

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



2010	
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990-PF

Return of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust

OMB No 1545-0052 മരവ

Department of the Treasury Internal Revenue Service Note: The foundation may t					n may be	Treated as a Private Foundation able to use a copy of this return to satisfy state reporting requirements						UY			
_					year begini								30 ,20 10		
			nat apply:	T	Initial return		Initial return of a former public charity Final return								
					Amended r	eturn	_	· —	s change		–	me change			
_	•		Name of fo	undati				1 1.,			_	A Employer identif	cation numb	er	
	lea th	e IRS									- [,		
•	lab		FT.OYD F	TAMT	LY FOUNDA	иттом						94-3106119			
	Otherwise, Number and street (or P O box number in					il le not	delivered to street s	addrase)	Room/suit						
	pri		Trumbur am	IG 50 61	St (SI / C DOX)	idilibor ii ilid	11 10 HOL	delivered to supply	iddiess)	11001113011	" l'	B Telephone number (see page 10 of the instructions)			
	or ty	/pe.	150 TA	CAN	DRA WAY							165	0) 851-	-0150	
		ecific	<u> </u>		e, and ZIP cod						٠,	If exemption applica		-0130	
. lt	struc	tions.	City or town	11, Stati	e, and zir cod						- 1	pending, check here		··· [H	
			DODEOT Z	1 1771 ·	TIEV CA	04020					ין	7. Förelgn organizat			
_	<u> </u>	al. 4 a			LLEY, CA		(2)					 Foreign organization 85% test, check to 		` . —	
- H 1-	_	• •	•			· · · · ·		empt private for				computation		-,-, -▶- <u> </u> -	
Ť					npt chantable t			ther taxable priv			 ∤ı	E If private foundation	status was term:	inated _	
1			t value of a					nethod: X Ca	ash Acc	rual		under section 507(b)	(1)(A), check he	ла. ▶ 📖	
			m Part II, d					ecify)			1	F If the foundation is in		- I I	
	_	> \$			154.	<u> </u>	olumn	(d) must be on	Cash Dasis.)	<u> </u>		under section 507(b	1 1 1		
Ŀ	art I	total o mav n	of amounts in not necessar	r colum ilv eau	and Expens nns (b), (c), and al the amounts	d (d)		Revenue and penses per	(b) Net inve		(c)	Adjusted net income	for ch	ursements antable ooses	
_		colum	n (a) (see po	ege 11	of the instruct	ions))		books					(cash b	asis only)	
	1	Contributi			eceived (attach scho			535,968.							
	2	Check			ation is not requ B					*;"		· · · · · · · · · · · · · · · · · · ·			
	3	Interest	on savings an	id temp	orary cash inves	tments _		21,974.		21,974.		. 0	ATCH		
	4	Divider	nds and inter	rest fro	m secunties			102,091.	10	2,091.	,	0	ATCH	2	
	5 a	Gross i	rents										*.	- 1	
	b	Net rent	tal income or (loss) _									<u> </u>		
ē	6a	Net gair	or (loss) from	sale o	f assets not on li	ne 10		-156,243.			,				
Ę	ь		ales price for a		337	<u>, 157.</u>	······································			<u> </u>			<u> </u>	<u> </u>	
Revenue	7	Capital	gain net inc	ome (f	from Part IV, in	ne 2)			13	7,838.				1	
14	8	Net sho	ort-term cap	tal gal	DECE!	VEL				,			ļ		
	9	Income	modificatio	ns 📩	الراس المالية	1 Tio Car 	ابد						<u> </u>	1	
	10 a	and allo	ales less retur wances			2010	S	, , , , , , , , , , , , , , , , , , ,		, m		· · · · · · · · · · · · · · · · · · ·			
	b	Less C	ost of goods ^t s	660 . I	NOV 6 2	2010	13						ļ		
	С				ich schedule)		<u>jë</u>						ļ		
	11	Other	ncome (atta	ch sch		117		10,987.		LO,987.		0	ATCH	3	
_	12	Total.	Add lines 1	hrougi		M U		514,777.	27	2,890.		0	•		
	13	Comper	nsation of offic	ers, dir	ectors, trustees,	etc		0.				-			
	14	Other e	employee sa	lanes	and wages .										
568	15		n plans, em										ļ		
and Administrative Expense	16 a	Legal f	ees (attach	schedu	nle)	L							1		
X	þ		- '		chedule) ATC			4,000.		0.		0		4,000	
.	С	Other	professional	fees (a	attach schedul	ө) .* 📙		34,495.	ļ ·	34,495.		0	 	0	
aţį	17	Interes	st										ļ		
str	18	Taxes (attach schedu	ile) (see	page 14 of the inst	ructions)* *		2,279.	<u> </u>	2,269.		0	<u> </u>	10	
Ē	19	Depre	ciation (attac	h sche	edule) and dep	letion .							ļ		
P	20	•	•			–							1		
P	21	Travel,	, conference	s, and	meetings								<u> </u>		
Ę	22												1		
gui	23	Other	expenses (a	ttach s	chedule) AT	СН. 7. 💄		17,429.		4,286.		0		61	
Operating	24	Total o	perating an	d adm	ninistrative exp	oenses.									
9		Add lin	nes 13 throug	gh 23			_	58,203.		11,050.		0		4,071	
O	25	Contrit	butions, gifts	, grant	s paid	[355,090.						355,090	
_	26	Total ex	penses and dis	burseme	ents Add lines 24	and 25		413,293.		41,050.		0		359,161	
	27	Subtra	ct line 26 fro	m line	12										
	a	Excess	of revenue over	r expens	es and disbursem	ents		101,484.							
	ь	Net inv	vestment in	come	(if negative, e	nter -0-)		-	2.	31,840.					
	l .				negative, ente	· -			1			-00	_		

For Privacy Act and Paperwork Reduction Act Notice, see page 30 of the instructions. * ATCH 5 JSA ** ATCH 6 9E14102 000 T30874 1555 36500

Form 990-PF (2009)

5 Decreases not included in line 2 (itemize) ATTACHMENT 10 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

** ATCH 8

3 Other increases not included in line 2 (itemize) ▶____

2 Enter amount from Part I, line 27a

4,811,635. Form 990-PF (2009)

4,833,791.

4,935,275.

2

3

4

5

101,484.

123,640.

