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### **Return of Private Foundation**

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

Internal R	levenue Service	Note	The foundate	on may	be able	to use a copy of this	return to sat	isfy state repo	rting re	quireme	nts.	
For cale	endar year 2009	, or tax year beg	ginning	NOV	1,	2009	, and e	ending	OCT	31,	2010	
G Chec	ck all that apply:		al return ended return			Initial return of a fo	•	charity	Name	 change	Final return	
Use the	e installation	foundation							]		lentification (	number
Otherw		N FLAGG						T			47557	
prii or tyj		d street (or PO bo	x number if mai	l is not de	elivered	to street address)		Room/suite		ephone n		
See Sp	:	BOX Y			<del></del>	<del></del>		i	(	650)	325-23	105
Instruct	tions   City of to	wn, state, and ZI								-		nding, check here
		PARK,		<u> 1026</u>		<u> </u>			ן נו טן	oreign o	rganizations,	check here
	ck type of organi					private foundation			<b>-</b> . ;	check here	and attach com	ting the 85% test, putation
	Section 4947(a)(					axable private found						us was terminated
	narket value of al		ityear   <b>J</b>	Ccounti	_		L Acc	rual	und	der sectio	on 507(b)(1)(.	A), check here
•	Part II, col (c)		00 (00		ther (sp	ecity) must be on cash	hans 1					0-month termination
<b>▶</b> \$	I Analysis of F	Revenue and Ex		i, coiu					1			B), check here
Part	(The total of am	iounts in columns (t	b), (c), and (d) m	ay not		a) Revenue and penses per books		nvestment ome	(	c) Adjust incor	ne	(d) Disbursements for charitable purposes (cash basis only)
1	Contributions,	, gifts, grants, etc	c., received		<u> </u>	30,000.				N/A	7	
2		if the foundation is not	required to attach	Sch B	<u> </u>				<del>                                     </del>			
3		gs and temporary s					<u> </u>		<u> </u>			
4	_	I interest from se	ecurities		<u> </u>							
5	a Gross rents					<del></del>			.			
١.	b Net rental incom	e or (loss)			<del> </del>				<del> </del>			
9   <u>و</u>	<ol> <li>Net gain or (loss)</li> <li>Gross sales price</li> </ol>		s not on line 10		ļ	<del></del> -						
E	D assets on line 6a	ı	-		<u> </u>		<del> </del>		+			
Revenue 7		Income (from Part I)			-			0.	-			
_  8	Net snort-term	capital gainE	CEIVE	D			<del></del>		┿			
9	I IIICOME MODII Gross sales less	ications			띪			<del></del> .	<del> </del>	<del>.</del>		<del></del>
10		AN	1 0 20		β	<del></del>			-			<u> </u>
	<ul><li>b Less Cost of go</li><li>c Gross profit of</li></ul>		1 0 20	111	₩				╁			
	<u> </u>	ĭ ———		إلــــــ	<b>⊈</b>		-		1		-	
11			DEN, L	JT	H	30,000.	<u> </u>	0.	1			<del></del>
13		f officers, directors,	trustone etc			0.		0.	'			0.
14		ee salaries and w							<u> </u>			
15		, employee bene	•				<u> </u>					
Ø 16	a Legal fees	,										<del></del>
Su l	<b>b</b> Accounting fe	es	STMT	1		4,491.		0.				0.
Ω.	c Other professi		STMT			475.		0.				0.
<b>9</b> 17	· ·						1					
E 18												•
19		ınd depletion							L			
E 20	•	•										
¥ 21	Travel, confere	ences, and meet	ıngs									
E 22												
ව් 23	Other expense	!S	STMT	3		72.		_0.				0.
± 24	Total operatin	ig and administi	rative						1			<del>_</del>
ber	expenses. Ad	d lines 13 throug	gh 23			5,038.		0.				0.
0 25	Contributions,	gifts, grants pai	ıd			1,175.			<u> </u>			1,175.
26	Total expense	es and disburser	ments								Ţ	-
	Add lines 24 a	nd 25				6,213.		0.				1,175.
27	Subtract line 2	26 from line 12:							-			
	a Excess of revenu	ie over expenses ar	nd disbursemer	ıts		23,787.			1			
	b Net investme	<b>nt income</b> (if nega	ative, enter -0-)		<u></u>			0.	4			
	c Adjusted net i						<u></u>			N/ <i>P</i>	<u> </u>	
923501	ILIA Far Da	inner Act and D	ananuark Da	dustion	Ant No	tion con the instruc	tions.					Form <b>QQA_DE</b> (2000)

