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#### Form '990-PF

#### **Return of Private Foundation**

or Section 4947(a)(1) Nonexempt Charitable Trust

Treated as a Private Foundation

2009

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

Operating and Administrative Expenses

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements. For calendar year 2009, or tax year beginning , 2009, and ending , 20 G Check all that apply: ☐ Initial return Initial return of a former public charity Final return ☐ Amended return ☐ Address change Name change A Employer identification number Name of foundation Use the IRS 91-1368660 RZZAD FOUNDATION

Number and street (or P.O box number if mail is not delivered to street address) label. Otherwise, Room/suite B Telephone number (see page 10 of the instructions) print )-577.ん405 or type. See Specific City or town, state, and ZIP code C If exemption application is pending, check here ONGVIEW WA 98632.5735 Instructions. D 1. Foreign organizations, check here Section 501(c)(3) exempt private foundation **H** Check type of organization: 2. Foreign organizations meeting the 85% test. check here and attach computation ☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation If private foundation status was terminated under Fair market value of all assets at J Accounting method: 
Cash Accrual section 507(b)(1)(A), check here end of year (from Part II, col. (c), Other (specify) If the foundation is in a 60-month termination line 16) ► \$ 484684 (Part I, column (d) must be on cash basis) under section 507(b)(1)(B), check here ▶□ Part I Analysis of Revenue and Expenses (The total of (d) Disbursements (a) Revenue and (b) Net investment (c) Adjusted net for charitable amounts in columns (b), (c), and (d) may not necessarily equal expenses per books purposes the amounts in column (a) (see page 11 of the instructions).) (cash basis only) Contributions, gifts, grants, etc., received (attach schedule) 2 Check ► ☐ if the foundation is **not** required to attach Sch. B 3 Interest on savings and temporary cash investments 4 Dividends and interest from securities . . . . Gross rents . . . . . Net rental income or (loss) Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2) . 40 Net short-term capital gain . . . . . Income modifications 10a Gross sales less returns and allowances Less: Cost of goods sold . . . Gross profit or (loss) (attach schedule) . 11 Other income (attach schedule) . . . 12 Total. Add lines 1 through 11 13 Compensation of officers, directors, trustees, etc. Other employee salaries and wages V.EU. 14 OSC 15 Pension plans, employed benefits Legal fees (attach schedule) MAY 0 7 2010 Accounting fees (attach schedule) . . . . 16a 875 Other professional fees (attach schedule) C Interest . . . . . 17 128 18 Taxes (attach schedule) (see page 14 of the instructions) Depreciation (attach schedule) and depletion . . 19 20 21 Travel, conferences, and meetings 22 Printing and publications . . . . 5627 23 Other expenses (attach schedule) 5627 Total operating and administrative expenses. **763**0 7630 3876 25 Total expenses and disbursements. Add lines 24 and 25 26 1506 27 Subtract line 26 from line 12: (51) Excess of revenue over expenses and disbursements Net investment income (if negative, enter -0-) . Adjusted net income (if negative, enter -0-) .

