	1	2

Part XVI-A	Analysis of	Income-P	Producing	Activities

Enter gross amounts unless otherwise indicated	Unrelated	business income	Exclu	ded by section 512, 513, or 514	(8)
	(a) Business	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income
1 Program service revenue	code		2000		
a					
b	l ŀ	·	+		
c		<u> </u>	+		
			+		
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	5.	
5 Net rental income or (loss) from real estate					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property					-
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory					·
9 Net income or (loss) from special events					
O Gross profit or (loss) from sales of inventory					
1 Other revenue	1				
a					
b	_		_		
C	_				
d	_		_		
e			ļ		
12 Subtotal Add columns (b), (d), and (e)		0	•	5.	<u> </u>
13 Total. Add line 12, columns (b), (d), and (e)				13	5.
See worksheet in line 13 instructions to verify calculations)				· · · · · · · · · · · · · · · · · · ·

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Par Avist	Relationship of	I ACIIVILIES LO LNE	Accombiishment	of Exempt Purbose

LIIIG NU.					•			•				A COII	ithibuted import	antity to the ac	compliant for	
		undation'														
3	INTER	REST	INC	OME	INC	CREA	SES	THE	FO	JNDA	NOI	'S	CORPUS	WHICH	PROVIDES	FUNDS
	THAT	ENAE	BLE :	IT 1	ro z	ACCO	MPL:	ISH	ITS	EXE	1PT	PUF	RPOSE.			
4	DIVII	DEND	INC	OME	INC	CREA	SES	THE	FO	JNDA'	NOI	'S	CORPUS	WHICH	PROVIDES	FUNDS
	THAT	ENAE	BLE	IT 7	ro z	ACCO	MPL	ISH	ITS	EXE	1PT	PUF	RPOSE.			
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					ALPERN FOUND				<u>-6422347</u>		age 13
Pa	art X	Information Re Exempt Organ	_	nsfers To a	and Transactions	and R	elation	ships With N	loncharitabl	е	
1	Did th	e organization directly or indi		ny of the followin	o with any other organizati	ion desci	ribed in se	ction 501(c) of		Yes	No
		de (other than section 501(c		-				` ,			
а		fers from the reporting found	.,								
_	(1) 0	ash		·	•				1a(1)	1	X
		ther assets							1a(2)		X
b	Other	transactions									
	(1) S	ales of assets to a noncharita	ble exempt organi	zation					1b(1)	1	X
	(2) P	urchases of assets from a no	ncharitable exemp	t organization					1b(2)		X
	(3) F	ental of facilities, equipment,	or other assets						1b(3)	<u> </u>	X
	(4) F	eimbursement arrangements	i.						1b(4)		X
	(5) L	oans or loan guarantees							1b(5)	<u> </u>	X
	(6) F	erformance of services or me	embership or fund	raising solicitation	ons				1b(6)	4	X
C		ng of facilities, equipment, ma	-						10	<u> </u>	X
d		answer to any of the above is		•		-			-	sets,	
		vices given by the reporting t			ed less than fair market val	lue in any	y transacti	on or sharing arrar	ngement, show in		
		in (d) the value of the goods,				1 4	41				
(a)	Line no	(b) Amount involved	(c) Name	N/A	e exempt organization	+ '	0) Descript	ion of transfers, transa	actions, and sharing a	rrangem	ents
				N/A							
				.			_				
					_ , .						
_				-							
_		···					•				
_			-						-		
					· ·		-				
_			· · · · · ·	•							
_				-					-		
_											
_											
_											
2a	is the	foundation directly or indirec	tly affiliated with,	or related to, one	e or more tax-exempt organ	nızatıons	described				
	ın sed	tion 501(c) of the Code (othe	er than section 501	(c)(3)) or in sec	tion 527?				X Yes	; [No
b	If "Ye	s," complete the following sch			1	·					
		(a) Name of or	ganization	••	(b) Type of organization		D 007	(c) Description o			
_	=				PRE-K	SE	E STA	ATEMENT 7	<u> </u>		
ΕI	. PA	SO COUNTRY DA	AY SCHOOL	<u></u>	THROUGH HIGH	П			-		
		····	 .		SCHOOL	-					
_											
\neg	Under	penalties of penury, I declare that I	have examined this re	etum, including acc	ompanying schedules and state	ements, an	d to the bes	t of my knowledge an	d belief, it is true, cor	rect,	
	and co	nplete Declaration of preparer (or	er than texpayer or fic	duciary) is based or	all information of which prepar	rer has any	knowledge				
					105/02/10		TRUST	EL			
ē	\overline{s}	gnature of officer or trustee			Daté /	- ▶	Title	<u> </u>			
Sign Here		Preparer's	•			Date		Check if	Preparer's ident	ifying nu	mber
ig	Paid eparer's se Only	signature	~	-111	_ CPA_	514	1/10	self- employed ► ∑			
٠,	aid sarer's ontv		ER & LII	LEBO, I	LLP			EIN ►			
	Pai Prepai Use C				DR., BLDG.	8A					
		address, and ZIP code EL I	PASO, TX	79912	2			Phone_no	(915) 6	<u>33–6</u>	<u> 5555</u>

