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Form **990-PF**

Department of the Treasury

Return of Private Foundation

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

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

| _ | | 5/46 66/1166 | be able to ase a copy of the | | | |
|------------------------------|--------|---|------------------------------|---------------------|--|--|
| For | calen | dar year 2009, or tax year beginning | | , and ending | | |
| G (| Check | all that apply: Initial return | Initial return of a fo | rmer public charity | Fınal retur | n |
| | | Amended return | Address chang | ge 🔲 | Name change | |
| | | Name of foundation | | | A Employer identificatio | n number |
| | the I | RS Name of Touridation | | | | |
| | label | a a committee committee | m T ON | | 94-6089512 |) |
| Otl | nerwis | | | | | <u> </u> |
| | print | | elivered to street address) | I | B Telephone number | |
| | r type | D, robr binder | | 510 | 415-981-29 | 766 |
| | Spec | I CILV OI LOWII. STATE, ATTU ZIT COUE | | | C If exemption application is | pending, check here |
| INS | ructio | ^{IIIS.} SAN FRANCISCO, CA 94 | 104 | | D 1 Foreign organization | s, check here |
| Н (| Check | type of organization: X Section 501(c)(3) e. | xemot private foundation | | Foreign organizations m check here and attach c | eeting the 85% test, proportion |
| <u> </u> | | 7, | Other taxable private founda | ition | | |
| | | | | X Accrual | E If private foundation st under section 507(b)(1 | |
| | | rket value of all assets at end of year J Account | | ALCIUAI | | |
| | | Part II, col (c), line 16) | ther (specify) | | F If the foundation is in a | |
| | -\$ | 18,469,176. (Part I, colu | ımn (d) must be on cash t | oasis) | under section 507(b)(1 | 1 |
| Pa | art I | Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not | (a) Revenue and | (b) Net investment | (c) Adjusted net | (d) Disbursements for charitable purposes |
| | | necessarily equal the amounts in column (a)) | expenses per books | income | income | (cash basis only) |
| _ | 1 | Contributions, gifts, grants, etc., received | 833,699. | | N/A | |
| | 2 | Check In the foundation is not required to attach Sch B | | | | |
| | _ | Interest on savings and temporary | 42. | 42. | | STATEMENT 1 |
| 2 | 3 | cash investments | | | | |
| | 4 | Dividends and interest from securities | 550,527. | 550,527. | | STATEMENT 2 |
| > | 5a | Gross rents | | | | |
| - | b | Net rental income or (loss) | | | | |
| | 6a | Net gain or (loss) from sale of assets not on line 10 | -96,284. | | | <u> </u> |
| 5 2 | Ь | Gross sales price for all assets on line 6a 938,590. | | | | |
| Revenue | 7 | Capital gain net income (from Part IV, line 2) | | 0. | | |
| 3 & | ′ | | | | | |
| Ũ | 8 | Net short-term capital gain | | | | |
| 2 | 9 | Income modifications Gross sales less returns | | | | |
| | 10a | and allowances | | | | |
| 3 | b | Less Cost of goods sold CCIVED | | | | |
| D | C | Gross profit or (loss) | | | | |
| | 11 | Other income & | 124,750. | -8,539. | | STATEMENT 3 |
| | 12 | Other income & Total Add lines through V1 0 8 2010 | 1,412,734. | 542,030. | | |
| | 13 | Compensation of officers, directors, trustees, etc | | 0. | | 0. |
| | 1 | Other employee as Glassed virgos | · · | | | |
| | 14 | Other employee salaries and wages | | | | |
| G. | 15 | Pension plans, employee benefits . U | J | | | |
| Ses | 16a | Legal fees | | | - | · |
| ğ | b | Accounting fees STMT 4 | 19,950. | 9,975. | | 9,975. |
| Expens | C | Other professional fees | | | | |
| ď | 17 | Interest | | | | |
| Operating and Administrative | 18 | Taxes STMT 5 | 5,468. | 639. | | 160. |
| ij | 10 | Depreciation and depletion | 3,200. | | | T |
| <u> </u> | 19 | | | | | |
| Ę | 20 | Occupancy | 77 460 | | | 77 460 |
| Ā | 21 | Travel, conferences, and meetings | 77,460. | 0. | | 77,460. |
| ž | 22 | Printing and publications | | | | 1 |
| ٤ | 23 | Other expenses STMT 6 | 237,929. | 119,044. | | 118,830. |
| ati: | 24 | Total operating and administrative | | | | |
| ğ | | expenses Add lines 13 through 23 | 340,807. | 129,658. | | 206,425. |
| Č | 25 | Contributions, gifts, grants paid | 901,000. | | | 848,000. |
| | | Total expenses and disbursements. | 2027000 | | | |
| | 20 | • | 1,241,807. | 129,658. | | 1,054,425. |
| _ | + | Add lines 24 and 25 | 1,241,007. | 149,030. | ' <u> </u> | 1,032,243. |
| | 27 | Subtract line 26 from line 12 ⁻ | 450 00- | | | |
| | a | Excess of revenue over expenses and disbursements | 170,927. | | | |
| | b | Net investment income (if negative, enter -0-) | | 412,372. | | |
| | L c | Adjusted net income (if negative, enter -0-) | | <u> </u> | N/A | <u> </u> |
| | | | | | | |

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,650,

5

Decreases not included in line 2 (itemize)

Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

| Part IV (| Capital Gains | and Loss | es for Tax on in | vestment | Income | | | | | | |
|------------------|---|-----------------------------------|--|------------------------------|------------------------------------|---------------|-----------------------------------|-----------------|--------------------------------|--------------------|--|
| | (a) List and desc 2-story brick wa | cribe the kind(arehouse; or c | s) of property sold (e.g. common stock, 200 shs | , real estate, . MLC Co.) | | l. b- | ow acquir Purchase Donation | 'V | c) Date acqu (mo., day,) | ured /r.) | (d) Date sold (mo., day, yr.) |
| 1a PUBLI | CLY TRADE | D SECU | RITIES | | | | P | | ARIOU | | VARIOUS |
| в 315 S | HS EXXON | MOBIL | CORP | | | | D | | 2/01/ | | 02/01/09 |
| | | | S II(K-1) | | | <u> </u> | P | | ARIOU | | VARIOUS |
| | <u>N SENSE P</u> | | | · - - | | | P_ | V | ARIOU | S | VARIOUS |
| e CAPIT | AL GAINS | | | | | L | | | | | |
| (e) Gros | s sales price | | reciation allowed or allowable) | | t or other basis opense of sale | | | | (h) Gain ((e) plus (f) | | (9) |
| <u>a</u> | <u>909,885.</u> | | | | 965,29 | | | | | | <u>-55,405</u> |
| <u>_b</u> | <u>24,653.</u> | ļ | | | 25,22 | | | | | | -569 |
| C | | ļ | | | 44,36 | 2. | | | | | -44,362 |
| <u>d</u> | 1,642. | | | | | | | | | | 1,642. |
| Complete o | 2,410. | | umn (h) and owned by t | ha foundation | on 12/21/60 | - | | (1) (| 20-1-6 | h\ | 2,410. |
| Complete o | illy for assets shown | | | | cess of col. (1) | | | (I) (col. (| Gains (Col. (k), but not k | n) gam ess thai | minus n -0-) or |
| (i) F.M.V. | as of 12/31/69 | | Adjusted basis of 12/31/69 | | col. (j), if any | | ·-·· | | Losses (fro | | h)) |
| <u>a</u> | | | | | | | | | | | -55,405 |
| <u>b</u> | · | ļ | | | | - | | | | | -569 |
| <u>C</u> | | ļ | | | | | | | | | -44,362 |
| <u>d</u> | | | _ | | | | | | | | 1,642. 2,410. |
| <u>e</u> | | <u></u> | | | | $\overline{}$ | T | | | | 2,410 |
| 2 Capıtal gain i | net income or (net ca | apital loss) | If gain, also enter If (loss), enter -0- | | | <u>}</u> | 2 | | | | -96,284 |
| 3 Net short-ter | m capital gain or (lo | ss) as defined | in sections 1222(5) and | d (6): | | | - 1 | | | | |
| If gain, also (| enter in Part I, line 8, | , column (c). | | , . | | 1 | | | | | |
| | er -0- in Part I, line 8 | | A: 4040(-) f | 0 | Tau an Nat | | 3 | | | <u> N/A</u> | |
| | | | ction 4940(e) for | | | | | LIIICO | IIIE | | |
| • | d)(2) applies, leave t | | subject to the section 4 | 340(a) tax 011 | net investment un | | , | | | | |
| | | | on the distributable ametion 4940(e). Do not co | | | iod? | | | | | Yes X No |
| 1 Enter the ap | | each column | for each year; see instru | ictions before | making any entrie | es. | | | | _ | - |
| | (a) ise period years r (or tax year beginn | ing in) | (b) Adjusted qualifying dist | | Net value of no | | | | | Dıstrıt (b) dıv | (d) oution ratio ided by col. (c)) |
| | 2008 | | | 6,601. | | | 187, | | | | .052596 |
| | 2007 | | | 0,267. | | | 887, | | | | .045268 |
| | 2006 | | | 6,700. | | | 285, | | | | .055055 |
| | 2005 | | | 0,799. | | | 627, | | | | .051102 |
| | 2004 | | | 4,741. | | <u>17,</u> | 045, | <u>241.</u> | | | .044865 |
| 2 Total of line | | | | | | | | | 2 | | .248886 |
| - | ribution ratio for the on has been in existe | - | period - divide the total o an 5 years | n line 2 by 5, o | or by the number | of yea | rs | | 3 | | .049777 |
| 4 Enter the net | t value of noncharda | hla-uca accats | s for 2009 from Part X, I | ıne 5 | | | | | 4 | 1 | 6,097,578 |
| | | DIC-030 03301 | 3 101 2003 HOM 1 art X, 1 | | | | | | | | |
| 5 Multiply line | 4 by line 3 | | | | | | | | 5 | | 801,289 |
| 6 Enter 1% of | net investment incor | me (1% of Pa | rt I, line 27b) | | | | | | 6 | | 4,124. |
| 7 Add lines 5 a | and 6 | | | | | | | | 7 | | 805,413 |
| | ring distributions froi | | | | | | | | 8 | | 1,054,425 |
| | jual to or greater tha VI instructions. | n line 7, check | k the box in Part VI, line | 1b, and comp | lete that part using | g a 1% | tax rate. | | | | |