Part	Balance She	Attached schedules and amounts in the description column		End	of year
	Dalance on	should be for end-of-year amounts only. (See instructions.)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	Cash-non-inte	erest-bearing	3225	1537	1537
	2 Savings and ter	nporary cash investments	4206	8039	8039
	3 Accounts received	vable ►			
- }	Less: allowance	for doubtful accounts			
1	4 Pledges receiva	able 🟲		<del> </del>	
- 1	Less: allowance	for doubtful accounts	1		
1	5 Grants receivab	le		· · · · · · · · · · · · · · · · · · ·	
l l		e from officers, directors, trustees, and other		···· · · · · · · · · · · · · · · · · ·	
		rsons (attach schedule) (see page 16 of the	<b> </b>		Ì
		· · · · · · · · · · · · · · · · · · ·			1
- 1.		pans receivable (attach schedule) ▶	<del></del>	<del></del>	<del> </del>
- 1	l acc: allowance f	or doubtful accounts			
Assets	Inventories for s	sale or use			<del> </del>
88			-		<u> </u>
		es and deferred charges	E 112 TO	2 = 0 = 12	28098
"		6. and state government obligations (attach schedule)		35079	35079
ł		orporate stock (attach schedule)	254894	318137	318137
		orporate bonds (attach schedule)		1487)	14871
1	I Investments—land	l, buildings, and equipment: basis ►			
		depreciation (attach schedule) ►			
1		nortgage loans			<del> </del>
1:		ther (attach schedule)			<del> </del>
1	Land, buildings, a	und equipment: basis ► 107021			
	Less: accumulated	d depreciation (attach schedule) ► _ O -	107021	107021	107021
1:	Other assets (de	escribe ▶)			
11	o Total assets	(to be completed by all filers—see the			
	instructions. Als	o, see page 1, item l)	423621	484684	484684
1	7 Accounts payab	ole and accrued expenses	1317		
ω 1	Grants payable				]
Liabilities	Deferred revenu	ie			]
<u></u>	Loans from officer	rs, directors, trustees, and other disqualified persons			]
<u>e</u> 2		other notes payable (attach schedule)			1
J 2	Other liabilities (	(describe ▶			1
2	Total liabilities	(add lines 17 through 22)	/3/7		
		at follow SFAS 117, check here >			
တ္က	and complete I	ines 24 through 26 and lines 30 and 31.			
2 2	Unrestricted .				}
Balances	Temporarily rest	tricted		······································	1
E 2		stricted	<del></del>	<del></del>	-
<u> </u>	,	at do not follow SFAS 117, check here ▶ □			1
5	and complete i	ines 27 through 31.			
Net Assets or Fund の		ust principal, or current funds	422304	484684	
g 2		al surplus, or land, bldg., and equipment fund		10.00	-
# 2		s, accumulated income, endowment, or other funds			7
SS 3		ets or fund balances (see page 17 of the		<del> </del>	
<b>₹</b>   •			422304	MOULSU	
S 3		and net assets/fund balances (see page 17	1600 201	484684	1
_ "		ns)	423621	494684	
Part			13 70 71	101001	<u> </u>
		Changes in Net Assets or Fund Balances and balances at beginning of year—Part II, colu	mn (a) line 20 (	t garag with	<u>r</u>
		and balances at beginning of year—Part 11, coluborted on prior year's return)		• I	11002011
					422304
	nter amount from Pa			2	(51,2
		ncluded in line 2 (itemize) ► UN REAL X26D Gy			62431
					484684
5 E	ecreases not include	ed in line 2 (itemize) ► nd balances at end of year (line 4 minus line 5)—	Da.4 11	5	4 944 944
0	otal net assets of ful	nd balances at end of year (line 4 minus line 5)—	ran II, column (b), lir	ne 30   6	Form <b>990-PF</b> (2009)

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

7

Add lines 5 and 6 .

Part VI instructions on page 18.

11056

7

	Level     Zem   Olivital I Zem       1   1   2   2   2   2   2   2   2				Page		
<sup>2</sup> art		3 of th	<u>e ins</u>	truct	ions)		
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ □ and enter "N/A" on line 1.	1			}		
_	Date of ruling or determination letter: (attach copy of letter if necessary—see instructions)	1	. ^				
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		<u> </u>		<del> </del>		
_	here Dand enter 1% of Part I, line 27b	İ			-		
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)	1			1		
_			-A.				
2 3	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)  Add lines 1 and 2  3	┼	<del>-0</del>		+		
4		<del> </del>	<del>-0</del>		<del> </del>		
5	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)  Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0	<del> </del>	-0		-		
6	Credits/Payments:	<del> </del>	ر	<u>-</u>	+		
а	2009 estimated tax payments and 2008 overpayment credited to 2009   6a				}		
b	Exempt foreign organizations—tax withheld at source 6b						
c	Tax paid with application for extension of time to file (Form 8868) . 6c		-				
d	Backup withholding erroneously withheld 6d						
7	Total credits and payments. Add lines 6a through 6d	-	0.		1		
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here  if Form 2220 is attached	1	-0	-			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed ▶ 9	-	0	•	1		
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid > 10						
11	Enter the amount of line 10 to be: Credited to 2010 estimated tax ▶ Refunded ▶ 11						
Part	VII-A Statements Regarding Activities						
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or d	id it		Yes			
	participate or intervene in any political campaign?		<u>1a</u>		X		
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page	∍ 19			X		
	of the instructions for definition)?		1b				
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any mater	rials	,		}		
	published or distributed by the foundation in connection with the activities.	İ	1c	*.	×		
	c Did the foundation file Form 1120-POL for this year?						
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:  (1) On the foundation. ▶ \$  (2) On foundation managers. ▶ \$				1		
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposi						
	on foundation managers. ► \$	eu	-				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	ĺ	2		X		
-	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, article	s of					
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3		X		
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a	•	X		
b	If "Yes," has it filed a tax return on Form 990-T for this year?	. [	4b				
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	. [	5		X		
	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	j			)		
	By state legislation that effectively amends the governing instrument so that no mandatory directions to the state of						
	conflict with the state law remain in the governing instrument?	- ⊢	6	X	ļ		
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part	-	7	X			
8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of instructions).	the					
1	instructions) ► WASHING TON  If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney Gen				1		
b	or designate) of each state as required by General Instruction G? If "No," attach explanation		<u>.</u>	×			
_			8b		<del> </del>		
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3 4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV on page 1942(j)(5)).						
	27)? If "Yes," complete Part XIV		9		X		
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing to		3		*		
. •	names and addresses		10		X		

