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

OMB No. 1545-0052

2009

Department of the Treasury
Internal Revenue Service

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

For calendar year 2009, or tax year beginning 7/01, 2009, and ending 6/30, 2010

G Check all that apply: ☐ Initial return ☐ Initial Return of a former public charity ☐ Final return
☐ Amended return ☐ Address change ☐ Name changeUse the
IRS label.
Otherwise,
print
or type.
See Specific
Instructions.THE PATRON SAINTS FOUNDATION
260 S. LOS ROBLES AVENUE, STE 201
PASADENA, CA 91101

A Employer identification number

95-3484257

B Telephone number (see the instructions)

626-564-0444

C If exemption application is pending, check here ☐D 1 Foreign organizations, check here ☐2 Foreign organizations meeting the 85% test, check here and attach computation ☐E If private foundation status was terminated under section 507(b)(1)(A), check here ☐F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ☐H Check type of organization: ☒ Section 501(c)(3) exempt private foundation
☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundationI Fair market value of all assets at end of year
(from Part II, column (c), line 16)

\$ 9,905,960.

J Accounting method: ☐ Cash ☒ Accrual
☐ Other (specify) _____

(Part I, column (d) must be on cash basis.)

Part I Analysis of Revenue and

Expenses (The total of amounts in
columns (b), (c), and (d) may not neces-
sarily equal the amounts in column (a)
(see the instructions).)(a) Revenue and
expenses per books(b) Net investment
income(c) Adjusted net
income(d) Disbursements
for charitable
purposes
(cash basis only)

1 Contributions, gifts, grants, etc. received (att sch).

2 Ck ☒ if the foundn is not req to att Sch B3 Interest on savings and temporary
cash investments

4 Dividends and interest from securities

5a Gross rents

b Net rental income
or (loss)

6a Net gain/(loss) from sale of assets not on line 10.

b Gross sales price for all
assets on line 6a

7 Capital gain net income (from Part IV, line 2)

8 Net short-term capital gain

9 Income modifications

10a Gross sales less
returns and
allowancesb Less: Cost of
goods sold

c Gross profit/(loss) (att sch)

11 Other income (attach schedule)

12 Total. Add lines 1 through 11

13 Compensation of officers, directors, trustees, etc.

14 Other employee salaries and wages

15 Pension plans, employee benefits

16a Legal fees (attach schedule)

b Accounting fees (attach sch) SEE ST 1

c Other prof fees (attach sch) SEE ST 2

17 Interest

18 Taxes (attach schedule) (see instr) SEE STM 3

19 Depreciation (attach
sch) and depletion

20 Occupancy

21 Travel, conferences, and meetings

22 Printing and publications

23 Other expenses (attach schedule)

SEE STATEMENT 4

24 Total operating and administrative
expenses. Add lines 13 through 23

25 Contributions, gifts, grants paid PART XV

26 Total expenses and disbursements.
Add lines 24 and 25

27 Subtract line 26 from line 12:

a Excess of revenue over expenses
and disbursements

b Net investment income (if negative, enter -0-)

c Adjusted net income (if negative, enter -0-)

SCANNED JAN 14 2011
RECEIVEDADMINISTRATIVE
AND
OPERATING
EXPENSES

3 9/14

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)		Beginning of year	End of year	
				(a) Book Value	(b) Book Value	(c) Fair Market Value
ASSETS	1	Cash – non-interest-bearing				
	2	Savings and temporary cash investments	201,036.	1,472,107.	1,472,107.	
	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 (attach schedule) (see the instructions)				
	7	Other notes and loans receivable (attach sch.)				
		Less: allowance for doubtful accounts				
	8	Inventories for sale or use				
	9	Prepaid expenses and deferred charges	2,816.	1,904.	1,904.	
	10a	Investments – U.S. and state government obligations (attach schedule)	3,805,276.	2,356,105.	2,356,105.	
	b	Investments – corporate stock (attach schedule)	5,593,309.	6,057,150.	6,057,150.	
	c	Investments – corporate bonds (attach schedule)				
	11	Investments – land, buildings, and equipment: basis				
	Less: accumulated depreciation (attach schedule)					
12	Investments – mortgage loans					
13	Investments – other (attach schedule)					
14	Land, buildings, and equipment: basis	4,919.				
	Less: accumulated depreciation (attach schedule)	SEE STMT 5.	3,505.	2,217.	1,414.	1,414.
15	Other assets (describe	SEE STATEMENT 6	18,691.	17,280.	17,280.	
16	Total assets (to be completed by all filers – see instructions. Also, see page 1, item I)		9,623,345.	9,905,960.	9,905,960.	
LIABILITIES	17	Accounts payable and accrued expenses				
	18	Grants payable				
	19	Deferred revenue				
	20	Loans from officers, directors, trustees, & other disqualified persons				
	21	Mortgages and other notes payable (attach schedule)				
	22	Other liabilities (describe	SEE STATEMENT 7	14,093.	20,496.	
	23	Total liabilities (add lines 17 through 22)		14,093.	20,496.	
NET FUND ASSET BALANCES		Foundations that follow SFAS 117, check here	☒			
	24	Unrestricted		9,609,252.	9,885,464.	
	25	Temporarily restricted				
	26	Permanently restricted				
		Foundations that do not follow SFAS 117, check here	☐			
	27	Capital stock, trust principal, or current funds				
	28	Paid-in or capital surplus, or land, building, and equipment fund				
	29	Retained earnings, accumulated income, endowment, or other funds				
	30	Total net assets or fund balances (see the instructions)		9,609,252.	9,885,464.	
	31	Total liabilities and net assets/fund balances (see the instructions)		9,623,345.	9,905,960.	