Add lines 1, 2, and 3

	m 990-PF (2009)	-	94-31061	19	— ···	Page 3
Pa		and Losses for Tax on Inv		(b) How	(c) Date	1
	• •	l describe the kind(s) of property sold (e ick warehouse, or common stock, 200 :	•	P-Purchase	acquired (mo, day, yr)	(d) Date sold (mo , day, yr)
1a	SEE PART IV SCHEI		ono wile see	D-Donation	(,,, ,, ,,	
b						
С						
<u>d</u>						
_е			(a) Cost as other basis		1	<u> </u>
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (k (e) plus (f) mini	
<u>a</u>						<u>.</u>
<u>b</u>				<u> </u>		
C				- 		
<u>_d</u> 		-		 		
<u>—е</u>	omplete only for assets show	wing gain in column (h) and owned	by the foundation on 12/31/69		Course (Col. (b) o	
_		(j) Adjusted basis	(k) Excess of col (i)		Gains (Col (h) g (k), but not less t	
	(I) F M V as of 12/31/69	as of 12/31/69	over col. (j), if any	ļ	Losses (from co	ol (h))
а						
_ <u>b</u>						
_ <u>c</u>						
d				<u> </u>		
_0			f :	 		
2	Capital gain net income or (f gain, also enter in Part I, line 7 f (loss), enter -0- in Part I, line 7	2		137,838.
3	Net short-term capital gain o	" or (loss) as defined in sections 122		' 		137,030.
		ine 8, column (c) (see pages 13 an				
		ine 8		[₃		
	art V Qualification Un	der Section 4940(e) for Redu	ced Tax on Net Investment Inc	ome		
lf s	ection 4940(d)(2) applies, le	eave this part blank.	section 4940(a) tax on net investme		,	
Wa	Yes," the foundation does n	he section 4942 tax on the distribut ot qualify under section 4940(e) D	table amount of any year in the base to not complete this part.	•	·	Yes X No
Wa	as the foundation liable for the Yes," the foundation does n	he section 4942 tax on the distribut ot qualify under section 4940(e) D unt in each column for each year, s	table amount of any year in the base to not complete this part. see page 18 of the instructions before	•	·	Yes X No
Wa If " 1	as the foundation liable for the Yes," the foundation does note that the appropriate amounts in the second	he section 4942 tax on the distribut ot qualify under section 4940(e) D	table amount of any year in the base to not complete this part.	•	any entries.	atio
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Wif" 1	as the foundation liable for the Yes," the foundation does in Enter the appropriate amore (a) Base period years alendar year (or tax year beginning in) 2008 2007 2008 2005 2004 Total of line 1, column (d) Average distribution ratio founder of years the found Enter the net value of none Multiply line 4 by line 3 Enter 1% of net investment Add lines 5 and 6 Enter qualifying distribution if line 8 is equal to or greater the service of the ser	the section 4942 tax on the distribute of qualify under section 4940(e). Dunt in each column for each year; so (b) Adjusted qualifying distributions 216, 516. 511, 537. 485, 289. 417, 996. 365, 474. For the 5-year base period - divide to ation has been in existence if less charitable-use assets for 2009 from the income (1% of Part I, line 27b).	table amount of any year in the base to not complete this part. See page 18 of the instructions before (c) Net value of noncharitable-use assets 6,040,195. 8,857,020. 8,084,510. 7,320,774. 7,029,088. The total on line 2 by 5, or by the than 5 years n Part X, line 5	2 3 4 5 6 7 8	any entries. Distribution racicol (b) divided by	0.035846 0.057755 0.060027 0.057097 0.051995 0.262720 0.052544 519,644. 342,568. 2,318. 344,886.

orm 9	94-3106119	-	Р	age 4
Par	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of the ins	tructio		<u> </u>
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1		,	\neg
	Date of ruling or determination letter(attach copy of ruling letter if necessary - see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		2,3	18.
	here ► X and enter 1% of Part I, line 27b			
C	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4%			
	of Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 2			
3	Add lines 1 and 2		2,3	18.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0.
5	Tax based on investment income. Subtract line 4 from line 3 if zero or less, enter -0-		2,3	18.
6	Credits/Payments			- 1
a	2009 estimated tax payments and 2008 overpayment credited to 2009 68 6,886.			l
b	Exempt foreign organizations-tax withheld at source 6b 0.		~ ^ ~	t
C	Tax paid with application for extension of time to file (Form 8868)			
d	Backup withholding erroneously withheld		^m=	
7	Total credits and payments Add lines 6a through 6d		6,8	<u>86.</u>
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		4,5	68.
11	Enter the amount of line 10 to be Credited to 2010 estimated tax 4,568. Refunded 11			
Par	t VII-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	***	Yes	No
	participate or intervene in any political campaign?	1a		<u> </u>
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19			
	of the instructions for definition)?	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials		7-3. * - 2. *	25
	published or distributed by the foundation in connection with the activities	4 37	بتشيد	لنحف
С	Did the foundation file Form 1120-POL for this year?	1c	N N A	
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year	~ ·		
	(1) On the foundation >\$ (2) On foundation managers >\$ 0.			
0	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
	on foundation managers > \$	*******	<u> </u>	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2	-75° 1	X
_	If "Yes," ettach a detailed description of the activities			3.3
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of		18.2	X
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3	х	
48	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	x	
	If "Yes," has it filed a tax return on Form 990-T for this year?	40	- 41	X
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Ves." attach the statement required by General Instruction T.	3	7 (4)	
6	If "Yes," attach the statement required by General Instruction T Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either	k, (%)	7 75	j
•	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that			
		6	X	:
7	conflict with the state law remain in the governing instrument? Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	x	
8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the	, 1		٤
Ju	(material and) N. CA.			
ь	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General	-		
_	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	Х	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			
,	4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV on page			ı
	27)? 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	10		х

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_	t VII-A Statements Regarding Activities (continued)			
	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule (see page 20 of the instructions)	11		Х
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before			
	August 17, 2008?	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address NONE			
14	The books are in care of ► WILLIAM S. FLOYD Telephone no ► (650) 85	1-01	50_	
	Located at ▶150 LA SANDRA WAY, PORTOLA VALLEY, CA ZIP+4 ▶ 94028			,
15	Section 4947(a)(1) nonexempt chantable trusts filing Form 990-PF in lieu of Form 1041 - Check here		▶	\cdot
	and enter the amount of tax-exempt interest received or accrued during the year			
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required		1	
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	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? Yes X No		·	- 21
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a		 	
	disqualified person? Yes X No		,-	1
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No	1		3
	(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)?			
	the benefit or use of a disqualified person)?	İ		
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if			
	the foundation agreed to make a grant to or to employ the official for a period after	1	'-	
	termination of government service, it terminating within 50 days / 1			
þ	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	45		<u>-</u>
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here		l	
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that	16		х
_	were not corrected before the first day of the tax year beginning in 2009?	16-		Ĥ
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))	İ		
а	At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e. Part XIII) for tax year(s) beginning before 20092			
	oo, Talt Ally for tax year(s) beginning belofe 2000 1		l	
U	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)	1	l š	
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see page 20 of the instructions)	2b		
	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
·	The provisions of section 4042(a)(2) and being applied to any of the years instead in 2a, institute years note	İ		1
3a	Did the foundation hold more than a 2% direct or indirect interest in any business			
-	enterprise at any time during the year?		<i>±</i>	
b	If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or			1
~	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the			
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse			
	of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the			
	foundation had excess business holdings in 2009)	3b		
48	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		Х
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			
	chantable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2009?	4b		Х
		Form 9	0-PF	(2009)

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

Part VIII Information About Officers, Directors, Trustees, Foundation M and Contractors (continued)	lanagers, Highly Paid Empl	oyees,	
3 Five highest-paid independent contractors for professional services (see page 2	3 of the instructions). If none,	enter "NC	NE."
(a) Name and address of each person paid more than \$50,000	(b) Type of service		pensation
NONE			
			_
			-
Total number of others receiving over \$50,000 for professional services		<u></u>	NON
Part IX-A Summary of Direct Charitable Activities			
List the foundation's four largest direct chantable activities during the tax year. Include relevant statistical inform of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	nation such as the number	Ехр	enses
1 NONE		1	
2			
3		<u> </u>	
·			
4		†	
Part IX-B Summary of Program-Related Investments (see page 23 of the in:	structions)		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 ar	nd 2	Am	ount
1 NONE			
2			
All other program-related investments See page 24 of the instructions			
3 NONE			