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Pari	VII-A Statements Regarding Activities (continued)		7	N
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see page 20 of the instructions)	11		X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before			<u> </u>
	August 17, 2008?	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Y	
	Website address ▶			<u> </u>
14	The books are in care of ► HOWARD C. RAGAN CPA Telephone no. ► 360-	577	64	105
	Located at > 203 E, CEDAR LANE LONGVIEW WA ZIP+4 > 98632	- 5	225	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here			<b>N</b>
	and enter the amount of tax-exempt interest received or accrued during the year		•	
Part	VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	5.7	Yes	No
1a		<del></del>		
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes No (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
		<u>.</u>		-
		,		,
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes (4) Pay compensation to, or pay or reimburse the expenses of a disqualified person? Yes (X) No	,	<u> </u>	~
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No (5) Transfer any income or assets to a disqualified person (or make any of either available for		٠.	
	the benefit or use of a disqualified person)?	-		
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the	_		
	foundation agreed to make a grant to or to employ the official for a period after	-,		
	termination of government service, if terminating within 90 days.)		-	
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)?	1b		A
	Organizations relying on a current notice regarding disaster assistance check here	10		**.
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that	-		1
	were not corrected before the first day of the tax year beginning in 2009?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			*,
	operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			
а	At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and			,
	6e, Part XIII) for tax year(s) beginning before 2009?			
	If "Yes," list the years ▶ 20, 20, 20, 20			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to	-		•
	all years listed, answer "No" and attach statement—see page 20 of the instructions)	2b	MA	A
С	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.  20, 20, 20, 20, 20, 20, 20, 20, 20, 20	`		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise		-	
	at any time during the year?			,
b	If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or		<b>.</b>	-
	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.)	3b	M	4
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		×
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2009?	4b		X

