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Form 990-PF

Dopartment of the Treasury

Return of Private Foundation

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

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

2009 No 1545-0052

		ue Service Note. The 1 Ir year 2009, or tax year beginni	·· ·	be able to use a copy of this	and ending	rting requirements.	
		that apply: Initial ret	_ 	Initial return of a fo	rmer public charity	Final retur	n
u c	HECK AN	Amende		Address change	· · · ·	Name change	"
		Name of foundation	<u> </u>		<u>,. </u>	A Employer identificatio	n number
	the IRS abel.	S					
	abei. erwise.	SANDERSON FAMI	LY FOUN	DATION		84-127817	4
	print	Number and street (or P O box num			Room/suite	B Telephone number	
	type.	PMB #466 MAYS	BLVD #1	0		707-939-7	083
	Specifi	City or town state and ZIP co				C If exemption application is	
Insti	ructions	INCLINE VILLAG		89451		D 1. Foreign organization	is, check here
H C	heck ty			empt private foundation		Foreign organizations mechanisms and attach of the company of the company	neeting the 85% test, computation
	Section	on 4947(a)(1) nonexempt charita	ble trust	Other taxable private founda	ition	E If private foundation st	_
I Fa	ır mark	et value of all assets at end of yea	ır J Accountii	ng method: X Cash	Accrual	under section 507(b)(
(fr	om Pa	rt II, col. (c), line 16)	Ot	her (specify)		F If the foundation is in a	a 60-month termination
•		420,156	(Part I, colu	mn (d) must be on cash t	oasis)	under section 507(b)(
Pa	rt I	Analysis of Revenue and Expens The total of amounts in columns (b), (c),	es	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements for charitable purposes
	(necessarily equal the amounts in columns (b), (c),	, and (d) may not n (a))	expenses per books	income	income	(cash basis only)
	1 C	ontributions, gifts, grants, etc., re	ceived			N/A	
		heck 🕨 🗶 if the foundation is not requir	ed to attach Sch B				
	3 tn	iterest on savings and temporary ash investments					<u> </u>
	4 D	ividends and interest from securi	ties	447.	447.		STATEMENT 1
	5a G	ross rents					
	b N	et rental income or (loss)					
ē		et gain or (loss) from sale of assets not ross sales price for all		12,515.			<u> </u>
en	U as	ssets on line 6a	<u> 9,910.</u>		10 515		
Revenue		apital gain net income (from Part IV, line	9 2)		12,515.		
_		et short-term capital gain					
	l G	ncome modifications ross sales less returns					
		nd allowances					
		ess Cost of goods sold					
	1	iross profit or (loss) Other income		<1,802.	> <1,802.		STATEMENT 2
		otal. Add lines 1 through 11		11,160.	11,160.		DIMILITY 2
_		compensation of officers, directors, trust	tono ato	0.	0.		0
		ther employee salaries and wage:	•			<u> </u>	
		ension plans, employee benefits	•		· · ·		
ses	l .	• • • • •	STMT 3	524.	0.		0
èns		annual transfer and the second	STMT 4	5,400.	0.	,	0
Š	60	intermites in arties	-				
Ve.	17 1	nterest					
raţi	18 T	nterest School S	STMT 5	119.	0.		C
Ţ.	19 D	epreciation and depletion					
Ė	20-0	ccupancy					
Ad	21 🗜	ravel conferences, and meetings					
and	22 P	rinting and publications					
ng (23 0	· ·	STMT 6	1,525.	1,207	,	<u> </u>
rati	24 T	otal operating and administrativ					
Operating and Administrative Expen	e	xpenses. Add lines 13 through 2	3	7,568.	1,207	·	10.15
U	25 U	Contributions, gifts, grants paid		49,154.			49,154
		otal expenses and disbursemen	ts.		4		4.5 4.5
		dd lines 24 and 25		56,722.	1,207	•	49,154
	27 S	Subtract line 26 from line 12;		45 565			
		xcess of revenue over expenses and di		<45,562.		1	
	ŀ	let investment income (if negative,			9,953		
	C A	djusted net income (if negative, en	ter -0-)	L		N/A	

923501 02-02-10 LHA For Privacy Act and Paperwork Reduction Act Notice, see the instructions.

