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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

		t of the Treasury venue Service Note. The foundation m		e to use a copy of this			rtına requirements.	2009
_		ndar year 2009, or tax year beginning	<u> </u>	<u> </u>	, and e			
		all that apply: Initial return		Initial return of a fo			Final return	
		Amended return	_	Address chan	•	´ 🔲	Name change	
	the	.]					A Employer identification	number
Oth	erwi					Room/suite	94-3400451	
0	print r type	' '				Noomisalle	B Telephone number (650) 948-8	2727
	Spe	I DI VILLED ON AD . I -	T 1 1 1	HOOK		l	C If exemption application is per	
Inst	ructio	SAN JOSE, CA 95113	-222	5			D 1. Foreign organizations,	
H (Check	type of organization: X Section 501(c)(3					Foreign organizations mee check here and attach con	ting the 85% test,
	Se	ction 4947(a)(1) nonexempt charitable trust	Other	taxable private founda	tion		E If private foundation statu	
I Fa	air ma	arket value of all assets at end of year J Accou	unting me	ethod: X Cash	Accı	ual	under section 507(b)(1)(
		Part II, col. (c), line 16)	Other (s	specify)			F If the foundation is in a 6	
	- \$	3,563,648. (Part I, c					under section 507(b)(1)(
Pa	art I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may no necessarily equal the amounts in column (a))	it 6	(a) Revenue and expenses per books		vestment ome	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received					N/A	
	2	Check \[\bigset \bigset \bigset \] If the foundation is not required to attach Sch. B Interest on savings and temporary cash investments		36.		36.		STATEMENT 1
	4	cash investments Dividends and interest from securities		84,996.	8	4,996.		STATEMENT 2
	1 '	Gross rents		04,550.		<u> </u>		JIMIDHUNI Z
		Net rental income or (loss)		-				
đ	6a	Net gain or (loss) from sale of assets not on line 10		25,685.				
ž	b	Gross sales price for all assets on line 6a 106,810	<u>.</u>					
Revenue	7	Capital gain net income (from Part IV, line 2)			2	<u>5,685.</u>		
	8	Net short-term capital gain						
	9	Income modifications Gross sales less returns			-			
	Ι.	and allowances Less Cost of goods sold						
	1	Gross profit or (loss)						
	11	Other income	•	-11,193.	-1	1,193.		STATEMENT 3
	12	Total. Add lines 1 through 11		99,524.	9	<u>9,524.</u>		
	13	Compensation of officers, directors, trustees, etc		0.		0.		0.
	14	Other employee salaries and wages						
L g	15	Pension plans, employee benefits		1,972.		0.		
Na A	168	Legal fees STMT 4 Accounting fees STMT 5		4,789.		0.		0.
ŽŠ		Other professional fees		4,703.				
たばんNやごね ative Expenses	17	Interest						
_ ⊆	18	Taxes STMT 6		2,090.		0.		0.
1.JC minist	19	Depreciation and depletion						
~ Έ	20	Occupancy	ļ					
ad Adju	21	Travel, conferences, and meetings					_	
a	22 23	Printing and publications Other expenses STMT 7		4,222.		0.		0.
CIUC ating a	24	Total operating and administrative		=,222				
الالال Operating	-:	expenses. Add lines 13 through 23		13,073.		0.		0.
ō	25	Contributions, gifts, grants paid		163,000.				163,000.
	26	Total expenses and disbursements.						
	R	Add lines 24 and 25		176,073.		0.		163,000.
		-Subtract-line-26-from-line 12:	ŀ	76 640			,	
488		Excess of revenue over expenses and disbursements		-76,549.	0	9,524.		
4	"	Adjusted net income (fraegative, enter -0-)		· · · · ·		J, J44.	N/A	
9235 02-0	01	GHAEFON Privacy Act and Paperwork Reduct	ion Act N	otice, see the instruc	tions.			Form 990-PF (2009)
	<u> </u>	JUDEN, UI			1			\