Part III Analysis of Changes in Net Assets or Fund Balances

1	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	9,609,252.
2	Enter amount from Part I, line 27a	2	-326,613.
3	Other increases not included in line 2 (itemize)	3	SEE STATEMENT 8
4	Add lines 1, 2, and 3	4	602,825.
5	Decreases not included in line 2 (itemize)	5	
6	Total net assets or fund balances at end of year (line 4 minus line 5) – Part II, column (b), line 30	6	9,885,464.

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shares MLC Company)		(b) How acquired P — Purchase D — Donation	(c) Date acquired (month, day, year)	(d) Date sold (month, day, year)
1 a SEE STATEMENT 9				
b				
c				
d				
e				

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a			
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(i) Gains (Column (h) gain minus column (k), but not less than -0-) or Losses (from column (h))
(j) Fair Market Value as of 12/31/69	(k) Adjusted basis as of 12/31/69	(l) Excess of column (j) over column (k), if any	
a			
b			
c			
d			
e			

2 Capital gain net income or (net capital loss). If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7	2	129,312.
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c) (see the instructions). If (loss), enter -0- in Part I, line 8. 	3	0.

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☒ No

If 'Yes,' the foundation does not qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year; see the instructions before making any entries.

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (column (b) divided by column (c))
2008	592,160.	10,130,774.	0.058452
2007	631,363.	12,393,556.	0.050943
2006	581,244.	11,354,087.	0.051192
2005	568,135.	10,756,143.	0.052820
2004	514,073.	10,069,055.	0.051055

2 Total of line 1, column (d)	2	0.264462
3 Average distribution ratio for the 5-year base period — divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	0.052892
4 Enter the net value of noncharitable-use assets for 2009 from Part X, line 5	4	10,290,519.
5 Multiply line 4 by line 3	5	544,286.
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	2,775.
7 Add lines 5 and 6	7	547,061.
8 Enter qualifying distributions from Part XII, line 4	8	594,898.

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.

Part V Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 — see the instructions)

1 a Exempt operating foundations described in section 4940(d)(2), check here ☐ and enter 'N/A' on line 1. Date of ruling or determination letter: _____ (attach copy of letter if necessary - see instr.)			
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here ☒ and enter 1% of Part I, line 27b.		1	2,775.
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, column (b).			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-).		2	0.
3 Add lines 1 and 2		3	2,775.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-).		4	0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-....		5	2,775.
6 Credits/Payments:			
a 2009 estimated tax pmts and 2008 overpayment credited to 2009	6a	2,400.	
b Exempt foreign organizations — tax withheld at source	6b		
c Tax paid with application for extension of time to file (Form 8868).	6c	1,075.	
d Backup withholding erroneously withheld	6d		
7 Total credits and payments. Add lines 6a through 6d	7	3,475.	
8 Enter any penalty for underpayment of estimated tax. Check here ☒ if Form 2220 is attached	8		
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	0.	
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid.	10	700.	
11 Enter the amount of line 10 to be: Credited to 2010 estimated tax	700.	Refunded.	11 0.

Part VII Statements Regarding Activities

	Yes	No
1 a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?		X
If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.		
c Did the foundation file Form 1120-POL for this year?		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. ▶ \$ 0. (2) On foundation managers. ▶ \$ 0.		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$ 0.		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS?		X
If 'Yes,' attach a detailed description of the activities.		
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes		X
4 a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
b If 'Yes,' has it filed a tax return on Form 990-T for this year?	N/A	
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?		X
If 'Yes,' attach the statement required by General Instruction T.		
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV.	X	
8 a Enter the states to which the foundation reports or with which it is registered (see the instructions)		
CA		
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) of each state as required by General Instruction G? If 'No,' attach explanation	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If 'Yes,' complete Part XIV.		X
10 Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses.		X

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Part VII-A Statements Regarding Activities Continued

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes', attach schedule (see instructions)	11		X
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? Website address: <u>WWW.PATRONSAINTSFOUNDATION.ORG</u>	13	X	
14	The books are in care of <u>KATHLEEN T. SHANNON</u> Telephone no. <u>626-564-0444</u> Located at <u>260 S LOS ROBLES AVE STE 201 PASADENA CA</u> ZIP + 4 <u>91101</u>			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here <u>N/A</u> and enter the amount of tax-exempt interest received or accrued during the year <u>15</u>			N/A

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

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 ☒ No	
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	☐ Yes ☒ No	
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	☐ Yes ☒ No	
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	☒ Yes ☐ 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)?	☐ Yes ☒ 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.)	☐ Yes ☒ No	
b If any answer is 'Yes' to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see the instructions)? Organizations relying on a current notice regarding disaster assistance check here ☐	1b	X
c 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?	1c	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? If 'Yes,' list the years <u>20__ , 20__ , 20__ , 20__</u>	☐ Yes ☒ No	
b 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 statement - see the instructions.)	2b	N/A
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. <u>20__ , 20__ , 20__ , 20__</u>		
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	☐ Yes ☒ No	
b If 'Yes,' did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or 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	N/A
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	X
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2009?	4b	X

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Part VII B Statements Regarding Activities for Which Form 4720 May Be Required (continued)**5a** During the year did the foundation pay or incur any amount to:

- (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? ☐ Yes ☒ No
- (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive? ☐ Yes ☒ No
- (3) Provide a grant to an individual for travel, study, or other similar purposes? ☐ Yes ☒ No
- (4) Provide a grant to an organization other than a charitable, etc, organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see instructions) ☐ Yes ☒ No
- (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? ☐ Yes ☒ No

b If any answer is 'Yes' to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?

