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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

	it of the Treasury	No	te The foundat			o use a copy of th			rtıng requ	ırements	2009
	ndar year 2009, o			APR		2009	, and e		MAR		
	call that apply		nitial return			Initial return of a	-	. —	Alassa !	Final return	1
Se	THE PA	undation AT & I FABLE street (or P O N . W n, state, and S , CA tion nonexemp	Dox number if mail ILLOW A d ZIP code 93619 X Section 50 t charitable trus	RIC	empt po	rivate foundation ixable private foun	dation	Room/suite	77 B Telept (5 C If exem D 1 For 2. Fore	none number 59) 299—0 ption applications in eigh organizations much here and attach c	pending, check here s, check here seeting the 85% test, proputation attus was terminated
•	Part II, col (c),				her (spe		h hagis l		I .		60-month termination
▶\$ Part	Analysis of Re (The total of amornecessarily equal	venue and	Expenses ons (b), (c), and (d)		(a	must be on cash) Revenue and penses per books	(b) Net i	nvestment come		section 507(b)(1 Adjusted net income	(a) Disbursements for chantable purposes (cash basis only)
<u></u>	Contributions, o					47,000	•			N/A	(Cash Dasis Only)
2 3 4	. —	the foundation is and tempora	is not required to attack ary	n Sch B		4	•	4.			STATEMENT 1
6:	Gross rents Net rental income Net gain or (loss) fi	· · —	-11,1								STATEMENT 2
enue	Gross sales price assets on line 6a	for all						0.			11 -1,, , , ,
8 8 8	Capital gain net in Net short-term Income modific	capital gain	-	A II	Ţ.	7600	\	· · · · · · · · · · · · · · · · · · ·	2UU		
	Gross sales less n and allowances D Less Cost of good	ds sold			3 [1	{	NM	已公出	
11	Gross profit or Other income Total - Add line	s)1 through	111			47,004		4.			
13	Compensation of Other employee	officers, girec	ctors, trustees, etc			0	•	0.			0.
15 16 16	al Cegal fees h. Accounting fee	= د آلایا ی	Penefits STMT	1 3	!	2,640		0.			0.
ive Exp	Other profession	nattees	ga-								
Operating and Administrative Expenses 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Taxes Depreciation an Occupancy	ıd depletior	STM1	. 4		7,920 5,341		7,885.		-	0.
PH 21 22	Travel, confere		neetings								
rating 54	Other expenses Total operating		STM1	5		6,290		3,290			0.
25	-	gifts, grants	s paid			22,191 26,905		11,175	•		26,905.
	Add lines 24 ar	d 25				49,096	•	11,175	•		26,905.
	Subtract line 26 a Excess of revenue b Net investment	e over expens	ses and disbursem			-2,092	•	0	•		
	c Adjusted net in	1COME (if ne	gative, enter -0-)		Act No	tice, see the instr	ructions.			N/A	Form 990-PF (2009)

Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	year
column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
1 Cash - non-interest-bearing			
2 Savings and temporary cash investments			
3 Accounts receivable ►			
Less allowance for doubtful accounts			
4 Pledges receivable ►			
Less allowance for doubtful accounts			
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		_	
8 Inventories for sale or use			
8 Inventories for sale or use 9 Prepaid expenses and deferred charges			
10a Investments - U.S. and state government obligations			
b Investments - corporate stock			
c Investments - corporate bonds			
11 Investments - land, buildings, and equipment basis 358,352.			
Less accumulated depreciation STMT 6 ▶ 38,885.	324,808.	319,467.	610,000.
12 Investments - mortgage loans			
13 Investments - other			
14 Land, buildings, and equipment basis ►			
Less accumulated depreciation			
15 Other assets (describe ►)			
16 Total assets (to be completed by all filers)	324,808.	319,467.	610,000.
17 Accounts payable and accrued expenses			
18 Grants payable			
g 19 Deferred revenue			
20 Loans from officers, directors, trustees, and other disqualified persons			
20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable			
22 Other liabilities (describe > BANK OVERDRAFT)	25,950.	22,701.	
23 Total liabilities (add lines 17 through 22)	25,950.	22,701.	
Foundations that follow SFAS 117, check here			
and complete lines 24 through 26 and lines 30 and 31.			
24 Unrestricted			
25 Temporarily restricted			
26 Permanently restricted			
Foundations that do not follow SFAS 117, check here		ļ	
and complete lines 27 through 31			
27 Capital stock, trust principal, or current funds	290,000.	290,000.	
28 Paid-in or capital surplus, or land, bldg, and equipment fund	0.	0.	
24 Officestricted 25 Temporarily restricted 26 Permanently restricted Foundations that do not follow SFAS 117, check here and complete lines 27 through 31 27 Capital stock, trust principal, or current funds 28 Paid-in or capital surplus, or land, bldg, and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds Total net assets or fund balances	8,858.	6,766.	
30 Total net assets or fund balances	298,858.	296,766.	
	224 000	210 457	
31 Total liabilities and net assets/fund balances	324,808.	319,467.	<u></u>
Part III Analysis of Changes in Net Assets or Fund B	alances		
Total net assets or fund balances at beginning of year - Part II, column (a), line	30		
(must agree with end-of-year figure reported on prior year's return)		1	298,858.
Penter amount from Part I, line 27a		2	-2,092.
Other increases not included in line 2 (itemize)		3	0.
Add lines 1, 2, and 3		4	296,766.
Decreases not included in line 2 (itemize)		5	0.
Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (h) line 30	6	296,766.