Form	990-PF (2009) OLANDER FAMILY FOUNDATIO			3400451 Page 2
Pai	Halance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
	1 Cash - non-interest-bearing	-20,242.	26,063.	26,063.
	2 Savings and temporary cash investments			
	3 Accounts receivable ►			
	Less: allowance for doubtful accounts ▶			
	4 Pledges receivable ▶			
	Less: allowance for doubtful accounts ▶			
- 1	5 Grants receivable			
- ['	6 Receivables due from officers, directors, trustees, and other			
	disqualified persons			 -
	7 Other notes and loans receivable			
	Less: allowance for doubtful accounts			
Assets	8 Inventories for sale or use	2 200	1 274	1 274
SS	9 Prepaid expenses and deferred charges	3,399.	1,374.	1,374.
1	Da Investments - U.S. and state government obligations			
	b Investments - corporate stock			
- }	c Investments - corporate bonds			
1	1 Investments - land, buildings, and equipment basis			
	Less accumulated depreciation			
1	2 Investments - mortgage loans	2 500 565	2 650 000	2 525 044
1		3,799,767.	3,678,938.	3,536,211.
1	4 Land, buildings, and equipment; basis			
	Less accumulated depreciation			
1	5 Other assets (describe ►)			
		2 500 004	2 706 275	2 562 640
	6 Total assets (to be completed by all filers)	3,782,924.	3,706,375.	3,563,648.
Ι.	7 Accounts payable and accrued expenses			
١.	8 Grants payable			
<u>s</u> 1				
<u></u> 2	Loans from officers, directors, trustees, and other disqualified persons			
· - -	1 Mortgages and other notes payable			
_ 2	2 Other liabilities (describe)			
,	3 Total liabilities (add lines 17 through 22)	0.	0.	
- -	Foundations that follow SFAS 117, check here			
	and complete lines 24 through 26 and lines 30 and 31.			
န္ပ 2				
anc		·········		
Bail 2				
힏	Foundations that do not follow SFAS 117, check here			
ᆵ	and complete lines 27 through 31.			
გ 2		0.	0.	
sets 2	The state of the s	0.	0.	
SY 2		3,782,924.	3,706,375.	
Net Assets or Fund Balances		3,782,924.	3,706,375.	
د ا ح				
3	1 Total liabilities and net assets/fund balances	3,782,924.	3,706,375.	
Pa	t III Analysis of Changes in Net Assets or Fund Ba	alances		
1 To	otal net assets or fund balances at beginning of year - Part II, column (a), line 3	30		
	nust agree with end-of-year figure reported on prior year's return)		1	3,782,924.
•	nter amount from Part I, line 27a		2	-76,549.
3 0	her increases not included in line 2 (itemize)		3	0.
4 A	dd lines 1, 2, and 3		4	3,706,375.
-	ecreases not included in line 2 (itemize)	_	5	0.
c T	stal not accepte or fund halangee at and of year /line 4 minus line 5) - Part II on	lumn (h) line 30	اعا	3 706 375

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(a) List and descri	be the kind(s) of property sold (e. ehouse; or common stock, 200 st	g., real estate,		P - Purc D - Dona	quired (c hase ition	c) Date acqu (mo., day, y		ite sold day, yr.)
1a								
b SEE ATTACHED	STATEMENT							
<u>C</u>								
d					_			
<u>e</u>				1				
(e) Gross sales price	(f) Depreciation allowed (or allowable)		t or other basis xpense of sale			(h) Gain c (e) plus (f)		
2		1		 		• • • • • • • • • • • • • • • • • • • •		
b b								
C								
d								
e 106,810.	 -		81,125				25	,685.
Complete only for assets showing	gain in column (h) and owned by	y the foundation			(I) G	ains (Col. (h) gain minus	1.5
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Ex	cess of col. (ı) col. (ı), ıf any		còl. (k		ess than -0-) or	
a								
b								
C								
d								
e							25	,685.
Capital gain net income or (net cap	oital loss) { If gain, also ent	er in Part I, line 0- in Part I, line	7 7	} 2				6,685.
3 Net short-term capital gain or (loss	`			'			-	
If gain, also enter in Part I, line 8, of If (loss), enter -0- in Part I, line 8	column (c).			} 3			N/A	
Part V Qualification Ur	nder Section 4940(e) fo	r Reduced	Tax on Net Ir	nvestn	nent Inco	me		
If section 4940(d)(2) applies, leave the Was the foundation liable for the secti If "Yes," the foundation does not qualif Enter the appropriate amount in each	on 4942 tax on the distributable a fy under section 4940(e). Do not o	complete this pa	rt.				Yes	X No
		didelions before				Γ.	(d)	
(a) Base period years Calendar year (or tax year beginnin			Net value of nonc			(col.	(d) Distribution ratio (b) divided by col	l. (c))
2008		34,765.			<u>8,732.</u>			58128
2007		62,937.			<u>1,078.</u>			54995
2006		20,518.			<u>3,359.</u>			46005
2005		49,919.			7,483.	ļ		52977
2004	11	92,110.		4,66	<u>9,523.</u>	-		41141
2 Total of line 1, column (d)		lastos Obu F				2	. 2	<u> </u>
3 Average distribution ratio for the 5 the foundation has been in existen		ii on line 2 by 5,	or by the number of	years		3	.0	50649
4 Enter the net value of noncharitable	e-use assets for 2009 from Part X	K, line 5				4	3,396	5,541.
5 Multiply line 4 by line 3						5	172	2,031
6 Enter 1% of net investment incom	e (1% of Part I, line 27b)					6		995
7 Add lines 5 and 6						7	173	,026
8 Enter qualifying distributions from	Part XII, line 4					8	163	3,000
If line 8 is equal to or greater than See the Part VI instructions.		ne 1b, and comp	olete that part using a	a 1% tax	rate.			
923521 02-02-10							Form 990 -	PF (2009

