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Porm 990~PF

Department 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.

OMB No 1545-0052 2009

Internal Revenue Service For calendar year 2009, or tax year beginning and ending Final return G Check all that apply: Initial return Initial return of a former public charity Address change Name change Amended return A Employer identification number Name of foundation Use the IRS label. 87-0686764 FLAMINGO FOUNDATION Otherwise. Room/suite Number and street (or P O box number if mail is not delivered to street address) print **B** Telephone number or type. 801-942-6571 8338 VIA RIVIERA WAY See Specific City or town, state, and ZIP code C If exemption application is pending, check here Instructions SANDY, UT 84093-6532 1 Foreign organizations, check here Foreign organizations meeting the 85% test, check here and attach computation H Check type of organization: X Section 501(c)(3) exempt private foundation Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation E If private foundation status was terminated I Fair market value of all assets at end of year J Accounting method: Cash X Accrual under section 507(b)(1)(A), check here Other (specify) (from Part II, col. (c), line 16) If the foundation is in a 60-month termination **≥**\$ (Part I, column (d) must be on cash basis.) under section 507(b)(1)(B), check here ,362, (d) Disbursements for charitable Analysis of Revenue and Expenses Part I (b) Net investment (c) Adjusted net (a) Revenue and (The total of amounts in columns (b), (c), and (d) may not charitable purposes (cash basis only) expenses per books income ıncome necessarily equal the amounts in column (a) N/A Contributions, gifts, grants, etc., received Check X If the foundation is not required to attach Sch. 8 Interest on savings and temporary cash investments 9 9 STATEMENT 4 Dividends and interest from securities 5a Gross rents SCANNED APR 1 b Net rental income or (loss) 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 0 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain Income modifications 10a Gross sales less returns and allowances b Less Cost of goods sold c Gross profit or (loss) 11 Other income 9 9 Total Add lines 1 through 11 12 0 0. 0 13 Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees 0. 400 0 STMT 2 b Accounting fees c Other professional fees RECEIVED 19 Depreciation and depletion Travel, conferences, a travel, conferences, a travel. 0. 2 On Enhances Ullim STMT 3 307 0 24 Total operating and administrative 707 0 0. expenses Add lines 13 through 23 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. 0 0. Add lines 24 and 25 707 27 Subtract line 26 from line 12: -698 2 Excess of revenue over expenses and disbursements 9 b Net investment income (if negative, enter -0-) N/Ac Adjusted net income (if negative, enter -0-) LHA For Privacy Act and Paperwork Reduction Act Notice, see the instructions.

Form 990-PF (2009)

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	2,039.
2 Enter amount from Part I, line 27a	2	- <u>698</u> .
3 Other increases not included in line 2 (itemize)	3	0.
4 Add lines 1, 2, and 3	4	1,341.
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	1,341.