Form **990-PF** (2009)

| | 990-PF (2009) A. P. GIANNINI FOUNDATION 94-608 rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see | | | Page 4 |
|----|--|----------------|-----|--------|
| | Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1. | | - | |
| | Date of ruling or determination letter: (attach copy of letter if necessary-see instructions) | | | |
| b | Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1% | | 4,1 | 24. |
| | of Part I, line 27b | | - | |
| C | All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part 1, 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 | | 4,1 | 24. |
| | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) | | | 0. |
| | Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- | | 4,1 | 24. |
| | Credits/Payments: | | | |
| | 2009 estimated tax payments and 2008 overpayment credited to 2009 6a 9, 123. | | | |
| | 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 6d | | | |
| | Total credits and payments. Add lines 6a through 6d | | 9.1 | 23. |
| | Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8 | | | |
| | Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed | | | |
| | Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid | | 4.9 | 99. |
| | Enter the amount of line 10 to be: Credited to 2010 estimated tax | | | 0. |
| | 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 |
| | any political campaign? | 1a | | X |
| b | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)? | 1b | | X |
| - | If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or | | | |
| | distributed by the foundation in connection with the activities | | | |
| c | 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: | 1.5 | | |
| • | (1) On the foundation. ▶ \$ O . (2) On foundation managers. ▶ \$ O . | | | |
| P | Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation | | | |
| • | managers ▶\$ 0. | | | |
| 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 | ł | | |
| _ | 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 | |
| | Was there a liquidation, termination, dissolution, or substantial contraction during the year? | 5 | | X |
| Ĭ | 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 | X | |
| 7 | Did the foundation have at least \$5,000 in assets at any time during the year? | 7 | X | |
| · | If "Yes," complete Part II, col. (c), and Part XV | | | |
| 8a | Enter the states to which the foundation reports or with which it is registered (see instructions) | | | |
| | CA | | | |
| h | 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 | X | 1 |
| 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)? If "Yes," complete Part XIV | 9 | | Х |
| 10 | Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses STMT 11 | 10 | Х | |
| | | rm 99 0 | -PF | (2009) |

N/A

3b

4a

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X

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

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

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

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

| orm 990-PF (2009) A. P. GIANNINI FOUNDATIO | N Form 4700 May Bo | Dogwirod / | <u>94-60895</u> | 12 Page 6 |
|--|---|-----------------------------|--|------------------------------|
| Part VII-B Statements Regarding Activities for Which 5a During the year did the foundation pay or incur any amount to: | Form 4/20 May be i | nequired (contin | uea) | |
| (1) Carry on propaganda, or otherwise attempt to influence legislation (section | n 4945(e))? | | s X No | |
| (2) Influence the outcome of any specific public election (see section 4955); | | | | |
| any voter registration drive? | , | | s X No | |
| (3) Provide a grant to an individual for travel, study, or other similar purposes | 37 | Y6 | s X No | |
| (4) Provide a grant to an organization other than a charitable, etc., organization | on described in section | | | |
| 509(a)(1), (2), or (3), or section 4940(d)(2)? | | Y6 | s 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? | | Ye | s X No | |
| b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un | der the exceptions described | ın Regulations | | |
| section 53.4945 or in a current notice regarding disaster assistance (see instri | uctions)? | | N/A | 5b |
| Organizations relying on a current notice regarding disaster assistance check to | | | | |
| c If the answer is "Yes" to question 5a(4), does the foundation claim exemption to | | | | <u> </u> |
| expenditure responsibility for the grant? | | I/A ∐ Y∈ | s 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 | <u></u> | [1] | |
| a personal benefit contract? | - avancel hangfy contract? | Y6 | s X No | es V |
| b Did the foundation, during the year, pay premiums, directly or indirectly, on a p | personal benefit contract? | | <u> </u> | 6b X |
| If "Yes" to 6b, file Form 8870 | chelter transaction? | □ v. | s X No | |
| 7a At any time during the tax year, was the foundation a party to a prohibited tax: b If yes, did the foundation receive any proceeds or have any net income attributed. | | 10 | | 7b |
| Information About Officers Directors Trust | | nagers, Highly | | |
| Part VIII Paid Employees, and Contractors | | | , | |
| 1 List all officers, directors, trustees, foundation managers and their | compensation. | | | |
| 4. Maria and add and | (b) Title, and average hours per week devoted | (c) Compensation | (d) Contributions to employee benefit plans | (e) Expense |
| (a) Name and address | to position | (If not paid, enter -0-) | and deterred compensation | account, other allowances |
| | | | | |
| |] | | | |
| SEE STATEMENT 12 | | 0. | 0. | 0. |
| | | | | l |
| | _ | | | i |
| | | | | |
| | - | | | |
| | _ | | | |
| | <u> </u> | | | |
| | - | | | i |
| · · · · · · · · · · · · · · · · · · · | + | | | |
| 2 Compensation of five highest-paid employees (other than those in | cluded on line 1). If none. | enter "NONE." | | |
| | (b) Title, and average | | (d) Contributions to employee benefit plans and deterred | (e) Expense |
| (a) Name and address of each employee paid more than \$50,000 | hours per week devoted to position | (c) Compensation | and deterred compensation | account, other allowances |
| NONE | 4070100 10 90011011 | | - Componitation | |
| | 1 | | | |
| | | | | |
| | 1 | | | |
| | | | | |
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| | | | | |
| | | | | |
| | | | | |
| | | | <u> </u> | L |
| Total number of other employees paid over \$50,000 | ···· | | | 0 |
| | | | Form | 990-PF (2009) |

Total. Add lines 1 through 3

| P | art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four | ndation | ns, see instructions) |
|----|---|-----------|-----------------------|
| 1 | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: | | |
| a | Average monthly fair market value of securities | 1a | 14,481,312. |
| b | Average of monthly cash balances | 1b | 1,845,873. |
| С | Fair market value of all other assets | 1c | 15,534. |
| d | Total (add lines 1a, b, and c) | 10 | 16,342,719. |
| 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 | 16,342,719. |
| 4 | Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions) | 4 | 245,141. |
| 5 | Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4 | 5 | 16,097,578. |
| 6 | Minimum investment return Enter 5% of line 5 | 6 | 804,879. |
| P | art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations check here and do not complete this part.) | d certa | in |
| 1 | Minimum investment return from Part X, line 6 | 1 | 804,879. |
| 2a | Tax on investment income for 2009 from Part VI, line 5 | | |
| b | Income tax for 2009. (This does not include the tax from Part VI.) | İ | |
| C | Add lines 2a and 2b | 2c | 4,124. |
| 3 | Distributable amount before adjustments. Subtract line 2c from line 1 | 3 | 800,755. |
| 4 | Recoveries of amounts treated as qualifying distributions | 4 | 61,620. |
| 5 | Add lines 3 and 4 | 5 | 862,375. |
| 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 | 862,375. |
| 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 | 1,054,425. |
| 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 | |
| b | Cash distribution test (attach the required schedule) | 3b | |
| 4 | Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 | 4 | <u>1,054,425.</u> |
| 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 | 4,124. |
| 6 | Adjusted qualifying distributions Subtract line 5 from line 4 | 6 | 1,050,301. |
| | Note The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of 4940(e) reduction of tax in those years. | qualifies | for the section |

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| • | (a) Corpus | (b) Years prior to 2008 | (c) 2008 | (d) 2009 |
|--|---------------|----------------------------|-------------|--------------------|
| 1 Distributable amount for 2009 from Part XI, | | | - | |
| line 7 | | | | 862,375. |
| 2 Undistributed income, if any, as of the end of 2009 | | | | |
| a Enter amount for 2008 only | | | 0. | |
| 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 424,054. | 404 054 | | | |
| f Total of lines 3a through e | 424,054. | | | |
| 4 Qualifying distributions for 2009 from | | | | |
| Part XII, line 4: ► \$ 1,054,425. | | | 0 | |
| a Applied to 2008, but not more than line 2a | | | 0. | |
| b Applied to undistributed income of prior | | ^ | | |
| years (Election required - see instructions) | _ | 0. | | ···· |
| c Treated as distributions out of corpus | 616 104 | | | |
| (Licetion required - See mondetions) | 616,104. | | | 420 201 |
| d Applied to 2009 distributable amount | 0. | | | 438,321. |
| e Remaining amount distributed out of corpus | 424,054. | | | 424,054. |
| 5 Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a)) | 424,034. | | | 424,054. |
| 6 Enter the net total of each column as indicated below: | | | | |
| a Corpus Add lines 31, 4c, and 4e Subtract line 5 | 616,104. | | | |
| b Prior years' undistributed income. Subtract | | | | |
| line 4b from line 2b | | 0. | | |
| c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed | | 0. | | |
| d Subtract line 6c from line 6b. Taxable | | | | |
| amount - see instructions | | 0. | | |
| e Undistributed income for 2008. Subtract line | | | | |
| 4a from line 2a. Taxable amount - see instr. | | | 0. | |
| f Undistributed income for 2009. Subtract | | | | |
| lines 4d and 5 from line 1. This amount must | | | | |
| be distributed in 2010 | | | | 0. |
| 7 Amounts treated as distributions out of | | | | |
| corpus to satisfy requirements imposed by | | | | |
| section 170(b)(1)(F) or 4942(g)(3) | 0. | | | |
| 8 Excess distributions carryover from 2004 | _ | | | |
| not applied on line 5 or line 7 | 0. | | | |
| 9 Excess distributions carryover to 2010 | | | | |
| Subtract lines 7 and 8 from line 6a | 616,104. | | | |
| 10 Analysis of line 9: | | | | |
| a Excess from 2005 | į | | | |
| b Excess from 2006 | İ | | | |
| c Excess from 2007 | | | | |
| d Excess from 2008 | | | | |
| e Excess from 2009 616,104. | ** SEE STATEN | ADMIN 12 | | Form 990-PF (2009) |