טווו 9:	90-PF (2009) SANDERSON FAMILY FOUNDAT	Beginning of year	84- End of	1278174 Page
Part	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash - non-interest-bearing	(2) 20011 14120	(-/ ₋ ,	(-7
l i	Savings and temporary cash investments	1,007.	9,107.	9,107
	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 ▶			
န္ 8	Inventories for sale or use			
Assets	Prepaid expenses and deferred charges			
108	Investments - U.S. and state government obligations			
	o Investments - corporate stock STMT 7	291,033.	248,062.	340,709
	: Investments - corporate bonds			
11	Investments - land, buildings, and equipment basis			
	Less accumulated depreciation			
12		40 771	20 000	70 240
13	Investments - other STMT 8	40,771.	30,080.	70,340
14				
1	Less accumulated depreciation			
15	Other assets (describe ►)			
16	Total assets (to be completed by all filers)	332,811.	287,249.	420,156
17	Accounts payable and accrued expenses	0,0-1,0-1		
18	Grants payable			
١.,	Deferred revenue			
Clabilities 20 21 21 21 22 22 22 22 22 22 22 22 22 22	Loans from officers, directors, trustees, and other disqualified persons			
E 21	Mortgages and other notes payable			
그 22	Other liabilities (describe)			
23	Total liabilities (add lines 17 through 22)	0.	0.	
	Foundations that follow SFAS 117, check here			
" l	and complete lines 24 through 26 and lines 30 and 31.			
<u>ဗ္</u> ဗိ 24	Unrestricted			
<u>ਛ</u> 25	Temporarily restricted			
26	·			
Š	Foundations that do not follow SFAS 117, check here			
5	and complete lines 27 through 31.		0	
န္ဌာ 27	Capital stock, trust principal, or current funds	0.	0.	
9 8 28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
Net Assets or Fund Balances	Retained earnings, accumulated income, endowment, or other funds	332,811.	287,249.	
울 30	Total net assets or fund balances	332,811.	287,249.	
31	Total liabilities and net assets/fund balances	332,811.	287,249.	
		•	201,220	<u></u>
Parl				
	al net assets or fund balances at beginning of year - Part II, column (a), line 3	30	_	220 011
-	ist agree with end-of-year figure reported on prior year's return)		1	332,811
	er amount from Part I, line 27a er increases not included in line 2 (itemize)		3	<45,562 0
a Uih	er increases not includen in line 2 (lieMiZe). 🖚		1 2	

$\overline{}$	Table to select the delegation of the Company of the Company (a) less 20		
1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30		
	(must agree with end-of-year figure reported on prior year's return)	1 _	332,811 <u>.</u>
2	Enter amount from Part I, line 27a	2	<45,562·>
3	Other increases not included in line 2 (itemize)	3	0.
4	Add lines 1, 2, and 3	4	287,249.
5	Decreases not included in line 2 (itemize)	5	0.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	287,249.

		DERS(ON FAMILY FO	UNDATI	ON_				8	<u>4-127</u>	<u>8174</u>	Page 3
P	art fV Capital Gains	and Lo	sses for Tax on In	vestment	Income							
`	(a) List and desc 2-story brick wa	ribe the ki arehouse;	nd(s) of property sold (e.g. or common stock, 200 shs	, real estate, . MLC Co.)		(b) l	How ac - Purc - Dona	cquired hase ation	(c) Date a (mo., d	acquired ay, yr.)	(d) Dat (mo., d	
1a	STREETTTRACKS	GOLD							10/0	1/06	VARI	OUS
	BUCKEYE PARTNE		-1						VARI	_	VARI	
	STREETTTRACKS					1			VARI		VARI	OUS
	CAPITAL GAINS		DENDS									
е								-				
	(e) Gross sales price	(f)	Depreciation allowed (or allowable)		st or other basis expense of sale					ain or (loss) s (f) minus (
a	48,595.	-			42,97	2.					5	,623.
b	10,110.				4,42						5	,687.
C	1,207.											,207.
đ	<2.	>										<2.
е										-		
	Complete only for assets shown	ng gain in	column (h) and owned by t	he 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 r	not less than (from col. (n -0-) or	
a		ļ				Ì					5	,623.
b												,687.
c								 -				,207.
d												<2.
e											•	
	Capital gain net income or (net ca	anıtal loss	If gain, also enter If (loss), enter -0-	in Part I, line	7 7	}	2				12	,515.
		•	•		•	7						
	Net short-term capital gain or (lo: If gain, also enter in Part I, line 8,	•	, ,	0 (6):		ا ۱						
	If (loss), enter -0- in Part I, line 8		·).			P	3			N/A		
	art V Qualification L	Inder S	Section 4940(e) for	Reduced	Tax on Net	Inv	estn	nent Inc	ome		•	
	r optional use by domestic privat											
(, 0	e opilonar ado by dominone privat						,					
If s	ection 4940(d)(2) applies, leave t	his part b	ank.									
Wa	s the foundation liable for the sec	tinn 4942	tay on the distributable am	nunt of any ve	ear in the base nei	rınd?					Yes	X No
	es," the foundation does not qua				•	100						
	Enter the appropriate amount in					es.						
÷	(a)		(b)		,	(c)					(d) oution ratio	
(Base periód years Calendar year (or tax year beginni	ina in)	Adjusted qualifying dis	tributions	Net value of no			-use assets		Distrit (col. (b) div	oution ratio vided by col	. (c))
—	2008	ייי עייי		7,517.			42	1,080		(0011 (0) 011		36594
	2007			5,170.				4,514				30739
	2006			0,650.				0,877				41752
	2005			2,460.				4,093				57534
	2004			5,934.				4,538				$\frac{57334}{57847}$
_	2004		14	3,334.				4,550	+		1.7	<u> </u>
0	Total of line 1 solume (d)								2		2 2	24466
	Total of line 1, column (d)	5 h.							2			24400
	Average distribution ratio for the	-		on line 2 by 5,	or by the number	or ye	ars		1_		_	C 4 0 0 2
	the foundation has been in existe	ence it less	than 5 years						3		. 6	<u>64893</u>
4	Enter the net value of nonchardal	ble-use as	sets for 2009 from Part X,	line 5					4		380	,740.
5	Multiply line 4 by line 3								5		253	,151.
									1			
6	Enter 1% of net investment incor	ne (1% of	Part I, line 27b)						6			100.
		•	, ,									
7	Add lines 5 and 6								7		253	,251.
•												<u> </u>
	Enter qualifying distributions froi								8		49	,154.
	If line 8 is equal to or greater that See the Part VI instructions.	n line 7, cl	heck the box in Part VI, line	1b, and comp	olete that part usin	ig a 1	% tax	rate.			_	

