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Return of Private Foundation
or Section 4947(a)(1) Nonexempt Charitable Trust
Treated as a Private Foundation
or may be able to use a copy of this return to satisfy state ren

OMB No 1545-0052

2009

_		evenue Se	<u> </u>				e able to use a	copy of the			•	ng requirements				
F	or cal	lendar	year 2009, c	or tax	x year begin	ning				and endi					, 20	
G	Che	ck all ti	hat apply	oxdot	Initial retur	n	Initia	l return	of a former pu	iblic chari	ty_		$\Box$	Final ret	urn	
		_			Amended i	eturn		Addre	ss change		١	Name change				
			Name of fou	ındatı	ion							A Employer idei	ntıfic	ation numb	er	
ι	Jse th	ne IRS	1													
	lab	el.	KOMES FO	OUN	DATION							9	4 – 3	1611406	5	
•	Other	wise,	Number and	stree	et (or PO box	number if i	mail is not delivere	d to street	address)	Room/su	ute	B Telephone number (	see pa	ige 10 of the insti	ructions)	
	pr											(415) 441-6462				
_	or ty		P.O. BOX	x 6	41481											
		ecific			e, and ZIP coo	le	•					C If exemption app	<b>▶</b>			
Instructions.										pending check h			▶⊟			
			SAN ERAI	NCT	SCO, CA	94164	· ·			D 1 Foreign organ 2 Foreign organ						
_	Cho	ok bino	of organiza	_			n)/2) ovomat a	rwata fa	undation			85% test, ched	ck her	re and attach	` <u> </u>	
'n		,,,	•				c)(3) exempt private foundation				computation			▶□		
+					npt charitable		Other taxable private foundation unting method X Cash Accrual				E If private foundation status was terminated					
ı			t value of all						asn Acc	ruai		under section 507(b)(1)(A), check here .				
	•	•	m Part II, co		•		ther (specify)					F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here				
		▶ \$			240.		column (d) mi	ust be of	n casn basis ) T			under section 50	7(b)(1			
Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see page 11 of the instructions))			(a) Revenue expenses books	per	(b) Net inve		(	c) Adjusted net income		(d) Disbursement for charitable purposes (cash basis only						
	1	Contribut			eceived (attach sch								$oxed{oxed}$			
	2	Check ]	If the	founda	ation is not req	uired to					L		$\bot \mathbb{I}$			
	3	Interest			orary cash inves			9	ļ	9.	-		T	ATCH	2	
	4		_	•	m secunties		74	4,832.	. 7	4,832.				ATCH		
	5 a							_								
													T			
			•				-40	0,846.					十			
Revenue	b	Gross s	Net gain or (loss) from sale of assets not on line Gross sales price for all 185, assets on line 6a				,					$\neg$	-			
ve	7			me /f	from Part IV, lı								1			
8	8										$\vdash$		$\dashv$		**	
	9		ort-term capita	-	n								$\dashv$			
	-	Gross sa	ales less retums	s							<u> </u>		十			
			wances · · ·	- 1								11	$\dashv$			
			ost of goods sol						<del> </del>	·		·	$\dashv$			
					ch schedule)			1,117		1,117.		<del></del>	$\dashv$	ATCH	1	
	11				edule)			5,112.		5,958.	$\vdash$		+	AICH	4	
-	12				<u> 111</u>		3.	3,112.	<del>'</del> }'	3,936.			-+			
	13				ectors, trustees,								$\dashv$			
,	14				and wages .		ļ		1		<u> </u>		$\dashv$			
ses	15				benefits						-	_	$\dashv$			
ë		_	ees (attach so			· · · ·			1		<u> </u>		<del>_</del> +		10	
χ	b		•		chedule) ATC			0,200.		0.	<u> </u>		0.		10,200	
e E	С	Other p	orofessional fe	ees (a	attach schedul	e) .*	1:	5,553.	1	5,553.	<u> </u>		_			
ati	17								ļ				_			
Operating and Administrative Expen	18	Taxes (	attach schedule	) (see	page 14 of the inst	ructions)**	1	640	<del> </del>		<u> </u>		$\bot$		55	
Ē	19	Depred	ciation (attach	sche	dule) and dep	letion .					<u> </u>	<u> </u>				
Ę	20	Occupa	ancy													
۲	21	Travel,	conferences.	and.	meetings								$\perp$			
au	22	Printing	g and publicat	igus.	別が行う											
g	23	Other 6	expenses (atta	ach s	chedule) AT	СН 8 }		92		92.						
ati	24		- 11 ·		inistrative exp	enses							T			
per					2.1 2010		2	6,485.	.  1	5,645.			0.		10,255	
ō	25		outions, gifts, g			(25)		3,740.		_			$\dashv$		133,740	
	26		1 1		nts, Add lines 24	333		0,225.	1	5,645.			0.		143,995	
_	27	Subtra	of line 26 from		EN UT		<del></del>	,	<u> </u>		<u> </u>		$\dashv$			
			<u> </u>		es and disbursem		-12	5,113.								
					es and disbursem (if negative, ei		}	-,	-	0,313.			$\dashv$			
						•			<del>                                     </del>	,,,,,,,,,		-0	_			
	C	Aajust	eu net incom	e (II I	negative, ente	1-0-)			J		L	0	L			

For Privacy Act and Paperwork Reduction Act Notice, see page 30 of the instructions. \* ATCH 6 JSA \*\* ATCH 7 277544 4178 5/13/2010 12:42:11 PM V 09-6.1 Form 990-PF (2009)