5b N/A

Organizations relying on a current notice regarding disaster assistance check here. ☐**c** If the answer is 'Yes' to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?N/A ☐ Yes ☐ No

If 'Yes,' attach the statement required by Regulations section 53.4945-5(d).

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☒ No**b** Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ☐ Yes ☒ No

6b X

If 'Yes' to 6b, file Form 8870.

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? ☐ Yes ☒ No**b** If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?

7b N/A

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**1** List all officers, directors, trustees, foundation managers and their compensation (see instructions).

(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
SEE STATEMENT 10		72,100.	4,326.	0.

2 Compensation of five highest-paid employees (other than those included on line 1— see instructions). 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, other allowances
NONE				

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

0

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a Average monthly fair market value of securities	1a	9,859,694.
b Average of monthly cash balances	1b	571,370.
c Fair market value of all other assets (see instructions)	1c	16,163.
d Total (add lines 1a, b, and c)	1d	10,447,227.
e 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	10,447,227.
4 Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	156,708.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	10,290,519.
6 Minimum investment return. Enter 5% of line 5	6	514,526.

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

1 Minimum investment return from Part X, line 6	1	514,526.
2a Tax on investment income for 2009 from Part VI, line 5	2a	2,775.
b Income tax for 2009. (This does not include the tax from Part VI.)	2b	
c Add lines 2a and 2b	2c	2,775.
3 Distributable amount before adjustments. Subtract line 2c from line 1	3	511,751.
4 Recoveries of amounts treated as qualifying distributions	4	
5 Add lines 3 and 4	5	511,751.
6 Deduction from distributable amount (see instructions)	6	
7 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	511,751.

Part XII Qualifying Distributions (see instructions)

1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a Expenses, contributions, gifts, etc. — total from Part I, column (d), line 26	1a	594,898.
b 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:		
a Suitability test (prior IRS approval required)	3a	
b Cash distribution test (attach the required schedule)	3b	
4 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	594,898.
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions)	5	2,775.
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	592,123.

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

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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, line 7.				511,751.
2 Undistributed income, if any, as of the end of 2009:				
a Enter amount for 2008 only			0.	
b Total for prior years: 20____, 20____, 20____		0.		
3 Excess distributions carryover, if any, to 2009:				
a From 2004.				
b From 2005.				
c From 2006.				
d From 2007.				
e From 2008	34,606.			
f Total of lines 3a through e	34,606.			
4 Qualifying distributions for 2009 from Part XII, line 4: ► \$ 594,898.				
a Applied to 2008, but not more than line 2a.			0.	
b Applied to undistributed income of prior years (Election required — see instructions)		0.		
c Treated as distributions out of corpus (Election required — see instructions)	0.			
d Applied to 2009 distributable amount				511,751.
e Remaining amount distributed out of corpus	83,147.			
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	117,753.			
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 instructions			0.	
f Undistributed income for 2009. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2010.				0.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions)	0.			
8 Excess distributions carryover from 2004 not applied on line 5 or line 7 (see instructions)	0.			
9 Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a.	117,753.			
10 Analysis of line 9:				
a Excess from 2005.				
b Excess from 2006				
c Excess from 2007.				
d Excess from 2008.	34,606.			
e Excess from 2009.	83,147.			

Part XV Supplementary Information (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year SEE ATTACHED		N/A	CHARITABLE, SCIENTIFIC OR EDUCATIONAL HEALTH CARE PROGRAMS	483,247.
Total				3a 483,247.
b Approved for future payment				
Total				3b

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.

Enter gross amounts unless otherwise indicated.		Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (see the instructions)
	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount		
1	Program service revenue:					
a						
b						
c						
d						
e						
f						
g	Fees and contracts from government agencies					
2	Membership dues and assessments					
3	Interest on savings and temporary cash investments			14	80,879.	
4	Dividends and interest from securities			14	121,554.	
5	Net rental income or (loss) from real estate:					
a	Debt-financed property					
b	Not debt-financed property					
6	Net rental income or (loss) from personal property					
7	Other investment income					
8	Gain or (loss) from sales of assets other than inventory			18	129,312.	
9	Net income or (loss) from special events					
10	Gross profit or (loss) from sales of inventory					
11	Other revenue:					
a						
b						
c						
d						
e						
12	Subtotal. Add columns (b), (d), and (e).				331,745.	
13	Total. Add line 12, columns (b), (d), and (e)				331,745.	331,745.

(See worksheet in the instructions for line 13 to verify calculations.)

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

[illegible]

STATEMENT 1
FORM 990-PF, PART I, LINE 16B
ACCOUNTING FEES

	(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING FEES	\$ 9,100.			\$ 9,100.
TOTAL	\$ 9,100.	\$ 0.		\$ 9,100.

STATEMENT 2
FORM 990-PF, PART I, LINE 16C
OTHER PROFESSIONAL FEES

	(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
INVESTMENT COUNSEL FEES.....	\$ 52,379.	\$ 52,379.		
TOTAL	\$ 52,379.	\$ 52,379.		\$ 0.

STATEMENT 3
FORM 990-PF, PART I, LINE 18
TAXES

	(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
EXCISE TAX.....	\$ 8,803.			
FOREIGN TAXES.....	1,842.	\$ 1,842.		
PAYROLL TAXES	5,635.			\$ 5,635.
TOTAL	\$ 16,280.	\$ 1,842.		\$ 5,635.