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		14,874.
2	Enter amount from Part I, line 27a	2	Τ	23,787.
3	Other increases not included in line 2 (itemize)	3	I	0.
4	Add lines 1, 2, and 3	4	Τ	38,661.
5	Decreases not included in line 2 (itemize)	5		0.
6	Total net assets or fund halances at end of year (line 4 minus line 5) - Part II, column (h), line 30	6	Т	38 661

1	Enter the appropriate amount in each colu	mn for each year; see 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 (col. (b) divided by col. (c))
_	2008	2,810.	1,823.		1.541415
	2007	6,015.	2,228.		2.699731
	2006	7,028.	1,726.		4.071842
	2005	48,594.	3,567.		13.623213
	2004	979,808.	8,726.		112.286042
	<b>Total</b> of line 1, column (d) Average distribution ratio for the 5-year ba the foundation has been in existence if less	3	134.222243 26.844449		
4	Enter the net value of noncharitable-use as	sets for 2009 from Part X, line 5		4	19,435.
5	Multiply line 4 by line 3			5	521,722.
6	Enter 1% of net investment income (1% of	f Part I, line 27b)		6	0.
7	Add lines 5 and 6			7	521,722.
8	Enter qualifying distributions from Part XII,	, line 4		8	1,175.

See the Part VI instructions.

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.

	1990-PF (2009) MORGAN FLAGG FAMILY FOUNDATION				<u>047</u>			Page 4
	rt VI Excise Tax Based on Investment Income (Section 4940		or 49	<u> 48 - </u>	see i	nstru	ctio	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here   and er		ľ					
	Date of ruling or determination letter: (attach copy of letter if nec	essary-see instructions)						
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here	and enter 1%		1				0.
	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)	ŀ					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Ot	hers enter -0-)		2				0.
3	Add lines 1 and 2	,	Γ	3				0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Of	thers enter -0-)		4				0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	,	Γ	5				0.
6	Credits/Payments:							
а	2009 estimated tax payments and 2008 overpayment credited to 2009	6a	1					
	Exempt foreign organizations - tax withheld at source	6b						
	Tax paid with application for extension of time to file (Form 8868)	6c		ŀ				
	Backup withholding erroneously withheld	6d						
	Total credits and payments. Add lines 6a through 6d		$\neg$	7				0.
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attack.	rhed		8				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	onou		9				0.
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			10				<u> </u>
	Enter the amount of line 10 to be: Credited to 2010 estimated tax	Refunde	.a. =	11				
	art VII-A Statements Regarding Activities		u					
	During the tax year, did the foundation attempt to influence any national, state, or local legisl	lation or did it participate or int	orvene in			Γ	Yes	No
•••	any political campaign?	ation of ala it participate of the	CI VOIIC III			1a		-
h	Did it spend more than \$100 during the year (either directly or indirectly) for political purpos	eas (see instructions for definit	on)2			1b		X
_	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and	•		or		· · ·		
	distributed by the foundation in connection with the activities	copies of any materials pu	Diisried	OI.				
	Did the foundation file Form 1120-POL for this year?							х
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the	uoor:				1c		
u	•	•	0					
	(1) On the foundation.  \$\\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		0.					
6	Enter the reimbursement (if any) paid by the foundation during the year for political expending managers. > \$ 0 .	ture tax imposed on roundation	1					
2	managers. > \$ 0.  Has the foundation engaged in any activities that have not previously been reported to the IF	100				_		v
2		10'				2		<u> </u>
2	If "Yes," attach a detailed description of the activities	notrument estudes of second						
J	Has the foundation made any changes, not previously reported to the IRS, in its governing in	•	ation, or			_		77
4.	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the change					3		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year	•		37	/ 78	4a		<u>X</u>
	If "Yes," has it filed a tax return on Form 990-T for this year?			N/	A	4b		77
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?					5		X
c	If "Yes," attach the statement required by General Instruction T	4h a						
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied en	mer:						
	By language in the governing instrument, or      By state legislation that affectively are add the appropriate to the second of the secon							
	By state legislation that effectively amends the governing instrument so that no mandatory	y directions that conflict with th	ie state ia	łW		_		
_	remain in the governing instrument?					6	X	
1	Did the foundation have at least \$5,000 in assets at any time during the year?					7	X	
_	If "Yes," complete Part II, col (c), and Part XV							
ва	Enter the states to which the foundation reports or with which it is registered (see instruction	ns) <b>&gt;</b>						
	CA							
þ	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the At	ttorney General (or designate)						
	of each state as required by General Instruction G? If "No," attach explanation					8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of sec	1.71 7	or calend	lar				
	year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," co					9		<u>X</u>
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedul	le listing their names and addresses				10		<u>X</u> _
					Fori	ո <b>99</b> 0	-PF (	2009)