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94-1611406

P	art II	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End of	year
_	21 t II	amounts only (See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			
	2	Savings and temporary cash investments	126,448.	144,728.	150,807.
	3	Accounts receivable			
		Less allowance for doubtful accounts			
		Pledges receivable			
		Less allowance for doubtful accounts			
		Grants receivable		·	
		Receivables due from officers, directors, trustees, and other			<del></del>
	٠	disqualified persons (attach schedule) (see page 16 of the instructions)			
	-	Other notes and loans receivable (attach schedule)			
		Less allowance for doubtful accounts			<del></del>
ŧ,		Inventones for sale or use			
Assets		Prepaid expenses and deferred charges			<u> </u>
۲		Investments - U S and state government obligations (attach schedule)			
	b	Investments - corporate stock (attach schedule)			
	11 C	Investments - corporate bonds (attach schedule) ATCH 9. Investments - land, buildings, and equipment basis	199,230.	199,230.	200,852.
		(attach schedule)			
	12	Investments - mortgage loans		0.505.100	0.000.501
	13 14	Investments - other (attach schedule) ATCH 10 Land, buildings, and	2,681,625.	2,537,420.	2,363,581.
	14	equipment basis		-	
		equipment basis Less accumulated depreciation (attach schedule)			
	15	Other assets (describe )			
	16	Total assets (to be completed by all filers - see the			
		ınstructions Also, see page 1, item I)	3,007,303.	2,881,378.	2,715,240.
	17	Accounts payable and accrued expenses			
	18	Grants payable			
Ŋ	19	Deferred revenue			
Liabilities	i	Loans from officers, directors, trustees, and other disqualified persons			
Ē		Mortgages and other notes payable (attach schedule)			
Ë	22	Other liabilities (describe			
	22	Other habilities (describe P			
	23	Total liabilities (add lines 17 through 22)			
$\dashv$		Foundations that follow SFAS 117, check here			
		and complete lines 24 through 26 and lines 30 and 31.			
10		,	3,007,303.	2,881,378.	
ces	24	Unrestricted		2,001,370.	
Balances	25	Temporarily restricted			
	26	Permanently restricted			
Fund		Foundations that do not follow SFAS 117,			
Fu		check here and complete lines 27 through 31. ▶ □			
o	27	Capital stock, trust principal, or current funds			
Net Assets	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
SS	29	Retained earnings, accumulated income, endowment, or other funds			
t A	30	Total net assets or fund balances (see page 17 of the			
Ne		instructions)	3,007,303.	2,881,378.	
	31	Total liabilities and net assets/fund balances (see page 17			
		of the instructions)	3,007,303.	2,881,378.	
Р	art II				
		net assets or fund balances at beginning of year - Part II, co	-	ree with	
•		of-year figure reported on prior year's return)			3,007,303.
2					-125,113.
		r increases not included in line 2 (itemize) ATTACH	 MFNT 11	3	171.
		==	LIDNI TI	4	2,882,361.
		lines 1, 2, and 3	 Мемт 10	· · · · · · · · · <del>                                      </del>	983.
		eases not included in line 2 (itemize) ATTACH		5	2,881,378.
<u>6</u> _	rota	net assets or fund balances at end of year (line 4 minus line	: 5) - Part II, column (b), III	ne 30   6	2,001,3/8.

Par	(a) List and 2-story bri	describe the kind(s) of property sick warehouse, or common stock,	old (e	g , real estate,	(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
<u>1a</u>	SEE PART IV SCHED	DULE				ļ	
b						ļ	
С							
_d_							
e						l <u></u>	
_	(e) Gross sales price	(f) Depreciation allowed (or allowable)		(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) mini	
_a_		<u></u>					
<u>b</u>							
_с							
<u>_d</u>							
<u>e</u>			l				
Cor	nplete only for assets show	ving gain in column (h) and ow	ned b	by the foundation on 12/31/69		Gains (Col (h) g	
(i	) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		(k) Excess of col (ı) over col (j), ıf any	col (k), but not less than -0-) or Losses (from col (h))		
_a					ļ		
ь							
d							
е							
2 C	apital gain net income or (i	net capital loss)		gain, also enter in Part I, line 7 (loss), enter -0- in Part I, line 7	2	<del>-</del> <del></del> -	-40,846.
3 N	et short-term capital gain o	or (loss) as defined in sections		· ·		-	<del></del>
		ine 8, column (c) (see pages 1		• • • • • • • • • • • • • • • • • • • •			
	•	ne 8			3		
Par				ed Tax on Net Investment Inco	ome		
Was		ne section 4942 tax on the distr		ble amount of any year in the base	period?	🗆	Yes X No
	<u> </u>	ot qualify under section 4940(e	<u> </u>	<del></del>			
<u>1</u> E		unt in each column for each ye	ar, se	ee page 18 of the instructions before	making		
Cale	(a) Base penod years endar year (or tax year beginning in)	(b) Adjusted qualifying distributions		(c) Net value of nonchantable-use assets		(d) Distribution ra (col (b) divided by	col (c))
	2008	150,68		2,846,235.	ļ		0.052942
	2007	150,19		3,176,568.	ļ		0.047282
	2006	167,85		2,940,221.			0.057090
	2005	163,54		2,905,210.			0.056293
	2004	168,32	9.	2,924,766.	ļ , , , ,		0.057553
	Total of line 1, column (d)				2		0.271160
3 /	Average distribution ratio fo	or the 5-year base period - divi	ide the	e total on line 2 by 5, or by the			
r	number of years the founda	ation has been in existence if l	ess th	nan 5 years	3		0.054232
4 E	Enter the net value of nonc	haritable-use assets for 2009	from l	Part X, line 5	4	2,	401,420.
						<del></del>	
5 1	Multiply line 4 by line 3 .				5		130,234.
6 8	Enter 1% of net investment	t income (1% of Part I, line 27t	o)		6		603.
7 /	Add lines 5 and 6				7		130,837.
ľ	Enter qualifying distribution f line 8 is equal to or greepart VI instructions on pag	eater than line 7, check the	box i	n Part VI, line 1b, and complete t	8 hat part	using a 1% ta	143,995. x rate See the

Par	VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of the ins	tructi	ons)	
1a	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 ruling letter if necessary - see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		6	503.
	here ► X and enter 1% of Part I, line 27b			
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			
	Add lines 1 and 2			503.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0.
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-		6	503.
6	Credits/Payments			
а	2009 estimated tax payments and 2008 overpayment credited to 2009 6a 0.			
ь	Exempt foreign organizations-tax withheld at source 6b 0.			
	Tax paid with application for extension of time to file (Form 8868)  6c  0.			
	Backup withholding erroneously withheld 6d 6d			
7	Total credits and payments Add lines 6a through 6d			0.
8	Enter any penalty for underpayment of estimated tax. Check here			18.
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		(	521.
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 ▶ 0 . Refunded ▶ 11			
Par	VII-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
	participate or intervene in any political campaign?	1a		Х
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19			
	of the instructions for definition)?	1b		Х
	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			
С	Did the foundation file Form 1120-POL for this year?	1c		Х
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation >\$(2) On foundation managers >\$			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
•	on foundation managers    \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		Х
	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 bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		Х
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		Х
	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		Х
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		Х
•	If "Yes," attach the statement required by General Instruction T			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
•	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that			
	conflict with the state law remain in the governing instrument?	6	Χ	l
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 XV	7	Х	
8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the			
	ınstructions) ► CA,			
ь	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			
-	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	Х	
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 year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV on page			
	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 their			
	names and addresses	10		Х

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Par	t VII-A Statements Regarding Activities (continued)			
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		Х
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before			
	August 17, 2008?	12		<u> x</u>
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address ► N/A			
14	The books are in care of ► FLORA KOMES Telephone no ► 415-441	-646	52	
	Located at ▶P.O BOX 641481 SAN FRANCISCO, CA ZIP+4 ▶ 94164			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		▶	· 🔲
	and enter the amount of tax-exempt interest received or accrued during the year			
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required	<del>,</del>		,
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	ļ	Yes	No
1a	During the year did the foundation (either directly or indirectly)	1		
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No	1		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person? Yes X No	1		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for			İ
	the benefit or use of a disqualified person)? Yes X No	1		
	(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	1		
	termination of government service, if terminating within 90 days ) Yes X No			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?	1b		X
	Organizations relying on a current notice regarding disaster assistance check here			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			١.,
	were not corrected before the first day of the tax year beginning in 2009?	1c	<u> </u>	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? Yes X No			
	If "Yes," list the years			
þ	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)	l	N/	 
	to all years listed, answer "No" and attach statement - see page 20 of the instructions )	2b	N/	<del> </del>
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	<b>&gt;</b>			
3 a	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			1
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year penod (or longer penod approved by the			
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse	1		
	of the 10-, 15-, or 20-year first phase holding penod? (Use Schedule C, Form 4720, to determine if the	<b> </b>		"
	foundation had excess business holdings in 2009)	3b	-	X
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		<del>  ^</del>
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	1		x
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2009?	4b	<u> </u>	^_