_	m 990-PF (2009) SANDERSON FAMILY FOUNDATION 84-127 art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see			Page 4
	Exempt operating foundations described in section 4940(d)(2), check here 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	<u>99.</u>
	of Part I, line 27b			
	e All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)			_
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			<u>0.</u>
3	Add lines 1 and 2		1	99.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0.
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-			99.
	Credits/Payments:			
	a 2009 estimated tax payments and 2008 overpayment credited to 2009 6a 628.			
	Exempt foreign organizations - tax withheld at source			
	Tax paid with application for extension of time to file (Form 8868)			
	Backup withholding erroneously withheld 6d		_	20
	Total credits and payments. Add lines 6a through 6d		Ь	<u> 28.</u>
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8			
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		4	<u>29.</u>
	Enter the amount of line 10 to be: Credited to 2010 estimated tax ▶ 429 . Refunded ▶ 11 art VII-A Statements Regarding Activities			0.
			Yes	No
ıa	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in	4-	162	
	any political campaign?	1a		X
D	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 or			
	distributed by the foundation in connection with the activities			1,5
	Did the foundation file Form 1120-POL for this year?	1c		X
a	I Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			
	(1) On the foundation. ► \$ 0. (2) On foundation managers. ► \$ 0.			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			
	managers. > \$			3,5
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, or			٠,,
4.	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a_		X
	of "Yes," has it filed a tax return on Form 990-T for this year? N/A Was there a liquidation, taymination, description, or substantial contraction during the year?	4b_		v
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
e	If "Yes," attach the statement required by General Instruction T			
ь	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			
	By language in the governing instrument, or Prostate language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law		v	
-	remain in the governing instrument?	6	X	
7		7	X	
٥.	If "Yes," complete Part II, col. (c), and Part XV.			
σa	Enter the states to which the foundation reports or with which it is registered (see instructions) NONE			
	If the anguer is "Ves" to line 7, has the foundation furnished a convert form 000 DE to the Attendar Convert (or decision).			
D	of the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)	A.	v	
0	of each state as required by General Instruction G? If "No," attach explanation	8b	_X_	_
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar	_		v
10	year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," complete Part XIV	9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	_ <u>10</u> rm 990	DE	
	rt	1111 J20	-rr(2003)