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	RITABLE TRUS			··	77-042	2594 Page 3
Part IV Capital Gains	and Losses for Ta	x on Investment	Income			
	ribe the kind(s) of property trehouse, or common stocl			(b) How acquired (P - Purchase D - Donation (c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a						
b NO	NE					
C						
d						
e	<u></u>					
(e) Gross sales price	(f) Depreciation allow (or allowable)		st or other basis expense of sale		(h) Gain or (los: (e) plus (f) minus	
a		-				
b						
G						· · · · · · · · · · · · · · · · · · ·
d			-			· · · · · · · · · · · · · · · · · · ·
						
Complete only for assets shower	on asin in column (b) and o	wand by the foundation	on 12/31/60		Councy (Col. /h) gav	
Complete only for assets shown					Gains (Col. (h) gaii k), but not less thi	
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col (i) col (j), if any		Losses (from col	(h))
<u>a</u>						···-
b						
C						
<u>d</u>						
e	<u></u>					
Capital gain net income or (net ca	apital loss) { If gain, If (loss)	also enter in Part I, line), enter -0- in Part I, line	7 7	} 2		
Net short-term capital gain or (los	`					
If gain, also enter in Part I, line 8,	•	222(3) and (0))		
If (loss), enter -0- in Part I, line 8	00:01:111 (0)			ß 3		
	Inder Section 4940	(e) for Reduced	Tax on Net	Investment Inco	me	
For optional use by domestic private					<u></u> -	
or optional accordance of the control of the contro				,		
f section 4940(d)(2) applies, leave t	his part blank					
Vas the foundation liable for the sec	tion 1012 tay on the distrib	uitable amount of any ve	oar in the hace no	nod2		Yes X No
		,,	•	1100		162 [24] 140
"Yes," the foundation does not qua Enter the appropriate amount in				100		
(a)	each column for each year		I IIIaking any entr		-	(d)
Base periód years	Advested aug	(b) lifying distributions	Not value of n	(c) oncharitable-use assets	Distr	ibiltión ratio
Calendar year (or tax year beginni	ng in) Aujusteu qua	· · ·	Net value of the			ivided by col (c))
2008		26,638.		538,100		.04950
2007		26,666.		532,754		.05005
2006		26,823.		533,312		.05029
2005		26,439.		541,040		.04886
2004		21,607.		533,361	•	.04051
Total of line 1, column (d)					2	.23923
Average distribution ratio for the	5-year base period - divide	the total on line 2 by 5	or by the numbe	r of years		···
the foundation has been in existe	•	the total on line 2 by o,	, 0, 0, (,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	. 0. ,00.0	3	.04784
the reduced has been in existe	nee ii iess than s years				•	
	his	D. + V I 5				600,850
Enter the net value of noncharital	Die-use assets for 2009 fro	m Part X, line 5			4	000,000
						20 740
Multiply line 4 by line 3				•	5	28,748
						_
Enter 1% of net investment incor	ne (1% of Part I, line 27b)				6	0
Add lines 5 and 6					7	28,748
Enter qualifying distributions from	n Part XII, line 4				8	26,905
		art VI lina the sad same	ninta that nart	na a 1% tay rata		
If line 8 is equal to or greater that See the Part VI instructions	i inte 7, citeck (ite box in P	art vi, une ib, and comp	piete tilat pärt USI	ing a 170 tax late		
COO CHO I GIT TI MICHIGATIONS						Farm 000 DE (2000

By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law

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

b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)

year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," complete Part XIV

10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses

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Х

Х

Х

6

7

8b

10

CA

remain in the governing instrument?