STATEMENT 4
FORM 990-PF, PART I, LINE 23
OTHER EXPENSES

	(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
401 (K) ADMINISTRATION EXPENSES.....	\$ 2,175.			\$ 2,175.
INSURANCE	3,045.			3,436.
OFFICE EXPENSE.....	4,112.			4,088.
POSTAGE.....	221.			221.
PRINTING.....	587.			587.
TAXES AND LICENSES.....	60.			60.
TELEPHONE.....	1,183.			1,183.
TOTAL	\$ 11,383.	\$ 0.		\$ 11,750.

STATEMENT 5
FORM 990-PF, PART II, LINE 14
LAND, BUILDINGS, AND EQUIPMENT

CATEGORY	BASIS	ACCUM. DEPREC.	BOOK VALUE	FAIR MARKET VALUE
FURNITURE AND FIXTURES	\$ 3,158.	\$ 2,126.	\$ 1,032.	\$ 1,032.
MACHINERY AND EQUIPMENT	1,761.	1,379.	382.	382.
TOTAL	\$ 4,919.	\$ 3,505.	\$ 1,414.	\$ 1,414.

STATEMENT 6
FORM 990-PF, PART II, LINE 15
OTHER ASSETS

	BOOK VALUE	FAIR MARKET VALUE
ACCRUED INCOME	\$ 16,163.	\$ 16,163.
DEPOSITS	1,117.	1,117.
TOTAL	\$ 17,280.	\$ 17,280.

STATEMENT 7
FORM 990-PF, PART II, LINE 22
OTHER LIABILITIES

DEFERRED TAX LIABILITY	\$ 20,121.
EXCISE TAX PAYABLE	375.
TOTAL	\$ 20,496.

STATEMENT 8
FORM 990-PF, PART III, LINE 3
OTHER INCREASES

NET UNREALIZED GAIN ON INVESTMENTS	\$ 602,825.
TOTAL	\$ 602,825.

STATEMENT 9
FORM 990-PF, PART IV, LINE 1
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

ITEM	(A) DESCRIPTION	(B) HOW ACQUIRED	(C) DATE ACQUIRED	(D) DATE SOLD
1	250000 FHLB 4.175% 6/1/10	PURCHASED	11/15/2004	6/01/2010
2	500000 FHLB 3.530% 6/10/11	PURCHASED	11/25/2008	6/10/2010
3	150000 FNMA 3.250% 11/12/14	PURCHASED	10/19/2009	5/12/2010
4	300000 FNMA 1.875% 4/8/11	PURCHASED	3/26/2009	4/08/2010
5	400000 FNMA 2.250% 12/23/11	PURCHASED	3/17/2009	3/23/2010
6	300000 FHLB 1.100% 3/23/10	PURCHASED	3/17/2009	3/23/2010
7	200000 FNMA 3.625% 7/14/14	PURCHASED	6/25/2009	1/14/2010

STATEMENT 9 (CONTINUED)
FORM 990-PF, PART IV, LINE 1
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

ITEM	(A) DESCRIPTION	(B) HOW ACQUIRED	(C) DATE ACQUIRED	(D) DATE SOLD
8	400000 FHLMC 2.000% 1/20/12	PURCHASED	6/25/2009	1/20/2010
9	200000 FHLB 4.300% 10/7/13	PURCHASED	9/17/2008	10/07/2009
10	150000 FHLMC 3.500% 9/30/09	PURCHASED	3/25/2004	9/30/2009
11	175000 FHLB 4.000% 7/15/11	PURCHASED	9/24/2008	7/15/2009
12	12000 TECK RESOURCES LTD	PURCHASED	VARIOUS	5/27/2010
13	2600 MICROSOFT CORP	PURCHASED	6/15/2000	3/23/2010
14	3100 SANOFI-ADVENTIS ADR	PURCHASED	3/23/2006	7/06/2009

ITEM	(E) GROSS SALES	(F) DEPREC. ALLOWED	(G) COST BASIS	(H) GAIN (LOSS)	(I) FMV 12/31/69	(J) ADJ. BAS. 12/31/69	(K) EXCESS (I) - (J)	(L) GAIN (LOSS)
1	250,000.		250,000.	0.				\$ 0.
2	500,000.		511,889.	-11,889.				-11,889.
3	150,000.		150,000.	0.				0.
4	300,000.		300,000.	0.				0.
5	400,000.		400,000.	0.				0.
6	300,000.		300,000.	0.				0.
7	200,000.		200,000.	0.				0.
8	400,000.		400,000.	0.				0.
9	200,000.		200,000.	0.				0.
10	150,000.		150,000.	0.				0.
11	175,000.		175,000.	0.				0.
12	414,641.		203,142.	211,499.				211,499.
13	76,844.		94,399.	-17,555.				-17,555.
14	92,981.		145,724.	-52,743.				-52,743.
TOTAL								\$ 129,312.

STATEMENT 10
FORM 990-PF, PART VIII, LINE 1
LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED	COMPEN- SATION	CONTRI- BUTION TO EBP & DC	EXPENSE ACCOUNT/ OTHER
KATHLEEN T. SHANNON 260 S LOS ROBLES AVE SUITE 201 PASADENA, CA 91101	EXECUTIVE DIREC 27.00	\$ 72,100.	\$ 4,326.	\$ 0.
NATHAN LEWIS 260 S LOS ROBLES AVE SUITE 201 PASADENA, CA 91101	DIRECTOR 1.00		0.	0.
DEBRA SPIEGEL 260 S LOS ROBLES AVE SUITE 201 PASADENA, CA 91101	PAST PRESIDENT 1.00		0.	0.
WILEY BUNN 260 S LOS ROBLES AVE SUITE 201 PASADENA, CA 91101	DIRECTOR 1.00		0.	0.