orm 990-PF (2009) SANDERSON FAMILY FOUNDAY			84-12781 ¹	74 Page 6
Part VII-B Statements Regarding Activities for Which	Form 4720 May Be I	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			s X No	
(2) Influence the outcome of any specific public election (see section 4955);	or to carry on, directly or indir			
any voter registration drive?	_		s X No	
(3) Provide a grant to an individual for travel, study, or other similar purpose		Ye	s X No	
(4) Provide a grant to an organization other than a charitable, etc., organization	on described in section	—) [-	-, . .	
509(a)(1), (2), or (3), or section 4940(d)(2)?			s X No	1
(5) Provide for any purpose other than religious, charitable, scientific, literary	y, or educational purposes, or		TT	
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 up		in Regulations		_,
section 53.4945 or in a current notice regarding disaster assistance (see instr			N/A	5b
Organizations relying on a current notice regarding disaster assistance check				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption			l	
expenditure responsibility for the grant?		I/A ∐Ye	s No	
If "Yes," attach the statement required by Regulations section 53.49				
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on		¬ ••	
a personal benefit contract?		(Y6	as X No	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a	personal benefit contract?		<u> </u>	6b X
If "Yes" to 6b, file Form 8870.			¬ ••	
7a At any time during the tax year, was the foundation a party to a prohibited tax		L [<u>Y</u> £	as X No	
b If yes, did the foundation receive any proceeds or have any net income attribu				7b
Part VIII Information About Officers, Directors, Trus Paid Employees, and Contractors	tees, Foundation Ma	inagers, Higniy	,	
List all officers, directors, trustees, foundation managers and their	r compensation		-	
List all Officers, directors, busices, foundation managers and the		(c) Compensation	(d) Contributions to employee benefit plans	(e) Expense
(a) Name and address	(b) Title, and average hours per week devoted	(If not paid,	and deterred	account, other allowances
BILL SANDERSON	to position DIRECTOR	`enter`-0-)	compensation	allowalices
PMB #466 MAYS BLVD #10	DIRECTOR	1		
INCLINE VILLAGE, NV 89451	2.00	0.	0.	0.
MABETH SANDERSON	DIRECTOR		<u> </u>	
PMB #466 MAYS BLVD #10	DIRECTOR			1
INCLINE VILLAGE, NV 89451	2.00	0.	0.	0.
INCLINE VILLAGE, NV 03431	2.00			
				1
				l
			-	-
				
	_			
Compensation of five highest-paid employees (other than those in	ncluded on line 1). If none	enter "NONE."		
			(d) Contributions to employee benefit plans and deferred	(e) Expense account, other allowances
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	and deterred compensation	allowances
NONE				
			<u> </u>	
	<u> </u>			
	<u> </u>	<u> </u>		
Total number of other employees paid over \$50,000			▶	0
			Form	990-PF (2009)

923551 02-02-10

P	art X Minimum Investment Return (All domestic foundations	must complete this pa	rt. Foreign four	ndations, see	e instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitat	ole, etc., purposes:			
а	Average monthly fair market value of securities			1a	378,779. 7,759.
b	Average of monthly cash balances			1b	7,759.
C	Fair market value of all other assets			1c	
d	Total (add lines 1a, b, and c)			1d	386,538.
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	386,538.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amoun	t, see instructions)		4	5,798.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and c	on Part V, line 4		5	380,740.
6	Minimum investment return Enter 5% of line 5	·		6	19,037.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) a foreign organizations check here ▶ ☐ and do not complete this part		g foundations ar	d certain	
1	Minimum investment return from Part X, line 6	, ,		1	19,037.
2a	Tax on investment income for 2009 from Part VI, line 5	2a	199.		
b	Income tax for 2009. (This does not include the tax from Part VI.)	2b			
C	Add lines 2a and 2b			2c	199.
3	Distributable amount before adjustments. Subtract line 2c from line 1			3	18,838.
4	Recoveries of amounts treated as qualifying distributions			4	0.
5	Add lines 3 and 4			5	18,838.
6	Deduction from distributable amount (see instructions)			6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Par	t XIII, line 1		7	18,838.
P	art XII Qualifying Distributions (see instructions)				
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., pu	rposes:			
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26			1a	49,154. 0.
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 charita	able, etc., purposes		2	
3	Amounts set aside for specific charitable projects that satisfy the:				
a	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, a	and Part XIII, line 4		4	49,154.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net inv	estment			
	income. Enter 1% of Part I, line 27b			5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4			6	49,154.
	Note. The amount on line 6 will be used in Part V. column (b), in subsequent years	when calculating whether	the foundation	nualifies for th	e section

4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI,				10.000
line 7				18,838.
2 Undistributed income, if any, as of the end of 2009			_	
a Enter amount for 2008 only			0.	
b Total for prior years:				
3 Excess distributions carryover, if any, to 2009:		0.		
a From 2004 142, 985.				
b From 2005 47,980.				
c From 2006 48,991.				
d From 2007 66,553.				
e From 2008 36,646.				
f Total of lines 3a through e	343,155.			
4 Qualifying distributions for 2009 from	343,133.			
Part XII, line 4: > \$ 49,154.				
a Applied to 2008, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2009 distributable amount				18,838.
e Remaining amount distributed out of corpus	30,316.			20,000.
5 Excess distributions carryover applied to 2009	0.			0.
(If an amount appears in column (d), the same amount must be shown in column (a))	<u> </u>			
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	373,471.			
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.	<u> </u>
f Undistributed income for 2009. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2010				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2004				
not applied on line 5 or line 7	142,985.			
9 Excess distributions carryover to 2010.				
Subtract lines 7 and 8 from line 6a	230,486.			
10 Analysis of line 9:				
a Excess from 2005 47,980.				
b Excess from 2006 48,991.	j			
c Excess from 2007 66,553.				
d Excess from 2008 36,646.				
e Excess from 2009 30,316.				5- 000 DE (0000)