Total number of other employees paid over \$50,000

B Five highest-paid independent contractors for professional services (see page 23 of the instructions). If none	e, enter "NONE."
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
ONE	
	<u> </u>
otal number of others receiving over \$50,000 for professional services	▶ NON
Part IX-A Summary of Direct Charitable Activities	
List the foundation's four largest direct chantable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficianes served, conferences convened, research papers produced, etc.	Expenses
1 N/A	
2	
3	
<sup>4</sup>	
Death D. Common of December Deleted Investments (see man 22 of the materials)	
Part IX-B Summary of Program-Related Investments (see page 23 of the instructions)  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
4 NOT APPLICABLE FOR THIS RETURN	
1 NOT APPLICABLE FOR THIS RETURN	
1 NOT APPLICABLE FOR THIS RETURN	
1 NOT APPLICABLE FOR THIS RETURN  2	
2	
All other program-related investments See page 24 of the instructions	

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Pa	Minimum Investment Return (All domestic foundations must complete this part. Foreig see page 24 of the instructions.)	n foundation	S,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes		
а	Average monthly fair market value of securities	1a	2,216,229.
b	Average of monthly cash balances	1b	221,761.
C	Fair market value of all other assets (see page 24 of the instructions)	1c	0.
d		1d	2,437,990.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	2,437,990.
4	Cash deemed held for charitable activities Enter 1 1/2 % of line 3 (for greater amount, see page 25		
	of the instructions)	4	36,570.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	2,401,420.
6	Minimum investment return. Enter 5% of line 5	6	120,071.
Pa	<b>Distributable Amount</b> (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) private foundations and certain foreign organizations check here ▶ ☐ and do not complete this page 25.		
1	Minimum investment return from Part X, line 6	1	120,071.
2 a	Tax on investment income for 2009 from Part VI, line 5 2a 603.		
b			
С	· · · · · · · · · · · · · · · · · · ·	2c	603.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	119,468.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	119,468.
6	Deduction from distributable amount (see page 25 of the instructions)	6	
7	Deduction from distributable amount (see page 25 of the instructions)  Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		<del></del>
	line 1	7	119,468.
Pa	art XII Qualifying Distributions(see page 25 of the instructions)	•	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		·····
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	143,995.
b		1b	0.
2	Program-related investments - total from Part IX-B  Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	0.
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	0.
b	Cash distribution test (attach the required schedule)	3b	0.
4	Qualifying distributions Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	143,995.
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 (see page 26 of the instructions)	5	603.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	143,392.
-	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating wheth		
	qualifies for the section 4940(e) reduction of tax in those years		

Pa	rt XIII Undistributed Income (see page	26 of the instruction	ns)		
	( ) (	(a)	(b)	(c)	(d)
1	Distributable amount for 2009 from Part XI,	Corpus	Years prior to 2008	2008	2009
-	line 7	·	·		119,468.
2	Undistributed income, if any, as of the end of 2009				
a					
	Total for pnor years 20 07 ,20 06 ,20 05				
3	Excess distributions carryover, if any, to 2009	. "		<del></del>	
	From 2004 8,821.				
	From 2005 19, 451.				
	From 2006 25,751.				
	From 2007 6, 257.				
	From 2008 9, 932.				
	Total of lines 3a through e	70,212.			
	Qualifying distributions for 2009 from Part XII,				
	line 4 ▶ \$ 143,995.				
а	Applied to 2008, but not more than line 2a				
	Applied to undistributed income of prior years (Election required - see page 26 of the instructions)				
_	Treated as distributions out of corpus (Election			···········	
٠	required - see page 26 of the instructions)				
d	Applied to 2009 distributable amount				119,468.
е	Remaining amount distributed out of corpus	24,527.			
5	Excess distributions carryover applied to 2009				
	(If an amount appears in column (d), the same				
6	amount must be shown in column (a)) Enter the net total of each column as				
-	indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	94,739.			
h	Prior years' undistributed income Subtract				
~	line 4b from line 2b				
С	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				
d	Subtract line 6c from line 6b Taxable				
	amount - see page 27 of the instructions				
е	Undistributed income for 2008 Subtract line 4a from line 2a Taxable amount - see page				
	27 of the instructions				
f	Undistributed income for 2009 Subtract lines				
•	4d and 5 from line 1. This amount must be				
	distributed in 2010				
7	Amounts treated as distributions out of corpus to satisfy requirements imposed by section		:		
	170(b)(1)(F) or 4942(g)(3) (see page 27 of the				
_	instructions)				ļ
8	Excess distributions carryover from 2004 not applied on line 5 or line 7 (see page 27 of the				
	instructions)	8,821.			
9	Excess distributions carryover to 2010.	0.5 0.4 0			
	Subtract lines 7 and 8 from line 6a	85,918.			
	Analysis of line 9				
	Excess from 2005 19, 451.				
	Excess from 2006 25,751.				
	Excess from 2007 6,257.				
	Excess from 2008 9, 932 .				
е	Excess from 2009 24, 527.	I	1		Ī

12F	rt XIV Private Oper	ating Foundations (s	see page 27 of the	instructions and Pad	Pallo A-IIV	STION 9) NOT	APPLICAB:
_	If the foundation has				1 '	311011 37 1101	THE EXECUTED.
a		•		at it is a private opera	ung_		
	foundation, and the ruling		=		. •	40.40(.)(0)	1040/1/5
b	Check box to indicate whe		vate operating foundati			4942(J)(3) or	4942(j)(5)
2 a	Enter the lesser of the ad-	Tax year		Prior 3 years			(e) Total
	justed net income from Part	(a) 2009	(b) 2008	(c) 2007	(d) 200	06	· · · · · · · · · · · · · · · · · · ·
	I or the minimum investment return from Part X for each						
	year listed	+					<del></del>
Ь	85% of line 2a	-					<del></del>
С	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						
е	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 invest- ment return shown in Part X						
	line 6 for each year listed						
С	"Support" alternative test - enter						
	(1) Total support other than						
	gross investment income						
	(interest, dividends, rents, payments on securities	1					
	loans (section 512(a)(5)),						
	or royalties)						<del></del>
	(2) Support from general public and 5 or more						
	exempt organizations as						
	provided in section 4942 (j)(3)(B)(iii)						
	(3) Largest amount of sup-						
	port from an exempt organization						
	(4) Gross investment income						
Dء	1 2	ary Information (Co	mplete this par	only if the founda	tion had S	\$5.000 or m	ore in asse
		luring the year - see					
1	Information Regarding	_					
а				re than 2% of the total more than \$5,000) (Se			the foundatior
	FLORA KOMES						
b	List any managers of ownership of a partner			of the stock of a corpo n has a 10% or greater		n equally large	portion of the
	N/A						
2	Information Regarding	Contribution, Grant, G	ift, Loan, Scholarsi	nip, etc., Programs:			
	unsolicited requests for	or funds If the found	ation makes gifts,	to preselected charita grants, etc (see page	able organız 28 of the	ations and doinstructions) to	es not accep individuals o
а	The name, address, an				ddressed		
<u>а</u>	The name, address, att		person to whom	applications should be a			
b	The form in which appli	cations should be subm	itted and information	n and materials they shou	uld include		
C	Any submission deadlin	nes					
	<del></del>						
d	Any restrictions or lii factors	mitations on awards,	such as by geog	aphical areas, charitat	ole tields, k	ınds of instituti	ons, or othe