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orm 990-PF (2009) MORGAN FLAGG FAMILY FOUN			<u>95-6047</u>	<u> 557                                   </u>	Page 6
Part VII-B   Statements Regarding Activities for Which	Form 4720 May Be F	Required (contin	ued)		
5a During the year did the foundation pay or incur any amount to:					
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	Ye	es 🗶 No		
(2) Influence the outcome of any specific public election (see section 4955);	or to carry on, directly or indir		_		
any voter registration drive?		Y6	es 🗶 No 📗		
(3) Provide a grant to an individual for travel, study, or other similar purpose:	5?	Ye	es 🗶 No		
(4) Provide a grant to an organization other than a charitable, etc., organization	on described in section				
509(a)(1), (2), or (3), or section 4940(d)(2)?		Ye	es X No	Ì	
(5) Provide for any purpose other than religious, charitable, scientific, literary	or educational purposes, or i				
the prevention of cruelty to children or animals?	,, , , , , ,		es X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify ur	ider the exceptions described				
section 53.4945 or in a current notice regarding disaster assistance (see instr		rrogulations	N/A	5b	
Organizations relying on a current notice regarding disaster assistance check	•		<b>▶</b> (		
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption		hanu	, _		:
expenditure responsibility for the grant?		7/A □ Y	es 🔲 No		
		1/A	,s NO	i	
If "Yes," attach the statement required by Regulations section 53.494			ļ	1	
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on	<u></u> ,	es X No	1	
a personal benefit contract?		Y(	S LAL NO	۱ ۵	
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a	personal benefit contract?		}	6b	X
If "Yes" to 6b, file Form 8870		<u></u>	(TE)		
7a At any time during the tax year, was the foundation a party to a prohibited tax		Y <sub>0</sub>	es X No		
b If yes, did the foundation receive any proceeds or have any net income attribu			N/A	7b	
Part VIII Information About Officers, Directors, Trus Paid Employees, and Contractors	tees, Foundation Ma	anagers, Highl	y		
List all officers, directors, trustees, foundation managers and their	companyation				_
List an officers, directors, didstees, foundation managers and their	(b) Title, and average	(c) Compensation	(d) Contributions to	T 1	N Eynense
(a) Name and address	hours per week devoted	(If not paid,	(d) Contributions to employee benefit plans and deferred	i acc	e) Expense count, other
	to position	`enter'-0-)	compensation	a	illowances
	-				
	4				_
EE STATEMENT 4		0.	0	<u>+</u>	0.
	4				
	_		ļ		
<u> </u>		<u> </u>		$\bot$	
	_				
				$\perp$	
Compensation of five highest-paid employees (other than those in	cluded on line 1). If none,	enter "NONE."			
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average	(a) Companyation	(d) Contributions to employee benefit plans and deferred	<u>، (</u> و	e) Expense count, other
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	and deferred compensation	act	allowances
NONE					
	1			1	
				†	
	1				
	<del>                                     </del>		<del>                                     </del>	+	
	1		1	1	
		<del> </del>	<del> </del>	+-	
	-		1		
	<del> </del>		<del> </del>	+-	
	4				
	1		L		
otal number of other employees paid over \$50,000			<b>▶</b> 1		0