923581 02-02-10 ** SEE STATEMENT 13

Form **990-PF** (2009

| | IANNINI FOU | | I A supertion (I) | | 089512 P |
|---|---|---------------------------------------|--|----------------------------|--|
| Part XIV Private Operating F | _ | | -A, question 9) | N/A | |
| 1 a If the foundation has received a ruling o | | • • • | | | |
| foundation, and the ruling is effective fo | <u>-</u> | = | ▶ └ | | |
| b Check box to indicate whether the found | | ing foundation described | | 4942(j)(3) or 4 | 1942(j)(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, | | | | | 1 |
| 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 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 | | | if the formulation | h = d &5 000 = = == | |
| at any time during t Information Regarding Foundation List any managers of the foundation wh year (but only if they have contributed in | on Managers: o have contributed more | e than 2% of the total cont | tributions received by the | e foundation before the cl | ose of any tax |
| NONE b List any managers of the foundation wh | 0 0WD 109/ or more of th | he stock of a corporation | (or an equally large posts | on of the ownership of a | nartnerchin or |
| other entity) of which the foundation ha | | | to, an odnany wide boun | on or the ownership of a | μαι αιστοπην στ |
| ONE | | 0-1-1-1- | | | |
| 2 Information Regarding Contribute Check here ☐ if the foundation of the foundation makes gifts, greats, etc. | nly makes contributions | to preselected charitable | organizations and does | • | • |
| the foundation makes gifts, grants, etc. a The name, address, and telephone num | | | | omplete items 2d, u, c, al | iu u. |
| JOHN AND KEN BLUM, A 57 POST STREET, SUIT | DMINISTRATI | ORS, 415-98 | 31-2966 | | |
| b The form in which applications should b | | | | | - |
| SEE EXHIBIT 3 | | | | | |
| c Any submission deadlines: SEE EXHIBIT 3 | | · · · · · · · · · · · · · · · · · · · | | | <u>. </u> |
| d Any restrictions or limitations on awards SEE EXHIBIT 3 | s, such as by geographic | cal areas, charitable fields, | kinds of institutions, or | other factors: | |
| 23801 02-02-10 | | 10 | ······································ | | Form 990-PF (|
| 30909 758582 GIAN12 | 200 | 9.04020 A. | P. GTANNTNT | FOUNDATTON | GIAN12 |
| JUJUJ JUJUZ GIRHIZ | 200 | | | | |

| 3 Grants and Contributions Paid During the | Year or Approved for Future | Payment | | |
|---|--|----------------------|----------------------------------|---------|
| Recipient | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of | Purpose of grant or contribution | Amount |
| Name and address (home or business) | or substantial contributor | recipient | | |
| a Paid during the year | | | | |
| SEE EXHIBIT 4 | | 509(A)(1) | | 848,000 |
| | | | | |
| | | | | |
| Total | | | ▶ 3a | 848,000 |
| b Approved for future payment SEE EXHIBIT 4 | | 509(A)(1) | | 819,000 |
| | | | | |
| | | | | us. 4. |
| Total | | | ▶ 3b | 819,000 |

923611 02-02-10

Part XVI-A Analysis of Income-Producing Activities

| Enter gross amounts unless otherwise indicated. | Unrelated b | usiness income | Exclud (C) Exclu- | ed by section 512, 513, or 514 | (e) | |
|---|-----------------|----------------|-------------------------|--------------------------------|-------------------|--|
| g | (a) Business | (b) | | (d) | Related or exempt | |
| 1 Program service revenue: | code | Amount | sion | Amount | function income | |
| a | | | | | | |
| b | | | | | | |
| С | | | | | | |
| d | 1 1 | | | | | |
| е | | | | | | |
| 1 | | | | | | |
| g Fees and contracts from government agencies | | | | | | |
| 2 Membership dues and assessments | | | | | | |
| 3 Interest on savings and temporary cash | | | | | | |
| investments | | | 14 | 42. | | |
| 4 Dividends and interest from securities | | | 14 | 550,527. | | |
| 5 Net rental income or (loss) from real estate. | | | | | | |
| a Debt-financed property | | | | | | |
| b Not debt-financed property | | | | | | |
| 6 Net rental income or (loss) from personal | | | | | | |
| property | | | | | | |
| 7 Other investment income | 900000 | 801. | 15 | -8,539. | | |
| 8 Gain or (loss) from sales of assets other | | | , | | | |
| than inventory | 900000 | 1,642. | 18 | -97,926. | | |
| 9 Net income or (loss) from special events | | | | | | |
| 10 Gross profit or (loss) from sales of inventory | | | | | | |
| 11 Other revenue: | | | | | | |
| a RECOVERIES | | | | | 148,620. | |
| b ONEOK PARTNERS (K-1) | 900000 | -16,132. | | | | |
| c OTHER INCOME | | | | | | |
| đ | | | | | | |
| e | | | | | | |
| 12 Subtotal. Add columns (b), (d), and (e) | | -13,689. | | 444,104. | 148,620. | |
| 13 Total Add line 12, columns (b), (d), and (e) | | | | 13 | 579,035. | |
| (See worksheet in line 13 instructions to verify calculations.) | | | | | | |

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

| Line No. | | | ctivity for which income is urposes (other than by p | | | A CONTRIDUTE | eo importan | try to the accomplish | iment of |
|--------------------|--|----|---|-------------|--------------|--------------|-------------|-----------------------|---------------------------|
| 111 | ·· · | | | | | 1 | | | |
| <u>11A</u> | RECOVERIES | OF | PREVIOUSLY | DEDUCTED | GRANTS | (FOR | BOOK | PURPOSES | ONLY) |
| | | | | | ** | | | | |
| | | | | | | | _ | | |
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| | | - | | | | | | | |
| 923621 02-02-10 | | | | | | | | | Form 990-PF (2009) |

| 1 | Did th | e organization directly or indir | rectly engage in any of the followin | ig with any other organization | n described in section 501(c) of | | Yes | No |
|--------|--------------------------------|--|---|----------------------------------|---|----------------|--|-----------|
| | the Co | ode (other than section 501(c) |)(3) organizations) or in section 52 | 27, relating to political organi | zations? | | | |
| 8 | Trans | fers from the reporting founda | ation to a noncharitable exempt or | ganization of: | | | | |
| | (1) (| Cash | | | | 1a(1) | | X |
| | (2) | Other assets | | | | 1a(2) | | X |
| t | Other | transactions: | | | | | | İ |
| | (1) S | Sales of assets to a noncharital | ble exempt organization | | | 1b(1) | | X |
| | (2) F | Purchases of assets from a no | ncharitable exempt organization | | | 1b(2) | | X |
| | (3) F | Rental of facilities, equipment, | or other assets | | | 1b(3) | | X |
| | (4) F | Reimbursement arrangements | | | | 1b(4) | | X |
| | (5) L | oans or loan guarantees | | | | 1b(5) | | X |
| | (6) F | Performance of services or me | embership or fundraising solicitatio | ons | | 1b(6) | | X |
| (| | | alling lists, other assets, or paid em | • • | | 1c | L | X |
| (| | | | | ays show the fair market value of the goods, | | ets, | |
| | | | | | e in any transaction or sharing arrangement, | show in | | |
| _ | | | other assets, or services received. | | | | _ | |
| a) | Line no | (b) Amount involved | (c) Name of noncharitable | e exempt organization | (d) Description of transfers, transactions, and | sharing an | rangeme | nts |
| | | | N/A | | | | | |
| | | | | | | | | |
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| | | | | | <u> </u> | | | |
| 28 | | | thy affiliated with, or related to, one | | ations described | — | \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\ | 7. |
| | | | r than section 501(c)(3)) or in sect | tion 52/7 | L | Yes | ĻX | . No |
| _! |) II Ye | s," complete the following scho | | (h) Type of organization | (c) Description of relations | | | |
| _ | | (a) Name of org | janization | (b) Type of organization | (c) Description of relations | | | |
| _ | | N/A | | | | | | |
| - | · | | | | | | | |
| | | | | 1 | | | | |
| | | | | - | | | | |
| | Under c | penalties of perjury, I declare that I h | have examined this return, including acco | mpanying schedules and stateme | ents, and to the best of my knowledge and belief, it is | true, corre | ct. | |
| | | | er than taxpayer or iductary) is based on | | | | | |
| | | (Car X en | Of Formal | 11/2/2010 | + Praculet | | | |
| ē | \overline{s} | gnature of officer or trustee | | Date | Title | | | |
| n Here | <u> </u> | Preparer's | 0 | OF D Di | Ate Check If Prepar | er's identify | ying nun | nber |
| ě | حيّ | signature | the B | un_SEP | 2010 Check if self-employed ► | | | |
| n | Paid Preparer's Use Only | Firm's name (or yours CALE | GARI & MORRIS, | ACCOUNTANTS | EIN ► | | | |
| | P de se | if self-employed). 123 | MISSION STREET, | | | | | |
| | ر م | address and ZIP code SAN | | 94105 | Phone no (415 |) 98 | 1-8 | 766 |
| | | · | | <u> </u> | | orm 990 | | |
| | | | | | | | | • |

Schedule B

or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

▶ Attach to Form 990, 990-EZ, or 990-PF.

OMB No 1545-0047

2009

Employer identification number

94-6089512 A. P. GIANNINI FOUNDATION Organization type (check one) Filers of: Section: ___ 501(c)(Form 990 or 990-EZ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor Complete Parts I and II **Special Rules** For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1 Complete Parts I and II ___ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year ▶ \$ Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF). Schedule B (Form 990, 990-EZ, or 990-PF) (2009) LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF.