3 Grants and Contributions Paid Dur	ing the Year or Appr		uture Payment	
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Community	
a Paid during the year				
ATTACHMENT 14			}	
ATTACHMENT 14			]	
			1	
		ļ		
		ļ		
		<u> </u>		
Total	<del> </del>	<del></del>	▶ 3a	133,74
<b>b</b> Approved for future payment				
			l i	
	Ì			
Total		1		

1 Program service revenue  a b c d e f g Fees and contracts from government agencies	(e) ted or exemp ction income e page 28 of instructions)
a b c d e f g Fees and contracts from government agencies	instructions)
b c d e f g Fees and contracts from government agencies	
c d e f g Fees and contracts from government agencies	
d e f g Fees and contracts from government agencies	
f g Fees and contracts from government agencies	_
g Fees and contracts from government agencies	
Mambambia disea and generamenta	
Membership dues and assessments	
Interest on savings and temporary cash investments 14 9.	
Dividends and interest from securities	
Net rental income or (loss) from real estate	
a Debt-financed property	
b Not debt-financed property	
Net rental income or (loss) from personal property	
Other investment income  Gain or (loss) from sales of assets other than inventory  18 -40,846.	
Call of (1666) non-scales of caseta office than inventory	
Net income or (loss) from special events	
Gross profit or (loss) from sales of inventory	
Other revenue a  b ATTACHMENT 15  1,117.	
d	
e	
Subtotal Add columns (b), (d), and (e)	
Total Add line 12, columns (b), (d), and (e)	35,13
Relationship of Activities to the Accomplishment of Exempt Purposes  Line No. Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed	ımportantl
ee worksheet in line 13 instructions on page 28 to verify calculations )  art XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes	
art XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes  ine No. Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed the accomplishment of the foundation's exempt purposes (other than by providing funds for such p	
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 the accomplishment of the foundation's exempt purposes (other than by providing funds for such page 29 of the instructions)	
re worksheet in line 13 instructions on page 28 to verify calculations.)  Relationship of Activities to the Accomplishment of Exempt Purposes  ine No.  Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed the accomplishment of the foundation's exempt purposes (other than by providing funds for such providing funds for suc	
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 the accomplishment of the foundation's exempt purposes (other than by providing funds for such page 29 of the instructions)	
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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 the accomplishment of the foundation's exempt purposes (other than by providing funds for such page 29 of the instructions)	