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	1 990-PF (2009) OLANDER FAMILY FOUNDATION, INC 94-3400 art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see) <u>451</u> instru	ıctio	Page 4
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 letter if necessary-see instructions)			
h	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%		1.9	90.
	of Part I, line 27b			
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)			
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0.
	Add lines 1 and 2		1.9	90.
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-		1.9	90.
-	Credits/Payments:		=.1_2	
	2009 estimated tax payments and 2008 overpayment credited to 2009 6a 1,374.			
	Exempt foreign organizations - tax withheld at source			
	Tax paid with application for extension of time to file (Form 8868) 6c			
	Backup withholding erroneously withheld 6d			
	Total credits and payments. Add lines 6a through 6d		1 3	74.
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8		<u> </u>	11.
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed SEE STATEMENT 9 9			27.
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			<u></u>
	Enter the amount of line 10 to be: Credited to 2010 estimated tax			
	rt VII-A Statements Regarding Activities			
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in		Yes	No
IQ	any political campaign?	1a		X
h	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?	1b		X
U	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or	10		
	distributed by the foundation in connection with the activities			
	Did the foundation file Form 1120-POL for this year?	ic		x
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:	16		Δ.
u	(1) On the foundation. \$			
•	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation	ĺ		
6				
2	managers. \$\sum_ \\$ 0 \cdot \\ Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		x
2				
•	If "Yes," attach a detailed description of the activities.			
J	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or	١.		
4.	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year? If "Yes," has it filed a tax return on Form 990-T for this year? N/A	4a		
		4b		x
Ð	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5	1	
	If "Yes," attach the statement required by General Instruction T. Are the requirements of parties 508(a) (relating to sections 4041 through 4045) catefied either:			
D	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 			
		_		
7	remain in the governing instrument?	6	Х	X
′	Did the foundation have at least \$5,000 in assets at any time during the year?	7		
0-	If "Yes," complete Part II, col. (c), and Part XV.			1
ъa	Enter the states to which the foundation reports or with which it is registered (see instructions)			
	CA If the appropriative in the foundation furnished a copy of Form 000 DE to the Atternay Copyright developed.)			
Þ	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)	٠.	37	
	of each state as required by General Instruction G? If "No," attach explanation	85	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			
40	year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," complete Part XIV Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses.	9		X
10	THE ADVIDED OF SUID OF SUBSIDIUM CONTROL OF SUID OF SU	! 10		

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

orm 990-PF (2009) OLANDER FAMILY FOUNDATION	ON, INC		<u>94-34004</u>	51	Page 6
Part VII-B Statements Regarding Activities for Which	Form 4720 May Be I	Required (contin	ued)		
5a During the year did the foundation pay or incur any amount to:					
(1) Carry on propaganda, or otherwise attempt to influence legislation (sectio	n 4945(e))?	Y	es X No		
(2) Influence the outcome of any specific public election (see section 4955); of	or to carry on, directly or indir				
any voter registration drive?			es X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes	3?	Y	es X No		
(4) Provide a grant to an organization other than a charitable, etc., organization	on described in section				
509(a)(1), (2), or (3), or section 4940(d)(2)?			es X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary	, or educational purposes, or				
the prevention of cruelty to children or animals?			es X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un		ın Regulations			
section 53.4945 or in a current notice regarding disaster assistance (see instru			N/A	5b	
Organizations relying on a current notice regarding disaster assistance check t			▶∟」		
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f					
expenditure responsibility for the grant?		1/A Y	es L No		
If "Yes," attach the statement required by Regulations section 53.494					
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on				
a personal benefit contract?		Ye	es X No	ا ا	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	personal benefit contract?		-	6b	X
If "Yes" to 6b, file Form 8870.	-h -lk t		es X No		
7a At any time during the tax year, was the foundation a party to a prohibited tax s		Ye		-	
b If yes, did the foundation receive any proceeds or have any net income attribute. Information About Officers, Directors, Trust		nagare Highl		7b	
Part VIII Paid Employees, and Contractors	.ees, Foundation Mic	mayers, mym	y		
List all officers, directors, trustees, foundation managers and their	compensation.			-	
	(b) Title, and average	(c) Compensation	(d) Contributions to	(e)	Expense
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation		unt, other owances
RONALD OLANDER	DIRECTOR	5	oomponoadon		711000
PO BOX 4096	1				
PRUCKEE, CA 96160	0.00	0.	0.		0.
	1				
	1				
]				
? Compensation of five highest-paid employees (other than those inc		enter "NONE."	(. n		
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans	(e)	Expense unt, other
	devoted to position	(O) compondation	and deferred compensation		owances
NONE	_				
·					
	_				
		<u> </u>		<u> </u>	
	-			•	
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The state of the s	<u> </u>	<u> </u>	<u> </u>	L	
Total number of other employees paid over \$50,000					0

orm 990-PF (2009) OLANDER FAMILY FOUNDATION,		-3400451 Page 7
Part VIII Information About Officers, Directors, Trustees, Paid Employees, and Contractors (continued)		 -
Five highest-paid independent contractors for professional services. If n		1.0
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
otal number of others receiving over \$50,000 for professional services		> (
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include rel number of organizations and other beneficiaries served, conferences convened, research	evant statistical information such as the papers produced, etc.	Expenses
N/A		_
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the	tax year on lines 1 and 2.	Amount
N/A	tan your ornings i and El	
	1.12	
All other program-related investments. See instructions.		
		_
		1

Total. Add lines 1 through 3

P	Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations,	, see instructions.)
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	3,423,784.
b	Average of monthly cash balances	_1b	23,107.
C	Fair market value of all other assets	1c	1,374.
d	Total (add lines 1a, b, and c)	1d	3,448,265.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	3,448,265.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	<u>51,724.</u>
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	3,396,541.
6	Minimum investment return. Enter 5% of line 5	6	169,827.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations an foreign organizations check here and do not complete this part.)	d certain	
1	Minimum investment return from Part X, line 6	1	169,827.
2a	Tax on investment income for 2009 from Part VI, line 5 2a 1,990.		
b	Income tax for 2009. (This does not include the tax from Part VI.)		
С	Add lines 2a and 2b	2c	1,990.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	167,837.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	167,837.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	_7	167,837.
P	art XII Qualifying Distributions (see 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	163,000.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
Ь	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	163,000.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions Subtract line 5 from line 4	6	163,000.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	qualifies fo	or the section