Employer identification number

A. P. GIANNINI FOUNDATION

94-6089512

| (a) No. Name, address, and ZIP + 4 ESTATE OF VICTOR SATURNO C/O WELLS FARGO BANK, 420 MONTGOMERY STREET, 7TH FLOOR SAN FRANCISCO, CA 94104 (a) No. Name, address, and ZIP + 4 FANCHER TRUST C/O WELLS FARGO BANK, 1512 EUREKA ROAD, SUITE 800 ROSEVILLE, CA 95661 (b) No. Name, address, and ZIP + 4 (c) (d) Type of contributions ROSEVILLE, CA 95661 (a) No. Name, address, and ZIP + 4 (b) No. Name, address, and ZIP + 4 (c) (d) Type of contributions ROSEVILLE, CA 95661 (b) No. Name, address, and ZIP + 4 (c) (d) Type of contributions ROSEVILLE, CA 94104 (a) No. Name, address, and ZIP + 4 (b) No. Name, address, and ZIP + 4 (c) Aggregate contributions ROSEVILLE, CA 94104 (a) No. Name, address, and ZIP + 4 MRS. VIRGINIA HAMMERNESS 57 POST STREET, SUITE 510 SAN FRANCISCO, CA 94104 (b) No. Name, address, and ZIP + 4 MRS. VIRGINIA HAMMERNESS 57 POST STREET, SUITE 510 SAN FRANCISCO, CA 94104 (a) No. Name, address, and ZIP + 4 Aggregate contributions SAN FRANCISCO, CA 94104 (b) No. Name, address, and ZIP + 4 Aggregate contributions SAN FRANCISCO, CA 94104 (c) (d) Type of contributions Person Payroll Noncash (Complete Part is a noncash contributions) SAN FRANCISCO, CA 94104 (a) No. Name, address, and ZIP + 4 Aggregate contributions SAN FRANCISCO, CA 94104 (b) No. Name, address, and ZIP + 4 Aggregate contributions Person Payroll Noncash (Complete Part is a noncash contributions) Person Payroll Noncash (Complete Part is a noncash contributions) Person Payroll Noncash (Complete Part is a noncash contributions) Person Payroll Noncash (Complete Part is a noncash contributions) SAN FRANCISCO, CA 94104 (a) No. Name, address, and ZIP + 4 Aggregate contributions Person Payroll Noncash (Complete Part is a noncash contributions) Person Payroll Noncash (Complete Part is a noncash contributions) Person Payroll Noncash (Complete Part is a noncash contributions) Person Payroll Noncash (Complete Part is a noncash contributions) Person Payroll Noncash (Complete Part is a noncash contributions) Person | |
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| C/O WELLS FARGO BANK, 420 MONTGOMERY STREET, 7TH FLOOR SAN FRANCISCO, CA 94104 (a) No. Name, address, and ZIP + 4 Payroll Noncash or read of the payroll solutions (b) No. Name, address, and ZIP + 4 Person Payroll Noncash Complete Part is a noncash or read of the payroll noncash or read | |
| No. Name, address, and ZIP + 4 Aggregate contributions Type of contributions | |
| C/O WELLS FARGO BANK, 1512 EUREKA ROAD, SUITE 800 SAN FRANCISCO, CA 94104 SAN FRANCISCO, C | • |
| No. Name, address, and ZIP + 4 Aggregate contributions Type of contributions Type of contributions Aggregate contributions Type of contributions Person Payroll Noncash (Complete Part is a noncash contributions) (a) No. Name, address, and ZIP + 4 MRS. VIRGINIA HAMMERNESS 57 POST STREET, SUITE 510 SAN FRANCISCO, CA 94104 (b) SAN FRANCISCO, CA 94104 (c) Aggregate contributions Person Payroll Noncash (Complete Part is a noncash contributions) (a) No. Name, address, and ZIP + 4 Aggregate contributions Person Payroll Noncash (Complete Part is a noncash contributions) Aggregate contributions Person Payroll Noncash (Complete Part is a noncash contributions) Aggregate contributions Person Payroll | |
| MR. & MRS. A.W. CLAUSEN 555 CALIFORNIA STREET, 11TH FLOOR SAN FRANCISCO, CA 94104 (a) (b) (c) (d) Type of come and compared is a noncash compared in a | I) |
| San Francisco, Ca 94104 San Francisco, C | ntribution |
| No. Name, address, and ZIP + 4 MRS. VIRGINIA HAMMERNESS 57 POST STREET, SUITE 510 SAN FRANCISCO, CA 94104 (a) (b) (c) (d) (d) No. Name, address, and ZIP + 4 BANK OF AMERICA FOUNDATION Person Payroll Aggregate contributions (c) (d) (d) Aggregate contributions Type of contributions Person Payroll Person Payroll | |
| 57 POST STREET, SUITE 510 SAN FRANCISCO, CA 94104 (a) (b) (c) (d) Aggregate contributions No. Name, address, and ZIP + 4 BANK OF AMERICA FOUNDATION Payroll Noncash (Complete Part is a noncash contributions) Payroll Noncash (Complete Part is a noncash contributions) Aggregate contributions Person Payroll | • |
| No. Name, address, and ZIP + 4 Aggregate contributions Type of com 5 BANK OF AMERICA FOUNDATION Person Payroll | |
| Payroll | |
| CHARLOTTE , NC 28292 (Complete Part is a noncash co | |
| (a) (b) (c) (d) No. Name, address, and ZIP + 4 Aggregate contributions Type of cont | |
| MR. & MRS. DANIEL P. RILEY 57 POST STREET, SUITE 510 \$ 25,000. Person Payroll Noncash (Complete Part | X Line there |
| SAN FRANCISCO, CA 94104 Is a noncash co | <u>·</u> |

Page 1 of 1 of Part II
Employer identification number

A. P. GIANNINI FOUNDATION

94-6089512

| Noncash Property (see instructions) | | |
|--|--|---|
| (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| 926 SHARES - WELLS FARGO BANK STOCK | _ | |
| | \$ 24,863. | 12/23/09 |
| (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | _ | |
| | | |
| (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | _ | |
| | _ | |
| (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
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| (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
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| (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
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| | | |
| | (b) Description of noncash property given (b) Description of noncash property given (b) Description of noncash property given (b) Description of noncash property given (b) Description of noncash property given (b) Description of noncash property given (b) Description of noncash property given | (b) Description of noncash property given 926 SHARES - WELLS FARGO BANK STOCK (b) Description of noncash property given (c) FMV (or estimate) (see instructions) (d) Description of noncash property given (c) FMV (or estimate) (see instructions) (d) Description of noncash property given (e) FMV (or estimate) (see instructions) (c) FMV (or estimate) (see instructions) (d) Description of noncash property given (e) FMV (or estimate) (see instructions) (f) FMV (or estimate) (see instructions) (h) Description of noncash property given (c) FMV (or estimate) (see instructions) |

| FORM 990-PF · INTEREST ON SAVINGS AND TEMPORARY CASH INVESTMENTS | STATEMENT | 1 |
|--|---------------------------------------|-----|
| SOURCE | AMOUNT | |
| MISCELLANEOUS INTEREST INCOME | | 42. |
| TOTAL TO FORM 990-PF, PART I, LINE 3, COLUMN A | · · · · · · · · · · · · · · · · · · · | 42. |

A. P. GIANNINI FOUNDATION

| FORM 990-PF DIVIDENDS AND | INTEREST FROM | SECURITIES | STATEMENT 2 |
|--|--------------------|----------------------------|----------------------|
| SOURCE | GROSS AMOUNT | CAPITAL GAINS DIVIDENDS | COLUMN (A) AMOUNT |
| COMMON SENSE PARTNERS II (K-1) | 18,364. | 0. | 18,364. |
| COVINGTON CAPITAL MGMT COVINGTON-FELLOWSHIP CAMPAIGN | 222,167. 5,897. | 0. | 222,167. 5,897. |
| ONEOK PARTNERS (K-1) PIMCO FUNDS | 530. 305,979. | 0. 2,410. | 530. 303,569. |
| TOTAL TO FM 990-PF, PART I, LN 4 | 552,937. | 2,410. | 550,527. |

| FORM 990-PF OTH | HER INCOME | | STATEMENT | 3 |
|--|---|-----------------------------------|-------------------------------|---|
| DESCRIPTION | (A) REVENUE PER BOOKS | (B) NET INVEST- MENT INCOME | (C) ADJUSTED NET INCOME | E |
| ONEOK PARTNERS (K-1) COMMON SENSE PARTNERS (K-1) LESS:COMMON SENSE PARTNERS-UBTI RECOVERIES ONEOK PARTNERS (K-1) | -107 -8,432 801 148,620 -16,132 | -8,432 0, | • | |
| TOTAL TO FORM 990-PF, PART I, LINE | 11 124,750 | -8,539 | • | |

| FORM 990-PF | ACCOUNTI | NG FEES | S | TATEMENT 4 |
|------------------------------|------------------------------|-----------------------------------|-------------------------------|-------------------------------|
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | (C) ADJUSTED NET INCOME | (D) CHARITABLE PURPOSES |
| ACCOUNTING FEES | 19,950. | 9,975. | | 9,975. |
| TO FORM 990-PF, PG 1, LN 16B | 19,950. | 9,975. | | 9,975. |

| FORM 990-PF | TAX | ES | S' | TATEMENT 5 |
|---|-------------------------------|-----------------------------------|-------------------------------|-------------------------------|
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | (C) ADJUSTED NET INCOME | (D) CHARITABLE PURPOSES |
| FEDERAL EXCISE TAXES FRANCHISE TAX BOARD CHARITABLE TRUST REGISTRY FOREIGN TAX PAID | 4,669. 10. 150. 639. | 0. 0. | | 0. 10. 150. 0. |
| TO FORM 990-PF, PG 1, LN 18 | 5,468. | 639. | | 160. |

| FORM 990-PF | OTHER E | XPENSES | S' | TATEMENT 6 |
|--|------------------------------|-----------------------------------|-------------------------------|-------------------------------|
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | (C) ADJUSTED NET INCOME | (D) CHARITABLE PURPOSES |
| MANAGEMENT FEE | 105,315. | | | 105,315. |
| OFFICE EXPENSE | 6,733. | | | 6,733. |
| INSURANCE | 4,552. | 0. | | 4,552. |
| COMMON SENSE PARTNERS K-1 | 104 | 104 | | 0 |
| FOREIGN TAX PD | 194. | 194. | | 0. |
| ONEOK PARTNERS K-1 NONDEDUCTIBLE LOSS | 35. | 0. | | 0. |
| COVINGTON CAPITAL MGMT | 33• | 0. | | • |
| INVESTMENT FEES | 64,096. | 64,096. | | 0. |
| DUES | 2,230. | 0. | | 2,230. |
| COMMON SENSE PARTNERS K-1 | • | | | • |
| INVESTMENT EXP. | 24,472. | 24,472. | | 0. |
| COMMON SENSE PARTNERS K-1 | | | | |
| OTHER PORTFOLIO DED | 30,282. | • | | 0. |
| FILING FEE | 20. | 0. | | 0. |
| TO FORM 990-PF, PG 1, LN 23 | 237,929. | 119,044. | | 118,830. |

FOOTNOTES

STATEMENT

CONTRIBUTIONS:

THE DONORS DID NOT RECEIVE ANY GOODS OR SERVICES IN EXCHANGE FOR THEIR CONTRIBUTIONS

PART VII-B 1A(4):

REIMBURSEMENT OF EXPENSES PAID TO TRUSTEES WAS FOR PROFESSIONAL SERVICES AND WAS REASONABLE IN AMOUNT AND THUS AN EXCEPTED ACT AS DESCRIBED IN REGULATION SECTION 53.4941(D)-3

FORM 8865 FILING EXCEPTION:

CONTROLLED FOREIGN PARTNERSHIP REPORTING

THE TAXPAYER WAS REQUIRED TO FILE FORM 8865, BUT IS NOT DOING SO UNDER THE CONSTRUCTIVE OWNERS EXCEPTION. THE TAXPAYER HAS AN INDIRECT INTEREST IN THE FOLLOWING ENTITY WHICH FILED FORM 8865:

PENINSULA FUND, LP 235 PINE STREET, SUITE 1600 SAN FRANCISCO, CA 94104

THE TAXPAYER WOULD HAVE HAD TO FILE FORM 8865 FOR ITS INDIRECT OWNERSHIP IN THE ENTITY LISTED BELOW BUT FOR THIS EXCEPTION.