STATEMENT 10 (CONTINUED)
 FORM 990-PF, PART VIII, LINE 1
 LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED	COMPEN- SATION	CONTRI- BUTION TO EBP & DC	EXPENSE ACCOUNT/ OTHER
CHARLES CARROLL 260 S LOS ROBLES AVE SUITE 201 PASADENA, CA 91101	DIRECTOR 1.00	\$ 0.	\$ 0.	\$ 0.
J. BENJAMIN EARL 260 S LOS ROBLES AVE SUITE 201 PASADENA, CA 91101	DIRECTOR 1.00	0.	0.	0.
GRETCHEN BERGER 260 S LOS ROBLES AVE SUITE 201 PASADENA, CA 91101	DIRECTOR 1.00	0.	0.	0.
BRYAN HERRMANN 260 S LOS ROBLES AVE SUITE 201 PASADENA, CA 91101	PRESIDENT-ELECT 1.00	0.	0.	0.
THOMAS COLLINS 260 S LOS ROBLES AVE SUITE 201 PASADENA, CA 91101	DIRECTOR 1.00	0.	0.	0.
JAMES W. GRAUNKE 260 S LOS ROBLES AVE SUITE 201 PASADENA, CA 91101	DIRECTOR 1.00	0.	0.	0.
DR. DOROTHY MCVANN 260 S LOS ROBLES AVE SUITE 201 PASADENA, CA 91101	TREASURER 1.00	0.	0.	0.
SALLY SIMS 260 S LOS ROBLES AVE SUITE 201 PASADENA, CA 91101	DIRECTOR 1.00	0.	0.	0.
JOSEPH W. SKEEHAN 260 S LOS ROBLES AVE SUITE 201 PASADENA, CA 91101	PRESIDENT 1.00	0.	0.	0.
SHARON THRALLS 260 S LOS ROBLES AVE SUITE 201 PASADENA, CA 91101	SECRETARY 1.00	0.	0.	0.
VERA VIGNES 260 S LOS ROBLES AVE SUITE 201 PASADENA, CA 91101	DIRECTOR 1.00	0.	0.	0.
MARGARET LANDRY 260 S LOS ROBLES AVE SUITE 201 PASADENA, CA 91101	DIRECTOR 1.00	0.	0.	0.
TOTAL		\$ 72,100.	\$ 4,326.	\$ 0.

STATEMENT 11
FORM 990-PF, PART XV, LINE 2A-D
APPLICATION SUBMISSION INFORMATION

NAME OF GRANT PROGRAM:

NAME:

CARE OF:

STREET ADDRESS:

CITY, STATE, ZIP CODE:

TELEPHONE:

FORM AND CONTENT:

SUBMISSION DEADLINES:

RESTRICTIONS ON AWARDS:

KATHLEEN T. SHANNON

THE PATRON SAINTS FOUNDATION

260 S. LOS ROBLES, SUITE 201

PASADENA, CA 91101

(626) 564-0444

SEE ATTACHED

FIRST FRIDAY IN MARCH AND OCTOBER

THE PATRON SAINTS FOUNDATION IS A PRIVATE FOUNDATION THAT PROVIDES GRANTS TO PUBLIC CHARITIES THAT IMPROVE THE HEALTH OF INDIVIDUALS RESIDING IN THE WEST SAN GABRIEL VALLEY THROUGH HEALTH CARE PROGRAMS THAT ARE CONSISTENT WITH THE MORAL AND RELIGIOUS TEACHINGS OF THE ROMAN CATHOLIC CHURCH.

GRANTS ARE MADE TO QUALIFIED PUBLIC CHARITIES TO SPONSOR CHARITABLE, SCIENTIFIC OR EDUCATIONAL HEALTH CARE PROGRAMS WHICH ARE NOT INCONSISTENT WITH THE MORAL AND RELIGIOUS TEACHINGS OF THE ROMAN CATHOLIC CHURCH. FUNDING FOR HEALTH CARE PROJECTS IS AVAILABLE IN THE FOLLOWING CATEGORIES IN ORDER OF PRIORITY:

1. COMMUNITY HEALTH SERVICES (DIRECT SERVICES)
2. COMMUNITY HEALTH CARE EDUCATION
3. CAPITAL EXPENDITURES
4. EQUIPMENT & SUPPLIES
5. MEDICAL RESEARCH

The Patron Saints Foundation
Form 990-PF, Part II, Lines 10a, 10b and 10c
For the year ended June 30, 2010

95-3484257

Par Value or Shares	Description	Market Value
300,000	FHLB 1.150%, due 11/5/10	300,915.00
400,000	FHLB 2.050%, due 1/13/12	409,300.00
175,000	FHLB 2.000%, due 12/28/12	175,820.22
200,000	FHLB 3.400%, due 7/7/14	205,625.00
100,000	FHLMC 1.600%, due 10/29/12	100,339.60
150,000	FNMA 2.750%, due 7/26/13	150,190.50
500,000	FNMA 2.200%, due 10/28/13	505,995.00
500,000	FNMA 2.050%, due 11/14/13	507,920.00
Total investments - U.S. government obligations		<u>2,356,105.32</u>
3,500	AT&T Inc.	84,665.00
6,000	Abbott Labs	280,680.00
4,000	Allstate Corp.	114,920.00
8,000	Anadarko Petro	288,720.00
19,000	Applied Materials Inc	228,380.00
3,200	Bank of America Corp.	45,984.00
7,871	Barrick Gold Corp	357,422.11
5	Berkshire Hathaway	600,000.00
2,000	Boeing Co.	125,500.00