Form 99	10-PF (2009) RIZAD FOUNDATION	N	91-13	686	60					í	age <b>6</b>
Part	VII-B Statements Regarding Activities		/hich Form	4720	May Be R	equir	ed (contir	nued)			
5a	Ouring the year did the foundation pay or incur a  (1) Carry on propaganda, or otherwise attempt t  (2) Influence the outcome of any specific public directly or indirectly, any voter registration dr	any amo to influe c election	ount to: ince legislation on (see sect	on (sec	tion 4945(e 55); or to ca	))? .	☐ Yes	⊠No	-		,
	<ul><li>(3) Provide a grant to an individual for travel, stu</li><li>(4) Provide a grant to an organization other than section 509(a)(1), (2), or (3), or section 4940(a)</li></ul>	idy, or on a chaid)(2)? (si	ritable, etc., ee page 22 c	organiz of the in	zation desc structions)	ribed in	Yes	₩No	, 		
	(5) Provide for any purpose other than religious purposes, or for the prevention of cruelty to of	children	or animals?				□Yes	⊠No			-
b	If any answer is "Yes" to 5a(1)–(5), did any of the Regulations section 53.4945 or in a current notice	regardı	ng disaster a	ssistand	ce (see page				5b	NI	4_
c	Organizations relying on a current notice regarding the answer is "Yes" to question 5a(4), does to because it maintained expenditure responsibility	he four	ndation claim	n exem	ption from	the tax	_	No			
6a	If "Yes," attach the statement required by Regula Did the foundation, during the year, receive any on a personal benefit contract?					emiums		МNo	-		,
b	Did the foundation, during the year, pay premiun If "Yes" to 6b, file Form 8870.	ns, dire	ctly or indire	ctly, on	a personal	benefi			6b	,	X
	At any time during the tax year, was the foundation of the foundation receive any proceeds of the foundation receive any proceeds of the foundation receive any proceeds of the foundation receive any proceeds of the foundation receive any proceeds of the foundation receive any proceeds of the foundation receive any proceeds of the foundation receives any proceeds o						Yes		7b		;
	Information About Officers, Direction and Contractors									ees,	
1	List all officers, directors, trustees, foundation	n mana	gers and th	eir con	npensatior	(see p	page 22 of	f the in	struct	ons).	
	(a) Name and address	hour	e, and average rs per week ed to position	(c) Co (If not	mpensation paid, enter -0-)	emple	Contributions byee benefit perred compe	plans	(e) Expe	nse acc allowan	
MZ1 6963	CLD PACHUY KALAMA WA		5-DZR NRS		-0 -		-0-			0	_
	CANYON VICW DR LONGIEW WA		thes		-0-		-0-			0	
8×4	& PACHWY LONGVIEW WA		6S-DER HRS	_	0.		-0-		-	0	_
292		1	igr Hrs	•	0-		-0-			0	_
2	Compensation of five highest-paid employee If none, enter "NONE."	s (othe	er than thos	e inclu	ided on lin	e 1-s	ee page	23 of t	he ins	tructi	ons).
	(a) Name and address of each employee paid more than \$50,00	00	(b) Title, and a hours per v devoted to p	veek	(c) Comper	esation	(d) Contributemployee I plans and d compens	benefit leferred	(e) Expe	nse acc allowan	
	1										
										·	
						··· <u>-</u> ·					
Total	number of other employees paid over \$50,000 .	<del></del>						. ▶			

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Pari	Information About Officers, Directors, Trustees, Foundation Managers, Highly	Paid Em	ployees,
3	and Contractors (continued)  Five highest-paid independent contractors for professional services (see page 23 of the instruction)	one) If nor	e enter "NONE "
<u> </u>	(a) Name and address of each person paid more than \$50,000 (b) Type of service		(c) Compensation
	NONE		
		-	
<b></b>			
			<del></del>
Total	number of others receiving over \$50,000 for professional services	▶	
Par	t IX-A Summary of Direct Charitable Activities		
	t the foundation's four largest direct chantable activities during the tax year. Include relevant statistical information such as the	number of	Expenses
	panizations and other beneficiaries served, conferences convened, research papers produced, etc		·
1	NONE		
2			
3			
4			····
•			
	IX-B Summary of Program-Related Investments (see page 24 of the instructions)		
	scribe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2		Amount
1 .	NONE		
2			<del></del>
-			
Ali	other program-related investments. See page 24 of the instructions.		
3			

Form **990-PF** (2009)

Total. Add lines 1 through 3 .

	foundations and certain foreign organizations check here \( \subseteq \subseteq \subseteq \subseteq \subseteq \subseteq \text{and do not complete this part.} \)		
1	Minimum investment return from Part X, line 6	1	16143
2a	Tax on investment income for 2009 from Part VI, line 5	٠,٢	
b	Income tax for 2009. (This does not include the tax from Part VI.)	_	_
C	Add lines 2a and 2b	2c	-O ·
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	160143
4	Recoveries of amounts treated as qualifying distributions	4	4317
5	Add lines 3 and 4	5	20460
6	Deduction from distributable amount (see page 25 of the instructions)	6	0-
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	20460

Part XII Qualifying Distributions (see page 25 of the instructions)

6

#### Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: 1 а 1a 506 1b b 2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., 2 3 Amounts set aside for specific charitable projects that satisfy the: -0-b 3b Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 11506 4 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. 5 -0-5