PENINSULA MASTER FUND, LTD.
C/O MOURANT CAYMAN CORPORATE SERVICES, LTD.
HARBOUR CENTRE, 42 NORTH CHURCH STREET
P.O. BOX 1348
GRAND CAYMAN, KY1-1108, CAYMAN ISLANDS

A. P. GIANNINI FOUNDATION

| FORM 990-PF· CORPORA | TE STOCK | STATEMENT | 8 |
|---|-------------------------|-----------------------|----------|
| DESCRIPTION | BOOK VALUE | FAIR MARKET VALUE | |
| COVINGTON CAPITAL MGMT (SEE EXHIBIT 1) COVINGTON-FELLOWSHIP CAMPAIGN (SEE EXHIBIT | 10,895,681. 304,545. | 10,895,681 304,545 | |
| TOTAL TO FORM 990-PF, PART II, LINE 10B | 11,200,226. | 11,200,226 | <u> </u> |

A. P. GIANNINI FOUNDATION

| FORM 990-PF OTH | ER INVESTMENTS | | STATEMENT 9 |
|---|---------------------|--|--|
| DESCRIPTION | VALUATION METHOD | BOOK VALUE | FAIR MARKET VALUE |
| PIMCO TOTAL RETURN FUND PIMCO ALL ASSET FUND COMMON SENSE PARTNERS II, L.P. | FMV FMV FMV | 1,091,226. 3,280,029. 1,101,292. | 1,091,226. 3,280,029. 1,101,292. |
| TOTAL TO FORM 990-PF, PART II, LINI | E 13 | 5,472,547. | 5,472,547. |

. A. P. GIANNINI FOUNDATION

| FORM 990-PF | OTHER ASSETS | | STATEMENT 10 |
|----------------------------------|---------------|-------------|--------------|
| DESCRIPTION | BEGINNING OF | END OF YEAR | FAIR MARKET |
| | YR BOOK VALUE | BOOK VALUE | VALUE |
| ACCRUED DIVIDENDS | 7,879. | 10,535. | 10,535. |
| PREPAID EXCISE TAX | 9,123. | 4,454. | 4,454. |
| TO FORM 990-PF, PART II, LINE 15 | 17,002. | 14,989. | 14,989. |

FORM 990-PF LIST OF SUBSTANTIAL CONTRIBUTORS PART VII-A, LINE 10

STATEMENT 11

NAME OF CONTRIBUTOR

ADDRESS

MR. & MRS. A.W. CLAUSEN

555 CALIFORNIA STREET, 11TH FLOOR

SAN FRANCISCO, CA 94104

BANK OF AMERICA FOUNDATION 101 S. TRYON ST. NC1-021 02-20 CHARLOTTE. NC 28292

CHARLOTTE, NC 28292

| FORM 990-PF PART VIII - 1 TRUSTEES A | LIST OF OFFICERS, D AND FOUNDATION MANA | IRECTORS GERS | STAT | EMENT 12 |
|---|--|------------------|---------------------------------|----------|
| NAME AND ADDRESS | TITLE AND AVRG HRS/WK | | EMPLOYEE BEN PLAN CONTRIB | EXPENSE |
| CAROLINE O. BOITANO 57 POST STREET, SUITE 510 SAN FRANCISCO, CA 94104 | PRESIDENT/SECR | ETARY 0. | 0. | 0. |
| JERRY L. BOWMAN 57 POST STREET, SUITE 510 SAN FRANCISCO, CA 94104 | DIRECTOR 0.00 | 0. | 0. | 0. |
| VIRGINIA HAMMERNESS 57 POST STREET, SUITE 510 SAN FRANCISCO, CA 94104 | VICE-CHAIRMAN 0.00 | 0. | 0. | 0. |
| DONALD A. MULLANE 57 POST STREET, SUITE 510 SAN FRANCISCO, CA 94104 | CHAIRMAN 0.00 | 0. | 0. | 0. |
| ANNE G. MCWILLIAMS 57 POST STREET, SUITE 510 SAN FRANCISCO, CA 94104 | DIRECTOR 0.00 | 0. | 0. | 0. |
| JULIUS R. KREVANS, M.D. 57 POST STREET, SUITE 510 SAN FRANCISCO, CA 94104 | DIRECTOR 0.00 | 0. | 0. | 0. |
| LARRY MCNABB 57 POST STREET, SUITE 510 SAN FRANCISCO, CA 94104 | DIRECTOR 0.00 | 0. | 0. | 0. |
| DANIEL P. RILEY 57 POST STREET, SUITE 510 SAN FRANCISCO, CA 94104 | DIRECTOR 0.00 | 0. | 0. | 0. |
| TOTALS INCLUDED ON 990-PF, PAG | E 6, PART VIII | 0. | 0. | 0. |

FORM 990-PF

ELECTION UNDER REGULATIONS SECTION 53.4942(A)-3(D)(2) TO TREAT EXCESS QUALIFYING DISTRIBUTIONS AS DISTRIBUTIONS OUT OF CORPUS

STATEMENT 13

SEC. 53.4942(A)-3(D)(2) ELECTION ORGANIZATION HEREBY ELECTS UNDER IRC REG. SECTION 53-4942(A)-3(D)(2) TO TREAT \$616,104 OF THE QUALIFYING DISTRIBUTIONS FOR 2009 AS HAVING BEEN DISTRIBUTED OUT OF CORPUS.

SIGNATURE OF OFFICER OR TRUSTEE

| COVINGTON CAPITAL MANAGEMENT | | Giannini, | Giannini, A.P. Foundation | uo | January | January 01, 2009 - December 31, 2009 | 31, 2009 |
|---|---------|-----------------|---------------------------|---------------|-------------|--------------------------------------|----------|
| Current Portfolio | | | | | | | , |
| Cash/Cash Equivalents | | | | | | į | |
| Description | Units | Current Cost | Current Price | Current Value | % of Sector | Esumated Annual Income | Yield |
| Taxable Schwab Advisor Cash Reserves | 599,453 | \$599,453.35 | . \$1.00 | \$599,453.35 | 100.00 | \$59.95 | 0.01 |
| Premiere Sweep Shares | | \$500 453 25 | | 6500 453 35 | 100.00 | \$59,95 | 0.01 |
| i otal i axable | | 0.7.7.4.7.00.09 | | | | | |
| Preferred Stocks | | | | | | | |
| Description | Units | Current Cost | Current Price | Current Value | % of Sector | Estimated Annual Income | Yield |
| Flaherty & Crumrne - PFD | 10,000 | \$146,561.40 | \$10.47 | \$104,700.00 | 55.86 | \$8,640.00 | 8.25 |
| Flaherty & Crumrine - PFO | 10,000 | \$112,004.04 | \$8.27 | \$82,700.00 | 44.13 | \$6,900.00 | 8.34 |
| Total | | \$258,565.44 | | \$187,400.00 | 100.00 | \$15,540.00 | 8.29 |
| Total Preferred Stocks | | \$258,565.44 | | \$187,400.00 | 100.00 | \$15,540.00 | 8.29 |
| | | | | | | | |
| | | | | | EXH | EXHIBIT 1 – ASSET SCHEDULE | JULE |

Page 4

January 01, 2009 - December 31, 2009

| Equities | | | | | | | | | |
|-------------------------------|----------|-------------|-----------|----------------------------|---------------|---------------|-------------|----------------------------|---------|
| Equity Sector Diversification | ion | İ | | | | | | | |
| Sector | Equity % | S & P 500 % | Sector | | Equity % | S & P 500 % | | | |
| Consumer Discretionary | 17 | 9.6 | Informati | Information Technology | 15.4 | 19.8 | | | |
| Consumer Staples | 109 | 11.4 | Materials | | 7.2 | 3.5 | | | |
| Energy | 189 | 11.5 | Telecom | Telecommunication Services | 5.8 | 3.2 | | | |
| Financials | 28 | 14.4 | Utilities | | 3.0 | 3.7 | | | |
| Healthcare | 242 | 12.6 | Total | | 100.0 | 100.0 | | | |
| Industrials | 101 | 103 | | | | | | | |
| | | | : | • | | | | Estimated | rja!X |
| Description | | Ticker | Units | Current Cost | Current Price | Current Value | % or sector | Аппан Іпсоте | niel / |
| Consumer Discretionary | | | | | | | | | |
| News Corp Inc CI A | | NWS/A | 8,800 | \$148,456.00 | \$13.69 | \$120,472.00 | 1.66 | \$2,112.00 | 1.75 |
| Total Consumer Discretionary | tionary | | | \$148,456.00 | | \$120,472.00 | 1.66 | \$2,112.00 | 1.75 |
| | | | | | | | | | |
| Consumer Staples | | | | | | | | | |
| Archer-Danjels-MidInd Co | 00 | ADM | 1,825 | \$41,873.53 | \$31.31 | \$57,140.75 | 0.78 | \$1,022.00 | 1.78 |
| Coca Cola Company | | 8 | 3,675 | \$151,125.60 | \$57.00 | \$209,475.00 | 2.89 | \$6,027.00 | 2.87 |
| Colgate-Palmolive Co | | ر ا | 3,000 | \$150,506.32 | \$82.15 | \$246,450.00 | 3.40 | \$5,280.00 | 2.14 |
| Kraft Foods Inc | | KFT | 4,375 | \$150,066.44 | \$27.18 | \$118,912.50 | 1.64 | \$5,075.00 | 4.26 |
| Wal-Mart Stores Inc | | WMT | 3,025 | \$134,501.45 | \$53.45 | \$161,686.25 | 2.23 | \$3,297.24 | 2.03 |
| | | | | | | | | EXHIBIT 1 – ASSET SCHEDULE | CHEDULE |