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Pa	rt X Minimum Investment Return (All domestic foundations must complete this part. Foreig see page 24 of the instructions.)	n foundatior	18,
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	5,893,699.
b	Average of monthly cash balances	1b	725,229.
C	Fair market value of all other assets (see page 24 of the instructions)	1c	0.
d	Total (add lines 1a, b, and c)	1d	6,618,928.
0	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	1c (attach detailed explanation) Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	6,618,928.
4	Cash deemed held for charitable activities. Enter 1 1/2 % of line 3 (for greater amount, see page 25		
	of the instructions)	4	99,284.
-5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	-5	6,519,644.
6	Minimum Investment return. Enter 5% of line 5	6	325,982.
Pa	rt XI Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) private foundations and certain foreign organizations check here and do not complete this page 25.		
1	Minimum investment return from Part X, line 6	1	325,982.
2a			· · · · · · · · · · · · · · · · · · ·
b	Income tax for 2009. (This does not include the tax from Part VI.)	.50	
C	Add lines 2a and 2b	2c	2,318.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	323,664.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	323,664.
6	Deduction from distributable amount (see page 25 of the instructions)	6	
7	Deduction from distributable amount (see page 25 of the instructions) Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	323,664.
Pa	urt XII Qualifying Distributions(see page 25 of the instructions)	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
1	Amounts paid (including administrative expenses) to accomplish chantable, etc., purposes:	- 4	
a	Expenses, contributions, gifts, etc - total from Part I, column (d), line 28	1a	359,161.
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.,	 	
-		2	0.
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	0.
b	Cash distribution test (attach the required schedule)	3b	0.
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	359,161.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		333, 131.
•	Enter 1% of Part I, line 27b (see page 26 of the instructions)	5	2,318.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	356,843.
U	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating when		
	qualifies for the section 4940(e) reduction of tax in those years	inci tile loullu	auon

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Pai	t XIII Undistributed Income (see page	26 of the instruction	18)		
		(a)	(b)	(c)	(d)
1	Distributable amount for 2009 from Part XI,	Corpus	Years pnor to 2008	2008	2009
	line 7				323,664.
2	Undistributed income, if any, as of the end of 2009				
8	Enter amount for 2008 only			118,648.	
b	Total for prior years 20, 20, 20				
3	Excess distributions carryover, if any, to 2009				
а	From 2004				
b	From 2005 0.				
C	From 2006				
d	From 2007 0.	·			
8	From 2008 0.		,		
	Total of lines 3a through e			ويوسفه شيه لايت داست ياسي	
4	Qualifying distributions for 2009 from Part XII,		(C. 1, 100)	*	and the second
	line 4 ▶ \$ 359,161.	,	- \$* · · · · · · · · · · · · · · · · · ·		
а	Applied to 2008, but not more than line 2a			118,648.	
	***	4-14/2			\$. . ,
U	Applied to undistributed income of prior years (Election required - see page 26 of the instructions)				٠, ٠, ٠,
_	Treated as distributions out of corpus (Election		e eni n e elitati	^ _	2
٠	required - see page 26 of the instructions)			/· ˈ.= .,	
d	Applied to 2009 distributable amount	- 沙滩盆。交流点		r Sana Jak	240,513.
	Remaining amount distributed out of corpus	0.		en de like is	
5	Excess distributions carryover applied to 2009	0.			0.
	(If an amount appears in column (d), the same				
6	emount must be shown in column (a)) Enter the net total of each column as				Salari,
•	indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.		* 1 % * 5 * 5 * 5 * 5 * 5 * 5 * 5 * 5 * 5 *	
b	Prior years' undistributed income Subtract				
_	line 4b from line 2b				
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				
d	Subtract line 6c from line 6b Taxable				
-	amount - see page 27 of the instructions			\$ # S - 1	
0	Undistributed income for 2008 Subtract line				
	4a from line 2a Taxable amount - see page 27 of the instructions		4, 4, 4, 4, 4, 4, 4, 4, 4, 4, 4, 4, 4, 4		
				era ba da	
T	Undistributed income for 2009 Subtract lines 4d and 5 from line 1. This amount must be		E		
	distributed in 2010		: 6.M + 3. W		83,151.
7	Amounts treated as distributions out of corpus		100		
	to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see page 27 of the]			
	instructions)				
8	Excess distributions carryover from 2004 not applied on line 5 or line 7 (see page 27 of the		1.7		, ***
	instructions)		,		
9	Excess distributions carryover to 2010.				
	Subtract lines 7 and 8 from line 6a	0.	·		
10	Analysis of line 9				
a	Excess from 2005		1		
b	Excess from 2006	1			
C	Excess from 2007	1			}
d	Excess from 2008 0 .				
0	Excess from 2009 0 .		1	†	

Pa	rt XIV Private Oper	ating Foundations (see page 27 of the	instructions and Par	t VII-A, question 9)	NOT APPLICABLE				
1 a	1 a If the foundation has received a ruling or determination letter that it is a private operating									
	foundation, and the ruling		-		. ▶└					
b	Check box to indicate whe		vate operating foundation		4942(j)	(3) or 4942(j)(5)				
2 a	Enter the lesser of the ad-	Tax year		Prior 3 years		(e) Total				
	justed net income from Part I or the minimum investment	(a) 2009	(b) 2008	(c) 2007	(d) 2006					
	return from Part X for each									
	year listed									
þ	85% of line 2a									
C	Qualifying distributions from Part									
4	XII, line 4 for each year listed . Amounts included in line 2c not				<u>-</u>					
u	used directly for active conduct		1							
	of exempt activities					<u> </u>				
•	Qualifying distributions made directly for active conduct of									
	exempt activities Subtract line									
3	2d from line 2c Complete 3a, b, or c for the									
_	alternative test relied upon									
а	"Assets" alternative test - enter									
	(1) Value of all assets (2) Value of assets qualifying									
	under section									
ь	4942(j)(3)(B)(i)									
	enter 2/3 of minimum invest-									
	ment return shown in Part X, tine 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 exampt organizations as									
	provided in section 4942 (j)(3)(B)(iii)									
	(3) Largest amount of sup-			·						
	port from an exempt organization									
	(4) Gross investment income .									
Pa		ary Information (C			ation had \$5,000	or more in assets				
		during the year - se		structions.)						
1	Information Regarding	•		- 45 60/ -6 15 4-4-	l	and the other for a deather.				
а	List any managers of before the close of any					ed by the foundation				
		-	icy have continuated i	11010 (11211 \$5,000). (0	66 3600011 307 (4)(2).)					
_	WILLIAM FLO									
Ь	List any managers of					large portion of the				
	ownership of a partner	ship of other entity) o	i which the loungation	nasa 10% or greater	interest.					
	NONE									
2	Information Regarding	Contribution, Grant.	Gift. Loan. Scholarshi	p. etc Programs:						
	Check here ► X if			· · · · · · · · · · · · · · · · · · ·	table omanizatione a	nd does not accent				
	unsolicited requests	for funds. If the foun	dation makes gifts, o	rants, etc. (see page	28 of the instruction	ns) to individuals or				
	organizations under ot					,				
a	The name, address, ar	nd telephone number of	f the person to whom a	pplications should be a	addressed:					
			, ,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						
b	The form in which appl	cations should be sub	mitted and information	and materials they sho	ould include:					
				·						
	<u>-</u> .									
C	Any submission deadli	nes								
_	A				ti. Alia i					
d	Any restrictions or lifactors	imitations on awards	, such as by geogra	iphical areas, charita	ble fields, kinds of	institutions, or other				

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Part XV Supplementary Information (c	ontinued)			
3 Grants and Contributions Paid Durin Recipient Name and address (home or business)	ng the Year or App	roved for F	uture Payment	
Recipient	if recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	contribution	
a Paid during the year		1		
		}		
ATTACHMENT 12				
	ļ — — — — — — — — — — — — — — — — — — —	-		
		-		
		1		
Total			▶ 3a	355,090.
b Approved for future payment				
		1		
Total			▶ 3b	

r gross amounts unless otherwise indicated	(a)	ted business income (b)	(c)	section 512, 513, or 514 (d)	(e) Related or exempt function income (See page 28 of
Program service revenue	Business code	Amount	Exclusion code	Amount	(See page 28 of the instructions)
					