3	oundations (see in determination letter tha			N/A	
foundation, and the ruling is effective for			.		
b Check box to indicate whether the found	•		in section	4942(j)(3) or 494	42(J)(5)
a Enter the lesser of the adjusted net	Tax year	Ĭ	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					
- i			 	-	
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			<u> </u>	-	
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c					
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,				i	
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				İ	
section 4942(j)(3)(B)(III)				1	
(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 foundation	n had \$5.000 or mo	re in assets
at any time during the					
Information Regarding Foundation					
a List any managers of the foundation who	_	than 20/ of the total and	stributions reserved by th	a faundation hafara the alas	a of any toy
year (but only if they have contributed m			imbulions received by in	e toutidation before the clos	e of ally lax
	1010 than \$0,000). (000 t	0011011 007 (0)(2).)			
EE STATEMENT 9					
b List any managers of the foundation who			(or an equally large port	ion of the ownership of a pa	rtnership or
arner entitle at which the foundation has	a 10% of greater intere	SI.			
other entity) of which the foundation has					
other entity) of which the foundation has ONE					
ONE Information Regarding Contribution			•		
ONE Information Regarding Contribution Check here In the foundation of	nly makes contributions	to preselected charitabl	e organizations and does	not accept unsolicited reque	
ONE Information Regarding Contribution	nly makes contributions	to preselected charitabl	e organizations and does		
ONE Information Regarding Contribution Check here In the foundation of	nly makes contributions see instructions) to indi	to preselected charitable viduals or organizations	e organizations and does under other conditions, i		
Information Regarding Contribution Check here ▶ if the foundation of the foundation makes gifts, grants, etc. (a The name, address, and telephone numbers	nty makes contributions see instructions) to indi- per of the person to who	to preselected charitable viduals or organizations m applications should b	e organizations and does under other conditions, i		
Information Regarding Contribution Check here if the foundation of the foundation makes gifts, grants, etc. (a The name, address, and telephone numblic MABETH SANDER.	nly makes contributions see instructions) to individual for of the person to who SON, 707-93	to preselected charitable viduals or organizations mapplications should be $9-7083$	e organizations and does under other conditions, o e addressed:		
ONE Information Regarding Contribution Check here if the foundation of the foundation makes gifts, grants, etc. (a The name, address, and telephone numbull LL & MABETH SANDER MB #466, MAYS BLVD	nly makes contributions see instructions) to indiverse of the person to who SON, 707-93#10, INCLIN	to preselected charitable viduals or organizations on applications should be 9 - 7083 (E VILLAGE).	e organizations and does under other conditions, of e addressed: NV 89451		
Information Regarding Contribution Check here if the foundation of the foundation makes gifts, grants, etc. (a The name, address, and telephone number in the second sec	nly makes contributions see instructions) to indiverse of the person to who SON, 707-93#10, INCLIN	to preselected charitable viduals or organizations on applications should be 9 - 7083 (E VILLAGE).	e organizations and does under other conditions, of e addressed: NV 89451		
ONE Information Regarding Contribution Check here ▶ if the foundation of the foundation makes gifts, grants, etc. (a The name, address, and telephone number in the sample of the sample of the form in which applications should be the sample of the sam	nly makes contributions see instructions) to indiverse of the person to who SON, 707-93#10, INCLIN	to preselected charitable viduals or organizations on applications should be 9 - 7083 (E VILLAGE).	e organizations and does under other conditions, of e addressed: NV 89451		
ONE Information Regarding Contribution Check here ▶ if the foundation of the foundation makes gifts, grants, etc. (a The name, address, and telephone number in the sample of the form in which applications should be the sample of the form in which applications should be the sample of the form in which applications should be the sample of the sampl	nly makes contributions see instructions) to indiverse of the person to who SON, 707-93#10, INCLIN	to preselected charitable viduals or organizations on applications should be 9 - 7083 (E VILLAGE).	e organizations and does under other conditions, of e addressed: NV 89451		
Information Regarding Contribution Check here if the foundation of the foundation makes gifts, grants, etc. (a The name, address, and telephone numble in the foundation makes gifts, grants, etc. (b The name, address, and telephone numble in the form in which applications should be the foundation of the foundation o	nly makes contributions see instructions) to individual for the person to who SON, 707–93 #10, INCLIN e submitted and informa	to preselected charitable viduals or organizations in applications should be 9 - 7083 IE VILLAGE, tion and materials they	e organizations and does under other conditions, on addressed: NV 89451 should include:	complete items 2a, b, c, and	
Information Regarding Contribution Check here if the foundation of the foundation makes gifts, grants, etc. (a The name, address, and telephone number in the sample of the form in which applications should be the sample of the form in which applications should be the sample of the form in which applications should be the sample of the	nly makes contributions see instructions) to individual for the person to who SON, 707–93 #10, INCLIN e submitted and informa	to preselected charitable viduals or organizations in applications should be 9 - 7083 IE VILLAGE, tion and materials they	e organizations and does under other conditions, on addressed: NV 89451 should include:	complete items 2a, b, c, and	