art	Undistributed Income (see page 26	of the instructions	<u>})                                    </u>		
1	Distributable amount for 2009 from Part XI,	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
,	line 7				20460
2	Undistributed income, if any, as of the end of 2009:				
а	Enter amount for 2008 only			-0-	
b	Total for prior years: 20,20,20		-0-		<u> </u>
3	Excess distributions carryover, if any, to 2009:				ļ
а	From 2004				
b	From 2005				1
C	From 2006				
d e	From 2007				
f	Total of lines 3a through e	88090			,
4	Qualifying distributions for 2009 from Part XII,				-
	line 4: ▶ \$ //506				
а	Applied to 2008, but not more than line 2a .			<u>-0 -</u>	
b	Applied to undistributed income of prior years		-0-		
	(Election required—see page 26 of the instructions)		- 0		
С	Treated as distributions out of corpus (Election	<b>√</b> 0-			
	required—see page 26 of the instructions) .				11-11
đ	Applied to 2009 distributable amount	-0-			11506
е 5	Remaining amount distributed out of corpus Excess distributions carryover applied to 2009	8954			8954
)	(If an amount appears in column (d), the same	6/3/			0 /0 /
	amount must be shown in column (a).)		-		
6	Enter the net total of each column as	,	-		
	indicated below:				
а	Corpus Add lines 3f, 4c, and 4e. Subtract line 5	79136			
b	Prior years' undistributed income. Subtract	,	.0-		
	line 4b from line 2b			·-··	
C	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has		-0-		
	been issued, or on which the section 4942(a) tax has been previously assessed				
d	Subtract line 6c from line 6b. Taxable				
<b>-</b>	amount—see page 27 of the instructions .		-0-	•	
е	Undistributed income for 2008. Subtract line				
-	4a from line 2a. Taxable amount-see page			~O	
	27 of the instructions			<b>~</b>	
f	Undistributed income for 2009. Subtract lines		}		
	4d and 5 from line 1. This amount must be		·		<b>-0</b> -
_	distributed in 2010		<u> </u>		
7	Amounts treated as distributions out of corpus		1		
	to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see page 27 of the	-0-	1		
	instructions)				
8	Excess distributions carryover from 2004 not				
-	applied on line 5 or line 7 (see page 27 of the	. 0		,	
	instructions)				
9	Excess distributions carryover to 2010.	7012			
	Subtract lines 7 and 8 from line 6a	79/36			
10	Analysis of line 9:				
a	Excess from 2005				
b	Excess from 2006			•	
C	Excess from 2007				
d e	Excess from 2009	1			

Supplementary Information (continued) Part XV

Name and address (home or business) a Paid during the year COWLETT COWNTY SEARCH AND RESCUE COUNCEL FOR COWLETT COWNTY SEARCH AND RESCUE TEAM  Total  Total  Total  Total  Total  Total  Total  Total  Total	Recipient	If recipient is an individual show any relationship to	Foundation	Purpose of grant or	
a Peid during the year  COULTTE COUNTY SEARCH AND RESCUE COUNCEL FOR COULETTE COUNTY SEAREN AND RESCUE TEAM  Total  b Approved for future payment  NONE  AND RESCUE TO AND	Name and address (home or business)	any foundation manager	status of recipient		Amount
b Approved for future payment  NON€	a Paid during the year  COWLITE COWNTY SEARCH  AND RESCUE COUNCIL FOR  COWLITE COUNTY SEARCH	or substantial contributor	A(0.00-	BE TO BURSEMENT	3870
b Approved for future payment  NON€	Total		L	▶ 3a	2276
Total	b Approved for future payment  NONE				3876

Form 990-PF (2009) **Analysis of Income-Producing Activities** Unrelated business income Excluded by section 512, 513, or 514 Enter gross amounts unless otherwise indicated. (e) Related or exempt function income (a) (b) (d) (c) (See page 28 of Business code Amount Exclusion code Amount the instructions) Program service revenue: h d f Fees and contracts from government agencies 2 Membership dues and assessments Interest on savings and temporary cash investments Dividends and interest from securities . . . . 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 Other investment income . . . . . . . . . 7 Gain or (loss) from sales of assets other than inventory 9 Net income or (loss) from special events . . . 10 Gross profit or (loss) from sales of inventory . . . Other revenue: a 12 Subtotal. Add columns (b), (d), and (e) . . . 6738 13 Total. Add line 12, columns (b), (d), and (e) 13 . . . . . . . (See worksheet in line 13 instructions on page 28 to verify calculations.) Relationship of Activities to the Accomplishment of Exempt Purposes Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See page 29 of the Line No. V