If "Yes," complete Part II, col (c), and Part XV

7 Did the foundation have at least \$5,000 in assets at any time during the year?

8a Enter the states to which the foundation reports or with which it is registered (see instructions)

of each state as required by General Instruction G? If "No," attach explanation

UIII	TI = CHARITABLE TRUST	142233	14	rayes
Þ	art VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			T
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	1	1	Х
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before	<u> </u>		
	August 17, 2008?	1:	,	Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	1		
	Website address ► N/A	L_ <u>-"</u>	9	<u> </u>
14	The books are in care of ► RON ASHIDA Telephone no ► (5.5)	191 20	9-02	01
		▶9361		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	<u> </u>		
10	and enter the amount of tax-exempt interest received or accrued during the year		N/A	
p,	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required		11/21	
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		V	N.
4.			res	No
10	a During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? (2) Power resources that we will be said to see that the said the said to see that the said	i NO		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)	1		
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	No		
	(5) Transfer any income or assets to a disqualified person (or make any of either available	,		
	for the benefit or use of a disqualified person)?	No		
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	if the foundation agreed to make a grant to or to employ the official for a period after	,		
	termination of government service, if terminating within 90 days)	No		
ı	o If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	,		
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?	/A 1	b	<u></u>
	Organizations relying on a current notice regarding disaster assistance check here			
(Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			
	before the first day of the tax year beginning in 2009?	1	c	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
	a At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
•	before 2009? Let the end of tax year 2009, did the foundation have any undistributed income (lines od and de, Part XIII) for tax year(s) degining Yes X	1		
		INO		
	If "Yes," list the years			
	a Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach	}		
		/A 2	.	
	,	/A 2	0	
(If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
٠.	Dutable formation half are the control of the contr	}		
37	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time	1		
	during the year? Yes X	NO		
ı	o If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or disqualified persons after			1
	May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			
	of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,	/-		
_	·	/A <u> 3</u>	\neg	
	1 Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4	a	X
t	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	j		
	had not been removed from jeopardy before the first day of the tax year beginning in 2009?	4		X
		Earm Q	90-PF	/2000

2	Compensation of five highest-paid employees (other than those in	cluded on line 1). If none,	enter "NONE."		
	(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, othe allowances
	NONE				
_					
T	otal number of other employees paid over \$50 000		<u> </u>	•	L.,,,,

Five highest-paid independent contractors for professional services. If none, enter "NONE.	u	
(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		b (
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical inform	nation such as the	
number of organizations and other beneficiaries served, conferences convened, research 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 an	d 2	Amount
N/A		
All other program-related investments. See instructions		
otal. Add lines 1 through 3	▶ 1	0

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P	Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations, se	e 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	0.
	Average of monthly cash balances	16	0.
	Fair market value of all other assets	10	610,000.
d	Total (add lines 1a, b, and c)	1d	610,000.
	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	610,000.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	9,150.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	600,850.
6	Minimum investment return. Enter 5% of line 5	6	30,043.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part.)	id certain	
1	Minimum investment return from Part X, line 6	1	30,043.
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)		
C	Add lines 2a and 2b	20	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	0. 30,043. 0. 30,043.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	30,043.
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	30,043.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		26 005
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	26,905. 0.
þ	Program-related investments - total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
b	,	3b	25 005
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	26,905.
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	26,905.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation	qualifies for t	he section

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI,		1-11-11-11-11-11-11-11-11-11-11-11-11-1	- 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
line 7				30,043.
2 Undistributed income, if any, as of the end of 2009	· · · · · · · · · · · · · · · · · · ·		-1,,,	
a Enter amount for 2008 only			26,905.	
b Total for prior years		1 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		—, ' lo-q , lb ,
, ,		0.		
3 Excess distributions carryover, if any, to 2009				-,···-, ' ;;;;;;;, , ,, , ,, , ,, , ,, , ,, , ,, , ,
a From 2004				
b From 2005				
€ From 2006				
d From 2007				
e From 2008				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2009 from				
Part XII, line 4 \triangleright \$ 26,905.				
a Applied to 2008, but not more than line 2a			26,905.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus	<u> </u>	- 173		
(Election required - see instructions)	0.			
d Applied to 2009 distributable amount	, , , , , , , , , , , , , , , , , , , ,		, , ',	0.
e Remaining amount distributed out of corpus	0.			······································
5 Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
a 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				
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				30,043.
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				5 000 PE (2000)