| マープラーン 日本 | Z | | | | | | | |
|-------------------------|------------|-------|----------------|---------------------------|----------------|-------------|----------------------------|--------|
| CAPITAL MANAG | MANAGEMENT | | Giannini, | Giannini, A.P. Foundation | uc | | | Page 5 |
| Equities | | | | | r | | | • |
| Description | Ticker | Units | Current Cost | Current Price | Current Value | % of Sector | Estimated Annual Income | Yield |
| Total Consumer Staples | | | \$628,073.34 | | \$793,664.50 | 10.94 | \$20,701.24 | 2.61 |
| Energy | | | | | | | | |
| Apache Corp | APA | 2,975 | \$155,720.45 | \$103.17 | \$306,930.75 | 4.23 | \$1,785.00 | 0.58 |
| Chevrontexaco Corp | CVX | 2,875 | \$150,952.29 | \$76.99 | \$221,346.25 | 3.05 | \$7,820.00 | 3.53 |
| Conocophilips | COP | 4,325 | \$375,583.95 | \$51.07 | \$220,877.75 | 3.04 | \$8,650.00 | 3.91. |
| Devon Energy Cp New | DVN | 2,225 | \$89,704.38 | \$73.50 | \$163,537.50 | . 2.25 | \$1,424.00 | 0.87 |
| Exxon Mobil Corporation | WOX | 3,950 | \$275,363.45 | \$68.19 | \$269,350.50 | 3.71 | \$6,636.00 | 2.46 |
| Oneok Partners Lp | OKS | 3,000 | \$32,408.11 | \$62.30 | \$186,900.00 | 2.58 | \$13,080.00 | 6.99 |
| Total Energy | | | \$1,079,732.63 | | \$1,368,942.75 | 18.86 | \$39,395.00 | 2.88 |
| Financials | | | | | | | | |
| Leucadia National Corp | LUK | 7,425 | \$200,058.01 | \$23.79 | \$176,640.75 | 2.43 | \$1,856.25 | 1.05 |
| Wells Fargo & Co New | WFC | 926 | \$24,660 35 | \$26.99 | \$24,992.74 | 0.34 | \$185.20 | 0.74 |
| Total Financials | | | \$224,718.36 | | \$201,633.49 | 2.77 | \$2,041.45 | 1.01 |
| Healthcare | | | | | | | | |
| aciterocato O recirco | n S | 4.125 | \$184,886.58 | \$82.44 | \$340,065.00 | 4.69 | \$0.00 | 0.00 |

| | | | | | | January (| January 01, 2009 - December 51, 2009 | 1 21, 4009 |
|-----------------------------------|--------|-------|----------------|---------------------------|----------------|-------------|--------------------------------------|------------------|
| COVINGTON CAPITAL MANAGEMENT | | | Giannini, | Giannini, A.P. Foundation | uo | | | . Page 6 |
| Equities | | | | | | | | • |
| Description | Ticker | Units | Current Cost | Current Price | Current Value | % of Sector | Estimated Annual Income | Yield |
| Healthcare Gilead Sciences Inc | GILD | 4,000 | \$127,286.95 | \$43.27 | \$173,080.00 | 2.38 | \$0.00 | 0.00 |
| Johnson & Johnson | UND | 4,925 | \$313,198.41 | \$64.41 | \$317,219.25 | 4.37 | \$9,653.00 | 3.04 |
| Lilly Eli & Company | ררא | 2,650 | \$151,695.73 | \$35.71 | \$94,631,50 | 1.30 | \$5,194.00 | 5.48 |
| Medtronic Inc | TOM | 5,975 | \$312,083.28 | \$43.98 | \$262,780.50 | 3.62 | \$4,899.50 | 1.86 |
| Stryker Corp | SYK | 5,325 | \$223,149.33 | \$50.37 | \$268,220.25 | 3.70 | \$2,130.00 | 0.79 |
| Teva Pharm Inds Ltd Adrf | TEVA | 5,300 | \$150,794.95 | \$56.18 | \$297,754.00 | 4,11 | \$3,323.92 | 1.11 |
| Total Healthcare | | | \$1,463,095.23 | | \$1,753,750.50 | 24.17 | \$25,200.42 | 1.44 |
| Industrials | | | | | | | | |
| Зт Сотралу | MMM | 4,125 | \$362,646.99 | \$82.67 | \$341,013.75 | 4.70 | \$8,415.00 | 2.46 |
| General Electric Company | GE | 4,250 | \$150,960.00 | \$15.13 | \$64,302.50 | 0.88 | \$1,700.00 | 2.64 |
| L-3 Communications Hidgs | LLL | 2,150 | \$152,525.51 | \$86.95 | \$186,942.50 | 2.58 | \$3,010.00 | 1.61 |
| United Technologies Corp | XTO | 2,000 | \$100,530.17 | \$69.41 | \$138,820.00 | 1.91 | \$3,080.00 | 2.21 |
| Total Industrials | | | \$766,662.67 | | \$731,078.75 | 10.07 | \$16,205.00 | 2.22 |
| Information Technology | | | | | | | | |
| Accenture Ltd CI A | ACN | 5,075 | \$144,748.95 | \$41.50 | \$210,612.50 | 2.90 | \$3,806.25 | 1.80 |
| | | | | | | | EXHIBIT 1 - ASSET | - ASSET SCHEDULE |

| COVINGTON CAPITAL MANAGEMENT | N E N I | | Giannini, | Giannini, A.P. Foundation | uo | January (| January 01, 2009 - December 31, 2009 Page 7 | . 31, 2009 |
|----------------------------------|---------|--------|--------------|---------------------------|----------------|-------------|---|------------|
| Equities | | | | | | | Estimated | |
| Description | Ticker | Units | Current Cost | Current Price | Current Value | % of Sector | Annual Income | Yield |
| Information Technology | 1 | | 000 | 0 0 0 0 | 9477 060 | o C | 44.7 FO | 9 0 |
| Adobe Systems Inc | ADBE | 4,700 | \$132,999.27 | \$36.78 | \$172,866.00 | 2.38 | 00.7114 | 8 |
| Microsoft Corp | MSFT | 10,700 | \$295,100.17 | \$30.48 | \$326,136.00 | 4.50 | \$5,564.00 | 1.70 |
| National Instruments | NATI | 5,900 | \$150,923.57 | \$29.45 | \$173,755.00 | 2.39 | \$2,832.00 | 1.62 |
| Qualcomm Inc | acom | 5,000 | \$190,345.80 | \$46.26 | \$231,300.00 | 3,19 | \$3,400.00 | 1.46 |
| Total Information Technology | | | \$914,117.76 | | \$1,114,669.50 | 15.36 | \$15,719.75 | 1.41 |
| | | | | | | | | |
| Materials | | | | | | | | |
| Freeport Mcmorn Cp&Gld B | FCX | 2,200 | \$138,722.10 | \$80.29 | \$176,638.00 | 2.43 | \$0.00 | 0.00 |
| SPDR Gold Shares | GLD | 3,200 | \$200,937.63 | \$107.31 | \$343,392.00 | 4,74 | \$0.00 | 0.00 |
| Total Materials | | | \$339,659.73 | | \$520,030.00 | 7.17 | \$0.00 | 0.00 |
| Telecommunication Services | | | | | | | | <u> </u> |
| Verizon Communications | ZA | 4,050 | \$145,289.23 | \$33.13 | \$134,176.50 | 1.85 | \$7,695.00 | 5.73 |
| Vodafone Group PIc Adr | QOA | 12,500 | \$223,251 45 | \$23.09 | \$288,625.00 | 3.98 | \$21,338.22 | 7.39 |
| Total Telecommunication Services | ses | | \$368,540.68 | | \$422,801.50 | 5.83 | \$29,033.22 | 6.87 |
| Utilities | | | | | | | | |

EXHIBIT 1 – ASSET SCHEDULE

| VALUE TO A STATE OF THE STATE O | | | | | January (| January 01, 2009 - December 31, 2009 | 31, 2009 |
|--|-----------|-----------------|---------------------------|-----------------|-------------|--------------------------------------|----------|
| COVINGTON CAPITAL MANAGEMENT | | Giannini, | Giannini, A.P. Foundation | ion | , | • | Page 9 |
| Equity Funds | | | | | | | |
| Description | Units | Current Cost | Current Price | Current Value | % of Sector | Estimated Annual Income | Yield |
| Domestic Funds Mid Cap S P D R TRUST - MDY | 3,325 | \$392,738 36 | \$131.74 | \$438,035 50 | 12.64 | \$5,169.78 | 1.18 |
| Total Domestic Funds | | \$392,738.36 | | \$438,035.50 | 12.64 | \$5,169.78 | 1.18 |
| International Funds | | | | | | | |
| Ishares Msci Cda Idx Fdf - EWC | 11,050 | \$277,229.65 | \$26.33 | \$290,946.50 | 8.39 | \$5,317.90 | 1.82 |
| IShares MSCI EAFE Fund - EFA | 31,550 | \$2,393,238.76 | \$55.28 | \$1,744,084.00 | 50.33 | \$15,640.44 | 0.89 |
| IShares MSCI Emrg Mkt Fd - | 14,100 | \$489,215 68 | \$41.50 | \$585,150.00 | 16.88 | \$4,552.76 | 0.77 |
| IShares MSCI Pac Ex Japn - EPP | 9,825 | \$287,086.33 | \$41.37 | \$406,460.25 | 11.73 | \$15,751.50 | 3.87 |
| Total International Funds | | \$3,446,770.42 | | \$3,026,640.75 | 87.33 | \$41,262.60 | 1.36 |
| Total Equity Funds | | \$3,839,508.78 | | \$3,464,676.25 | 100.00 | \$46,432.38 | 1.34 |
| Total Securities | 37 | \$10,182,427.18 | | \$10,895,681.24 | | | |
| | | | | | | | |
| | | | | | | | |

Page 4

Giannini, A.P. Foundation Fellowship Campaing

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Equity Sector Diversification