1 Dub de organization directly or indirectly engage in any of the following with any other organization discribed in section 501(c) of the Code (other than section 501(c)) disgranizations or in section 527, relating to political a special property of the section 501(c) and the reporting foundation to a nonchantable exempt organization of (1) Cash.  (2) Other assats  (3) Purchases of assets to an nonchantable exempt organization  (3) Purchases of assets from a nonchantable exempt organization  (3) Purchases of assets from a nonchantable exempt organization  (3) Remistration, other assets  (4) Remistration, other assets  (5) Coans of too guarantees  (6) Performance of services or membership or fundasing solicitations  (7) Shaning of facilities, equipment, or other assets  (8) Performance of services or membership or fundasing solicitations  (8) Performance of services or membership or fundasing solicitations  (8) Performance of services or membership or fundasing solicitations  (9) Performance of services or membership or fundasing solicitations  (10) Cash of the coal organization or sharing arrangement, show in column (d) the value of the goods, other assets, or sorvices yer by the freporting foundation if the foundation necewel assets are asset to any for the above is "Yes," complete the following schedule Column (b) should always show the fair marker value of the goods, other assets, or sorvices yer by the freporting foundation if the foundation necewel assets for a marker to any for the coal of the coal	Pa	rt XVII	Information Exempt Orga		Transfers To a	nd Transa	ctions	and Relati	onship	s With N	lonc	harit	able
a gragmastenes* of the reporting foundation to a nonchanitable exempt organization of (1) Cash.  (2) Other assests  13(1) X  (3) Other assests  14(2) X  (4) Rembut sacisfs from a nonchanitable exempt organization  (5) Purchases of assets from a nonchanitable exempt organization  (6) Purchases of assets from a nonchanitable exempt organization  (7) Rembut seems of assets from a nonchanitable exempt organization  (8) Performance of searces of membership or fundrissing solicitations  (9) Performance of services or membership or fundrissing solicitations  (9) Performance of services or membership or fundrissing solicitations  (9) Performance of services or membership or fundrissing solicitations  (9) Performance of services or membership or fundrissing solicitations  (9) Performance of services or membership or fundrissing solicitations  (9) Performance of services or services given by the reporting foundation if the foundation received less than farm market value or the goods, other assets, or services given by the reporting foundation if the foundation received less than farm market value or the goods, other assets, or services given by the reporting foundation if the foundation received less than farm market value or the goods, other assets, or services given by the reporting foundation if the foundation received less than farm market value or the goods, other assets, or services given by the reporting foundation if the foundation received less than farm market value or the goods, other assets, or services given by the reporting foundation if the foundation received less than farm market value or the goods, other assets, or services given by the reporting foundation if the foundation received less than it market value or the goods, other services or services given by the reporting foundation if the foundation received less than it market value or the goods, other services or services for the following services or services or services for the following services or services for the following services or services f	1											Yes	No
a Triansfers from the reporting foundation to a noncharitable exempt organization of (1) Cash 1.  (2) Other assets 1.  (3) Other assets 1.  (4) Sales of assets to an anocharitable exempt organization (1) Sales of assets from a noncharitable exempt organization (1) Sales of assets from a noncharitable exempt organization (1) Sales of assets from a noncharitable exempt organization (1) Sales of assets from a noncharitable exempt organization (1) Sales of assets from a noncharitable exempt organization (1) Sales of assets from a noncharitable exempt organization (1) Sales of assets from a noncharitable exempt organization (1) Sales of assets from a noncharitable exempt organization (1) Sales of assets of the goods, other assets of the sales of the sale			, ,	ode (other than	section 501(c)(3)	organizations	) or in s	ection 527, i	relating to	o political			
(2) Other assects  (3) Other assects  (3) Other assects  (3) Seniar of assets to a nonchantable exempt organization  (4) Seles of assets from a nonchantable exempt organization  (5) Purchases of assets from a nonchantable exempt organization  (6) Remisurement arrangements  (6) Lears or loan guarantee  (6) Lears or loan guarantee  (7) Seles of bookles, equipment, making lists, other assets, or paid employees  (8) If the answer to any of the above is "fee," complete the following schedule Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value of any of the above is "fee," complete the following schedule Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value of the goods, other assets, or services received.  (a) Line no (b) Amount anywhead (c) Name of noncharisable exempt organization.  (b) If Yes, complete the following schedule  (c) Line no (b) Amount anywhead (c) Name of noncharisable exempt organization.  (c) Description of transfers, transactions, and sharing arrangements.  N/A  If Yes, complete the following schedule  (a) Name of organization.  (b) Type of organization.  (c) Description of relationship.  (c) Description of relationship.  (d) Name of organization of which prepare has been been of industry in the property	а	Trănsf	ers from the reporting fou										
b Other transactions  (1) Sales of assets to a noncharitable exempt organization  (2) Purchase of assets from a noncharitable exempt organization  (3) Rental of facilities, equipment, or other assets  (4) Rombissement arrangements  (5) Loans or loan guarantees  (6) Loans or loan guarantees  (7) Elbig   X  (8) Performance of services or membership or fundraising solicitations  (8) Performance of services or membership or fundraising solicitations  (9) Loans or loan guarantees  (15) Elsi   X  (15) Loans or loan guarantees  (16) Performance of services or membership or fundraising solicitations  (16) Performance of services or membership or fundraising solicitations  (17) If the answer to any of the above is "Yes," complete the following schedule Column (b) should always show the fair market value or the goods, other assets, or services given by the reporting foundation if the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received (a) Line no  (b) Amount involved  (c) Name of incrucharitable exempt organization  (d) Description of transfers, transactions, and sharing arrangements  N/A  N/A    Different particular organization   N/A   N/A													
(1) Sales of assets to a noncharitable exempt organization (2) Purchases of assets from a noncharitable exempt organization (3) Renal of facilities, equipment, or other assets (3) Renal of facilities, equipment, or other assets (4) Remibursement arrangements (5) Loans or loan guarantee (6) Loans or loan guarantee (6) Loans or loan guarantee (7) Loans (8) Performance of services or membership or fundrasing solicitations (15) Loans or loan guarantee (6) Loans or loan guarantee (7) Loans (8) Loans or loan guarantee (8) Loans (8)								· · · · · · ·			18(2)		
(a) Purchases of assets from a nonchanitable exempt organization   th(t/2)   X   (b) Reimbursement arrangements   th(t/2)   X   (c) Loans or loan guarantees   th(t/2)   X   (d) Reimbursement arrangements   th(t/2)   X   (e) Loans or loan guarantees   th(t/2)   X   (f) Loans or loan guarantees   th(t/2)   X   (h) Earnamance of services or membership or fundrasing solicitations   th(t/2)   X   (h) Earnamance of services or membership or fundrasing solicitations   th(t/2)   X   (h) Earnamance of services or membership or fundrasing solicitations   th(t/2)   X   (h) Earnamance of services or membership or fundrasing solicitations   th(t/2)   X   (h) Earnamance of services or membership or fundrasing solicitations   the following schedule				ritable exempt or	ganization						1b(1)		Х
(4) Rembursement arrangements													Х
(e) Rembursement arrangements											1b(3)		Х
(e) Performance of services or membership or fundrasing solicitations  c Sharing of facilities, equipment, mailing lists, other assets, or paid employees  d if the answer to any of the above is "Yes," complete the following schedule  value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair marker value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received  (a) Line no (b) Amount involved (c) Name of nonchanitable exampt organization (d) Decorption of transfers, transactions, and sharing arrangements  N/A  N/A  2a Is the foundation directly or indirectly siffliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?  b If "Yes," complete the following schedule  (a) Name of organization (b) Type of organization (c) Decorption of relationship  Under penalties of penjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge middle that the little of the penalties of penjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge middle that the little of the penalties of penjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge middle that the little of the penalties of penjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge middle that the little of the penalties of penjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge middle that the penalties of penjury, I declare that I have examined this return including accompanying schedules and statements, and to the best of my knowledge middle that the penalties of penjury, I de											1b(4)		