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

NONE

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here \(\sum \) If the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

a The name, address, and telephone number of the person to whom applications should be addressed N/A

b The form in which applications should be submitted and information and materials they should include

N/A

c Any submission deadlines

N/A

 ${f d}$ Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors ${f N/A}$

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3 Grants and Contributions Paid During the		Payment	, 	
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
a Pad during the year FRESNO ADVENTIST ACADEMY 5397 E. OLIVE AVE. FRESNO, CA 93727	N/A	RELIGIOUS	CHARITABLE	26,905
				26,905
Total b Approved for future payment		 _	▶ 3a	20,903
a Approved for latere payment				
NONE				
		1		
Total 923611 02-02-10			▶ 3b	0 orm 990-PF (2009

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

Enter gross amounts unless otherwise indicated	Unrelated business income			ded by 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	Amount	code	Amount	TOTICION INCOME	
a			<u> </u>			
b			<u> </u>			
C						
d			<u> </u>			
e						
f						
g Fees and contracts from government agencies						
2 Membership dues and assessments						
3 Interest on savings and temporary cash					-	
investments			14	4.	Ti	
4 Dividends and interest from securities						
5 Net rental income or (loss) from real estate						
a Debt-financed property						
b Not debt-financed property			16	-11,175.		
6 Net rental income or (loss) from personal				· · · · · · · · · · · · · · · · · · ·		
property	İ					
7 Other investment income						
8 Gain or (loss) from sales of assets other						
than inventory						
9 Net income or (loss) from special events						
10 Gross profit or (loss) from sales of inventory			 			
11 Other revenue						
b			_			
			 			
·						
d	—		 			
12 Subtotal Add columns (b), (d), and (e)		0.	<u> </u>	-11,171.	0.	
13 Total Add line 12, columns (b), (d), and (e)			L		-11,171.	
(See worksheet in line 13 instructions to verify calculations)				'' <u>_</u>		
						
Part XVI-B Relationship of Activities to	o the Acc	omplishment of Ex	cemp	ot Purposes		
Line No Explain below how each activity for which incor	me is reported	ın column (e) of Part XVI-A	contri	buted importantly to the accor	nplishment of	
the foundation's exempt purposes (other than	by providing fu	inds for such purposes)				
			_			
						
						
	······					

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CHARITABLE TRUST

01111 990-FF (200	CHARLIADED	11001		11-0422374
Part XVII	Information Regarding	Transfers To and Tra	nsactions and Relations	hips With Noncharitable
	Exempt Organizations			

		Exempt Organ	120110113			
1	Did th	e organization directly or indir	rectly engage in any of the following	g with any other organization	described in section 501(c) of	Yes No
	the Co					
а	Trans					
	(1) 0	1a(1) X				
	(2) (1a(2) X			
b	Other					
	(1) S		1b(1) X			
	(2) P	1b(2) X				
	(3) F	lental of facilities, equipment,	or other assets			1b(3) X
	(4) F	leimbursement arrangements				1b(4) X
	(5) L	oans or loan guarantees				1b(5) X
	(6) P	erformance of services or me	mbership or fundraising solicitation	ns		1b(6) X
C	Shari	ng of facilities, equipment, ma	iling lists, other assets, or paid emp	ployees		1c X
d	If the	answer to any of the above is	"Yes," complete the following sche-	dule Column (b) should alwa	ays show the fair market value of the good	ls, other assets,
				ed less than fair market value	in any transaction or sharing arrangemen	it, show in
_			other assets, or services received			
a)	Line no	(b) Amount involved	(c) Name of noncnaritable	exempt organization	(d) Description of transfers, transactions,	and shanng arrangements
			N/A			
						
						
_						
						
					ļ	
					<u> </u>	
				·		
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_					 	
						
_						
		L	<u>L</u>		<u> </u>	
22		-	tly affiliated with, or related to, one	· -	ations described	
		, ,	r than section 501(c)(3)) or in sect	ion 527?		Yes X No
I) IT Ye	s," complete the following sch (a) Name of org		(b) Type of organization	(a) Description of relati	anohio
		N/A	janization	(b) Type of organization	(c) Description of relati	onsinb
		N/ A				<u> </u>
	·					
_						
						
	Under	enalties of penury, 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, correct,
			er than taxpayer or fiduciary) is based on			•
		Frances	Ricch Ti	11/3/10	A TRUSTEE	_
ē	Si	gnature of officer or trustee_	- CONTRACT	Date	Title	
9		Preparer's	V N M	Da	te Check if Pre	parer's identifying number
ğ	Paid Preparer's Use Only	signature	ns Mitun	-CPA 10	028 10 self- employed >	
n	Paid spare		GHTON DAVIDSON	ACCOUNTANCY C	CORP. EIN	
	rep Jse	if self-employed). 2520			City 2	
	۔ ہ	· · · · · · · · · · · · · · · · · · ·	NO, CA 93711	,	Phone no (55	9) 436-1200
_					1.115.110 110	Form 990-PF (2009)
						11 222 11 (2000)

Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

2009

Name of the organization
THE PAT & FRANCES RICCHIUTI
CHARITABLE TRUST

Organization type (check one).