		_	 		
			 		
			-	- · - · · · · · · · · · · · · · · · · ·	
Fees and contracts from government agencies					·
Membership dues and assessments					
nterest on savings and temporary cash investments			1-4	2 1, 974 .	
Dividends and interest from securities			14	102,091.	
let rental income or (loss) from real estate					-
Debt-financed property				-	
Not debt-financed property			<u> </u>		
let rental income or (loss) from personal property .					
Other investment income					
Sain or (loss) from sales of assets other than inventory		-10,240.	18	-146,003.	
Net income or (loss) from special events					
Gross profit or (loss) from sales of inventory	<u> </u>				
Other revenue a			ļ		
ATTACHMENT 13			ļ	10,987.	
·			ļ		
			ļ		
		1			
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions on page 28 to TXVI-B Relationship of Activities	venfy calcula	ations)	empt Pur	00808	-21,1
Subtotal Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions on page 28 to rt XVI-B Relationship of Activities are No. Explain below how each activities accomplishment of the fire statement of the fire statement and the statement of the fire statement and the statement of the statement o	venfy calcula s to the Ad vity for whi	ations) complishment of Ex	empt Pur	DOSES (e) of Part XVI-A cor	-21,19
Subtotal Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions on page 28 to rt XVI-B Relationship of Activities Explain below how each activithe accomplishment of the finance page 29 of the instructions.)	venfy calcula s to the Ad vity for whi	ations) complishment of Ex	empt Pur	DOSES (e) of Part XVI-A cor	-21,19
Subtotal Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions on page 28 to rt XVI-B Relationship of Activities are No. Explain below how each activities accomplishment of the fire statement of the fire statement and the statement of the fire statement and the statement of the statement o	venfy calcula s to the Ad vity for whi	ations) complishment of Ex	empt Pur	DOSES (e) of Part XVI-A cor	-21,19
Subtotal Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions on page 28 to rt XVI-B Relationship of Activities Explain below how each activithe accomplishment of the finance page 29 of the instructions.)	venfy calcula s to the Ad vity for whi	ations) complishment of Ex	empt Pur	DOSES (e) of Part XVI-A cor	-21,19
Subtotal Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions on page 28 to rt XVI-B Relationship of Activities Explain below how each activithe accomplishment of the finance page 29 of the instructions.)	venfy calcula s to the Ad vity for whi	ations) complishment of Ex	empt Pur	DOSES (e) of Part XVI-A cor	-21,1
Subtotal Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions on page 28 to rt XVI-B Relationship of Activities Explain below how each activithe accomplishment of the finance page 29 of the instructions.)	venfy calcula s to the Ad vity for whi	ations) complishment of Ex	empt Pur	DOSES (e) of Part XVI-A cor	-21,1
Subtotal Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions on page 28 to rt XVI-B Relationship of Activities Explain below how each activithe accomplishment of the finance page 29 of the instructions.)	venfy calcula s to the Ad vity for whi	ations) complishment of Ex	empt Pur	DOSES (e) of Part XVI-A cor	-21, 19 stributed importantly such purposes)
Subtotal Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions on page 28 to rt XVI-B Relationship of Activities Explain below how each activithe accomplishment of the finance page 29 of the instructions.)	venfy calcula s to the Ad vity for whi	ations) complishment of Ex	empt Pur	DOSES (e) of Part XVI-A cor	-21, 19 stributed importantly such purposes)
Subtotal Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions on page 28 to rt XVI-B Relationship of Activities Explain below how each activithe accomplishment of the finance page 29 of the instructions.)	venfy calcula s to the Ad vity for whi	ations) complishment of Ex	empt Pur	DOSES (e) of Part XVI-A cor	-21,1
Subtotal Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions on page 28 to rt XVI-B Relationship of Activities Explain below how each activithe accomplishment of the finance page 29 of the instructions.)	venfy calcula s to the Ad vity for whi	ations) complishment of Ex	empt Pur	DOSES (e) of Part XVI-A cor	-21,1
Subtotal Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions on page 28 to rt XVI-B Relationship of Activities Explain below how each activithe accomplishment of the finance page 29 of the instructions.)	venfy calcula s to the Ad vity for whi	ations) complishment of Ex	empt Pur	DOSES (e) of Part XVI-A cor	-21,1
Subtotal Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions on page 28 to rt XVI-B Relationship of Activities Explain below how each activithe accomplishment of the finance page 29 of the instructions.)	venfy calcula s to the Ad vity for whi	ations) complishment of Ex	empt Pur	DOSES (e) of Part XVI-A cor	-21,1
Subtotal Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions on page 28 to rt XVI-B Relationship of Activities Explain below how each activithe accomplishment of the finance page 29 of the instructions.)	venfy calcula s to the Ad vity for whi	ations) complishment of Ex	empt Pur	DOSES (e) of Part XVI-A cor	-21,1
Subtotal Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions on page 28 to rt XVI-B Relationship of Activities Explain below how each activithe accomplishment of the finance page 29 of the instructions.)	venfy calcula s to the Ad vity for whi	ations) complishment of Ex	empt Pur	DOSES (e) of Part XVI-A cor	-21,1
Subtotal Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions on page 28 to rt XVI-B Relationship of Activities Explain below how each activithe accomplishment of the finance page 29 of the instructions.)	venfy calcula s to the Ad vity for whi	ations) complishment of Ex	empt Pur	DOSES (e) of Part XVI-A cor	-21,1
Subtotal Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions on page 28 to rt XVI-B Relationship of Activities Explain below how each activithe accomplishment of the finance page 29 of the instructions.)	venfy calcula s to the Ad vity for whi	ations) complishment of Ex	empt Pur	DOSES (e) of Part XVI-A cor	-21,1
Subtotal Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions on page 28 to rt XVI-B Relationship of Activities Explain below how each activithe accomplishment of the finance page 29 of the instructions.)	venfy calcula s to the Ad vity for whi	ations) complishment of Ex	empt Pur	DOSES (e) of Part XVI-A cor	-21,1
Subtotal Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions on page 28 to rt XVI-B Relationship of Activities Explain below how each activithe accomplishment of the finance page 29 of the instructions.)	venfy calcula s to the Ad vity for whi	ations) complishment of Ex	empt Pur	DOSES (e) of Part XVI-A cor	-21,1
Subtotal Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions on page 28 to rt XVI-B Relationship of Activities Explain below how each activithe accomplishment of the finance page 29 of the instructions.)	venfy calcula s to the Ad vity for whi	ations) complishment of Ex	empt Pur	DOSES (e) of Part XVI-A cor	-21,1
Subtotal Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions on page 28 to rt XVI-B Relationship of Activities Explain below how each activithe accomplishment of the finance page 29 of the instructions.)	venfy calcula s to the Ad vity for whi	ations) complishment of Ex	empt Pur	DOSES (e) of Part XVI-A cor	-21,1
Subtotal Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions on page 28 to rt XVI-B Relationship of Activities Explain below how each activithe accomplishment of the finance page 29 of the instructions.)	venfy calcula s to the Ad vity for whi	ations) complishment of Ex	empt Pur	DOSES (e) of Part XVI-A cor	-21, 19 stributed importantly such purposes)
Subtotal Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions on page 28 to rt XVI-B Relationship of Activities Explain below how each activithe accomplishment of the finance page 29 of the instructions.)	venfy calcula s to the Ad vity for whi	ations) complishment of Ex	empt Pur	DOSES (e) of Part XVI-A cor	-21, 19 stributed importantly such purposes)
Subtotal Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions on page 28 to rt XVI-B Relationship of Activities Explain below how each activithe accomplishment of the finance page 29 of the instructions.)	venfy calcula s to the Ad vity for whi	ations) complishment of Ex	empt Pur	DOSES (e) of Part XVI-A cor	-21,1

Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations Form 990-PF (2009) Part XVII

l a	in sec organiz Transfe	ne organization directly ction 501(c) of the Co zations? ers from the reporting four	ode (other than ndation to a nonc	section 501(c)(3) hantable exempt organ	organizations) nization of:	or in se	ction 527,				Yes	No
		ash	• • • • • • • •		• • • • • •			• • • • •		1a(1)	-	<u>X</u>
		herassets	• • • • • • • •		• • • • • •					1a(2)		X
þ		transactions										
		ales of assets to a noncha								1b(1)		_ <u>X</u> _
		urchases of assets from a								1b(2)		<u> X</u>
		ental of facilities, equipme								1b(3)		X
	(4) Re	eimbursement arrangemei	nts							1b(4)		<u> </u>
		ans or loan guarantees								1b(5)		X
	(6) Pe	erformance of services or	membership or fi	undraising solicitations						1b(6)		_X_
C	Shann	g of facilities, equipment,	mailing lists, othe	er assets, or paid emple	oyees					1c		<u> </u>
_q	-if-the	_answer_to_any_of_t	he-above-is-"	Yes,"-complete-the-	followings	chedule -C	olumn_(b)_	_shouldah	ways_show.	_the_	fair_r	narket
	value	of the goods, other	assets, or serv	nces given by the	reporting for	undation. I	f the foun	dation rec	erved less	than	fair r	narket
	value	in any transaction or	shanng arrang	gement, show in co	olumn (d) th	e value o	f the good	ds, other a	assets, or	service	s rec	peviec
		· · · · · · · · · · · · · · · · · · ·		-								
(a) L	ine no	(b) Amount involved	(c) Name of n	oncharitable exempt orga	inization		ption of transf	ers, transactio	ons, and sharl	ng arran	gemen	ts
		N/A				N/A						
	-		<u> </u>				·					<u>-</u>
												
		· · · · · · · · · · · · · · · · · · ·										
												
												
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20	lo tho	foundation disastly as	undersative office	tool with an indicate	<u> </u>							
2 a		foundation directly or	-							$\neg \downarrow$. [3	No.
h		n 501(c) of the Code (oth s," complete the following:		out(c)(s)) or in section	1 52/7		• • • • • •	• • • • •	٠ ل	*	es <u></u>	A MO
	11 103	(a) Name of organization		(b) Type of o	organization			(c) Description	on of relations	hip		
		(-,		(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				(0) 5000.pu	,,, o,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
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	Under	penalties of perjury, I declar it is true, correct, and comp	are that have ex	amined this return, inclu	iding accompa	nying schedu	les and state	ments, and	to the best o	f my k	nowled	ge and
	belief,	it is true correct, and comp	oleter Declaration	of preparer (other than t	axpayer or fidu	iciary) is base	ed on all info	mation of w	hich prepare	r has aı مر	ny knov	wledge
		1/1/1/1/-	1 wd			10-2	8-10	\mathcal{P}_{r} e	Side	T		
စု	Sig	gnature of officer or trustee	777	·		Date		Title				
更					Date		T		Preparer's	identify	ing	
ਛ∣	.	D	an La				Check if self-employ	.od ▶☐	number (Se page 30 of the			
Sign Here	ᅙᅙᇎ	Preparer's Signature	J-111 2-2		13 () 1	4-10	Journal India	,	P000434			
	Paid Preparer's Use Only	Firm's name (or yours if	ERNST	& YOUNG LLP	L	·	L	EIN ▶	34-6565			
-	2 3	self-employed), address	D —	OUGLAS BOULEY	JARD, SU	TE 300				-		
		and ZIP code	ROSEV			956	61	Phone no	916-2	18-1	900	
										om 90		(0000)

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 FLOYD FAMILY FOUND.	ATTON	Employer identification number
		94-3106119
Organization type (check o	ne):	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated	d 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	
	on filing Form 990, 990-EZ, or 990-PF that received, during the yone contributor Complete Parts I and II.	year, \$5,000 or more (in money or
Special Rules		
sections 509(a)(1	(c)(3) organization filing Form 990 or 990-EZ that met the 33) and 170(b)(1)(A)(vi), and received from any one contributor, d (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Fo	uring the year, a contribution of the greater
the year, aggrega	(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that reste contributions of more than \$1,000 for use exclusively for reses, or the prevention of cruelty to children or animals. Comple	eligious, charitable, scientific, literary, or
the year, contribution aggregate to more year for an exclusional applies to this org	(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that retions for use exclusively for religious, charitable, etc., purposes than \$1,000 If this box is checked, enter here the total contributions of the size of t	s, but these contributions did not buttons that were received during the of the parts unless the General Rule ole, etc., contributions of \$5,000 or more
Caution. An organization th	at is not covered by the General Rule and/or the Special Rules nust answer "No" on Part IV, line 2 of its Form 990, or check th PF, to certify that it does not meet the filing requirements of Sch	does not file Schedule B (Form 990, le box on line H of its Form 990-EZ,
For Privacy Act and Paperwork R	eduction Act Notice, see the instructions	Schedule B (Form 990, 990-EZ, or 990-PF) (20

for Form 990, 990-EZ, or 990-PF.

90-PF) (2009) Page_
DYD_FAMIT.Y_FOUNDATION | Employer ide

Name of organization FLOYD FAMILY FOUNDATION Employer identification number 94-3106119

Part I Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	CYNTHIA ROBERTS FLOYD 150 LA SANDRA WAY PORTOLA VALLEY, CA 94028-7312	\$\$.	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a)	(b)	(c)	(d)
No	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
2	WILLIAM S. FLOYD 150 LA SANDRA WAY PORTOLA VALLEY, CA 94028-7312	\$\$517,856.	Person X Payroll X Noncash X (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 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 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 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 Noncash (Complete Part II if there is a noncash contribution.)

of Part II

Employer identification number

94-3106119

of

(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
13000 SHS EMC; 1000 SHS AUTOMATIC DATA PROCESSING; 800 SHS JACOBS ENGINEERING; 1700 SHS JOHNSON & JOHNSON; 500 SHS TOTAL S.A.; 2000 SHS NIKE		VARIOUS
Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d)————————————————————————————————————
(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
	 \$	
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	 \$	
	Description of noncash property given 13000 SHS EMC; 1000 SHS AUTOMATIC DATA PROCESSING; 800 SHS JACOBS ENGINEERING; 1700 SHS JOHNSON & JOHNSON; 500 SHS TOTAL S.A.; 2000 SHS NIKE (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	Description of noncash property given 13000 SHS EMC; 1000 SHS AUTOMATIC DATA

FLOYD FAMILY FOUNDATION				94-3106119	
				ATTACHMENT 1	
FORM 990PE, PART I - INTEREST C	INTEREST ON TEMPORARY CASH INVESTMENTS	H INVESTMENTS			
DESCRIPTION		REVENUE AND EXPENSES PER BOOKS	NET INVESTMENT INCOME	ADJUSTED NET INCOME	
KKR FINANCIAL HOLDINGS LLC	TOTAL	21,974.	21, 974.	0 0.	
					-