Part IV Capital Gains	and Losses for Ta	ax on Investment	Income			
(a) List and desc 2-story brick wa	ribe the kind(s) of propert arehouse; or common sto	y sold (e.g., real estate, ck, 200 shs. MLC Co.)	(b) How acquired P - Purchase D - Donation	(c) Date acquire (mo., day, yr.)	
1a						
b NO	NE			<u> </u>		
C		-				=
_d						
<u>e</u>	r					
(e) Gross sales price	(f) Depreciation allo (or allowable)		t or other basis xpense of sale		(h) Gain or ((e) plus (f) mi	
<u>a</u>						
_b						
<u>c</u>						
е	<u> </u>					
Complete only for assets shown	1				(I) Gains (Col. (h) ol. (k), but not less	
(i) F.M.V. as of 12/31/69	(j) Adjusted bas as of 12/31/69	s (k) Ex over	cess of col. (1) col. (1), if any		Losses (from	col. (h))
a						
b						_
C						
d						
e						,
Capital gain net income or (net ca	apital loss) { If gain	, also enter in Part I, line s), enter -0- in Part I, line	7 7	} 2		
3 Net short-term capital gain or (lo	ss) as defined in sections	1222(5) and (6):				
If gain, also enter in Part I, line 8,	column (c).		•	} 3		
Part V Qualification L	Inder Section 494	0(e) for Reduced	Tax on Net I	nvestment In	ncome	
If section 4940(d)(2) applies, leave to Was the foundation liable for the section and the section of the sectio	ction 4942 tax on the distr lilfy under section 4940(e)	. Do not complete this pa	rt.			Yes X No
(a)		(b)		(c)		(d)
Base periód years Calendar year (or tax year beginni	_{ing in)} Adjusted qu	alifying distributions	Net value of none	charitable-use asse		o) divided by col. (c))
2008		3,700.		2,59	8.	1.424172
2007		2,999.		4,50		.665409
2006		2,500.		8,08		.309176
2005		7,099.	,	8,40		.84471
2004		2,500.		8,80	3.	.283994
2 Total of line 1, column (d)					2	3.527468
3 Average distribution ratio for the the foundation has been in existe		e the total on line 2 by 5,	or by the number o	f years	3	.70549
4 Enter the net value of noncharital	ble-use assets for 2009 fr	om Part X, line 5			4	1,682
5 Multiply line 4 by line 3					5	1,187
6 Enter 1% of net investment incor	me (1% of Part I, line 27b))			6	0
7 Add lines 5 and 6	· · · · · ·				7	1,187
8 Enter qualifying distributions from	m Part XII, line 4				8	0
If line 8 is equal to or greater tha See the Part VI instructions.		Part VI, line 1b, and comp	olete that part using	a 1% tax rate.		
						Farm 000 PE (2000

923521 02-02-10

Form **990-PF** (2009

1197-061

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X

3b

4a

Yes X No

N/A

14490313 135708 1197-06

during the year?

c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

b If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time

Form 4720, to determine if the foundation had excess business holdings in 2009)

had not been removed from jeopardy before the first day of the tax year beginning in 2009?

orm 990-PF (2009) FLAMINGO FOUNDATION	F 4700 M D F		<u>87-068676</u>	54 Page 6
Part VII-B Statements Regarding Activities for Which	Form 4/20 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			s X No	
(2) Influence the outcome of any specific public election (see section 4955);	or 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	ş?	Ye	es 🗓 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)?		Ye	es 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?		Ye	s X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify ur	ider the exceptions described i	n Regulations		
section 53.4945 or in a current notice regarding disaster assistance (see instr	uctions)?		N/A 5	b
Organizations relying on a current notice regarding disaster assistance check	here		▶□	
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption		ined		
expenditure responsibility for the grant?		Γ/A □ Υ€	es 🔲 No	1 1
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				
a personal benefit contract?	pay promisino on	□ Ve	es 🗓 No	
•	nerconal henefit contract?			b X
b Did the foundation, during the year, pay premiums, directly or indirectly, on a	personar benefit contract:			- A
If "Yes" to 6b, file Form 8870.	abaltas tannaastanO		es X No	
7a At any time during the tax year, was the foundation a party to a prohibited tax		TE		
b If yes, did the foundation receive any proceeds or have any net income attribu		Li-bb		b
Part VIII Information About Officers, Directors, Trus	tees, Foundation Ma	magers, nigni	y	
List all officers, directors, trustees, foundation managers and their	componentian	_		
List all officers, directors, trustees, foundation managers and their		(c) Compensation	(d) Contributions to	(e) Expense
(a) Name and address	(b) Title, and average hours per week devoted	(If not paid,	(d) Contributions to employee benefit plans and deferred	account, other
	to position	enter -0-)	compensation	allowances
JAMES E. ROBINSON	PRESIDENT		ļ	
8338 VIA RIVIERA WAY		_		
SANDY, UT 84093	0.00	0.	0.	0.
JANICE L. ROBINSON	_VICE-PRESIDEN	T		
8338 VIA RIVIERA WAY				
SANDY, UT 84093	0.00	0.	0.	0.
SCOTT L. ROBINSON	OFFICER			
2871 W MATTERHORN DR				
WEST JORDAN, UT 84084	0.00	0.	0.	0.
	7			
	1			
2 Compensation of five highest-paid employees (other than those in	cluded on line 1). If none,	enter "NONE."	•	
	(b) Title, and average		(d) Contributions to employee benefit plans	(e) Expense account, other allowances
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	and deferred compensation	account, other allowances
NONE	dovoted to position			
NONE	-		ĺ	
	-			
	+	1		
	 	1	 	
	+		[
	-			
	1	<u> </u>		
	4			
	<u> </u>	L	L	
Total number of other employees paid over \$50,000				0
			Form S	990-PF (2009)