Employer identification number
77-0422594

Filers of:	Section:
Form 990 or 990-EZ	501(c)() (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
• -	covered by the General Rule or a Special Rule . 7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions
General Rule	
X For an organization contributor. Comple	I filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one ete Parts I and II
Special Rules	
509(a)(1) and 170(b	c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections o)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2%) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1 Complete Parts I and II
aggregate contribu	c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, itions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or ruelty to children or animals. Complete Parts I, II, and III.
contributions for us If this box is check purpose. Do not co	c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, se exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000 ed, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., omplete any of the parts unless the General Rule applies to this organization because it received nonexclusively e, etc., contributions of \$5,000 or more during the year.
	nat is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF),

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).

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990, 990-EZ, or 990-PF) (2009)

Name of organization

THE PAT & FRANCES RICCHIUTI

CHARITABLE TRUST

77-0422594

Page 1 of 1 of Part I

Part I	Contributors	(see instructions)
--------	--------------	--------------------

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	FRANCES RICCHIUTI 11490 N. WILLOW AVE. CLOVIS, CA 93619	\$ 47,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II if there Is a noncash contribution.
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Oncash Occuplete Part II if there Is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
	-	\$	Person Payroli Noncash Complete Part II if there is a noncash contribution)

4562

Department of the Treasury Internal Revenue Service

Depreciation and Amortization 990-PF

(Including Information on Listed Property)

See separate instructions.

Attach to your tax return.

OMB No 1545-0172

Business or activity to which this form relates Name(s) shown on return THE PAT & FRANCES RICCHIUTI CHARITABLE TRUST FORM 990-PF PAGE 1 77-0422594 Part | Election To Expense Certain Property Under Section 179 Note If you have any listed property, complete Part V before you complete Part I 250,000. 1 Maximum amount See the instructions for a higher limit for certain businesses 2 2 Total cost of section 179 property placed in service (see instructions) 800,000. 3 Threshold cost of section 179 property before reduction in limitation 4 Reduction in limitation. Subtract line 3 from line 2 If zero or less, enter -0-5 Dollar limitation for tax year Subtract line 4 from line 1. If zero or less, enter -0-. If marned filing separately, see instructions (a) Description of property (b) Cost (business use only) (c) Elected cost 7 7 Listed property. Enter the amount from line 29 8 8 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 9 Tentative deduction Enter the smaller of line 5 or line 8 10 10 Carryover of disallowed deduction from line 13 of your 2008 Form 4562 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 11 12 Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11 12 13 Carryover of disallowed deduction to 2010 Add lines 9 and 10, less line 12 Note: Do not use Part II or Part III below for listed property. Instead, use Part V. Special Depreciation Allowance and Other Depreciation (Do not include listed property) 14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year 14 15 15 Property subject to section 168(f)(1) election ,923 16 Other depreciation (including ACRS) 16 Part III MACRS Depreciation (Do not include listed property.) (See instructions) Section A 3,418. 17 17 MACRS deductions for assets placed in service in tax years beginning before 2009 18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B - Assets Placed in Service During 2009 Tax Year Using the General Depreciation System (b) Month and year placed in service (c) Basis for depreciation (business/investment use only - see instructions) (d) Recovery period (a) Depreciation deduction (a) Classification of property 19a 3-year property b 5-year property 7-year property C 10-year property d 15-year property e 20-year property S/L 25 yrs 9 25-year property MM S/L 27.5 yrs h Residential rental property MM S/L 27 5 yrs MM S/L 39 vrs

C	40-year		 TO yis.	IAIIAI	5	
С	40-year	/	 40 yrs.	MM	S/L	
	40	,	40	NANA.	C/I	
b	12-year		12 yrs.		S/L	
20a	Class life				S/L	

Section C - Assets Placed in Service During 2009 Tax Year Using the Alternative Depreciation System

Nonresidential real property

21 Listed property Enter amount from line 28 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21.

5,341. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instr 23 For assets shown above and placed in service during the current year, enter the

portion of the basis attributable to section 263A costs LHA For Paperwork Reduction Act Notice, see separate instructions.