36500

94-3106119

ATTACHMENT 2

	ADJUSTED NET INCOME		• 0
	NET INVESTMENT INCOME	26. 100,111. 1,954.	102,091.
INTEREST FROM SECURITIES	REVENUE AND EXPENSES PER BOOKS	26. 100,111. 1,954.	102,091.
FORM 990PF, PART I - DIVIDENDS AND INTEREST H	DESCRIPTION	CAPITAL PRESERVATION FUND UNION BANK-CUSTODIAN KKR FINANCIAL HOLDINGS LLC	TOTAL

19		
94-3106119 T 3	000	
94-3 NT 3	ADJUSTED NET INCOME	
9 ATTACHMENT	ADJU	
ATT	970.	
	MENT ME 10,017 10,987	
	NET INVESTMENT INCOME 10,	
•		
	JE SS SKS 10,017.	
	REVENUE AND EXPENSES PER BOOKS 10,	
	EXP PER	
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	INCOME	-
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LY FO	T, PART ON TARE HOISTALE HOISTALE	
FAMI	990PF, XIPTION SINANCI	
FLOYD FAMILY FOUNDATION	FORM 990PF, PART I - OTHER DESCRIPTION KKR FINANCIAL HOLDINGS LLC LAWSUIT AWARD	

36500

	CHARITABLE PURPOSES	4,000.	4,000.
	ADJUSTED NET INCOME	0	0
	NET INVESTMENT INCOME	.0	0
li	REVENUE AND EXPENSES PER BOOKS	4,000.	4,000.
FORM 990PF, PART I - ACCOUNTING FEES			TOTALS
FORM 990PF, PAR	DESCRIPTION	ACCOUNTING	

36500

ATTACHMENT 4

FLOYD FAMILY FOUNDATION			K	94-3106119 ATTACHMENT 5
FORM 990PF, PART I - OTHER PROFESSIONAL FEES	ONAL FEES			
DESCRIPTION	REVENUE AND EXPENSES <u>PER</u> BOOKS	NET INVESTMENT INCOME	ADJUSTED NET INCOME	CHARITABLE PURPOSES
INVESTMENT ADVISER FEES	34,495.	34,495.		0.
TOTALS	34,495.	34,495.		0.0
T30874 1555	(1)	36500		ATTACHMENT 5

36500

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FLOYD FAMILY FOUNDATION			94- ATTACHMENT 7	94-3106119 MENT 7
FORM 990PF, PART I - OTHER EXPENSES				,
DESCRIPTION POSTAGE KKR FINANCIAL HOLDINGS KKR FINANCIAL HOLDINGS (UBTI) CALIFORNIA SECRETARY OF STATE	REVENUE AND EXPENSES PER BOOKS 4,245. 13,082. 13,082.	NET INVESTMENT INCOME 41. 4,245. 0. 0.	ADJUSTED NET INCOME 0. 0. 0.	CHARITABLE <u>PURPOSES</u> 41. 0. 0. 20.

94-3106119		•					-			ATTACHMENT 8
94-	8	ENDING <u>FMV</u>	5,742,685.	5,742,685.		 		 	 	AT
	ATTACHMENT	ENDING BOOK VALUE	4,512,166.	4,512,166.						36500
ITION	- U.S. AND STATE OBLIGATIONS		JIAN	IGATIONS TOTAL						

US OBLIGATIONS TOTAL

UNION BANK - CUSTODIAN

DESCRIPTION

FLOYD FAMILY FOUNDATION

PART II

FORM 990PE,

94-3106119		ENDING <u>FMV</u>	0.0	ATTACHMENT 9
	ATTACHMENT	ENDING BOOK VALUE	0.0	36500
FLOYD FAMILY FOUNDATION	FORM 990PF, PART II - OTHER INVESTMENTS	DESCRIPTION	KKR FINANCIAL HOLDINGS LLC TOTALS	T30874 1555

FLOYD FAMILY FOUNDATION

94-3106119

ATTACHMENT 10

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

DESCRIPTION

AMOUNT

KKR NONDEDUCTIBLE EXPENSES

2,559.

KKR DISTRIBUTIONS

121,081.

TOTAL

123,640.

11
ATTACHMENT

FLOYD FAMILY FOUNDATION				94-3106119
FORM 990PF, PART VIII - LIST OF OFFICERS,	ERS, DIRECTORS, AND TRUSTEES		ATTACH	ATTACHMENT 11
NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
WILLIAM S. FLOYD 150 LA SANDRA WAY PORTOLA VALLEY, CA 94028	PRESIDENT 1.00	.0	· 0	.0
JEANNE FLOYD DOWNS 195 CONCORD ROAD WAYLAND, MA 01778	VP/SEC/TRS 1.00		° C	. 0
	GRAND TOTALS	0.	0	0

FLOYD FAMILY FOUNDATION

94-3106119

EORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DUBING THE YEAR	SING THE YEAR		
			- -
	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		
	AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	IBUTIC
VALLEY PRESBYTERIAN CHIRCH	NOT RELATED	ANNUAL FUND	
945 PORTOLA ROAD	CHURCH		
PORTOLA VALLEY, CA 94028			
CHANICACH INITIED CTMV	COPE TOO TOW	ANNITAL FIRM / ENDOMMENT	
SIANFUND UNIVERSILI			-
STANFORD, CA 94305	зсноог		
PACIFIC LEGAL FOUNDATION	NOT RELATED	ANNUAL FUND	
3900 LENNANE DRIVE, #200	509(A)(1)		
SACRAMENTO, CA 95834-1909		•	
		TRUMENT TRUMENT TRUMENT	
THE YOSEMITE FUND	NOT RELATED	ANNUAL FUND/CAPITAL CAMPAIGN	
155 MONTGOMERY STREET, #1104	509(A)(1)		
SAN FRANCISCO, CA 94104-4116			
COMMUNITY HOUSING, INC.	NOT RELATED	ANNUAL FUND	
437 WEBSTER STREET	509(A)(2)		
PALO ALTO, CA 94301			
			_
CHILDREN'S HEALTH COUNCIL	NOT RELATED	ANNUAL FUND	
650 CLARK WAY	HOSPITAL		_

10,000.

AMOUNT

ATTACHMENT 12

17,500.

2,500.

55,000.

1,000.

15,040.

PALO ALTO, CA 94304

94-3106119	

ATTACHMENT 12 (CONT'D)

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

FLOYD FAMILY FOUNDATION

AMOUNT	79,000.	500.	5,000.	250.	250.	1,000.
PURPOSE OF GRANT OR CONTRIBUTION	ANNUAL FUND/ENDOMMENT	ANNUAL FUND	ANNUAL FUND	ENDOMMENT	ANNUAL FUND	ANNUAL FUND
RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	NOT RELATED SCHOOL	NOT RELATED 509(A)(1)	NOT RELATED SCHOOL	NOT RELATED 509(A)(2)	NOT RELATED 509(A)(1)	NOT RELATED 509(A)(1)
RECIPIENT NAME AND ADDRESS	UNIVERSITY OF CALIFORNIA, BERKELEY BERKELEY, CA 94720	CALIFORNIA HISTORICAL SOCIETY 678 MISSION STREET SAN FRANCISCO, CA 94105-4014	HOOVER INSTITUTION STANFORD UNIVERSITY STANFORD, CA 94305-9954	JUNIOR LEAGUE OF PALO ALTO 555 RAVENSWOOD AVENUE MENLO PARK, CA 94025	BOYS & GIRLS CLUBS OF THE PENINSULA 401 PIERCE ROAD MENLO PARK, CA 94025	JOB TRAIN 1200 O'BRIEN DRIVE MENLO PARK, CA 94025-1413