923622 02-02-10

Form **990-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

LOUIS M AND LAURA K ALPERN FOUNDATION

74-6422347

Organization type (check one):

Filers of: Section:

Form 990 or 990-EZ 501(c)() (enter number) organization

4947(a)(1) nonexempt charitable trust not treated as a private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

Check if your organization is covered by the General Rule or a Special Rule.

527 political organization

501(c)(3) exempt private foundation

501(c)(3) taxable private foundation

Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

Form 990-PF

X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II

Special Rules

For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II.
For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.
For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc.,

purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

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

religious, charitable, etc., contributions of \$5,000 or more during the year.

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

▶ \$

Employer Identification number

LOUIS M AND LAURA K ALPERN FOUNDATION

74-6422347

Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	LOUIS & LAURA ALPERN 4171 N. MESA ST., BLDG. D, STE. 100 EL PASO, TX 79902	\$\$.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(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) No.	(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) No.	(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) No.	(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) No.	(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.)
923452 02-	01-10	Schedule B (Form	990, 990-EZ, or 990-PF) (2009)

FORM 990-PF DIVIDENT	OS AND	INTER	EST FROM	SECUI	RITIES	STATEMENT	
SOURCE		GROSS	AMOUNT		ITAL GAINS IVIDENDS	COLUMN (A	A)
GUNNALLEN FINANCIAL INC	•		5.		0.		5.
TOTAL TO FM 990-PF, PART I, I	LN 4		5.		0.		5 .
FORM 990-PF		TAXI A)	ES (B)	· · · · · · · · · · · · · · · · · · ·	(C)	STATEMENT (D)	
DESCRIPTION	EXPE		NET INV	EST-	ADJUSTED		
EXCISE TAX		1.		0.			0 .
TO FORM 990-PF, PG 1, LN 18		1.		0.			0 .

PART VII-A STATEMENT 10 SUBSTANTIAL CONTRIBUTORS ARE: LOUIS AND LAURA ALPERN 4171 N. MESA, EL PASO, TEXAS 79902

FORM 990-PF	CORPORATE STOCK		STATEMENT
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
2,200 SHARES LASER-SIGHT		28,055.	0
TOTAL TO FORM 990-PF, PART II, L	INE 10B	28,055.	0
FORM 990-PF	OTHER ASSETS		STATEMENT !
DESCRIPTION	BEGINNING OF YR BOOK VALUE	END OF YEAR BOOK VALUE	FAIR MARKET VALUE
CASH SURRENDER VALUE OF LIFE INSURANCE	170,505.	186,258.	323,063
TO FORM 990-PF, PART II, LINE 15	170,505.	186,258.	323,063

NAME OF MANAGER

LOUIS M. ALPERN

990-PF AFFILIATION WITH TAX-EXEMPT ORGANIZATIONS STATEMENT PART XVII, LINE 2, COLUMN (C)

NAME OF AFFILIATED OR RELATED ORGANIZATION

EL PASO COUNTRY DAY SCHOOL

DESCRIPTION OF RELATIONSHIP WITH AFFILIATED OR RELATED ORGANIZATION

LAURA K. ALPERN IS THE EXECUTIVE DIRECTOR AND LOUIS M. ALPERN IS A MEMBER OF THE BOARD