Firm's name (or yours if self-employed), address, and ZIP code

FORM 990-PF (2009) RIZAD FOUNDARION 91-1313660

Parl	XVI		n Regarding rganizations	Transfers To and	Trans	sactions and	Relationships Wi	th Noncha	ritab	le	<u> </u>
1	in s	the organization	directly or indire				ny other organization section 527, relating			Yes	No
а	_		porting foundat	ion to a noncharitat	ole exen	not organizatio	on of	-			
_		_							1a(1)	•	×
		Other assets							1a(2)		X
b		er transactions:	•	,					1		
_			a noncharitabl	e exempt organizati	ion .				1b(1)		×
				haritable exempt or					1b(2)		X
				other assets	_				1b(3)		X
									1b(4)		X
		Loans or loan gua	-						1b(5)		X
									1b(6)		X
С				•	_				1c		X
d							. Column (b) should		the	fair m	arke
							n. If the foundation r				
	valu	ie in any transacti	on or sharing a	rrangement, show in	n colum	n (d) the value	of the goods, other a	assets, or ser	vices	recei	ved.
a) Lin	e no.	(b) Amount involved	(c) Name o	nonchantable exempt or	rganizatioi	n (d) Des	cription of transfers, transa	actions, and shai	ing arr	angeme	nts
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2a							ore tax-exempt orga	nızations			
				de (other than secti	ion 501(	(c)(3)) or in sec	tion 527?	L	Yes	· 🗀 ı	No
<u>b</u>	If "Y	es," complete the		·							
		(a) Name of organ	nization	<b>(b)</b> Typ	e of orga	nization	(c) Descr	iption of relation	ship		
			· · · · · · · · · · · · · · · · · · ·				ļ				
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er	Sig	nature of officer or tru	Stee			Date	<b>▼</b> Title				
Sign Here	_					Date	051-7	Preparer's ide	•	_	_
<u>5</u>	_ <u>*</u> *		. 1	0			Check if self-employed ▶ 🄀	number (see page 30 of the			
ଉ	Page 5	Preparer's	Lougade	Gagan CPA	ı L	5-1-2010	3811-6111pi0yeu > 123				-,
	Paid Preparer's	signature Firm's name (or you				<del> </del>		P0026	<u> </u>	<b>60</b>	
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360-577-6405

### RIZAD FOUNDATION - 91-1368660 FORM 990 PF - 2009

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18.	TAXES - BEAL ESTATA	TAX-FAAM			/2
23	OTHER EXPENSES POST OFFICE BOX INSURANCE MEMORIAL FLOWERS				/51 /0
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<b>//</b>	OTHER INCOME BETURN OF PRIOR YEARS NOT EXPENDED BY GRAN	GRANT KUNDS			431
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### GENERAL GRANTING GUIDELINES

The Rizad Foundation may, at its discretion, reimburse qualified individuals for out-of-pocket expenses incurred while volunteering. Individuals requesting a grant must belong to a volunteer organization headquartered in Cowlitz County.

Although the primary mission is directed at the individual volunteer, the Foundation may, at its discretion, make grants to qualified volunteer organizations in Cowlitz County which are seen to benefit the individual volunteers by providing training or equipment which would otherwise not be reasonably available.

At no time is the Rizad Foundation obligated to make grants to any individual or organization and any grants made are totally at the discretion of the Foundation's directors.

# RIZAD FOUNDATION GRANT APPLICATION PROCESS

Individuals or organizations requesting grants must meet the following criteria:

- 1. Individuals must be members of a Rizad approved emergency response unit headquartered in Cowlitz County.
- 2. The grant must be for individual or organizational expenses incurred while on an authorized activity.
- If the grant is for other than already expended funds, prior authorization must be obtained before the expenditures are made. This includes, but is not limited to, training and equipment.
- 4. Individual requested will be authorized by their volunteer organization and forwarded to the Rizad Foundation for consideration.
- 5. Qualified organizational requests will be forwarded to the Foundation.

A qualified individual is a person who is a member in good standing of an emergency response organization and has incurred an expense while volunteering on an authorized activity. Such expenses must not be eligible for reimbursement through any government agency.

A qualified organization is one on the approved Rizad list.

Grant applications are available through the Cowlitz County Department of Emergency Management website. Fully completed applications will be returned to the Rizad Foundation, P.O. Box 1082, Kelso, Wa. 98626. Grant requests will be considered at the Rizad Foundation's quarterly meetings.

# RIZAD FOUNDATION Grant Request

The RIZAD Foundation's primary purpose is to assist Cowlitz County emergency worker volunteers with one-time personal expenses incurred as a result of their volunteerism while belonging to an authorized Cowlitz County volunteer agency.

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# RIZAD FOUNDATION 91-1368660

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