	(0)	(h)	(0)	(d)
	(a) Corpus	(b) Years prior to 2008	(c) 2008	2009
1 Distributable amount for 2009 from Part XI,		· · · · · ·		
line 7				167,837.
2 Undistributed income, if any, as of the end of 2009		·		
a Enter amount for 2008 only			162,828.	
b Total for prior years:				
,,		0.		
3 Excess distributions carryover, if any, to 2009:				
a From 2004				
b From 2005				
c From 2006				
d From 2007				
e From 2008	0			
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2009 from				
Part XII, line 4: ► \$ 163,000.			162,828.	
a Applied to 2008, but not more than line 2a			102,020.	
b Applied to undistributed income of prior		0.		
years (Election required - see instructions)		- 0.		
c Treated as distributions out of corpus	0.			
(Election required - see instructions) d Applied to 2009 distributable amount	- 0 • 1			172.
e Remaining amount distributed out of corpus	0.			
	0.			0.
5 Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below:				
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously				
assessed		0.		
d Subtract line 6c from line 6b. Taxable		0.		
amount - see instructions e Undistributed income for 2008. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2009. Subtract		·		
lines 4d and 5 from line 1. This amount must				
be distributed in 2010				167,665.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2004				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2010.				
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:				
a Excess from 2005				
b Excess from 2006				
c Excess from 2007				
d Excess from 2008				
e Excess from 2009				

	FAMILY FOU			94-34	00451 Page 10
Part XIV Private Operating For	oundations (see in	structions and Part VII	A, question 9)	N/A	
1 a If the foundation has received a ruling or	r determination letter that	t it is a private operating			
foundation, and the ruling is effective for	2009, enter the date of t	the ruling	▶ <u> </u>		
b Check box to indicate whether the found		ng foundation described in		4942(j)(3) or 49)42(<u>j)(</u> 5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total
investment return from Part X for					
each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed			-		
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the					
alternative test relied upon: a "Assets" alternative test - enter:					
(1) Value of all assets					
` '					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter					
2/3 of minimum investment return					
shown in Part X, line 6 for each year listed		!			
c "Support" alternative test - enter:				···-	
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on					
securities loans (section 512(a)(5)), or royalties)					
					
(2) Support from general public and 5 or more exempt					
organizations as provided in					
section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income Part XV Supplementary Info	rmation (Comple	to this part only i	f the foundation	had \$5,000 or me	ore in accets
at any time during t			i tile loulidation	i nau \$5,000 or m	ore iii assets
	<u>-</u>			·	
1 Information Regarding Foundation	-	than 20/ of the total contr	ibutions recoived by the	foundation before the ele	so of any tay
a List any managers of the foundation who year (but only if they have contributed m			ibutions received by the	Touridation before the Cio	se of ally lax
	40,000/. (0000	20 20. (2/(2/-/-/			
NONE b List any managers of the foundation who	a own 109/ or more of th	a stock of a corporation (or an equally large ports	on of the ownership of a n	ortnorchin or
other entity) of which the foundation has			or arrequary large porti	on or the ownership or a p	ar trier strip to
NONE	3				
2 Information Regarding Contributi	on Cront Cift Loon	Cohelerahin eta Dr			
Check here X if the foundation of		• • • •	=	not accept upoplicated road	acte for funde. If
the foundation makes gifts, grants, etc. (
				omplete nome Ea, b, e, and	
a The name, address, and telephone numb	per of the person to who	n applications should be	auuresseu.		
h. The form in which applications should h	a cubmitted and informat	tion and materials they sh	only include:		
b The form in which applications should b	o submitted and fillorfilat	non and materials they Si	outu motuue,		
c Any submission deadlines:				-	-
• Any submission deadmines.					
d Any restrictions or limitations on awards	s, such as by geographics	al areas, charitable fields	kinds of institutions, or i	other factors:	
_ 7.1., 100	,) goog.apinoc				
923601 02-02-10			- 		Form 990-PF (2009)

Supplementary information	r (continued)			
3 Grants and Contributions Paid During the Y	fear or Approved for Future	Payment		
Recipient	If recipient is an individual,	Foundation	Purpose of grant or	
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	status of recipient	Purpose of grant or contribution	Amount
a. Poud dumps the year	Of Substantial Continuutor	roopion		
a Paid during the year				
SEE STATEMENT 12				
Total		,	▶ 3a	163,000
b Approved for future payment			-	
NONE				
				•
		1		
	<u></u>			
Total			▶ 3b	0