The Patron Saints Foundation
Form 990-PF, Part II, Lines 10a, 10b and 10c
For the year ended June 30, 2010

95-3484257

Par Value or Shares	Description	Market Value
3,000	BP PLC Spons ADR	86,640.00
4,700	Chevron Corp	318,942.00
4,328	ConocoPhillips	212,461.52
4,350	Costco Whsl Corp New	238,510.50
2,200	Devon Energy Corp	134,024.00
6,400	Duke Energy Corp.	102,400.00
4,392	Exxon Mobil Corp.	250,651.44
1,000	Gilead Sciences Inc.	34,280.00
5,600	GoldCorp Inc. New	245,560.00
140	Google Inc.	62,293.00
4,600	Honeywell International	179,538.00
6,000	Intel Corp.	116,700.00
4,200	International Business Machines	518,616.00
12,500	Kinross Gold Corp.	213,625.00
5,000	Nestle S A Spnsd ADR	241,200.00
1,800	Procter & Gamble Co	107,964.00
3,702	Raytheon Company	179,139.78
5,000	Schlumberger Ltd.	276,700.00
1,150	Thermo Fisher Scientific Inc.	56,407.50
1,700	Transocean Inc New	78,761.00
3,500	3M Company	276,465.00
	Total investments - corporate stock	6,057,149.85
	Grand total	8,413,255.17

FY 2009-2010 Grant Awards

Braille Institute

741 N Vermont Ave Los Angeles, CA 90029	Free Low Vision & Rehab Services	\$10,000
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Christ Child Society of Pasadena

59 Annandale Road Pasadena, CA 91105	Medical Support to 18 WSGV Catholic Schools	\$15,000
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Community Health Alliance of Pasadena (CHAP)

1855 N Fair Oaks Avenue, #200 Pasadena, CA 91103	Specialty Care Telehealth Program	\$25,000
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Convalescent Aid Society

3255 E Foothill Blvd Pasadena, CA 91107	Purchase Durable Medical Equipment	\$15,000
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Door of Hope

669 N Los Robles Avenue Pasadena, CA 91101	Mental Health & Family Counseling Services	\$10,000
---	--	----------

Elizabeth House

P.O. Box 94077 Pasadena, CA 91109-4077	Health Services Program	\$15,000
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Foothill Family Service

2500 E Foothill Blvd, #300 Pasadena, CA 91107	Child Abuse Treatment (CHAT)	\$10,000
--	------------------------------	----------

Friends Outside in Los Angeles County

464 E Walnut Street Pasadena, CA 91101	After School Project for Children with Incarcerated Family Memt	\$15,000
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Girls on the Run of Pasadena & the San Gabriel Valley

556 S Fair Oaks Avenue, Suite 101-307 Pasadena, CA 91105	Program & Volunteer Coordinator	\$15,000
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Hathaway-Sycamores Child & Family Services

210 S Delacey Avenue, #110 Pasadena, CA 91105	Costs Associated with Residential Treatment Program	\$15,000
--	---	----------

HEAR Center

301 E. Del Mar Blvd Pasadena, CA 91101	Community Access Program	\$14,247
---	--------------------------	----------

Homeless Not Toothless

11908 San Vicente Blvd, #507 Brentwood, CA 90049	El Monte Foster Youth Dental Program	\$15,000
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House Ear Institute

2100 W Third Street Los Angeles, CA 90057	Hearing Health Care for WSGV Children	\$10,000
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Los Angeles Regional Foodbank

1734 E 41st Street Los Angeles, CA 90058	Food Distribution Fund	\$10,000
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Marianne Frostig Center for Educational Therapy

971 N. Altadena Drive Pasadena, CA 91107	Teacher Training & Support in Neurologically Based Learning D	\$10,000
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Mater Dolorosa Passionist Retreat Center

700 Sunnyside Avenue Sierra Madre, CA 91024	6 Person Vehicle	\$15,000
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Methodist Hospital of Southern California

P.O. Box 60016 Arcadia, CA 91066-6016	Neonatal Intensive Care Unit Incubator	\$25,000
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Mothers' Club Family Learning Center

980 N. Fair Oaks Avenue Pasadena, CA 91103	Bilingual Mental Health Support	\$20,000
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Nativity School

10907 St Louis Drive El Monte, CA 91731	School Counselor	\$10,000
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Painted Turtle Gang Camp Foundation

1300 Fourth St , #300 Santa Monica, CA 90401	Medical Specialty Camp Program	\$15,000
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Partners in Care Foundation

723 Mott Street, #150 San Fernando, CA 91340	Family Care Network	\$10,000
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Pasadena Educational Foundation

351 S. Hudson Ave Pasadena, CA 91109	Nurse Practitioner at 3 Family Centers	\$15,000
---	--	----------

Phoenix House of California

11600 Eldridge Avenue Lake View Terrace, CA 91342	Mental Health Services & Assessment Materials	\$20,000
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Pregnancy Help Center of San Gabriel Valley

5626 N Rosemead Blvd Temple City, CA 91780	Parenting Classes	\$6,000
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Rose City Counseling Center