Form 990-PF (2009) MORGAN FLAGG FAMILY FOUNDATION	95-	6047557 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	flanagers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "NON	E."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
<del></del>		
Dr. 1000 (100 (100 (100 (100 (100 (100 (10		
Fotal number of others receiving over \$50,000 for professional services  Part IX-A   Summary of Direct Charitable Activities	·	<u> </u>
List the toundation's four largest direct charitable activities during the tax year. Include relevant statistical info number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	rmation such as the	Expenses
1 N/A		
1 N/A		
)	-	
·		
3		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 a	ınd 2.	Amount
N/A		
2		
All other program related investments. See instructions		
All other program-related investments. See instructions.		
3		
Fotal. Add lines 1 through 3	•	0.
		Form <b>990-PF</b> (2009)

Pa	Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations,	see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
	Average monthly fair market value of securities	1a	0.
b	Average of monthly cash balances	1b	19,731.
	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	19,731.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	19,731.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	296.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4	5	19,435.
6	Minimum investment return Enter 5% of line 5	6	972.
Pa	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations check here and do not complete this part.)	id certain	
1	Minimum investment return from Part X, line 6	1	972.
2a	Tax on investment income for 2009 from Part VI, line 5		
b	Income tax for 2009. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	972.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	972.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	972.
Pa	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
-	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	1,175.
	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
_	Amounts set aside for specific charitable projects that satisfy the:	2	
-	Suitability test (prior IRS approval required)	3a	
	Cash distribution test (attach the required schedule)	3b	<del></del>
	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	1,175.
	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment	7	
	Income. Enter 1% of Part I, line 27b	5	Λ
	Adjusted qualifying distributions Subtract line 5 from line 4	6	1,175.
٠	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of		
	4940(e) reduction of tax in those years.	4uannes 101	the Soution

### 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				972.
2 Undistributed income, if any, as of the end of 2009			*-	
a Enter amount for 2008 only			0.	
b Total for prior years:				
		0.		
3 Excess distributions carryover, if any, to 2009:			<del></del>	
a From 2004 979, 373.				
<b>b</b> From 2005 48,463.				
c From 2006 6,942.				
d From 2007 5,904.				
e From 2008 2,719.				
f Total of lines 3a through e	1,043,401.			
4 Qualifying distributions for 2009 from				
Part XII, line 4: ►\$ 1,175.				
a Applied to 2008, but not more than line 2a			0.	
<b>b</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		·		972.
e Remaining amount distributed out of corpus	203.			<u> </u>
5 Excess distributions carryover applied to 2009	0.			0.
(If an amount appears in column (d), the same amount must be shown in column (a))				<u> </u>
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f 4c, and 4e Subtract line 5	1,043,604.			
b Prior years' undistributed income Subtract				
line 4b from line 2b		0.		<u></u>
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable	-			
amount - see instructions		0.		
e Undistributed income for 2008. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2009. Subtract				
lines 4d and 5 from line 1. This amount must	i			
be distributed in 2010				0.
7 Amounts treated as distributions out of				<del></del>
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2004				
not applied on line 5 or line 7	979,373.			
9 Excess distributions carryover to 2010				-
Subtract lines 7 and 8 from line 6a	64,231.		!	
0 Analysis of line 9			<u> </u>	_
a Excess from 2005 48,463.				
b Excess from 2006 6,942.				
c Excess from 2007 5,904.				
d Excess from 2008 2,719.				
e Excess from 2009 203.				
				5 000 DE (000)