Grants and Contributions Paid During t	If reginant is an industrial	ayıncıı		
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year	Or Substantial Contributor	100.00.00		
		İ		
	İ			
SEE STATEMENT 10				
Total			<u>▶ 3a</u>	49,15
Approved for future payment				
NONE				
7-4-1				
Total 811 02-02-10			▶ 3b	m 990-PF (200

923621 02-02-10

Enter gross amounts unless otherwise indicated.	Unrelated	ousiness income	Exclude	ed by section 512, 513, or 514	(e)
Program service revenue:	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
	0000				
	_		 -		
· · · · · · · · · · · · · · · · · · ·		<u> </u>			
			 		
de	1				
f			 		······································
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash		 		***	
investments			1		
4 Dividends and interest from securities			14	447.	
5 Net rental income or (loss) from real estate:			1	2270	
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			18	12,515.	
9 Net income or (loss) from special events			1	12,313.	
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:			 		
a BUCKEYE PARTNERS					<1,802
-					(1)002
	1 1		1 1		
C			 		
A			+		
d	_ _		l 1		
e		0.	 +	12.962.	<1.802
e		0.		12,962.	
e		0.		12,962. 13	
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations)	ns.)			13	
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculation	ns.) ies to the Accor	nplishment of Excolumn (e) of Part XVI-A	kempt	Purposes	
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculation Part XVI-B Relationship of Activiti Line No. Explain below how each activity for which the foundation's exempt purposes (other	ies to the Accor	nplishment of Excolumn (e) of Part XVI-As for such purposes).	contribu	Purposes ited importantly to the accomp	11,160
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculation Part XVI-B Relationship of Activition Line No. Explain below how each activity for whice the foundation's exempt purposes (other activity) 11A INVESTMENT INCOME IS	ies to the Accor	nplishment of Excolumn (e) of Part XVI-As for such purposes).	contribu	Purposes ited importantly to the accomp	11,160
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculation Part XVI-B Relationship of Activiti Explain below how each activity for whice the foundation's exempt purposes (other	ies to the Accor	nplishment of Excolumn (e) of Part XVI-As for such purposes).	contribu	Purposes ited importantly to the accomp	11,160
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculation Part XVI-B Relationship of Activitions Line No. Explain below how each activity for which the foundation's exempt purposes (other activity) 11A INVESTMENT INCOME IS	ies to the Accor	nplishment of Excolumn (e) of Part XVI-As for such purposes).	contribu	Purposes ited importantly to the accomp	11,160
e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculation Part XVI-B Relationship of Activition Explain below how each activity for whice the foundation's exempt purposes (other activity) 11A INVESTMENT INCOME IS	ies to the Accor	nplishment of Excolumn (e) of Part XVI-As for such purposes).	contribu	Purposes ited importantly to the accomp	11,160
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculation Part XVI-B Relationship of Activitions Line No. Explain below how each activity for which the foundation's exempt purposes (other activity) 11A INVESTMENT INCOME IS	ies to the Accor	nplishment of Excolumn (e) of Part XVI-As for such purposes).	contribu	Purposes ited importantly to the accomp	11,160
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculation Part XVI-B Relationship of Activitions Line No. Explain below how each activity for which the foundation's exempt purposes (other activity) 11A INVESTMENT INCOME IS	ies to the Accor	nplishment of Excolumn (e) of Part XVI-As for such purposes).	contribu	Purposes ited importantly to the accomp	11,160
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculation Part XVI-B Relationship of Activitions Line No. Explain below how each activity for which the foundation's exempt purposes (other activity) 11A INVESTMENT INCOME IS	ies to the Accor	nplishment of Excolumn (e) of Part XVI-As for such purposes).	contribu	Purposes ited importantly to the accomp	11,160
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e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculation Part XVI-B Relationship of Activition Explain below how each activity for whice the foundation's exempt purposes (other activity) 11A INVESTMENT INCOME IS	ies to the Accor	nplishment of Excolumn (e) of Part XVI-As for such purposes).	contribu	Purposes ited importantly to the accomp	11,160
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e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculation Part XVI-B Relationship of Activition Explain below how each activity for whice the foundation's exempt purposes (other activity) 11A INVESTMENT INCOME IS	ies to the Accor	nplishment of Excolumn (e) of Part XVI-As for such purposes).	contribu	Purposes ited importantly to the accomp	11,160
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculation Part XVI-B Relationship of Activitions Line No. Explain below how each activity for which the foundation's exempt purposes (other activity) 11A INVESTMENT INCOME IS	ies to the Accor	nplishment of Excolumn (e) of Part XVI-As for such purposes).	contribu	Purposes ited importantly to the accomp	11,160
e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculation Part XVI-B Relationship of Activition Explain below how each activity for whice the foundation's exempt purposes (other activity) 11A INVESTMENT INCOME IS	ies to the Accor	nplishment of Excolumn (e) of Part XVI-As for such purposes).	contribu	Purposes ited importantly to the accomp	11,160
e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculation Part XVI-B Relationship of Activition Explain below how each activity for whice the foundation's exempt purposes (other 11A INVESTMENT INCOME IS	ies to the Accor	nplishment of Excolumn (e) of Part XVI-As for such purposes).	contribu	Purposes ited importantly to the accomp	11,160