FLOYD FAMILY FOUNDATION	; - +6	94-3106119	
FORM 990PE, PART XV = GRANTS AND CONTRIBUTIONS PAID DURING THE	NIRING THE YEAR	ATTAC	ATTACHMENT 12 (CONT'D)
	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND		
RECIPIENT NAME AND ADDRESS.	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
ECUMENICAL HUNGER PROGRAM	NOT RELATED	ANNUAL FUND	.000
2411 PULGAS AVENUE EAST PALO ALTO, CA 94303	509(A)(1)		
PORTOLA VALLEY SCHOOLS FOUNDATION	NOT RELATED	ANNUAL FUND	2,000.
4575 ALPINE ROAD	509(A)(1)		
PORTOLA VALLEY, CA 94028			
ZETA PSI EDUCATIONAL FOUNDATION	NOT RELATED	ANNUAL FUND	.002
15 SOUTH HENRY STREET	509(A)(1)		
PEARL RIVER, NY 10965-2603			
SENSORY ACCESS FOUNDATION	NOT RELATED	ANNUAL FUND	500.
300 WEST IOWA AVENUE	509(A) (2)		
SUNNYVALE, CA 94086-9802		_	
PENINSULA VOLUNTEERS	NOT RELATED	ANNUAL EUND	2,000.
800 MIDDLE AVENUE	509(A)(2)		
MENLO PARK, CA 94025		_	
PENINSULA OPEN SPACE TRUST	NOT RELATED	ANNUAL FUND/CAPITAL CAMPAIGN	21,000.
222 HIGH STREET	509(A)(1)		
PALO ALTO, CA 94301-1040			

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

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR	DIRING THE YEAR		ATTACHMENT 12 (CONT'D)
	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
CASTILLEJA SCHOOL FOUNDATION 1310 BRYANT STREET PALO ALTO, CA 94301	NOT RELATED SCHOOL	ANNUAL FUND	2,000.
NATIONAL MULTIPLE SCLEROSIS SOCIETY P.O. BOX 23664 OAKLAND, CA 94623-0664	NOT RELATED 509(A)(1)	ANNUAL, FUND	250.
AVENIDAS 450 BRYANT STREET PALO ALTO, CA 94301-1701	NOT RELATED 509(A)(1)	ANNUAL FUND	7,750.
AMERICAN RED CROSS 85 SECOND STREET, 8TH FLOOR SAN FRANCISCO, CA 94105	NOT RELATED 509(A)(1)	ANNUAL FUND	250.
HARVARD BUSINESS SCHOOL SOLDIERS FIELD BOSTON, MA 02163-9922	NOT RELATED SCHOOL	ANNUAL FUND	900.
HARVARD UNIVERSITY - DEPARTMENT OF ATHLETICS 65 NORTH HARVARD STREET BOSTON, MA 02163-1012	NOT RELATED SCHOOL	ANNUAL FUND	5,000.

250.

ATTACHMENT 12 (CONT'D)

FLOYD FAMILY FOUNDATION

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

AMOUNT	. 200	2,500.	250.	250.	250.	250.
PURPOSE OF GRANT OR CONTRIBUTION	ANNUAL FUND	ANNUAL FUND	ANNUAL FUND	ANNUAL FUND	ANNUAL FUND	ANNUAL FUND
RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	NOT RELATED	NOT RELATED	NOT RELATED	NOT RELATED	NOT RELATED	NOT RELATED
	SCHOOL	509(A)(2)	509(A)(1)	509(A)(1)	509(A)(1)	509(A)(1)
RECIPIENT NAME AND ADDRESS	CHARLES ARMSTRONG SCHOOL	PENINSULA BRIDGE	REBUILDING TOGETHER PENINSULA	BREAST CANCER CONNECTIONS	GUIDE DOGS FOR THE BLIND, INC.	PLANNED PARENTHOOD GOLDEN GATE
	1405 SOLANA DRIVE	P O. BOX 963	P.O. BOX 4031	390 CAMBRIDGE AVENUE	P.O. BOX 3950	815 EDDY STREET, #300
	BELMONT, CA 94002-3653	MENLO PARK, CA 94026	MENLO PARK, CA 94026-4031	PALO ALTO, CA 94306	SAN RAFAEL, CA 94912-3950	SAN FRANCISCO, CA 94109

ATTACHMENT 12 (CONT'D)

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FORM 990PE

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TIAL CONTRIBUTOR PURPOSE OF GRANT OR CONTRIBUTION AMOUNT	ANNUAL FUND 3,000.	ANNUAL FUND 1,000.	ANNUAL FUND 250.	ANNUAL FUND 250.	ANNUAL FUND 250.	ANNUAL FUND 250.
RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	NOT RELATED	NOT RELATED	NOT RELATED	NOT RELATED	NOT RELATED	NOT RELATED
	SCHOOL	509(A)(1)	509(A)(1)	CHURCH	509(A)(1)	509(A)(1)
RECIPIENT NAME AND ADDRESS	UNIVERSITY OF THE PACIFIC	LUCILE PACKARD CHILDREN'S FUND	LARKIN STREET YOUTH SERVICES	ST. ANTHONY'S PADUA DINING ROOM	ARTHRITIS FOUNDATION	ABILITIES UNITED
	3601 PACIFIC AVENUE	400 HAMILTON AVENUE, SUITE 340	701 SUTTER STREET, SUITE 2	3500 MIDDLEFIELD ROAD	657 MISSION STREET, SUITE 603	525 E. CHARLESTON ROAD
	STOCKTON, CA 95211	PALO ALTO, CA 94301	SAN FRANCISCO, CA 94109	MENLO PARK, CA 94025-3025	SAN FRANCISCO, CA 94105-4120	DAITO BITTO CA 04306

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FORM 990PF

ATTACHMENT 12 (CONT'D)

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		•
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
USO WORLD HEADQUARTERS P.O. BOX 96860 WASHINGTON, DC 20077-7677	NOT RELATED 509(A)(1)	ANNUAL FUND	250.
LEAGUE TO SAVE LAKE TAHOE 955 EMERALD BAY ROAD SOUTH LAKE TAHOE, CA 96150-9921	NOT RELATED 509(A)(2)	ANNUAL FUND	500.
OKIZU FOUNDATION 16 DIGITAL DRIVE, SUITE 130 NOVATO, CA 94949	NOT RELATED 509(A)(1)	ANNUAL FUND	3,000.
THE SALVATION ARMY PO BOX 193465 SAN FRANCISCO, CA 94119-3465	NOT RELATED 509(A)(1)	ANNUAL FUND	250.
SUPPORT NETWORK FOR BATTERED WOMEN 1257 TASMAN DRIVE, SUITE C SUNNYVALE, CA 94089	NOT RELATED 509(A)(1)	ANNUAL FUND	250.
VISTA CENTER FOR THE BLIND 2470 EL CAMINO REAL, #107 PALO ALTO, CA 94306-1715	NOT RELATED 509(A)(1)	ANNUAL FUND	250.