c Shamp of facilities, equipment, maling lists, other assets, or paid employees  d if the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair marker value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.  (a) Line no. (b) Amount involved. (c) Name of nonchanitable exempt organization.  (b) Amount involved. (c) Name of nonchanitable exempt organization.  (c) Description of transfers, transactions, and sharing arrangements.  N/A.  2a is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?  b If "Yes," complete the following schedule.  (a) Name of organization.  (b) Type of organization.  (c) Description of relationship.  (c) Description of relationship.  (d) Description of relationship.  (e) Description of relationship.  (f) Description of relationship.  (g) No.  (h) Type of organization.  (h) Description of relationship.  (h) Type of organization.  (h) Type of organization.  (h) Type of organization.  (h) Description of relationship.  (h) Description of relationship.			=										
d if the answer to any of the above is "res," complete the following schedule Column (b) should always show the fair marker value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair marker value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received to the goods, and the goods and the goods, and the goods and goods and goods and goods and goods and goods and goods a		• •			-							ļ	_
value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair marke value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received (e) Line no. (b) Amount involved.  (c) Name of nonchantable exempt organization.  N/A  N/A  N/A  N/A  N/A  N/A  N/A  N/	C		* · · · · · · · · · · · · · · · · · · ·	-								four i	
value in any transaction or shaning arrangement, show in column (d) the value of the goods, other assets, or services received (a) Line no (b) Amount involved (c) Name of nonchantable exempt organization (d) Description of transfers, transactions, and sharing arrangements N/A	C												
(a) Line no (b) Amount involved (c) Name of nonchantable exempt organization (d) Description of transfers, vanisactions, and sharing arrangements N/A					• ,								
N/A  N/A  N/A  N/A  N/A  N/A  N/A  N/A		Value	in any transaction of	onaling arrang	gomone, onon m		10 14140	o good.	,				
2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?	(a)	Line no	(b) Amount involved	(c) Name of r	nenchantable exempt org	anization	(d) Desc	inption of transfei	rs, transaction	ons, and shanr	ng arrar	gemen	its
section 501(c) of the Code (other than section 501(c)(3)) or in section 527?  b If "Yes," complete the following schedule  (a) Name of organization  (b) Type of organization  (c) Description of relationship  Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge  Signature of officer or trustee  Date  Preparer's identifying number (see Signature on page 30 of the instructions) page 30 of the instructions)  Preparer's signature on page 30 of the instructions)  PRICEMATERHOUSECOOPERS LLP  EIN ▶ 13-4008324  Phone no 415-498-5000			N/A				N/A						
section 501(c) of the Code (other than section 501(c)(3)) or in section 527?  b If "Yes," complete the following schedule  (a) Name of organization  (b) Type of organization  (c) Description of relationship  Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge  Signature of officer or trustee  Date  Preparer's identifying number (see Signature on page 30 of the instructions) page 30 of the instructions)  Preparer's signature on page 30 of the instructions)  PRICEMATERHOUSECOOPERS LLP  EIN ▶ 13-4008324  Phone no 415-498-5000										<del> </del>			
section 501(c) of the Code (other than section 501(c)(3)) or in section 527?  b If "Yes," complete the following schedule  (a) Name of organization  (b) Type of organization  (c) Description of relationship  Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge  Signature of officer or trustee  Date  Preparer's identifying number (see Signature on page 30 of the instructions) page 30 of the instructions)  Preparer's signature on page 30 of the instructions)  PRICEMATERHOUSECOOPERS LLP  EIN ▶ 13-4008324  Phone no 415-498-5000													
section 501(c) of the Code (other than section 501(c)(3)) or in section 527?  b If "Yes," complete the following schedule  (a) Name of organization  (b) Type of organization  (c) Description of relationship  Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge  Signature of officer or trustee  Date  Preparer's identifying number (see Signature on page 30 of the instructions) page 30 of the instructions)  Preparer's signature on page 30 of the instructions)  PRICEMATERHOUSECOOPERS LLP  EIN ▶ 13-4008324  Phone no 415-498-5000													
section 501(c) of the Code (other than section 501(c)(3)) or in section 527?  b If "Yes," complete the following schedule  (a) Name of organization  (b) Type of organization  (c) Description of relationship  Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge  Signature of officer or trustee  Date  Preparer's identifying number (see Signature on page 30 of the instructions) page 30 of the instructions)  Preparer's signature on page 30 of the instructions)  PRICEMATERHOUSECOOPERS LLP  EIN ▶ 13-4008324  Phone no 415-498-5000	_	-											
section 501(c) of the Code (other than section 501(c)(3)) or in section 527?  b If "Yes," complete the following schedule  (a) Name of organization  (b) Type of organization  (c) Description of relationship  Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge  Signature of officer or trustee  Date  Preparer's identifying number (see Signature on page 30 of the instructions) page 30 of the instructions)  Preparer's signature on page 30 of the instructions)  PRICEMATERHOUSECOOPERS LLP  EIN ▶ 13-4008324  Phone no 415-498-5000	_									-			
section 501(c) of the Code (other than section 501(c)(3)) or in section 527?  b If "Yes," complete the following schedule  (a) Name of organization  (b) Type of organization  (c) Description of relationship  Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge  Signature of officer or trustee  Date  Preparer's identifying number (see Signature on page 30 of the instructions) page 30 of the instructions)  Preparer's signature on page 30 of the instructions)  PRICEMATERHOUSECOOPERS LLP  EIN ▶ 13-4008324  Phone no 415-498-5000													
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b If "Yes," complete the following schedule  (a) Name of organization  (b) Type of organization  (c) Description of relationship  Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge  Signature of officer or trustee  Date  Title  Preparer's  Signature of organization  Preparer's identifying number (See Signature on page 30 of the instructions)  P00286106  Firm's name (or yours if self-employed), address.  AN FRANCISCO, CA  94111  Phone no 415-498-5000	2a			-								es []	
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer or fiducary) is based on all information of which preparer has any knowledge    Signature of officer or trustee   Date   Tritle	t												
belief, it is true, correct, and complete Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge    Signature of officer or trustee   Date   Title			(a) Name of organization	l	(b) Type of	organization		(	c) Description	on of relations	hip		
belief, it is true, correct, and complete Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge    Signature of officer or trustee   Date   Title	_												
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belief, it is true, correct, and complete Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge    Signature of officer or trustee   Date   Title	_												
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Signature of officer or trustee  Date  Date  Check if self-employed page 30 of the instructions)  Preparer's identifying number (See Signature on page 30 of the instructions)  Provided page 30 of the instructions and the instructions are page 30 of the instructions)  Provided page 30 of the instructions are page 30 of the instructions and the instructions are page 30 of the instructions are page 30 of the	_	Under belief,	penalties of perjury, I decli	are that I have ex plete Declaration	amined this return, incl of preparer (other than	uding accompa taxpayer or fidu	nying sched iciary) is ba	tules and statem sed on all inform	nents, and nation of w	to the best o	f my k	nowled	ge and wledge
Date   Check if self-employed   Preparer's identifying number (See Signature on page 30 of the instructions)   P00286106			Hora to	•			İ	No.	nay 17	210			
Firm's name (or yours if self-employed), address, and ZIP code  PRICEWATERHOUSECOOPERS LLP  EIN > 13-4008324  THREE EMBARCADERO CENTER  SAN FRANCISCO, CA 94111  Phone no 415-498-5000	ø	Sı	gnature of officer or trustee		<del> </del>		Date	<b>&gt;</b>	Title				
Firm's name (or yours if self-employed), address, and ZIP code  PRICEWATERHOUSECOOPERS LLP  EIN > 13-4008324  THREE EMBARCADERO CENTER  SAN FRANCISCO, CA 94111  Phone no 415-498-5000	Ę					Date		Charles					
Firm's name (or yours if self-employed), address, and ZIP code  PRICEWATERHOUSECOOPERS LLP  EIN > 13-4008324  THREE EMBARCADERO CENTER  SAN FRANCISCO, CA 94111  Phone no 415-498-5000	r E	ح ئ	Preparer's	7/11/01	P	5/	2/1		ed ▶				
and ZIP code SAN FRANCISCO, CA 94111 Phone no 415-498-5000	Sign	are on	. · <b>-</b> / /	MI A/	1/		1//0_	<u> </u>		<u> </u>			
and ZIP code SAN FRANCISCO, CA 94111 Phone no 415-498-5000		rep.	, , ,	//			<u> </u>	<del>-</del>	EIN ▶	13-40083	324		
		"		, ,	J		0.41	, , ,	Dt -	. 415 44	) O F	000	
Form 4411-PP (711M)		L	und En Code	SAN FI	RANCISCO, CA	_	94.	111	Phone no	-			(2009)