595 E Colorado Blvd , #303 Pasadena, CA 91101	Funds for Part-Time Clinical Director's Salary	\$15,000
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Rosemary Children's Services

36 Kinneloa Avenue, #200 Pasadena, CA 91107	Child Care Counselor	\$15,000
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Special Olympics of Southern California

P.O Box 94949 Pasadena, CA 91109	Health and Fitness Programs	\$10,000
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Verdugo Hills Hospital Foundation

1812 Verdugo Blvd. Glendale, CA 91208	2 Electronic Medical Record Computers on Wheels	\$12,000
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Villa Esperanza Services

2060 E. Villa Street Pasadena, CA 91107	Speech & Language Personnel & Staff Training	\$20,000
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Wellness Community - Foothills

200 E. Del Mar Blvd., #118 Pasadena, CA 91105	Support Group for Cancer Patients, Caregivers & Children	\$36,000
--	--	----------

Young and Healthy

37 N. Holliston Ave. Pasadena, CA 91106	Comprehensive Dental Health Programming	\$35,000
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NAME OF ORGANIZATION AS SHOWN ON IRS DETERMINATION LETTER (**BOLD** & ALL CAPS): _____

Address:

Executive Director (Name & Title):

Phone + Ext.:

E-mail:

Contact Person for Grant Proposal (Name & Title):

Phone + Ext.:

E-mail:

I. MISSION STATEMENT (**LIMIT** to 1 Sentence **ONLY** – State the purpose of why the agency exists):

II. USING BULLET POINTS, describe the programs & services of the nonprofit that holds the tax exempt status. **USING BULLET POINTS**, include statistics on # of clients/patients served each month and annually; # of FTE staff in Program Services, Management & General and Fundraising; and # of units/beds along with a description of facility (if in-house program):

III. ORGANIZATION'S CURRENT FISCAL YEAR OPERATING BUDGET (Use the exact budget categories below):

Fiscal Year: MM/DD/YYYY – MM/DD/YYYY			
OPERATING INCOME	AMOUNT	OPERATING EXPENSES	AMOUNT
Service Fees/Program Income	\$	Program Services	\$
Government Sources	\$	Management & General	\$
Endowment & Interest	\$	Fund Raising	\$
Contributions From:		Miscellaneous (LIST)	\$
-Individuals	\$		
-Corporations	\$		
-Foundations	\$		
-Special Events (net amount)	\$		
-Board of Directors	\$		
-Other	\$		
Total Contributions	\$		
Miscellaneous (LIST)	\$		
TOTAL OPERATING INCOME	\$	TOTAL OPERATING EXPENSES	\$

IV. GRANT PROJECT-Please check 1 that describes the purpose of the grant:
☐ Maintain Current Program/Services ☐ Expand Current Program/Services ☐ Add New Program/Services

1. Project Title:

2. Executive Summary of Proposed Health Care Project/Program (**LIMIT** to 3-5 sentences):

3. Grant Request: \$

4. Project Budget: \$

5. Describe the purpose of the grant and how our grant funds will be used:

a) Describe the proposed health care project & how it relates to your agency's mission. **INCLUDE** total number of clients/patients to be served by the proposed health care project, number of additional staff needed and the location of the project.

b) State expected health care outcome(s) from the proposed project & describe how you will measure the outcome(s).

c) Provide a timeline of one (1) year for the proposed health care project (grant funds must be used within 1 year).

d) Provide an itemized **income & expense** budget for the proposed health care project using the following format.

Explain any deficits in a footnote. You may add rows as needed, within the 3 page limit of the grant application.

INCOME: Provide Funder's Name, Grant Amount & if grant is pending or secured			EXPENSES: Use BOLD TYPE to highlight the expenses that are expected to be paid with the Patron Saints Grant & Include the Project's General Operating Expenses	
LIST each source of pending funding	\$		LIST Project Personnel - Hrly. Rates x # of hrs. & Professional Titles	\$
Patron Saints Foundation (should match #3. Grant Request above)	\$	Pending	Subtotal Project Personnel	\$
Subtotal of Pending Grants	\$		LIST Project Overhead/Admin. Expenses	\$
LIST each source of secured funding	\$		Subtotal Project Overhead	\$
Subtotal of Secured Grants	\$		LIST Project Materials/Supplies Expenses	\$
			Subtotal Project Materials	\$
TOTAL INCOME for Project	\$		TOTAL EXPENSES for Project	\$

Patron Saints Foundation
 260 S. Los Robles Avenue • Suite 201 • Pasadena • CA • 91101
 Tel/Fax 626-564-0444 • E-mail patronsaintsfdn@sbcglobal.net
www.patronsaintsfoundation.org

FY2009-2010 FALL Grant Application
 Page 1 of 2

V. APPLICATION SUBMISSION PROCEDURES:

Deadline: Applications must be postmarked on or before **Midnight, October 2, 2009**.

PLEASE USE REGULAR U.S. MAIL SERVICE TO SEND IN YOUR GRANT PROPOSAL. DO NOT drop off your proposal. To avoid delays in delivery, do not use delivery services, certified or return receipt requested services. To ensure compliance with the stated post mark deadline, request a Proof of Mailing slip from the post office.

Please follow the grant application format EXACTLY. Include the question & then your response – DO NOT WRITE "SEE ATTACHED." The grant application may not exceed 3 pages for Sections I – IV. The required attachments do not count towards the 3 page limit. The font size cannot be less than 11 point.