NECTION NAME AND ADDRESS PERMINDENTIAL CONTRIBUTION AND ADDRESS PERMINDENTIAL CONTRIBUTION AND ADDRESS PERMINDENTIAL CONTRIBUTION AND ADDRESS PERMINDENTIAL CONTRIBUTION AND ADDRESS PERMINDENTIAL CONTRIBUTION PERMINDENTE PERMIND	EORM 990PE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR	NS PAID DUBING THE YEAR		ATTACHMENT 12 (CONT'D)
FOUNDATION STATUS OF RECIPIENT PURSOE OF GRANT OR CONTIBUTION AND AND AND AND AND AND AND AND AND AN		RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND		
NOT RELATED NATIONAL FUND NOT RELATED NOT RELATED NATIONAL FUND NA	S	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUT	1
SOG (A) (1) NOT RELATED ANNUAL FUND SOG (A) (1) ANNUAL FUND SOG (A) (2) ANNUAL FUND SOG (A) (2) ANNUAL FUND/CAPITAL CAMPAIGN SOG (A) (2) ANNUAL FUND/CAPITAL CAMPAIGN SOG (A) (2) ANNUAL FUND SOG (A) (ANNUAL FUND SOG (A) (ANNUAL FUND SOG (A) (ANNUAL FUND SOG (A) (ANNUAL FUND SOG (A	7	NOT RELATED	ANNUAL FUND	250.
NOT RELATED 509 (A) (1) NOT RELATED 509 (A) (1) NOT RELATED 509 (A) (1) NOT RELATED 509 (A) (2)	100	509(A)(1)		
509(A)(1) NOT RELATED ANNUAL FUND 509(A)(1)		NOT RELATED	ANNUAL FUND	.005
NOT RELATED NOT RELATED NOT RELATED NOT RELATED NOT RELATED SOJ (A) (1) NOT RELATED SOJ (A) (2) NOT RELATED SOJ (A) (2) NOT RELATED ANNUAL FUND/CAPITAL CAMPAIGN 100,		509(A)(1)	_	_
NOT RELATED 509 (A) (1) NOT RELATED 509 (A) (1) NOT RELATED 501 (C) (3) NOT RELATED 509 (A) (2) ANNUAL FUND ANNUAL FUND ANNUAL FUND ANNUAL CAMPAIGN 10,				
SO9 (A) (1) ANNUAL FUND ANNUAL FUND SO9 (A) (1) SO9 (A) (2) SO9 (A) (A) (A) (A) (A) (A) (A) (A) (A) (A)	NO	NOT RELATED	ANNUAL FUND	750.
NOT RELATED 509 (A) (1) NOT RELATED 501 (C) (3) NOT RELATED NOT RELATED 509 (A) (2)		509(A)(1)		_
NOT RELATED SOB(A) (1) NOT RELATED NOT RELATED NOT RELATED SOB (A) (2) SOB (A) (2)				
509(A)(1) NOT RELATED S01(C)(3) NOT RELATED ANNUAL FUND/CAPITAL CAMPAIGN 509 (A)(2)		NOT RELATED	ANNUAL FUND	250.
NOT RELATED 501(C)(3) NOT RELATED S09 (A)(2)		509(A)(1)		
NOT RELATED SOI(C)(3) NOT RELATED SO9 (A)(2)	116			
SOI(C)(3) NOT RELATED ANNUAL FUND/CAPITAL CAMPAIGN 509 (A)(2)		NOT RELATED	CAPITAL CAMPAIGN	25,000.
NOT RELATED S09 (A) (2)		501(C)(3)		-
NOT RELATED S09 (A)(2)				
		NOT RELATED	ANNUAL FUND/CAPITAL CAMPAIGN	10,000.
	OR	509 (A)(2)		

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FLOYD FAMILY FOUNDATION

RECIPIENT NAME AND ADDRESS CALIFORNIA PACIFIC MEDICAL CENTER FNDN PO BOX 45902 MOT RELATED HOSPITAL HOSPITAL HOSPITAL HOSPITAL SAN FRANCISCO, CA 94145 THE MICHAEL J. FOX FOUNDATION FO BOX 45339 SO 45339 NOT RELATED HOSPITAL HOSPITAL HOSPITAL HOSPITAL HOSPITAL SO (A) (1) FO BOX 45339 BOY SCOUTS OF ACEICE SO (A) (1) FO BOX 780 NOT RELATED SO (A) (1) FO BOX 780 NOT RELATED SO (A) (1) FOSTER CITY, CA 94404-1107 NOT RELATED SO (A) (1) FOSTER CITY, CA 94304 NOT RELATED SO (A) (1) FOSTER CITY, CA 94306 NOT RELATED SO (A) (1) FOR CHESS DRIVE FOR SCOUTS OF AMERICA SO (A) (1) FOR CHESS DRIVE FOR SCOUTS OF AMERICA SO (A) (1) FOR CHESS DRIVE FOR SCOUTS OF AMERICA SO (A) (1) FOR CHESS DRIVE FOR SCOUTS OF AMERICA SO (A) (1) FOR TRELATED FOR TRELATED F
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FLOYD FAMILY FOUNDATION

ATTACHMENT 12 (CONT'D)	AMOUNT	250.	. 6, 000	250.	250.	.000.7	. 59, 300
	PURPOSE OF GRANT OR CONTRIBUTION	ANNUAL FUND	ANNUAL FUND	ANNUAL FUND	ANNUAL FUND	CAPITAL CAMPAIGN	CAPITAL CAMPAIGN
PAID DURING THE YEAR	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	NOT RELATED 509(A)(1)	NOT RELATED 501(C)(3)	NOT RELATED 509(A)(1)	NOT RELATED CHURCH	NOT RELATED. 501 (C) (3)	NOT RELATED 509(A)(2)
EORM 990DF, PART XV GRANTS AND CONTRIBITIONS PAID DIRING THE YEAR	RECIPIENT NAME AND ADDRESS	SAN FRANCISCO MUSEUM OF MODERN ART PO BOX 7432 SAN FRANCISCO, CA 94120-9788	THE CLINTON BUSH HAITI FUND C/O WILLIAM J. CLINTON FOUNDATION 610 PRESIDENT CLINTON AVENUE LITTLE ROCK, AR 72201	CENTRAL ASIA INSTITUTE PO BOX 7209 BOZEMAN, MT 59771	NEWTON PRESBYTERIAN CHURCH 75 VERNON STREET NEWTON, MA 02458	MERCYWORLDWIDE 536 SHELDON STREET EL SEGUNDO, CA 90245	WAYLAND COMMUNITY POOL, INC. 195 CONCORD ROAD WAYLAND, MA 01778

ATTACHMENT 12

355,090

TOTAL CONTRIBUTIONS PAID

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•	94-3106119	13	RELATED OR EXEMPT FUNCTION INCOME			ATTACHMENT 13
		ATTACHMENT	AMOUNT	970.	10,987.	
			CODE	01		
			AMOUNT			36500
			BUSINESS			n
	FLOYD FAMILY FOUNDATION	FORM 990-PF, PART XVI-A - ANALYSIS OF OTHER REVENUE	DESCRIPTION	OTHER INCOME FROM PARTNERSHIP LAWSUIT AWARD	TOTALS	T30874 1555

FORM 990-PF - PART IV

Kind of F		AINS AND LOSSES FOR TAX ON INVEST				P Or	Date acquired	Date sold
Gross sale price less	Depreciation allowed/	Cost or	FMV	Adj basis	Excess of FMV over	Н	Gain	
price less expenses of sale	allowable	other basis	as of 12/31/69	as of 12/31/69	adı basıs	\coprod	or (loss)	
		PARTNERSHI	T-TERM COMMO P, S CORPORA TRUST GAIN	TION, AND O			-1,846.	
		PARTNERSHI	-TERM COMMON P, S CORPORA -TRUST GAIN-	TION, AND O		-1-		
			RADED SECURI YPE: SECURIT			P	VAR	V
228,016.		47,097.					180,919.	
			RADED SECURI YPE: SECURIT			Р	VAR	VAR
.22,569.		162,461.					-39,892.	
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