Form 4562 (2009)

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MM

S/L

Form 4562 (2009)		PAT & 1 RITABLE			RICC	нтот	1				77-0	0422	594 I	Page 2
Part V Listed Proper					les, cell	ular telec	hone	s. certain o	compute	rs. and p			_	
recreation, or a	musement.)													
Note: For any through (c) of S	vehicle for wi Section A. all	hich you are us of Section B. a	ing the s and Seci	standard tion C if	l mileag applica	e rate or ble	dedu	cting lease	expense	e, compl	eteonly	24a, 24	b, colum	ns (a)
		on and Other I					nstruc	tions for li	mits for p	passenge	er auton	nobiles)		
24a Do you have evidence to s	support the bu	siness/investmer	nt use cla	ımed?	Y	es	No	24b If "Y	es," is th	e eviden	ce writte	en?	Yes [No
(a)	(b)	(c)		(d)		(e)		(f)	(g)	(1	h)		(i)
Type of property (list vehicles first)	Date placed in service	Business/ investment use percentag	l off	Cost or ner basis		is for depre siness/inver use only	stment	Recovery period		hod/ ention		ciation iction	Elec sectio co	ก 179
25 Special depreciation alle	owance for q	ualified listed p	property	placed	ın servi	ce during	the ta	ax year an	d					
used more than 50% in	a qualified b	usiness use								25				
26 Property used more that	ın 50% ın a c	qualified busine	ss use:											
		%	6											
		%	ó											
		%	6						<u> </u>					
27 Property used 50% or I	ess in a quali	ified business i	use.										,	
		%	6			, 			S/L-					
		9/	6					<u> </u>	S/L·					
	<u> </u>	9/	6					<u> </u>	S/L·	_,				
8 Add amounts in column	(h), lines 25	through 27 Er	nter here	and on	line 21	, page 1				28				
29 Add amounts in column	ı (ı), lıne 26 E	nter here and	on line 7	, page	1							29	<u> </u>	
		S	ection E	3 - Infor	mation	on Use	of Vel	hicles						
Complete this section for ve	ehicles used	by a sole propi	rietor, pa	artner, o	r other	more th	an 5%	6 owner," o	or related	person				
If you provided vehicles to	your employe	ees, first answe	er the qu	estions	ın Secti	on C to	see If	you meet a	an excep	otion to c	ompleti	ng this s	section fo	or
hose vehicles.							r		T				 	
			(a	a)	(b)	Ì	(c)	(d)	(6	e)	(f	
30 Total business/investment	miles driven d	luring the	Veh	ırcle	Ve	hicle	<u> </u>	/ehicle	Vet	iicle	Veh	ncle	Veh	ıcle
year (do not include com	muting miles)						<u> </u>			_				
31 Total commuting miles	driven during	the year					ļ						1	
32 Total other personal (no	oncommuting	g) miles												
driven							ļ							
33 Total miles driven durin	g the year.													
Add lines 30 through 32	2						<u> </u>		ļ	τ			ļ	
34 Was the vehicle availab	ole for persor	nal use	Yes	No	Yes	No_	Yes	s No	Yes	No	Yes	No	Yes	No
during off-duty hours?					ļ	ļ	<u> </u>		_	ļ		ļ		·
35 Was the vehicle used p		more]										
than 5% owner or relat	ed person?			ļ	 	ļ	 	_	 	ļ	ļ	<u> </u>	ļ	
36 Is another vehicle available	able for perso	onal		1	1			Í	1		ļ	1		
use?			<u> </u>	l	<u></u>	<u> </u>	J		1	<u> </u>	<u> </u>	L	<u> </u>	
		- Questions f												
Answer these questions to	determine if	you meet an ex	xception	to com	pleting	Section	B for v	vehicles us	sed by e	mployee	s who a	re not n	nore than	15%
owners or related persons														T
37 Do you maintain a writt	en policy sta	tement that pr	ohibits a	ali perso	nal use	of vehicl	es, inc	cluding co	mmuting	, by you	r		Yes	No
employees?													-	┨──
38 Do you maintain a writt										our				
employees? See the in:					micers,	directors	, or 19	% or more	owners					
39 Do you treat all use of	-	• •											<u> </u>	
40 Do you provide more th		· ·			intorma	ition from	n your	employee	s about				Ì	
the use of the vehicles,						_4	- 0						<u> </u>	+
41 Do you meet the requir														
Note: If your answer to	37, 38, 39, 4	10, or 41 is "Ye:	s," do no	ot comp	lete Se	ction B to	or tne	coverea v	enicies	-				_1
Part VI Amortization (a)			(b)	T	(c)			(d)	—т	(e)			(f)	
Description (of costs		amortization		Amortiza			Code	1	Amortiza		4	mortization	
40. Amortination of acata ti	hat bootes d		begins D tax you	l	amour		!	section		period or per	centage		or this year	
42 Amortization of costs to	nat begins di	uring your 2009	a lax yea	ar.							1			
				 			_				+			
42 American of acces 4	hat basss 5	ofore ver- 2000) tov	1					L		43			
43 Amortization of costs to					0 1000						44			
44 Total. Add amounts in	column (j). S	ee ine instruct	ions for	wnere t	o repon						_ _			