Part XIV   Private Operating F	FLAGG FAMIL			95-60	4/55/ Page 10
1 a If the foundation has received a ruling of				N/A	<del></del>
foundation, and the ruling is effective fo			' .		
<b>b</b> Check box to indicate whether the found	•	•		14040(2)(0) == 1140	40(.)(5)
2 a Enter the lesser of the adjusted net	Tax year	ig toutidation described	Prior 3 years	4942(j)(3) or 49-	42(j)(5)
income from Part I or the minimum	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total
investment return from Part X for	- (2)2000	(0) 2000	(0) 2007	(0) 2000	(0) 10181
each year listed				+	<del></del>
b 85% of line 2a	<u> </u>		<u> </u>		<del></del>
c Qualifying distributions from Part XII,					
line 4 for each year listed		-	<del> </del>		
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities			-		
e Qualifying distributions made directly					
for active conduct of exempt activities.			į		
Subtract line 2d from line 2c 3 Complete 3a, b, or c for the					<del>-</del>
alternative test relied upon:					
a "Assets" alternative test - enter:					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
<b>b</b> "Endowment" alternative test - enter		<del></del>			
2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:		· · ·	-		· · · · · · · · · · · · · · · · · · ·
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on securities loans (section					
512(a)(5)), or royalties)					
(2) Support from general public					<del> </del>
and 5 or more exempt					
organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income					
Part XV Supplementary Info	rmation (Comple	te this part only	if the foundation	had \$5,000 or mo	re in assets
at any time during t	he year-see the i	nstructions.)			
1 Information Regarding Foundation	_				
a List any managers of the foundation wh	o have contributed more	than 2% of the total cor	ntributions received by the	e foundation before the clos	e of any tax
year (but only if they have contributed r	nore man \$5,000). (See S	ection 507(a)(2).)			
NONE		<del></del>			<u>.                                    </u>
b List any managers of the foundation who other entity) of which the foundation ha			i (or an equally large porti	on of the ownership of a pa	artnership or
NONE	ou 1070 or greater interes	,,,			
· · · · · · · · · · · · · · · · · · ·	ion Cront Citt Loon	Cabalanah a ata 1	·····		
2 Information Regarding Contribut Check here  ☐ if the foundation of the foundation makes gifts, grants, etc.	only makes contributions t	to preselected charitable	e organizations and does	not accept unsolicited reque	ests for funds. If
a The name, address, and telephone num				omploto noma za, o, o, ano	-
NAOMI MUSTARI, (650)	·	н аррисацонѕ ѕновіо в	e addressed.		
P.O. BOX Y, MENLO PA		<b>c</b>			
b The form in which applications should t			should include		
WRITTEN REQUEST, CHA			SHOUIU HICIUUE.		
c Any submission deadlines:			<del> </del>		
NONE					
d Any restrictions or limitations on award	s, such as by geographica	il areas, charitable field:	s, kinds of institutions, or	other factors:	
NONE					
				_	5 000 PE (1999)

Form 990-PF (2009) MORGAN FLAGG	FAMILY FOUNDA'	rion	95-6047	557 Page 1
Part XV Supplementary Informatio  3 Grants and Contributions Paid During the	<del></del>	. Da	<del></del>	
Recipient	If recipient is an individual.		<u> </u>	
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year  KASKE FOUNDATION EBENEZER CHAPEL LEIGH STREET LEIGH ON MENDIP, UNITED KINGDOM BA3 5QQ	UNRELATED	OTHER PUBLIC CHARITY	CHARITABLE PURPOSES OF ORGANIZATION	500
HOLBROOK PALMER RECREATION PARK FOUNDATION - 150 WATKINS AVENUE ATHERTON, CA	UNRELATED	OTHER PUBLIC CHARITY	CHARITABLE PURPOSES OF ORGANIZATION	25
LAFAYETTE SCHOOL MENTORING PROJECT 1700 MARKET STREET OAKLAND, CA 94607	UNRELATED	OTHER PUBLIC CHARITY	CHARITABLE PURPOSES OF ORGANIZATION	250
CARE 151 NO. ELLIS NE ATLANTA, GA 30303	UNRELATED	OTHER PUBLIC CHARITY	CHARITABLE PURPOSES OF ORGANIZATION	100
INTERNATIONAL RESCUE COMMITTEE P.O. BOX 98152 WASHINGTON, DC 20077	UNRELATED	OTHER PUBLIC CHARITY	CHARITABLE PURPOSES OF ORGANIZATION	100
THE SALVATION ARMY P.O. BOX 193465 SAN FRANCISCO, CA 94119	UNRELATED	OTHER PUBLIC CHARITY	CHARITABLE PURPOSES OF ORGANIZATION	200
Total			<b>▶</b> 3a	1,175
b Approved for future payment			- 54	1,175
NONE				
Total			<b>▶</b> 3b	0
923611 02-02-10		11	Form	<b>990-PF</b> (2009