#### FORM 990PF, PART I - INTEREST ON TEMPORARY CASH INVESTMENTS

REVENUE AND EXPENSES

<u>DESCRIPTION</u>

PER BOOKS

WELLS FARGO BANK (CHECKING)

9.

TOTAL

<u>9.</u>

#### FORM 990PF, PART I - DIVIDENDS AND INTEREST FROM SECURITIES

REVENUE

AND

EXPENSES

DESCRIPTION

PER BOOKS

FIDELITY INTEREST INCOME FIDELITY DIVIDEND INCOME

18,298.

56,534.

TOTAL

74,832.

### FORM 990PF, PART I - OTHER INCOME

	REVENUE
	AND
	EXPENSES
DESCRIPTION	PER BOOKS
FOREIGN DIVIDEND	176.
CLASS ACTION SETTLEMENT - FREDDIE MAC 1	83.
CLASS ACTION SETTLEMENT - AIG	844.
CLASS ACTION SETTLEMENT	14.
TOTALS	1,117.

I
FEES
ACCOUNTING
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PART
990PF,
FORM

CHARITABLE PURPOSES	10,200.	10,200.
ADJUSTED NET INCOME		0
NET INVESTMENT INCOME		0
REVENUE AND EXPENSES PER BOOKS	10,200.	10,200.
		TOTALS
DESCRIPTION	TAX PREPARATION FEE	

ATTACHMENT 5

DESCRIPTION

ATTACHMENT 6

FORM 990PF, PART I - OTHER PROFESSIONAL FEES

REVENUE

AND

EXPENSES

PER BOOKS

FIDELITY ADVISOR FEES

15,553.

TOTALS

15,553.

## FORM 990PF, PART I - TAXES

DESCRIPTION	REVENUE AND EXPENSES PER BOOKS
FILING FEE-CA ATTORNEY GENERAL FRANCHISE TAX BOARD IRS SECRETARY OF STATE	25. 10. 585. 20.
TOTALS	640.

DESCRIPTION

US POSTAL SERVICES

WELLS FARGO MONTHLY SVC FEE

ATTACHMENT 8

FORM 990PF, PART I - OTHER EXPENSES

REVENUE AND

EXPENSES

PER BOOKS

80. 12.

TOTALS

92.

PAGE 26

}	ATT
BONDS	
CORPORATE	
- II	
PART	
FORM 990PF, PART II - CORPORATE BC	

DESCRIPTION

200,000 GOLDMAN SACH GROUP

TOTALS

6	ENDING	FMV
ATTACHMENT	ENDING	BOOK VALUE

30
9,2
19

200,852.

200,852.

199,230.

- OTHER INVESTMENTS

PART

FORM 990PE,

ATTACHMENT 10

# 12:42:11 PMV 09-6.1 5/13/2010 277544 4178

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ENDING

ENDING BOOK VALUE

DESCRIPTION	2200 ISHARES TR EFA INDEX FD 100K FEDERAL FARM CR BKS CONS FIDELITY INSTL GOV'T PORT 111,475 DFA T A US CORE EQUITY 13,184 DFA INTL REAL ESTATE 31,484 DFA INTERNATIONAL CORE 9,221 DFA EMERGING MRKTS CORE 4,014 VANGUARD REIT INDEX EUND 1,325 GS GROUP INC. INDEX LKD 1250 VANGUARD INDEX FDS 13,406 PIMCO 5,708 VANGUARD INFLATION

TOTALS

4,27	2,76	494,333.	6,94	9,55	6,33	5,92	3,81	19,64	2,363,581.
61,10	26,1	505,100.	93,09	90,94	10,26	0,71	0,05	10,05	2,537,420.

FORM 990PF, PART III - OTHER INCREASES IN NET WORTH OR FUND BALANCES

<u>DESCRIPTION</u> <u>AMOUNT</u>

PRIOR PERIOD ADJUSTMENT - INTEREST 171.

TOTAL 171.

94-1611406

ATTACHMENT 12

FORM 990PF, PART III - OTHER DECREASES IN NET WORTH OR FUND BALANCES

DESCRIPTION

AMOUNT

COST BASIS ADJUSTMENT

983.

TOTAL

983.

FORM 990PE, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

ATTACHMENT 13

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ATTACHMENT	

TITLE AND AVERAGE HOURS PER	PRESIDENT	VICE PRESIDENT, CFO	SECRETARY
WEEK DEVOTED TO POSITION	1.00	2.00	8.00
NAME AND ADDRESS	FLORA KOMES	JULIA K. GARVEY	CATHERINE M. CUNNINGHAM
	1661 PINE STREET APT 314	1801 VAN NESS AVENUE, SUITE 300	1801 VAN NESS AVENUE, SUITE 300

GRAND TOTALS

. 50

DIRECTOR

JOHN A. KOMES 1801 VAN NESS AVENUE, SUITE 300

. 50

DIRECTOR

J. MICHAEL KOMES 1801 VAN NESS AVENUE, SUITE 300

FORM, 930PE, PART XV - GRANTS AND CONTRIBUTIONS, PAID DURING THE YEAR

94-1611406

2,000

AMOUNT

PURFOSE OF GRANT OR CONTRIBUTION

CHARITABLE

ATTACHMENT 14 (CONT'D)

2,000

3,000

1,000

1,200

54,440

FORM 990PE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

FOUNDATION STATUS OF RECIPIENT

RECIPIENT NAME AND ADDRESS

SAN FRANCISCO, CA 94143

THAT MAN MAY SEE, INC

10 KORET WAY

N/A 501(C)(3)

CHARITABLE	CHARITABLE	CHARITABLE	CHARITABLE
N/A 501 (C) (3)	N/A 501 (C) (3)	N/A 501 (C) (3) N/A	501 (C) (3) N/A 501 (C) (3)
TURN ONTO AMERICA P O BOX 643 LAFAYETTE, CA 94549	MD ANDERSON CANCER CENTER 1515 HOLCOMBE BLVD HOUSTON, TX 77030	AWAZING GRACE PET RESCUE SPRING, TX 77379 JESUIT RETREAT HOUSE	ADDRESS AVAILABLE UPON REQUEST MARIANIST PROVIDENCE OF THE U S 4425 WEST PINE BLVD ST LOUIS, MD 63108

ATTACHMENT 14 (CONT'D)

YEAR	I
THE	
S_PAID_DURING_THE YEAR	
PAID	I
NAMIS AND CONTRIBUTIONS	
GRANTS AND	
PART XV - GR	
FORM 990PE.	

AMOUNT	13,600	4,000	5,000	2,000
PURPOSE OF GRANT OR CONTRIBUTION	CHARITABLE	CHARITABLE	CHARITABLE	CHARITABLE
RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	N/A 501(C)(3)	N/A 501 (C) (3)	N/A 501 (C) (3)	N/A 501(C)(3)
RECIPIENT NAME AND ADDRESS	MARIANISTS 4425 WEST PINE BLVD ST LOUIS, MD 63108	MAYO FOUNDATION 200 IST ST SW ROCHESTER, MN 55905	SISTERS OF MERCY INSTITUTE OFFICE 8380 COLESVILLE ROAD, SUITE 300 SILVER SPRING, CA 20910	ST MARTIN DE PORRES SCHOOL ADDRESS AVAILABLE UPON REQUEST

133,740

TOTAL CONTRIBUTIONS PAID

RELATED OR EXEMPT FUNCTION INCOME

FORM 990-PF, PART XVI-A - ANALYSIS OF OTHER REVENUE

	AMOUNT	
EXCLUSION	CODE	
	AMOUNT	
BUSINESS	CODE	
	<u>"</u>	
	DESCRIPTION	

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844. 83. 14. 176.

CLASS ACTION SETTLEMENT - AIG CLASS ACTION SETTLEMENT - FREDDIE MAC 1 CLASS ACTION SETTLEMENT - WF STATEMENT FOREIGN DIVIDEND ATTACHMENT 15

#### SCHEDULE D (Form 1041)

Department of the Treasury Internal Revenue Service

# **Capital Gains and Losses**

► Attach to Form 1041, Form 5227, or Form 990-T. See the instructions for Schedule D (Form 1041) (also for Form 5227 or Form 990-T, if applicable).