			RSON FAMILY				Page 13
P	art X\	Information Re Exempt Organ		To and Transactions ar	nd Relationships With Nonc	haritable	
1	Did th	e organization directly or indi	rectly engage in any of the f	ollowing with any other organization	described in section 501(c) of	Yes	No
	the C	ode (other than section 501(c)(3) organizations) or in sec	tion 527, relating to political organiz	The state of the s		
а		fers from the reporting found	ation to a noncharitable exe	mpt organization of:			
	(1)					1a(1)	<u> </u>
		Other assets				1a(2)	X
b		transactions:					
		Sales of assets to a noncharita	• •			1b(1)	X
	• •	Purchases of assets from a no	· -	ation		1b(2)	X
		Rental of facilities, equipment,				1b(3)	X
	٠,	Reimbursement arrangements				1b(4)	X
		oans or loan guarantees	umbarahin ar fundraiaina aa	ligitations		1b(5) 1b(6)	X
		Performance of services or me ng of facilities, equipment, ma	•			10(0)	X
			-		ays show the fair market value of the goo	<u> </u>	
u		•			in any transaction or sharing arrangeme		
		on (d) the value of the goods,			many transaction of sharing arrangeme	nt, 3now m	
(a)	Line no	(b) Amount involved		aritable exempt organization	(d) Description of transfers, transactions,	and sharing arrangen	nents
			N	/A			
				·····			
					· · · · · · · · · · · · · · · · · · ·		
							-
							
	ın sec	tion 501(c) of the Code (othe s," complete the following sch	r than section 501(c)(3)) or edule.				X No
		(a) Name of org	ganization	(b) Type of organization	(c) Description of relati	onship	
		N/A					
_				 -			
				ing accompanying schedules and statement ased on all information of which preparer h	nts, and to the best of my knowledge and belief, as any knowledge DIRECTOR	it is true, correct,	
ē	Si	gnature of officer or trustee		Date	Title		
Sign Here		Prenarer's	e C Van aal	Da		eparer's identifying nu	ımbər
S	Paid spare se On	Firm's name (op ours CLIF	TON GUNDERSO		EIN >		
	Paid Preparer's Use Only	if self-employed), 370 address, and VIP cod	INTERLOCKEN	BLVD., SUITE 500)	2 466 00	22
\Box		BROC	MFIELD, CO 8	UUZI	Phone no. 303	<u>3-466-88</u> 2	44