All other program-related investments. See instructions.

Total. Add lines 1 through 3

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign	foundations, see i	nstructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
	Average monthly fair market value of securities	1a	
	Average of monthly cash balances	1b	1,708.
	Fair market value of all other assets	10	
	Total (add lines 1a, b, and c)	1d	1,708.
	Reduction claimed for blockage or other factors reported on lines 1a and		
_		0.	
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	1,708.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,682.
6	Minimum investment return Enter 5% of line 5	6	84.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundation foreign organizations check here and do not complete this part.)	ns and certain	
1	Minimum investment return from Part X, line 6	1	84.
2a	Tax on investment income for 2009 from Part VI, line 5		
Ь	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	84.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	84.
6	Deduction from distributable amount (see instructions)	6	0.
<u>7_</u>	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	_ 7	84.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	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 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	0.
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	0.
	Note The amount on line 6 will be used in Part V. column (b), in subsequent years when calculating whether the foundat	ion qualifies for the s	section

4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

		(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for	2009 from Part XI,				
line 7					84.
2 Undistributed income, if any	, as of the end of 2009				
a Enter amount for 2008 of	i i			0.	
b Total for prior years:					
,	,		0.		
3 Excess distributions carr					
a From 2004	2,061.				:
b From 2005	6,681.				
c From 2006	2,099.				
d From 2007	2,776.				
e From 2008	3,570.				
f Total of lines 3a through		17,187.			
4 Qualifying distributions					
Part XII, line 4: ► \$	0.			_	
a Applied to 2008, but not			· · · · · · · · · · · · · · · · · · ·	0.	
b Applied to undistributed	•		_		
years (Election required	- see instructions)		0.		
c Treated as distributions	out of corpus				
(Election required - see	· -	0.		<u> </u>	
d Applied to 2009 distribu					0.
e Remaining amount distr	ibuted out of corpus	0.	·		
5 Excess distributions carryov (If an amount appears in columnust be shown in column (a)	umn (d), the same amount	84.			84.
6 Enter the net total of ea	· ·				
a Corpus Add lines 3f, 4c, and	d 4e Subtract line 5	17,103.			
b Prior years' undistribute	<u> </u>				
line 4b from line 2b			0.		
c Enter the amount of price	or years'		<u></u>		
undistributed income fo deficiency has been issu the section 4942(a) tax assessed	r which a notice of lied, or on which		0.		,
d Subtract line 6c from lin	e 6h Taxahle				
amount - see instruction			0.		
e Undistributed income fo				· · · · · · · · · · · · · · · · · · ·	
4a from line 2a. Taxable	1			0.	
f Undistributed income fo	F				
lines 4d and 5 from line	1. This amount must				
be distributed in 2010					0.
7 Amounts treated as dist	ributions out of				
corpus to satisfy require	ements imposed by				
section 170(b)(1)(F) or	4942(g)(3)	0.			
8 Excess distributions car	ryover from 2004				
not applied on line 5 or l	ine 7	<u> </u>			
9 Excess distributions ca	rryover to 2010.				
Subtract lines 7 and 8 fr	om line 6a	15,126.			
10 Analysis of line 9:	Γ				
a Excess from 2005	6,681.				
b Excess from 2006	2,099.				
c Excess from 2007	2,776.				
d Excess from 2008	3,570.				
e Excess from 2009					<u> </u>
					Earm QQN_DF (2000)