	ducing Activitie				
Enter gross amounts unless otherwise indicated.		ousiness income		y section 512, 513, or 514	(e)
	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	Related or exempt function income
1 Program service revenue:	code	741104111	code	Amount	- Idilotion income
ab	- 	· - ·	+ + -		
b	1 1		1		
d		 .			
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments			1 4	04.006	36
4 Dividends and interest from securities			14	84,996.	
5 Net rental income or (loss) from real estate:a Debt-financed property	-		 		
b Not debt-financed property	· 		 		<u>-</u>
6 Net rental income or (loss) from personal		· · · · · · · · · · · · · · · · · · ·			
property					
7 Other investment income			14	-11,193.	
8 Gain or (loss) from sales of assets other					
than inventory			18	25,685.	
9 Net income or (loss) from special events					······
10 Gross profit or (loss) from sales of inventory		<u> </u>	+ +		
11 Other revenue:					
a	1 1		+ + -		
b	1 1	· · · · · · · · · · · · · · · · · · ·	+ +		
cd			1 1	-	
e					
12 Subtotal. Add columns (b), (d), and (e)		0	•	99,488.	36
13 Total. Add line 12, columns (b), (d), and (e)				13	99,524
(See worksheet in line 13 instructions to verify calculations					
Part XVI-B Relationship of Activitie	s to the Accon	nplishment of E	xempt Pu	urposes	
					laborat of
Line No. Explain below how each activity for which is the foundation's exempt purposes (other the			A contributed	importantly to the accomp	distrinent of
INTEREST EARNED ON OV			L TAX.		
					
			· ···		

923621 02-02-10

orm 990-PF (2 Part XVII	Information Re			94-34 nd Relationships With Nonch			ge 1 <u>3</u>
		rectly engage in any of the followi)(3) organizations) or in section 5				Yes	No
a Transfers (1) Cash		ation to a noncharitable exempt o	rganization of:		1a(1)		х
(2) Other					1a(2)		X
b Other tran					15,57		
-	of assets to a noncharita	ble exempt organization			1b(1)		X
		ncharitable exempt organization			1b(2)		Х
	al of facilities, equipment,				1b(3)		Х
	bursement arrangements				1b(4)		X
• •	s or loan guarantees				1b(5)		Х
	-	embership or fundraising solicitati	ions		1b(6)		X
		uling lists, other assets, or paid er			10		X
or service column (c	s given by the reporting for the value of the goods,		ved less than fair market value I.	nys show the fair market value of the good in any transaction or sharing arrangemen	t, show in		
a) Line no	(b) Amount involved	· · · · · · · · · · · · · · · · · · ·	ne exempt organization	(d) Description of transfers, transactions, a	no snaring arra	angeme	nts
		N/A					
-							
			···				
ın section	501(c) of the Code (othe omplete the following sch		ction 527?		Yes	X] No
	(a) Name of org	ganization	(b) Type of organization	(c) Description of relation	nsnip		
	N/A						
-							
-		·					
and complet	e Declaration of preparer (other	nave examined this return, including accept than taxpayer or fiduciary) is based of	n all information of which preparer h	Pres.	t is true, correc	et,	
~	ture of officer or trustee		Date	Title te Check if Pres	parer's identify	יות חווים	her
ug s Pr	eparer's	mirand and	Da	self	Jan Siderilly	y nun	
Paid Preparer's Use Only		KNIGHT CPA		9/22/10 employed ►			
Se (n's name (or yours KNIG		2	EIN ►			
\frac{F}{2} \big _426		FIRST ST STE		Dhare - 1CE	01040	_ 07	27
	ress, and ZIP code LOS	ALTOS, CA 9402	4	Phone no. (65	0)948 Form 990	DE /	2000)

(650)948-8737 Form **990-PF** (2009)

FORM 990-PF	INTERE	ST AND	PENALTI	ES		STAT	EMENT	9
TAX DUE FROM FORM 990 UNDERPAYMENT PENAL' LATE PAYMENT INTERI LATE PAYMENT PENAL'	TY EST	VI					6	16. 11. 6. 9.
TOTAL AMOUNT DUE							6	42.
FORM 990-PF	LA	TE PAY	MENT PEN	IALTY		STAT	EMENT	10
DESCRIPTION	DAT	'E	AMOUNT	BALANC	CE M	ONTHS	PENAL	ΤΥ
TAX DUE EXTENSION PAYMENT DATE FILED	05/15 08/15 09/15	/10	61 -61	6.	616.	3 1		9.
TOTAL LATE PAYMENT PE	NALTY							9.
FORM 990-PF	LA	TE PAY	MENT INT	EREST		STAT	EMENT	11
DESCRIPTION	DATE	AMOU	NT	BALANCE	RATE	DAYS	INTER	EST
TAX DUE EXTENSION PAYMENT DATE FILED	05/15/10 08/15/10 09/15/10		616.	616. 6. 6.	.0400			6.
TOTAL LATE PAYMENT IN	TEREST							6.

(Rev December 2005) Department of the Treasury

Notice of Inconsistent Treatment or Administrative Adjustment Request (AAR)

(For use by partners, S corporation shareholders, estate and domestic trust beneficiaries, foreign trust owners and beneficiaries, REMIC residual interest holders, and TMPs)