916252 11-04-09

2009 DEPRECIATION AND AMORTIZATION REPORT FORM 990-PF PAGE 1

990-PF

rt Year ctron	0.	750.	738.	125.	1,805.	341.	
Current Year Deduction	1,				1,	5,	
Current Sec 179						0	
Accumulated Depreciation	24,999.	1,875.	1,845.	313.	4,512,	33,544.	
Basis For Depreciation	215,000.	15,000.	14,756.	2,500.	36,096.	358,352.	
Reduction in Basis		-				0	
Bus % Excl							
Unadjusted Cost Or Basis	215,000.	15,000.	14,756.	2,500.	36,096.	358,352.	
No No	016	017	017	017	017		
Life	39.00	20.00	20.00	20.00	20.00		
Method	L						
Date Acquired	040595L 040595SL	040106SL	040106SL	040106SL	ANGE040106SL		
Description	1LAND - 46.77 ACRES 0 BUILDING ZIMPROVEMENTS	3LAZER LEVELING 0	4RIPPING COSTS 0		FEACH TREES-20.6 FEATER, 18.30 ANGEO	14 F F F F F F F F F F F F F F F F F F F	
Asset		··,	7.	α,	v		

(D) - Asset disposed

928102 06-24-09

					
FORM 990-PF INTEREST ON SAVI	INGS AND TEM	PORARY CASH I	NVESTMENTS	STATEMENT	1
SOURCE				AMOUNT	
CENTRAL VALLEY COMMUNITY BANK	ζ				4.
TOTAL TO FORM 990-PF, PART I,	LINE 3, CO	LUMN A			4.
FORM 990-PF	RENTAL EXP	ENSES		STATEMENT	2
DESCRIPTION		CTIVITY NUMBER	AMOUNT	TOTAL	
PROPERTY TAXES INSURANCE	- SUBTOTAL -	1	7,885. 3,290.	11,1	75
TOTAL RENTAL EXPENSES	JODIOTAL -	1		11,1	•
NET RENTAL INCOME TO FORM 990)~PF, PART I	, LINE 5B		-11,1	
FORM 990-PF	ACCOUNTI	NG FEES		STATEMENT	3
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOM		
ACCOUNTING	2,640.	0.			0.
TO FORM 990-PF, PG 1, LN 16B	2,640.	0.			0.
FORM 990-PF	TAX	ES		STATEMENT	4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOM		
STATE TAXES ATTORNEY GENERAL PROPERTY TAXES	10. 25. 7,885.	0.			0. 0. 0.
TO FORM 990-PF, PG 1, LN 18	7,920.	7,885.			0.
					

FORM 990-PF	OTHER E	XPENSES		STATEMENT 5		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST MENT INCOM		(D) CHARITABLE PURPOSES		
MISCELLANEOUS INSURANCE	3,000. 3,290.		0.	0.		
TO FORM 990-PF, PG 1, LN 23	6,290.	3,29	0.	0.		
FORM 990-PF DEPRECIATION (OF ASSETS HE	LD FOR INVE	STMENT S	STATEMENT (
FORM 990-PF DEPRECIATION O	co	ST OR	ACCUMULATED DEPRECIATION	STATEMENT 6		
DESCRIPTION	co	ST OR R BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE		
	co	ST OR R BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE 215,000		
DESCRIPTION LAND - 46.77 ACRES	co	ST OR R BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE 215,000 48,078		
DESCRIPTION LAND - 46.77 ACRES BUILDING IMPROVEMENTS	co	215,000. 75,000.	ACCUMULATED DEPRECIATION 0. 26,922.	BOOK VALUE 215,000 48,078 12,375		
DESCRIPTION LAND - 46.77 ACRES BUILDING IMPROVEMENTS LAZER LEVELING RIPPING COSTS SURVEYING	co	215,000. 75,000.	ACCUMULATED DEPRECIATION 0. 26,922. 2,625.	215,000 48,078 12,375 12,173		
DESCRIPTION LAND - 46.77 ACRES BUILDING IMPROVEMENTS LAZER LEVELING RIPPING COSTS	co	215,000. 75,000. 15,000. 14,756.	ACCUMULATED DEPRECIATION 0. 26,922. 2,625. 2,583.			