OMB No 1545-0092

2009

Name of estate or trust Employer identification number KOMES FOUNDATION 94-1611406 Note: Form 5227 filers need to complete onlyParts I and II Short-Term Capital Gains and Losses - Assets Held One Year or Less Part I (e) Cost or other basis (f) Gain or (loss) for (b) Date acquired (c) Date sold (a) Description of property (see page 4 of the instructions) (d) Sales pnce the entire year (mo , day, yr ) (Example 100 shares 7% preferred of "Z" Co ) Subtract (e) from (d) 1a b Enter the short-term gain or (loss), if any, from Schedule D-1, line 1b 1b Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824 Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts Short-term capital loss carryover Enter the amount, if any, from line 9 of the 2008 Capital Loss Net short-term gain or (loss). Combine lines 1a through 4 in column (f) Enter here and on line 13, column (3) on the back Long-Term Capital Gains and Losses - Assets Held More Than One Year (e) Cost or other basis (f) Gain or (loss) for (a) Description of property (Example 100 shares 7% preferred of "Z" Co ) (b) Date acquired (c) Date sold (see page 4 of the instructions) (d) Sales price the entire year Subtract (e) from (d) (mo , day, yr ) (mo, day, yr) 6a -40,846. b Enter the long-term gain or (loss), if any, from Schedule D-1, line 6b 6b Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824 Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts 8 Capital gain distributions . . . Gain from Form 4797, Part I 10 10 Long-term capital loss carryover Enter the amount, if any, from line 14 of the 2008 Capital Loss 11 Net long-term gain or (loss). Combine lines 6a through 11 in column (f) Enter here and on line 14a, -40,846. column (3) on the back . Schedule D (Form 1041) 2009 For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

Chedule D (Form 1041) 2009 Part III Summary of Parts I and II		(4) Ronofiniana	(2) E-1-1-	'c	Page 2
Part III Summary of Parts I and II Caution: Read the instructions beforecompleting this pa	ırt	(1) Beneficiaries' (see page 5)	(2) Estate or trust's		(3) Total
<del></del>	13	(444 ) 134 17			
14 Net long-term gain or (loss):	<u></u>				
	I4a				-40,846.
	l4b				
	I4c				
	15		·		-40,846.
Note: If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4 (or Form 9		, Part I, line 4a) If lines	14a and 15, colu	umn (2	), are net gains, go
o Part V, and do notcomplete Part IV If line 15, column (3), is a net loss, complete Part					
Part IV Capital Loss Limitation		•			
6 Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, Part	t I, lir	ne 4c, if a trust), the <b>sm</b>	naller of		
a The loss on line 15, column (3) or b \$3,000			16	<u> </u>	3,000.)
Note: If the loss on line 15, column (3), is more than \$3,000, or if Form 1041, page CarryovetWorksheeton page 7 of the instructions to figure your capital loss carryover	1, lın	e 22 (or Form 990-T, lir	ne 34), is a loss	, comp	plete the Capital Loss
Part V Tax Computation Using Maximum Capital Gains Rates					
Form 1041 filers. Complete this part only if both lines 14a and 15 in colum		n) are name or an am	nount is entere	ed in 1	Part I or Part II and
here is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is more the			iodin is cincic	, u 111 1	altionialtialla
Caution: Skip this part and complete the worksheet on page 8 of the instruction		20.0			
Either line 14b, col (2) or line 14c, col (2) is more than zero, or					
Both Form 1041, line 2b(1), and Form 4952, line 4g are more than zero					
Form 990-T trusts. Complete this part only if both lines 14a and 15 are	_	· ·			
of Form 990-T, and Form 990-T, line 34, is more than zero. Skip this part either line 14b, col. (2) or line 14c, col. (2) is more than zero.	and	complete the works	heet on page	8 of	the instructions if
17 Enter taxable income from Form 1041, line 22 (or Form 990-T, line 34)		17			
8 Enter the smaller of line 14a or 15 in column (2)	•				
but not less than zero18			1		
9 Enter the estate's or trust's qualified dividends					
from Form 1041, line 2b(2) (or enter the qualified					
dividends included in income in Part I of Form 990-T) 19		] }			
20 Add lines 18 and 19		<b>-</b>			
21 If the estate or trust is filing Form 4952, enter the					
amount from line 4g, otherwise, enter -0-				ĺ	
Subtract line 21 from line 20 If zero or less, enter -0-		22			
Subtract line 22 from line 17 If zero or less, enter -0-		23		1	
	• •				
24 Enter the smaller of the amount on line 17 or \$2,300		24			
25 Is the amount on line 23 equal to or more than the amount on line 24?	• •	•			
Yes. Skip lines 25 and 26, go to line 27 and check the "No" box					
No. Enter the amount from line 23		25			
Subtract line 25 from line 24		26			
27 Are the amounts on lines 22 and 26 the same?	•				
Yes. Skip lines 27 thru 30, go to line 31 No. Enter the smaller of line 17 or line 23	2	27			
Enter the amount from line 26 (If line 26 is blank, enter -0-)		28			
				1	
Subtract line 28 from line 27		29			
30 Multiply line 29 by 15% (15)				)	
31 Figure the tax on the amount on line 23 Use the 2009 Tax Rate	Sch	edule for Estates an	d Trusts		
(see the Schedule Ginstructions in the instructions for Form 1041)			31	1	
	-				
32 Add lines 30 and 31		. <b></b>		2	
33 Figure the tax on the amount on line 17 Use the 2009 Tax Rate				$\top$	
(see the Schedule Ginstructions in the instructions for Form 1041)				3	
Tax on all taxable income. Enter the smaller of line 32 or line 33 he					<u> </u>
G, line 1a (or Form 990-T, line 36)			II	١	

Schedule D (Form 1041) 2009

Part II Long-Term Capital Gains and (a) Description of property (Example 100 sh 7% preferred of "Z" Co)  6a 2,200 SHARES - ISHARES TR MSCI EAFE INDEX FD (EFA)  100.000 FEDERAL FARM CR BKS	d Losses - Asse (b) Date acquired (mo , day, yr )  VARIOUS	ts Held More Tha (c) Date sold (mo , day, yr )	(d) Sales pnce (see page 4 of the instructions)	(e) Cost or other basis (see page 4 of the instructions)	(f) Gain or (loss)	
MSCI EAFE INDEX FD (EFA) 100.000 FEDERAL FARM CR			mandalona	I instructions)	(f) Gain or (loss) Subtract (e) from (d)	
		03/30/2009	85,131.	126,054.	-40,923.	
	VARIOUS	05/04/2009	100,000.	99,923.	77	
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FORM 990-PF - PART IV
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

Kınd of P	Description Description							
Gross sale	Depreciation				Excess of	Ď	acquired Gain	Date sold
price less expenses of sale	allowed/ allowable	other	as of	as of	FMV over adj basis		or (loss)	
85,131.	allowable	2,200 SHARES 126,054.	12/31/69 - ISHARES	12/31/69 TR MSCI EAF			VARIOUS -40,923.	03/30/2009
100,000.		100.000 FEDE 99,923.	CRAL FARM CE	R BKS			VARIOUS 77.	05/04/2009
TOTAL GAIN (L	oss)						-40,846.	
						! .		