OMB No 1545-0790

Attachment Sequence No 84

Internal Revenue Service See separate instructions. Name(s) shown on return Identifying number **OLANDER FAMILY FOUNDATION** 94-3400451 **General Information** ⊾Part í (a) X Notice of inconsistent treatment Check boxes that apply 1 (b) Administrative adjustment request (AAR) If you are a tax matters partner (TMP) filing an AAR on behalf of the pass-through entity, are you requesting substituted return treatment? (see instructions) X Identify type of pass-through entity. (a) X Partnership (b) Electing large partnership S corporation Estate Employer identification number of pass-through entity Tax shelter registration number (if applicable) of pass-through entity 94-3400451 Internal Revenue Service Center where pass-through entity filed its return Name, address, and ZIP code of pass-through entity Fresno BMAC INVESTMENT COMPANY 2004 POOL, LLC 8 Tax year of pass-through entity Name 1/1/2009 Address 3720 CAMPUS DR. STE 200 to 12/31/2009 **NEWPORT BEACH** Your tax year State CA City 1/1/2009 to 12/31/2009 ZIP code 92660 Foreign Country Inconsistent or Administrative Adjustment Request (AAR) Items Part II (c) Amount as shown on (b) Inconsistency is in, Schedule K-1, Schedule Q. or AAR is to correct (a) Description of inconsistent or or similar statement, a (e) Difference between administrative adjustment request (AAR) items (check boxes that apply) (d) Amount you are reporting foreign trust statement, or (c) and (d) (see instructions) your return, whichever Amount of Treatment applies (see instructions) ıtem of item -11.067-11.06710 LINE 1) Ordinary Business Income Х 0 0 11 O 12 13 Explanations—Enter the Part II item number before each explanation. If more space is needed. Part III continue your explanations on the back. ITEM SHOULD BE TREATED AS OTHER INCOME/(LOSS) BECAUSE THE LLC DOES NOT DO ANY BUSINESS, RATHER PURCHASES EXISTING PORTFOLIOS OF LOANS AND RECEIVES THE PAYMENTS THEREON

Part IV	Capital Gains and Los	ses for Tax on Investment Income				
_	(a) List and 2-story br	describe the kind(s) of property sold ick warehouse; or common stock, 20	, e.g., real estate, 0 shs. MLC Co.	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a SPI	IT AMERICAN	INTL GROUP		P	08/13/02	06/30/09
	0 SHS GETTY			P	VARIOUS	10/01/09
c 800	SHS MCGRAW	HILL COS INC			VARIOUS	
d 600	SHS PITNEY	BOWES				12/08/09
e MEF	GER WELLS FA	ARGO		P		01/02/09
f 169	2 SHS WELLS	FARGO		P	VARIOUS_	12/08/09
g						
h			- .			
<u> </u>						
						
_ <u>k</u>						
!						
_m			····			
<u>n</u>						· · · · · · · · · · · · · · · · · · ·
0	<u> </u>	(f) Depreciation allowed	(g) Cost or other basis	(h)	Gain or (loss)	
(e)	Gross sales price	(or allowable)	plus expense of sale	(e) p	lus (f) minus (g)	
	3.	,	187.			-184.
b	23,519.		18,259.		·	5,260.
C	25,880.		24,227.			1,653.
d	13,480.		25,790.			-12,310.
е	13.	,	6.			7.
f	43,915.		12,656.			31,259.
g						
h						
1						
<u></u>						
k						
1						
m						
n				·		
0 Comp	lote aply for accets chayen	g gain in column (h) and owned by th	os foundation on 12/21/60	//\	(from oal (b))	
	M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	Gains (excess o	ses (from col. (h)) of col. (h) gaın ovel ot less than "-0-")	
			(III)			-184.
b						5,260.
C						1,653.
d						-12,310.
e						7.
f						31,259.
g						
h						
<u> </u>						
						•
k						
<u> </u>						
<u>m</u>					<u>-</u>	
<u>n</u>						
0		<u></u>		<u> </u>		
	gain net income or (net ca	· "	~ i	2		25,685.
If gain,	ort-term capital gain or (los also enter in Part I, line 8,), enter "-0-" in Part I, line 8		}	3	N/A	

FORM 990-PF INTEREST ON SAV	INGS AND	TEMP	ORARY C	ASH :	INVESTMENTS	STATEMENT	1
SOURCE						AMOUNT	
UNITED STATES TREASURY					-		36.
TOTAL TO FORM 990-PF, PART I	, LINE 3	, COL	UMN A		=		36.
FORM 990-PF DIVIDEN	DS AND II	NTERE	ST FROM	SEC	URITIES	STATEMENT	2
SOURCE	G	ROSS	AMOUNT		PITAL GAINS DIVIDENDS	COLUMN (A AMOUNT)
SMITH BARNEY 546-23660-13 03	2		84,996. 0.		0.	84,99	
TOTAL TO FM 990-PF, PART I,	LN 4		84,996.		0.	84,9	96.
FORM 990-PF	ОТН	ER IN	COME			STATEMENT	3
DESCRIPTION			(A) REVENUE ER BOOK		(B) NET INVEST- MENT INCOME		
CEDAR FAIR, LP - SSB ACCT BMAC 2004 POOL, LLC			-11,	126. 067.	-126 -11,067		
TOTAL TO FORM 990-PF, PART I	, LINE 1	1	-11,	193.	-11,193	•	
FORM 990-PF	L	EGAL	FEES			STATEMENT	4
DESCRIPTION	(A) EXPENS PER BO		(B) NET INV MENT IN		(C) ADJUSTED NET INCOM	(D) CHARITA E PURPOS	
LEGAL	1,	972.		0	•		0.
TO FM 990-PF, PG 1, LN 16A	1,	972.		0	•		0.
•							_