	O FOUNDATIO				686764 Page 1
Part XIV Private Operating Fo			II-A, question 9)	N/A	
1 a If the foundation has received a ruling or		,			
foundation, and the ruling is effective for		-	•		
b Check box to indicate whether the foundary		ing foundation described			4942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 yea		<u> </u>
income from Part I or the minimum	(a) 2009	(b) 2008	(c) 200	7 (d) 2006	(e) Total_
investment return from Part X for					
each year listed			<u></u>		
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		_			
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		ĺ			
investment income (interest,					
dividends, rents, payments on					
securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public		·			
and 5 or more exempt					
organizations as provided in					
section 4942(j)(3)(B)(III)					
(3) Largest amount of support from			1		
an exempt organization	···		 		
Part XV Supplementary Infor	mation (Comple	ete this part only	if the found	dation had \$5,000 or n	nore in assets
at any time during the			ii tilo loulit		iore iii assets
					
 Information Regarding Foundation List any managers of the foundation who 	_	than 20/ of the total con	tributione receive	ad by the foundation before the c	loce of any tay
year (but only if they have contributed m			ii ibu iioii 5 i eceive	to by the loundation before the c	iose of ally lax
, (,,		(-)(-)-			
b List any managers of the foundation who	own 10% or more of t	he stock of a corneration	(or an equally lar	rge portion of the ownership of a	nartnership or
other entity) of which the foundation has			(or air equally lai	go portion of the ownership of a	partitionship of
.,	-				
2 Information Regarding Contribution	on Grant Gift Loan	Scholarshin etc. P	rograms:		
Check here if the foundation or				id does not accept unsolicited re	quests for funds. If
the foundation makes gifts, grants, etc. (
a The name, address, and telephone numb					
JAMES E. ROBINSON	or or the person to whe	m applications should be	, aud. 00000.		
0141115 21 11021115011					
b The form in which applications should be	submitted and informa	ation and materials they s	hould include:		
WRITTEN		and maiorials may			
c Any submission deadlines:					
N/A					
d Any restrictions or limitations on awards,	such as by geographic	cal areas, charitable fields	. kinds of instituti	ions, or other factors:	
N/A	, 235., ac by goograpilit	.a. arvao, vilaritable itelae	,	, 5. 55. 186.6.0.	
,					
923601 02-02-10					Form 990-PF (2009)

3 Grants and Contributions Paid During the	Year or Approved for Future	Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
NONE				
			,	
			,	
Total b Approved for future payment			▶ 3a	0.
• Approved for future payment				
		:		
			,	
NONE				
Total			3b	0.
923611 02-02-10			Fo	rm 990-PF (2009)

Part XVI-A	Analysis of Income-Producing	Activities
	, , , , , , , , , , , , , , , , , , ,	

nter gross amounts unless otherwise indicated.	Unrelated	business income	Exclud	ded by section 512, 513, or 514	/a\
Program service revenue:	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	(e) Related or exempt function income
a	COUE				
b					
c					
d	_				
e	_				<u>-</u>
f	_				
g Fees and contracts from government agencies					· · · · · · · · · · · · · · · · · · ·
2 Membership dues and assessments					
3 Interest on savings and temporary cash			1		9.
investments 4 Dividends and interest from securities					
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:					
<u> </u>	1 1				
b					
cd					
de	_				
2 Subtotal. Add columns (b), (d), and (e)		0.		0.	9.
3 Total. Add line 12, columns (b), (d), and (e)	<u> </u>			13	
See worksheet in line 13 instructions to verify calculations.)				
Part XVI-B Relationship of Activities		mplishment of Ex	emp	t Purposes	
Line No. Explain below how each activity for which in the foundation's exempt purposes (other th			contrib	uted importantly to the accon	nplishment of
3E INTEREST EARNED ON FU			'HAR	TTABLE PURPOS	ES
JE INTERNEDI BIRANDO ON 1 O.	NIII DE	ilmilitino c		1111000	
				····	
		-			
	 	·			**************************************
	· · · · · · · · · · · · · · · · · · ·				