The grant application package must include the following: A COVER LETTER IS NOT REQUIRED

1. Two (2) copies of the three-page grant application (one copy stapled & one copy clipped with a paper clip);
2. Send an e-mail to patronsaintsfdn@sbcglobal.net with a MS Word document attachment of the 3-page grant application;
3. A signed Accountability Statement that the funds will be utilized as stated in the grant application, as follows:
This grant application from (Legal Name of Public Charity) to the Patron Saints Foundation for a grant of \$ _____
to be used for _____ is hereby submitted; and, in the event said grant is made, either in whole or in part, the funds so granted will be used solely for the purpose specified above.
Date: _____ Executive Director's Signature: _____;
4. Two (2) copies of the Board of Directors List that includes their name, board title, city of residence and professional affiliation. At the bottom of the list, for the last completed fiscal year, indicate the % of board members that supported your agency, the total amount of direct contributions and the total amount raised by the board (do not include direct contributions in this last figure) (one copy stapled & one copy clipped with a paper clip);
5. Financial Information:
 - a) Most recent audited financial statement; **AND**,
 - b) First page of the most recent IRS 990 + One complete copy (stapled) of the most recent 990 with **ALL** attachments, schedules & statements;
 - c) **If your organization does not have both of the above stated financial documents**, submit the document you have and also submit a Balance Sheet along with an Income Statement for the most recently completed fiscal year;
6. Please include a copy of the organization's IRS 501(c)(3) Determination Letter stating that the agency is a public, tax-exempt charity & not a private foundation (stapled); OR, (ONLY WHEN APPLICABLE) a copy of the Face Page and the page on which the Applicant's listing is found in the current edition of the Official National Directory of the Applicant's Sponsoring IRS recognized Church or Public Charity, with a copy of the IRS Group Ruling Letter to the Sponsoring Organization for its current National Directory Listing of its sponsored organizations which are covered by its Group Ruling and in which the Applicant is identified as covered by that Group Ruling (stapled);
7. A completed H.R. 4 Self-Certification Form on applicant's letterhead, as follows: (Legal Name of Public Charity) with EIN of _____, is a 501(c)(3) organization with a designation under IRS section 509(a) as an organization described in: **(PLEASE SELECT ONLY ONE)** _____ Section 509(a)(1) OR, _____ Section 509(a)(2) OR, _____ Section 509(a)(3).
I declare that I am authorized to sign this self-certification form on behalf of the above organization and it is true and correct to the best of my knowledge.
Date: _____ Executive Director's Signature: _____
8. Place all the above documents, in the order listed, in a file folder with the organization's name on the file folder tab.

COPY

FY2009-2010 HEALTH CARE GRANT GUIDELINES**MISSION**

The Patron Saints Foundation is a private foundation that provides grants to public charities that improve the health of individuals residing in the West San Gabriel Valley through health care programs which are consistent with the moral and religious teachings of the Roman Catholic Church.

GRANT AMOUNT

Grants typically range from \$5,000 - \$15,000. Larger or smaller grants are at the discretion of The Patron Saints Foundation Board of Directors based on the merits of the project.

GEOGRAPHIC AREA SERVED

Grants will be given to qualified public charities serving the West San Gabriel Valley as defined as follows: the cities of Alhambra, Arcadia, Duarte, El Monte, La Canada Flintridge, Monrovia, Monterey Park, Pasadena, Rosemead, San Gabriel, San Marino, Sierra Madre, South El Monte, South Pasadena, Temple City and the unincorporated areas of Los Angeles County known as Altadena and South San Gabriel along with the unincorporated portions of Los Angeles County bounded by these areas.

GRANT CATEGORIES

Grants will be made to qualified public charities to sponsor charitable, scientific or educational health care programs which are not inconsistent with the moral and religious teachings of the Roman Catholic Church, in the following health care categories:

1. Community Health Services (Direct Health Care Services)
2. Community Health Care Education
3. Capital Expenditures
4. Equipment & Supplies
5. Medical Research

GRANT TYPE

Funding will be awarded primarily for program grants or capital projects **and may include general operating expenses associated with the proposed project.** Funding for operating support will be awarded at the discretion of the Board of Directors.

GRANT CYCLE

Grant awards are made semi-annually in the spring and fall. Spring applications must be postmarked by the first Friday in March for consideration in May. Fall applications must be postmarked by the first Friday in October for consideration in December.

ELIGIBILITY

- Grants will be made only to tax-exempt public charities as defined in section 501(c)(3) of the Internal Revenue Code (IRC) and are "not a private foundation" under Section 509(a) of the IRC.
- Grants are not awarded for reimbursement of previous purchases, endowment funds, political activities, travel, surveys or fund raising activities.
- One grant per public charity per fiscal year (July 1 – June 30).
- A Grant Report for any previous grant must be on file before the next grant will be awarded.

CRITERIA

- Grant proposals are evaluated according to the following criteria:
- Health care component is clearly defined with stated need(s) and outcome(s);
- The project or program has broad and/or strong community impact;
- The grant funds will be utilized efficiently and effectively.

GRANT APPLICATION PROCEDURES (Mission Statement is limited to 1 sentence describing the purpose of the agency)

Please refer to our Grant Application Form for detailed instructions on how to apply for a grant. Please follow the Grant Application Format EXACTLY. Include the question & then your response – DO NOT WRITE "SEE ATTACHED." The Grant Application may not exceed 3 pages for Sections I-IV. The required attachments do not count towards the 3 page limit. The font size cannot be less than 11 point. Please call or e-mail us with any questions. Site visits will be initiated by The Patron Saints Foundation and applicants will be contacted directly.