FORM 990-PF PART VIII - LIST TRUSTEES AND	OF OFFICERS, DEFOUNDATION MANA		STATI	EMENT 7
NAME AND ADDRESS	TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
FRANCES RICCHIUTI	CO-TRUSTEE			
11490 N. WILLOW AVE., CLOVIS CA 93619	0.00	0.	0.	0.
PAT V. RICCHIUTI - SUCCESSOR	CO-TRUSTEE (EF	FECTIVE 7-2	7-08)	
11490 N. WILLOW AVE., CLOVIS CA 93619	0.00	0.	0.	0.
LORENE RAU - SUCCESSOR	CO-TRUSTEE (EF	FECTIVE 7-2	7-08)	
11490 N. WILLOW AVE., CLOVIS CA 93619	0.00	0.	0.	0.
TERI ANN RICCHIUTI - SUCCESSOR	CO-TRUSTEE (EF	FFECTIVE 7-2	7-08)	
11490 N. WILLOW AVE., CLOVIS CA 93619	0.00	0.	0.	0.
MARI ANN RICCHIUTI - SUCCESSOR	CO-TRUSTEE (EF	FFECTIVE 7-2	7-08)	
11490 N. WILLOW AVE., CLOVIS CA 93619	0.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6	, PART VIII	0.	0.	0.

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

Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return.

OMB No 1545-1709

	are filing for an Automatic 3-Month Extension, complete only Part I and check this box		► X
	are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this Complete Part II unless you have already been granted an automatic 3-month extension on a previously fi		m 8868
Part 1			
	- ution required to file Form 990-T and requesting an automatic 6-month extension - check this box and com	plete	
Part I only		•	▶ □
	corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request ar ome tax returns	exten	sion of time
noted bei (not autor you must	c Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronication of (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consubmit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic file pov/efile and click on e-file for Charities & Nonprofits	cally if nsolida	(1) you want the additional ated Form 990-T. Instead,
Type or	Name of Exempt Organization	Empl	oyer identification number
print	THE PAT & FRANCES RICCHIUTI	,	7 0433504
File by the	CHARITABLE TRUST		7-0422594
due date for filing your	Number, street, and room or suite no. If a P.O box, see instructions 11490 N. WILLOW AVENUE		
retum See instructions	City, town or post office, state, and ZIP code. For a foreign address, see instructions. CLOVIS, CA 93619		
Check ty	pe of return to be filed (file a separate application for each return):		
For	m 990 Form 990-T (corporation) Form 4	720	
===	m 990-BL Form 990-T (sec. 401(a) or 408(a) trust) Form 55		
☐ For	m 990-EZ Form 990-T (trust other than above) Form 60	069	
	m 990-PF	370	
Teleph If the c	RON ASHIDA books are in the care of ▶ 11490 N WILLOW AVENUE, CLOVIS CA - 936 bone No ▶ (559) 299-0201 FAX No. ▶ borganization does not have an office or place of business in the United States, check this box s for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If the If it is for part of the group, check this box ▶ and attach a list with the names and EINs of all	is is fo	
	quest an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time un $NOVEMBER\ 15$, 2010 , to file the exempt organization return for the organization named for the organization's return for:		The extension
▶ [▶ [calendar year or value tax year beginning APR 1, 2009 and ending MAR 31, 2010		_
2 If th	nis tax year is for less than 12 months, check reason Initial return Final return		Change in accounting period
	us application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any		
	refundable credits. See instructions.	3a	\$ 0.
	nis application is for Form 990-PF or 990-T, enter any refundable credits and estimated	3ь	s 0
	payments made Include any prior year overpayment allowed as a credit ance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required,	30	\$ 0.
	nosit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System).		
•	e Instructions	3c	\$ 0.
		1	

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions

LHA For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

Form 8868 (Rev 4-2009)