FORM 990-PF	ACCOUNTING FEES			STATEMENT			
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVES MENT INCO		(C) ADJUSTED NET INCOM	CHAR	D) ITAB POSE	
ACCOUNTING	4,789.		0.			_	0.
TO FORM 990-PF, PG 1, LN 16B =	4,789.		0.				0.
FORM 990-PF	TAX	ES			STATEME	NT	6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVES MENT INCO		(C) ADJUSTED NET INCOM	CHAR	D) ITAB POSE	
LICENSES & FEES INTERNAL REVENUE SERVICE	95. 1,995.		0.			_	0.
TO FORM 990-PF, PG 1, LN 18 =	2,090.		0.				0.
FORM 990-PF	OTHER E	XPENSES			STATEME	NT	7
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVES MENT INCO		(C) ADJUSTED NET INCOM	CHAR	D) ITAB POSE	
							0.
OTHER EXPENSE	4,222.		0.				
OTHER EXPENSE TO FORM 990-PF, PG 1, LN 23	4,222.		0.				0.
TO FORM 990-PF, PG 1, LN 23		ESTMENTS			STATEME	NT	
TO FORM 990-PF, PG 1, LN 23 FORM 990-PF	4,222. OTHER INV	ESTMENTS LUATION ETHOD	0.	OK VALUE	STATEME FAIR MA VALU	RKET	8
	4,222. OTHER INV VA	LUATION	0.	OK VALUE 3,686,401. -7,463.	FAIR MA VALU	RKET E	8

12

STATEMENT

FORM 990-PF

PAID	DURING THE YEAR		
RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT		AMOUNT
AMERICAN CANCER SOCIETY 1710 WEBSTER STREET OAKLAND, CA 94612	NONE OPERATING	PUBLIC	750.
ASSISTANCE LEAGUE OF LOS ALTOS 169 STATE STREET LOS ALTOS, CA 94022		PUBLIC	10,000.
ASSISTANCE LEAGUE OF LOS ALTOS/ASSISTEENS 169 STATE STREET LOS ALTOS, CA 94022	NONE SUPPORT	PUBLIC	1,000.
BREAST CANCER P.O. BOX 650309 DALLAS , TX 75265	NONE OPERATING	PUBLIC	750.
CHEETAH CONSERVATION FUNDS 2210 MT. VERNON AVE. SUITE 301 ALEXANDRIA, VA 22301		PUBLIC	1,000.
CHILDREN'S THERAPY CENTER 29-01 BERKSHIRE ROAD FAIR LAWN, NJ 07410		PUBLIC	500.
HUMANE SOCIETY OF TRUCKEE 12716 NORTHWOODS BLVD TRUCKEE, CA 96161	NONE OPERATING	PUBLIC	5,000.
ICELANDIC ASSOCIATION 787 SOUTHHAMPTON DR. PALO ALTO, CA 94303	NONE SUPPORT	PUBLIC	1,000.

GRANTS AND CONTRIBUTIONS

OLANDER FAMILY FOUNDATION, INC			94-3400451
LAW FOUNDATION OF SILICON VALLEY 111 W ST JOHN ST., STE 315 SAN JOSE, CA 95113		PUBLIC	5,000.
LOS ALTOS HIGH SCHOOL ATHLETICS 1299 BRYANT AVE MOUNTAIN VIEW, CA 94040	NONE SUPPORT	PUBLIC	10,000.
MIRACLE DISTRIBUTION CENTER	NONE OPERATING	PUBLIC	300.
MT VIEW HIGH SCHOOL ATHLETICS 3535 TRUMAN AVE. MOUNTAIN VIEW, CA 94040		PUBLIC	7,000.
MVLA COMMUNITY SCHOLARS 183 HILLVIEW AVE LOS ALTOS, CA 94022	NONE SUPPORT	PUBLIC	3,000.
NPCA 1300 19TH STREET, NW SUITE 300 WASHINGTON, DC 20036	NONE OPERATING	PUBLIC	
NRDC 40 WEST 20TH STREET NEW YORK, NY 10011	NONE OPERATING	PUBLIC	
RELAY FOR LIFE ACS	NONE SUPPORT	PUBLIC	8,000.
RESCUE RANCH PO BOX 7112 BELLE CHASSE, LA 70037	NONE SUPPORT	PUBLIC	10,000.
SPRINGER SCHOOL 1120 ROSE AVE. MOUNTAIN VIEW, CA 94040	NONE EDUCATION	PUBLIC	7,000.

OLANDER FAMILY FOUNDATION, INC			94-3400451
STEVE HALLGRIMSON FOUNDATION 10 ALMADEN BLVD, 11TH FLR SAN JOSE, CA 95112	NONE SCHOLARSHIP FUND	PUBLIC	5,000.
STEVENSON SCHOOL GOLF TEAM 3152 FOREST LAKE ROAD PEBBLE BEACH, CA 93953	NONE SUPPORT	PUBLIC	7,500.
TAHOE FOREST HOSPICE 10083 LAKE AVE. TRUCKEE, CA 96161	NONE SUPPORT	PUBLIC	7,000.
TAHOE FOREST HOSPITAL FOUNDATION 10121 PINE AVE. TRUCKEE, CA 96161	NONE SUPPORT	PUBLIC	5,000.
TAHOE KID'S MUSEUM 11711 DONNER PASS RD. TRUCKEE, CA 96161	NONE OPERATING	PUBLIC	5,000.
TURNING WHEELS FOR KIDS 2400 MOORPARK AVE. STE 201 SAN JOSE, CA 95128		PUBLIC	200.
UNIVERSITY OF SANTA CLARA BASEBALL 500 EL CAMINO REAL SANTA CLARA, CA 95053	NONE SUPPORT	PUBLIC	10,000.
YOSEMITE FUND 155 MONTGOMERY ST, STE 1104 SAN FRANCISCO, CA 94104	NONE SUPPORT	PUBLIC	10,000.
YWCA 375 S 3RD ST. SAN JOSE, CA 95112	NONE OPERATING	PUBLIC	2,000.
ACKCS RESCUE 6000 HIGH BLUFF CT RALEIGH, NC 27612	NONE SUPPORT	PUBLIC	5,000.