Equities

| Sector | Equity % | S & P 500 % | Sector | | Equity % | S & P 500 % | | | |
|------------------------|----------|-------------|-------------|----------------------------|--------------|---------------|-------------|----------------------------|-------------|
| Consumer Discretionary | 0 0 | 9.6 | Information | Information Technology | 00 | 19.8 | | | |
| Consumer Staples | 0 0 | 11.4 | Materials | | 100.0 | 3.5 | | | |
| Energy | 0 0 | 11.5 | Telecomm | Telecommunication Services | 0.0 | 3.2 | | | |
| Financials | 00 | 14.4 | Utilities | | 0.0 | 3.7 | | | |
| Healthcare | 0 0 | 12.6 | Total | | 100.0 | 100 0 | | | |
| Industrials | 0 0 | 10.3 | | | | | | | |
| Description | | Ticker | Units | Current Cost | Current Pnce | Current Value | % of Sector | Estimated Annual Income | Yield |
| Materials | | | | | | | | | |
| SPDR Gold Shares | | GLD | 375 | \$32,651.95 | \$107.31 | \$40,241.25 | 100.00 | \$0.00 | 0.00 |
| Total Materials | | | | \$32,651.95 | | \$40,241.25 | 100.00 | \$0.00 | 0.00 |
| | | | | | | | | | |
| Total Equities | | | | \$32,651.95 | | \$40,241.25 | 100.00 | \$0.00 | 0.00 |
| | | | | | | | | | |

January 01, 2009 - December 31, 2009

Page 5

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| Description | Units | Current Cost | Current Price | Current Value | % of Sector | Estimated Annual Income | Yield |
|--|-------|--------------|---------------|---------------|-------------|-------------------------|-------|
| Domestic Funds | | | | | | , | |
| Vanguard Div Apprciation - VIG | 1,700 | \$82,369.97 | \$46.86 | \$79,662.00 | 30.14 | \$1,638.80 | 2.05 |
| Vanguard Index Fd Mid Cap Vipers - VO | 950 | \$65,128.60 | \$59.95 | \$56,952.50 | 21.54 | \$380.00 | 0.66 |
| Vanguard Total Stock Mkt - VTI | 1,025 | \$65,946.18 | \$56.37 | \$57,779.25 | 21.86 | \$1,467.80 | 2.54 |
| Total Domestic Funds | | \$213,444.75 | | \$194,393.75 | 73.54 | \$3,486.60 | 1.79 |
| International Funds | | | | | | · | |
| Vanguard Emerging Market - | 725 | \$32,875.33 | \$41.00 | \$29,725.00 | 11.24 | \$854.05 | 2.87 |
| Vanguard Europe Pac ETF - VEA | 1,175 | \$49,863.03 | \$34.20 | \$40,185.00 | 15.20 | \$1,096.28 | 2.72 |
| Total International Funds | | \$82,738.36 | | \$69,910.00 | 26.44 | \$1,950.33 | 2.79 |
| Total Equity Funds | | \$296,183.11 | | \$264,303.75 | 100.00 | \$5,436.93 | 2.06 |
| | | | | | | | |

\$304,545.00



P. Giannini Foundation Fellowships for Medical Research in California



A. P. Giannini, the founder of the Bank of America, established the A.P. Giannini Foundation in 1945 to bring to fruition his long-held dream to promote the study, discovery, treatment and care of diseases that impair the human body.

Home

- How to apply
- FAQ
- Fellows
- Directory
- Contact

Objectives of Fellowship Program

The Fellowship Program supports innovative medical research in the basic sciences and applied fields conducted by promising postdoctoral investigators with no more than 0-3 years of postdoctoral research

Research projects should advance the translation of biomedical science into new treatments, preventions and cures for human diseases and contribute to the alleviation of human suffering

Since 1951, the A. P. Giannini Family Foundation has awarded 600 fellowships to postdoctoral biomedical researchers at California's eight accredited medical schools

The Foundation awards six to eight new fellowships annually on a competitive, peer-review basis and funds fellowships up to a maximum of three years based on satisfactory performance

Eligibility and Qualifications of Applicants

Eligible candidates must be United States citizens or permanent alien residents. They must hold, or complete, a Doctor of Medicine, Doctor of Philosophy or equivalent degree before activating the fellowship

Candidates with 0-3 years of postdoctoral training are eligible to apply. The Foundation will not consider candidates with tenured or tenure-track research positions or faculty appointments

Candidates must be sponsored by one of California's eight accredited medical schools. They must conduct their research under the mentorship of a principal investigator of the sponsoring institution

The principal investigator may supervise a maximum of two Giannini fellows in any one year. Each fellow must be guaranteed adequate laboratory space, equipment and supplies throughout the fellowship

Candidates should use the fellowship to broaden their postdoctoral research experience rather than work in a laboratory where they have already received extensive postdoctoral training. Candidates are required to make all arrangements for the research fellowship with a principal investigator and institution before applying to the 2011 Fellowship Program

Fellowship Stipends

The current fellowship stipend is \$42,000 in Year 1, \$43,000 in Year 2 and \$45,000 in Year 3. The Foundation reviews the competitiveness of the fellowship stipends annually and will announce the 2011 fellowship stipends after November 15, 2010

Stipend payments are made directly to the sponsoring institution. First year fellows receive a one-time award of \$2,000 to help defray relocation and personal setup expenses. No part of the annual stipend or award may be used for institutional overhead

Sources of Other Income

Fellows may accept another fellowship or traineeship as long as the award does not exceed the A P Giannini Foundation stipend each year

Candidates must state in their application the source and amount of other income they expect to receive during the fellowship. Other income will not preclude favorable consideration of an application

Timetable for Review and Selection Process

November 15, 2010

The Foundation must receive all applications and reference letters for the 2011 Fellowship Program no later than 2 p.m. (PST) Late applications will not be considered

The Scientific Advisory Committee completes the review of all applications and

EXHIBIT 3 – WEBSITE INFORMATION

selects the finalists for personal interviews

March 4, 2011

The Scientific Advisory Committee interviews and ranks the finalists in order of

priority for the 2011 fellowships

March 7, 2011

The Foundation notifies all finalists of the Scientific Advisory Committee's

decisions

Review Criteria

The Scientific Advisory Committee emphasizes the following criteria in selecting candidates to interview

- The accomplishments of the candidate as demonstrated in peer-reviewed publications and letters of recommendation
- The originality and the scientific and medical importance of the proposed research project
- The commitment of the candidate to a career in biomedical research
- The prior months of postdoctoral research experience
- The commitment of the postdoctoral mentor to the candidate's development as an independent scientist
- The accomplishments of the postdoctoral mentor in the candidate's field of inquiry

Competition for the A P Giannini Fellowship Program is intense. Less than ten percent of candidates who apply receive awards. Due to the number of applications that the Foundation receives each year, the Scientific Advisory Committee is unable to provide critiques of unsuccessful proposals.

Scientific Advisory Committee

The Scientific Advisory Committee is composed of one representative from each of the California's accredited medical schools. The current members are

John S Adams,M D
Professor of Orthopaedic Surgery, Medicine and
Molecular, Cell and Developmental Biology
Department of Orthopaedic Surgery
University of California, Los Angeles

M Elizabeth Fini,Ph D Vice Dean for Research Advancement Professor of Cell and Neurobiology Keck School of Medicine University of Southern California

Calvin Kuo, M D , Ph D Associate Professor of Medicine Division of Hematology School of Medicine Stanford University

Frederick J Meyers, M D Executive Associate Dean School of Medicine University of California, Davis Victor Nizet, M D Professor of Pediatrics and Pharmacy Chief, Division of Pharmacology and Drug Discovery School of Medicine University of California, San Diego

Lawrence C Sowers, Ph D Professor of Biochemistry and Medicine Associate Dean for Basic Science School of Medicine Loma Linda University

Oswald Steward, Ph D Professor of Neurobiology and Behavior Director, Reeve-Irvine Research Center School of Medicine University of California at Irvine

Bruce U Wintroub, M D Vice Dean, Professor and Chairman Department of Dermatology School of Medicine University of California, San Francisco

Application Availability

Available online at www.apgianninifoundation.org For further information about the 2011 Fellowship Program, please call or e-mail Ken and John Blum, Administrative Directors, at (415) 981-2966 or info@apgianninifoundation.org



P. Giannini Foundation

Fellowships for Medical Research in California



Home How to apply FAQ

Fellows

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Contact

How to Apply - Application Procedures

Applicants must use the 2011 Application to apply for the A P Giannini Medical Research Fellowship The application form is available online. Click here to download a Microsoft Word formatted copy of the application, or click here to download a PDF formatted copy of the application

Click here to download these instructions in Microsoft Word format. Candidates should work closely with their prospective supervisor and grants officer to prepare the application in advance of the deadline to avoid errors and omissions

The Foundation must receive all components of the application for the 2011 Fellowship Program no later than 2 p.m. (PST) on Monday, November 15, 2010. The Foundation will not consider late applications nor accept applications submitted by email or fax.

Letters of Reference

The Foundation requires three Letters of Reference from professors, supervisors or collaborators who are familiar with the candidate's work during the past three years. The candidate's prospective supervisor cannot be one of the three references

One of the three references for a candidate holding a Ph D degree must be the doctoral thesis advisor Candidates with an M D degree should ask for a letter from their Chief Resident or someone equivalent

Referees should comment on the cardidate's scientific background and training, achievements and ability to contribute to the field of research Referees may send their letters directly to the A P Giannini Foundation on a PDF file

Application Items (PLEASE DO NOT STAPLE ANY DOCUMENTS)

The completed application includes one copy of the following documents

The 2011 Application Form.

Candidates must use the 2011 Application Form to apply to the 2011 Fellowship Program

Curriculum Vitae and Bibliography of Publications.

Please do not send copies of published articles, colored photographs or other visuals

Non-technical Statement (Not to exceed 200 words).

Title and brief description of the proposed research for non-scientific audience

Significance of the Proposed Research (Not to exceed one page).

escribe the practical application of the research beyond the laboratory and the potential to help advance the translation of basic biomedical sciences into new treatments, preventions and cures for human diseases and contribute to the alleviation of human suffering

Technical Statement of the Proposed Research (Not to exceed five pages, excluding bibliography).

Outline the significance of the research problem, the hypotheses, methodology, expected results and the dates when the research will begin and be completed

Curriculum Vita of Principal Investigator (Not to exceed two pages) and a list of public and private of research grants and institutional funding.

Letter of Endorsement from the Principal Investigator.