Part XVI-A Analysis of Income-Producing Activities

nter gross amounts unless otherwise indicated.	(a) Business	(b)	(C)	(d)	(e) Related or exempt
1 Program service revenue:	Business	Amount	sion	Amount	function income
a					
b	_	····		<u>.                                    </u>	<del> </del>
C	_				
d	_				
e					<del> </del>
f	_	<del></del>	-		<del></del>
g Fees and contracts from government agencies		<del>_</del>		<del></del>	<del>                                      </del>
Membership dues and assessments	-	-			
Interest on savings and temporary cash investments					
Dividends and interest from securities					<del>                                       </del>
Net rental income or (loss) from real estate:	-	<u>-</u> -	<del>                                     </del>	<del></del>	<del>                                     </del>
a Debt-financed property			+-+-		<del> </del>
b Not debt-financed property	-		<del></del>	<del></del> -	
Net rental income or (loss) from personal			<del></del>	<del>-</del>	
property					
Other investment income					<del>                                     </del>
Gain or (loss) from sales of assets other				<del></del>	1
than inventory					
Net income or (loss) from special events				<del></del>	
Gross profit or (loss) from sales of inventory				<del></del>	
Other revenue:					
a					
b	1 1				
C					
d	l i				
e					
Subtotal. Add columns (b), (d), and (e)			<u> </u>	0	
Total Add line 12, columns (b), (d), and (e)				13 _	
Explain below how each activity for which in the foundation's exempt purposes (other the				d importantly to the acco	omplishment of
		-			
	<del></del>			· · · · · · · · · · · · · · · · · · ·	
3621 02-10				<del> </del>	Form <b>990-PF</b> (2

	art X		W FLAGG FA				J Daladia	95	-604/55	<u>Pa</u>	ige 13
_	ai t A	Exempt Organ	egarding Trans	siers 10 a	and Transaction	ons ar	ia Relation	snips with r	ioncnantabi	е	
1	Did t	ne organization directly or indi		of the followin	a with any other are		dosestad is se	ation EO1(a) of		Yes	No
•		ode (other than section 501(c						3001 30 1(0) 01	<del> </del>	103	110
•		sfers from the reporting found			= -	i oi yaniz	allons				
٠	(1)		anon to a noncharitab	ue evembt ori	gamzation of,				1a(1)	, l	X
		Other assets							1a(2)		X
ŀ		transactions:							i ia(z)		
١			ihle evemnt organizati	nn					1b(1)		х
	(1) Sales of assets to a noncharitable exempt organization (2) Purchases of assets from a noncharitable exempt organization										X
		Rental of facilities, equipment,	•	gamzation					1b(2)	1	X
		Reimbursement arrangements							1b(4)		X
		oans or loan guarantees							1b(4)		X
		Performance of services or me	mhershin or fundrais	ınn solicitatio	ne				1b(6)	<b>——</b>	X
•		ng of facilities, equipment, ma	•	•					10(0)	+	X
		answer to any of the above is	•			ould alwa	we chow the four	market value of th			
١		rvices given by the reporting f								3613,	
		nn (d) the value of the goods,			su icas man ian man	ct value	in any nansaon	on or snaring arrai	igenieni, snow in		
(a)	Line no	(b) Amount involved		<del></del>	exempt organization		(d) Descripti	on of transfers, transa	ections, and sharing a	rran aama	
(-,		(0)::::::0::::	(b) Hamo or	N/A	oxompt or gameation	<u> </u>	(G) bescripti	on or transiers, transe	citoris, and sharing a	nangeme	
			-	N/A			<del> </del>				
			<del>                                     </del>				<del>                                     </del>				
		·-									
							-				
							<del>-</del>				
_		· · · · · · · · · · · · · · · · · · ·									
							-				
		<del></del>									
		<del></del>	-								
								<del></del>			
				-			-		_		
			-								
2 2	ls the	foundation directly or indirec	thy affiliated with or re	elated to one	or more tay-eyemnt	ornaniza	tions described		<del></del>		
		ction 501(c) of the Code (othe				oi yainza	mons described		Yes	Ţ	] No
h		s," complete the following sch	, ,,	0// 01 111 3000	1011 027				162		7 140
		(a) Name of org		·	(b) Type of organiz	ation		(c) Description of	f relationship	_	
		N/A	<del></del>					(-,		****	
							<del>-</del>				
_		· <u>-</u> · · -									
				-							
					· <del>-</del>						
	Under p	enalties of perjury, I declare that I h	ave examined this return,	, including acco	mpanying schedules and	statemer	nts, and to the best	of my knowledge and	d belief, it is true, corr	ect,	
	and cor	nplete Declaration of preparer (other	r than taxpayer or fiducia	ry) is based on a	all information of which i	reparer ha	as any knowledge				
Ì	1	n Glim Horan	trusties		111-11-	10					
2	Si	gnature of officer or trustee/			Date		Title				
Ĭ	_	Preparer's	~/	<del>-</del>		Dat	te C	theck if	Preparer's identi	fying nun	nber
Sign Here	Paid Preparer's Use Only	signature	1.5				, _   S	elf- mployed ▶ 🗓	al -		
٠,	Paid spare	Firm's name (or yours SUSA	N K. SCREI	EN, CP.	A	, lee-		EIN ▶	<del></del>		
	rep Use	if self-employed). 1649		TREET	<del></del>				-		
	address, and ZIP code SAN CARLOS, CALIFORNIA 94070-5216 Phone no. (650								(650) 59	3-5	377