FORM 990-PF DIVIDEN	DS AND	INTER	EST F	ROM	SECU	RITIES	STATEMENT	1
SOURCE		GROSS	AMOU	INT	_	PITAL GAINS DIVIDENDS	COLUMN (A)
BUCKEYE PARTNERS MORGAN STANLEY	-		4	144.		<2.> 0.	4	46. 1.
TOTAL TO FM 990-PF, PART I,	LN 4		4	45.		<2.>	4	47.
FORM 990-PF	0	THER I	NCOME	3			STATEMENT	2
DESCRIPTION			(A REVE PER E	ENUE		(B) NET INVEST- MENT INCOME		
BUCKEYE PARTNERS				<1,8	302.>	<1,802	.>	
TOTAL TO FORM 990-PF, PART I	, LINE	11		<1,8	302.>	<1,802	.>	
FORM 990-PF		LEGAL	FEES	5			STATEMENT	3
DESCRIPTION	EXPE	A) NSES BOOKS			EST-	(C) ADJUSTED NET INCOM		
LEGAL		524.	-		0.			0.
TO FM 990-PF, PG 1, LN 16A		524.	-		0.			0.
FORM 990-PF	AC	ACCOUNTING FEES			STATEMENT	4		
DESCRIPTION	EXPE	A) NSES BOOKS		(B) INVI	EST-	(C) ADJUSTED NET INCOM		
ACCOUNTING		5,400.	,		0.			0.
TO FORM 990-PF, PG 1, LN 16E		5,400.			0.			0.

FORM 990-PF	XAT	ES		STATEMENT !		
DESCRIPTION	(A) EXPENSES PER BOOKS		(C) T- ADJUSTE ME NET INCO	D CHARITAB		
US TREASURY	119.		0.		0.	
TO FORM 990-PF, PG 1, LN 18	119.		0.		0.	
FORM 990-PF	OTHER E	XPENSES		STATEMENT	6	
DESCRIPTION		NET INVEST	(C) T- ADJUSTE ME NET INCO	D CHARITAB		
BANK CHARGES OTHER INVESTMENT EXPENSES	300. 18. 1,207.		0. 0. 07.		0. 0. 0.	
TO FORM 990-PF, PG 1, LN 23	1,525.	1,20	07.		0.	
FORM 990-PF	CORPORAT	E STOCK		STATEMENT	7	
DESCRIPTION			BOOK VALUE	FAIR MARKET VALUE	ı	
STREETTRACKS GOLD TRUST 248,06				340,709.		
TOTAL TO FORM 990-PF, PART II, LINE 10B			248,062.	340,70	9.	
FORM 990-PF	OTHER INV	ESTMENTS		STATEMENT	8	
DESCRIPTION		LUATION ETHOD	BOOK VALUE	FAIR MARKET VALUE	- 	
			25,080.	65,34	0.	
BUCKEYE PARTNERS SONOMA VALLEY BANK CD		COST COST	5,000.	5,00		

FORM 990-PF LIST	STATEMENT 9		
NAME OF MANAGER			
BILL SANDERSON MABETH SANDERSON			
	NTS AND CONTRIBUTIONS AID DURING THE YEAR	STAT	EMENT 10
RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT	RECIPIENT STATUS	AMOUNT
1ST CONGREGATIONAL CHURCH, SONOMA	NONE OPERATIONS	PUBLIC	10,300.
SCLERODERMA FOUNDATION	NONE OPERATIONS	PUBLIC	10,225.
UNITY	NONE OPERATIONS	PUBLIC	200.
SONOMA PLEIN AIR	NONE OPERATIONS	PUBLIC	500.
TOUR DE CURE	NONE OPERATIONS	PUBLIC	250.
ASF	NONE OPERATIONS	PUBLIC	100.

. SANDERSON FAMILY FOUNDATION			84-1278174
MEALS ON WHEELS	NONE OPERATIONS	PUBLIC	100.
FRIENDS OF NINOS ADELANTE	NONE OPERATIONS	PUBLIC	800.
PET'S LIFELINE	NONE OPERATIONS	PUBLIC	2,000.
CHEMICAL ENGINEERING	NONE OPERATIONS	PUBLIC	8,000.
LA LUZ CENTER	NONE OPERATIONS	PUBLIC	1,000.
SONOMA COMMUNUNITY	NONE OPERATIONS	PUBLIC	100.
SONOMA LEAGUE FOR HISTORIC PRESERVATION	NONE OPERATIONS	PUBLIC	250.
SONOMA VALLEY HOSPITAL FOUNDATION	NONE OPERATIONS	PUBLIC	500.
SONOMA VALLEY MENTORING ALLIANCE	NONE OPERATIONS	PUBLIC	1,000.
SONOMA VALLEY ROTARY	NONE OPERATIONS	PUBLIC	3,885.

SANDERSON FAMILY FOUNDATION			84-1278174
VINTAGÈ HOUSE	NONE OPERATIONS	PUBLIC	5,300.
WILLMAR CENTER	NONE OPERATIONS	PUBLIC	100.
LAS MADRONAS	NONE OPERATIONS	PUBLIC	4,544.
TOTAL TO FORM 990-PF, PART XV,	LINE 3A	_	49,154.