OLANDER FAMILY FOUNDATION, INC			94-3400451
BEST BUDDIES FIT FUNDRAISING	NONE SUPPORT	PUBLIC	1,000.
BRANHAM HILLS GIRLS SOFTBALL P.O. BOX 24854 SAN JOSE, CA 95154	NONE SUPPORT	PUBLIC	200.
CATHOLIC CHARITIES OF SANTA CLARA 2625 ZANKER RD SAN JOSE, CA 95134	NONE SUPPORT	PUBLIC	1,250.
GREEN MEADOW COMMUNITY SCHOLARSHIP 4257 MACKAY DR PALO ALTO, CA 94306	NONE SCHOLARSHIP FUND	PUBLIC	2,500.
LOS ALTO UNITED METHODIST CHURCH 655 MAGDALENA AVE LOS ALTOS, CA 94024		PUBLIC	4,000.
LAMUC DAMIEN SILER MEMORIAL FUND 655 MAGDALENA AVE LOS ALTOS, CA 94024		PUBLIC	6,000.
LOAVES AND FISHES 358 NORTH MONTGOMERY ST SAN JOSE, CA 95134	NONE SUPPORT	PUBLIC	2,000.
PROJECT OPEN HAND 730 POLK STREET SAN FRANCISCO, CA 94109	NONE SUPPORT	PUBLIC	50.
PUBLIC INTEREST LAW FOUNDATION SAN FRANCISCO, CA 94104	NONE SUPPORT	PUBLIC	2,500.
REBUILDING TOGETHER SILICON VALLEY P.O. BOX 21996 SAN JOSE, CA 95151	NONE SUPPORT	PUBLIC	500.

OLÂNDER FAMILY FOUNDATION, INC			94-3400451
SACRED HEART SCHOOL 13718 SARATOGA AVE SARATOGA, CA 95070	NONE OPERATING	PUBLIC	2,500.
SIERRA MOUNTAIN SOCCER CLUB P.O. BOX 4000 TRUCKEE, CA 96160	NONE SUPPORT	PUBLIC	2,500.
THE LEUKEMIA & LYMPHOMA SOCIETY 675 N. FIRST ST SAN JOSE, CA 95112	NONE SUPPORT	PUBLIC	6,000.
TRUCKEE TAHOE HIGH SCHOOL 11725 DONNER PASS ROAD TRUCKEE, CA 96161	NONE SUPPORT	PUBLIC	5,000.
TOTAL TO FORM 990-PF, PART XV, LI	NE 3A		163,000.

•	,				
Form 8868	3 (Rev. 4-2009)				Page 2
Note. On	are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this buily complete Part II if you have already been granted an automatic 3-month extension on a previously filed are filing for an Automatic 3-Month Extension, complete only Part I (on page 1)	Form		•	
Part II	Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no o	opies r	needed).		
Type or	Name of Exempt Organization	Emp	loyer identi	fication	number
print	OLANDER FAMILY FOUNDATION, INC	9	4-3400	451	
File by the extended due date for filing the	Number, street, and room or suite no. If a P O. box, see instructions	For II	RS use only		
return See instructions	City, town or post office, state, and ZIP code. For a foreign address, see instructions SAN JOSE, CA 95113-2226				
For	pe of return to be filed (File a separate application for each return): m 990 Form 990-EZ Form 990-T (sec 401(a) or 408(a) trust) Form 1041-A m 990-BL Form 990-PF Form 990-T (trust other than above) Form 4720		orm 5227 orm 6069	Fo	orm 8870
STOP! D	o not complete Part II if you were not already granted an automatic 3-month extension on a previous	ısly fıle	d Form 88	38.	
Teleph If the c If this box I If this 5 For 6 If th	KNIGHT & COMPANY CPA'S clocks are in the care of ► 425 FIRST ST # A - LOS ALTOS, CA 94022 clone No ► (650) 948-8737 FAX No. ► (650) 948-302 organization does not have an office or place of business in the United States, check this box is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If the company of the group, check this box ► and attach a list with the names and EINs of all the calendar year 2009, or other tax year beginning, and ending, and ending	is is fo	ers the exte	ension is	for ng period
NE	EED ADDITIONAL TIME TO GATHER INFORMATION TO FILE AN	ACC	URATE	RETU	RN
nor	nis application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any prefundable credits. See instructions application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated	8a	\$	1	,990.
tax	payments made Include any prior year overpayment allowed as a credit and any amount paid eviously with Form 8868	8b	\$	1	<u>,374.</u>
	ance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit in FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions.	8c	\$		616.
Under pen	Signature and Verification alties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the orrect, and complete, and that I am authorized to prepare this form.	e best c	f my knowled	lge and be	elief,
Signature		Date	>		
			Form	8868 (R	ev. 4-2009)

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