923621 02-02-10

	m 990-P		NGO FOUNDATION			<u>686764 </u>	Page 13
P	art XV			and Transactions ar	nd Relationships With None	charitable	
_		Exempt Organ					/ A I -
1		-	rectly engage in any of the follow			 	<u>'es No</u>
			(3) organizations) or in section 5		zations?		
•			ation to a noncharitable exempt o	organization of:		4-(4)	₩.
	(1) Ca					1a(1)	X
	` '	ther assets				1a(2)	 - ^-
		transactions:	ble suggest suggestion			15/1	- V
	٠,,	ales of assets to a noncharita				1b(1)	X
			oncharitable exempt organization			1b(2)	X
	` '	ental of facilities, equipment,				1b(3)	$\frac{\lambda}{x}$
	• •	eimbursement arrangements	į			1b(4) 1b(5)	X
		oans or loan guarantees					X
	٠,,		embership or fundraising solicitat			1b(6)	$\frac{\mathbf{x}}{\mathbf{x}}$
			ailing lists, other assets, or paid e		ays show the fair market value of the go		
•					e in any transaction or sharing arrangem		3,
			other assets, or services received		e in any transaction of snaming arrangem	siit, SiiOW iii	
(2)		(b) Amount involved	(c) Name of noncharitat		(d) Description of transfers, transactions	and charing arrar	nements
(a)	Line no	(b) Amount involved	N/A	no exempt organization	(b) Bescription of italisions, italicaetteric	, and breating artar	- gomente
	+		N/A				
		* - * ·					
						-	· · · · ·
			——————————————————————————————————————			_	
	-	- -					
_		** * ''		· · · · · · · · · · · · · · · · · · ·			
_		<u></u>					
_							
_							
			<u> </u>				
2		•	ctly affiliated with, or related to, or		ations described		
			er than section 501(c)(3)) or in se	ction 527?		Yes	X No
	o If "Yes	," complete the following sch		1017	(c) Description of rela	t. a a b. a	
_		(a) Name of org	ganization	(b) Type of organization	(c) Description of rela	HOUSIND	
		N/A		-			
_							
				 			
_	Under po	enalties of perjury, I declare that	have examined finis return, including ac	companying schedules and stateme	ents, and to the best of my knowledge and belie	i, it is true, correct	
	and com	plete Declaration of prepare (oth	er than taxpager or fiduciary) is based of	on all information of which preparer h	nas any knowledge		
		(James 7.	Robinson	1 4/1/10	Irustee		
ē	े इत	nature of officer or trustee)	70-0-000	Date	Title		
Sign Here	– 	Preparer's	7	· · · · · · · · · · · · · · · · · · ·	10 _ 0.1.001.11	reparer's identifyin	ig number
ign	ا_ ئ _ە ك	signature	/	2	S·19·// self- employed ► □		
V)	Paid Preparer's Use Only	Firm's name (or yours PBO	ESSIONAL BUSIN	ESS ADVISORS,	LLC EIN ▶		
	L de la	if self-employed).	SOUTH 500 WES				
		1.1	TIFUL, UT 8401		Phone no. 80	1-296-1	
						Form 990-	PF (2009)

FORM 990-PF INTEREST ON SAVI	NGS AND TEM	PORARY CASH I	NVESTMENTS	STATEMENT	1
SOURCE				AMOUNT	
INTEREST INCOME			-		9.
TOTAL TO FORM 990-PF, PART I,	LINE 3, CO	LUMN A	:		9.
FORM 990-PF	ACCOUNTI	NG FEES		STATEMENT	2
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME			
ACCOUNTING	400.	0.	•		0.
TO FORM 990-PF, PG 1, LN 16B	400.	0.			0.
FORM 990-PF	OTHER E	XPENSES		STATEMENT	3
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME			
LICENSE SPONSORSHIP	7. 300.				0.
TO FORM 990-PF, PG 1, LN 23	307.	0	•		0.