Prospective mentors should comment on the significance of the candidate's proposed research and research potential, They should state their willingness to accept and supervise the candidate if awarded a fellowship, guarantee the fellow adequate laboratory space, equipment and supplies, and reimburse an out-of-state candidate for travel expenses to California for an interview

EXHIBIT 3 – WEBSITE INFORMATION



A.P. Ciannini, Founder The Bank of America

A.P. Giannini Foundation Fellowships for Medical Research in California



Contacting the A. P. Giannini Foundation

A. P. Giannini Foundation 57 Post Street, Suite 510 San Francisco, CA 94104

Phone: 415-981-2966

email: info@apgianninifoundation org

- How to apply
- PAQ
- Fellows
- Directory
- Contact

A.P. GIANNINI FOUNDATION

Grant Payment and Commitments For the Year Ended December 31, 2009 EIN 94-6089512

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| PAID 2009 | PAID DUKING THE YEAR | | The Later of the Control of the Cont | | |
|---|--|--------|--|----------------|--------------------------|
| MEDICAL RESEARCH FELLOWSHIPS | | | | | |
| GRANTEE | ADDRESS | STATUS | PURPOSE | AMOUNT PAID | FOR FUTURE PAYMENT |
| Stanford University School of Medicine | 300 Pasteur Drive, Palo Alto, CA 94305 | Public | For medical research fellowship-Shalizi | 43,000 | 0 |
| Stanford University School of Medicine | 300 Pasteur Drive, Palo Alto, CA 94305 | Public | For medical research fellowship-Vlader | 41,000 | 44,000 |
| University of California, Los Angeles School of Medicine | Box 951722, Los Angeles, CA 90095 | Public | For medical research fellowship-Honarpour | 43,000 | 0 |
| University of California, Los Angeles School of Medicine | | Public | For medical research fellowship-Konopka | 43,000 | 0 |
| School of Medicine University of California, Los Angeles School of Medicine | 951722, Angeles, CA | Public | For medical research fellowship-Froehler | 43,000 | 42,000 |
| University of California, Los Angeles School of Medicine | 951722, Angeles, CA | Public | For medical research fellowship-Bill | 43,000 | 86,000 |
| University of California, Los Angeles | Box 951722, 1 os Angeles CA 90095 | Public | For medical research fellowship-Morales | 43,000 | 86,000 |
| University of California, San Diego | 9500 Gilman Drive, | Public | For medical research fellowship-Kordasiewicz | 43,000 | 0 |
| School of Medicine University of California, San Diego | 9500 Gilman Drive, | Public | For medical research fellowship-Timmer | 41,000 | 44,000 |
| School of Medicine University of California, San Diego | 9500 Gilman Drive, | Public | For medical research fellowship-Bahmanyar | 43,000 | 86,000 |
| School of Medicine University of Southern California Keck | 3500 S Figueroa St , Ste. 102 | Public | For medical research fellowship-Mishra | 43,000 | 86,000 |
| University of California, San Francisco | 513 Parmassus Avenue, | Public | For medical research fellowship-Hebbeler | 41,000 | 0 |
| University of California, San Francisco | 513 Parnassus Avenue, | Public | For medical research fellowship-Chan | 43,000 | 0 |
| School of Medicine University of California, San Francisco | | Public | For medical research fellowship-Hnasko | 43,000 | 0 |
| University of California, San Francisco School of Medicine | | Public | For medical research fellowship-Flenniken | 41,000 | 44,000 |
| University of California, San Francisco School of Medicine | | Public | For medical research fellowship-Roan | 41,000 | 44,000 |
| School of Medicine, San Francisco School of Medicine | | Public | For medical research fellowship-Publicover | 42,000 | 85,000 |
| University of California, San Francisco | 513 Parnassus Avenue, San Francisco CA 94143 | Public | For medical research fellowship-Cheng | 43,000 | 86,000 |
| University of California, San Francisco School of Medicine | 513 Parnassus Avenue, San Francisco, CA 94143 | Public | For medical research fellowship-Ku | 43,000 | 86,000 |
| | | | | \$806,000 | \$819,000 |
| Iotal Fellowship Awards | | | | | |
| | | | | | == |

EXHIBIT 4 – GRANT LIST

A.P. GIANNINI FOUNDATION Grant Payment and Commitments For the Year Ended December 31, 2009 EIN 94-6089512

| | PAID DI | PAID DURING THE YEAR | IE YEAR | | |
|--|---|----------------------|---|----------------|--------------------------|
| DISCRETIONARY GRANTS | | | | | |
| GRANTEE | ADDRESS | STATUS | PURPOSE | AMOUNT PAID | FOR FUTURE PAYMENT |
| A P Giannini Middle School PTA | 3151 Ortega Street, San Francisco, CA 94122 | Public | For student award program and production of student-teacher binders | 7,000 | 0 |
| Geffen School of Medicine at UCLA | 10920 Wilshire Blvd, Ste 1400 Los Angeles, CA 90024 | Public | For support of the Department of Neurobiology Graduate Program | 15,000 | 0 |
| Federal Hemophila Treatment Centers - Region IX @ UCLA Division of Pediatric Hemarology(Ducology | 10833 Le Conte Avenue, Room A2-410 MDCC, Los Angeles CA 90095 | Public | For advanced practice seminar for health care Public professionals providing services to people with hemophilia | 20,000 | 0 |
| Total Discretionary Grants | 6 | | | \$42,000 | 0 |
| | | | | \$848.000 | \$819,000 |
| Total Fellowship Awards & Grants | | | | 3040,000 | 9 |

Form **8868** (Rev. April 2009) Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

File a separate application for each return.

| | |
|---|---|
| If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this f | orm) |
| Oo not complete Part II unless you have already been granted an automatic 3-month extension on a previously file | |
| Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed). | |
| a corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and comp | olete |
| Part I only | ▶ □ |
| All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an o file income tax returns | extension of time |
| Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension toted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronic not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or contour must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing www.irs.gov/efile and click on e-file for Charities & Nonprofits | ally if (1) you want the additional solidated Form 990-T Instead, |
| ype or Name of Exempt Organization | Employer identification number |
| A. P. GIANNINI FOUNDATION | 94-6089512 |
| lie by the ue date for Number, street, and room or suite no. If a P.O. box, see instructions | |
| ling your sturn See Street, No. 510 City, town or post office, state, and ZIP code. For a foreign address, see instructions. | |
| SAN FRANCISCO, CA 94104 | |
| Check type of return to be filed (file a separate application for each return): | |
| | |
| Form 990 Form 990-T (corporation) Form 472 Form 990-BL Form 990-T (sec. 401(a) or 408(a) trust) Form 522 | |
| Form 990-BL Form 990-T (sec 401(a) or 408(a) trust) Form 522 Form 990-EZ Form 990-T (trust other than above) Form 606 | |
| X Form 990-PF | |
| | |
| KRAMER, BLUM & ASSOCIATES, INC. | |
| The books are in the care of > 57 POST STREET, SUITE 510 - SAN FRANCISO | CO, CA 94104 |
| Telephone No ► <u>415-981-2966</u> FAX No ► | |
| If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this | s is for the whole group, shock the |
| ox ► If it is for part of the group, check this box ► I and attach a list with the names and EINs of all r | - · |
| and attach a list with the harnes and clies of all the solutions of all | |
| 1 I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time until | |
| AUGUST 15, 2010 , to file the exempt organization return for the organization named at | pove The extension |
| is for the organization's return for | |
| ► X calendar year 2009 or | |
| tax year beginning, and ending | |
| 2 If this tax year is for less than 12 months, check reason Initial return Final return | Change in accounting period |
| 3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any | |
| nonrefundable credits. See instructions | 3a \$ 4,156. |
| b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated | 0.100 |
| tax payments made Include any prior year overpayment allowed as a credit | 3b \$ 9,123. |
| c Balance Due. Subtract line 3b from line 3a Include your payment with this form, or, if required, | |
| deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions | 3c \$ 0. |
| Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8 | |
| | |
| .HA For Privacy Act and Paperwork Reduction Act Notice, see Instructions. | Form 8868 (Rev. 4-2009) |

| <u>Form</u> | 8868 (Rev. 4-2009) | | | | Page 2 |
|---|--|-------------|-----------------------|-----------------|---------------------------|
| • H | you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this b | ЭX | | > | <u> </u> |
| | e. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed | | 8868. | | |
| | you are filing for an Automatic 3-Month Extension, complete only Part I (on page 1). | | | | |
| | rt II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no c | opies r | needed). | | |
| Туре | Name of Exempt Organization | Emp | loyer iden | tificatio | n number |
| print | M. P. GIANNINI FOUNDATION | 9 | 4-608 | 9512 | |
| File by extend due da filing t | ate for 57 POST STREET. NO. 510 | For IF | RS use onl | y | |
| return | See City, town or post office, state, and ZIP code. For a foreign address, see instructions. | | | | |
| Che | ck type of return to be filed (File a separate application for each return) Form 990 Form 990-EZ Form 990-T (sec. 401(a) or 408(a) trust) Form 4720 Form 990-BL Form 990-PF Form 990-T (trust other than above) | == ' | orm 5227 orm 6069 | | Form 8870 |
| STO | Pl Do not complete Part II if you were not already granted an automatic 3-month extension on a previou | ısly file | d Form 8 | 368. | |
| Te ● If | the books are in the care of ▶ 57 POST STREET, SUITE 510 - SAN FRANCISC elephone No. ▶ 415-981-2966 FAX No ▶ the organization does not have an office or place of business in the United States, check this box this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If it is for part of the group, check this box ▶ and attach a list with the names and EINs of all I request an additional 3-month extension of time until NOVEMBER 15, 2010. For calendar year 2009, or other tax year beginning, and ending, and ending fithis tax year is for less than 12 months, check reason: Initial return Final return State in detail why you need the extension ADDITIONAL TIME IS REQUIRED TO PREPARE A COMPLETE AND | nemb | the whole ers the ext | group, | s for. ting period |
| | ADDITIONAL TIME IS REQUIRED TO PREPARE A COMPLETE AND | ACC | OKAIE | KEI | OKN. |
| 8a b | If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated | 8a | \$ | | 4,124. |
| | tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868. | 8b | \$ | | 9,123. |
| С | Balance Due. Subtract line 8b from line 8a Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions | . 8c | | | 0. |
| | Signature and Verification | <u>j ac</u> | 1 9 | | <u> </u> |
| Unde it is tr | r penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the correct, and complete, and that I am additional to prepare this form. | e best o | of my knowk | edge and | belief, |
| Signa | iture Hatrie Kury Title CPA | Date | × 8/ | 1/0// | 0 |
| | \mathcal{D} | | For | m 8868 m | (Rev. 4-2009) |