(650) 593-5377

Phone no.

### Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

### **Schedule of Contributors**

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

OMB No 1545-0047

**2009** 

**Employer identification number** 

MORGAN FLAGG FAMILY FOUNDATION 95-6047557 Organization type (check one) Filers of: Section: Form 990 or 990-EZ \_\_\_ 501(c)( ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor Complete Parts I and II Special Rules For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1 Complete Parts I and II For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals Complete Parts I, II, and III For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

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

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

Name of organization

Employer identification number

MORGAN	FLAGG	FAMILY	FOUNDATION
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95-6047557

Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	MORGAN FLAGG ADMINISTRATIVE TRUST P.O. BOX Y MENLO PARK, CA 94026	\$30,000.	Person X Payroll
(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
		<b>\$</b>	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
		<b> \$</b>	Person Payroll Oncash Complete Part II if there is a noncash contribution )
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
22452 02-0		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)

Name of organization

**Employer identification number** 

### MORGAN FLAGG FAMILY FOUNDATION

95-6047557

art II	Noncash Property (see instructions)		<u> </u>
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
-			
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		<b>\$</b>	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\ \ \\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	990, 990-EZ, or 990-PF) (

Name of organization **Employer identification number** MORGAN FLAGG FAMILY FOUNDATION 95-6047557 Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations aggregating Part III more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry For organizations completing Part III, enter the total of exclusively religious, chantable, etc., contributions of \$1,000 or less for the year (Enter this information once See instructions) > \$ (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (d) Description of how gift is held (c) Use of gift Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

FORM 990-PF	ACCOUNTING FEES		STATEMENT		1
DESCRIPTION		(B) NET INVEST- MENT INCOME		(D) CHARITAE PURPOSE	
TAX PREPARATION FEE	4,491.	0.			0.
TO FORM 990-PF, PG 1, LN 16B	4,491.	0.			0.
FORM 990-PF C	OTHER PROFES	SIONAL FEES	S'	TATEMENT	2
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITAE PURPOSE	
C.L. WYSUPH & ASSOCIATES	475.	0.			0.
TO FORM 990-PF, PG 1, LN 16C	475.	0.			0.
FORM 990-PF	OTHER E	XPENSES	S	TATEMENT	3
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME			
FRANCHISE TAX BOARD POSTAGE & DELIVERY	10. 62.				0.
TO FORM 990-PF, PG 1, LN 23	72.	0.			0.

FORM 990-PF PART VIII - LISTRUSTEES AND	LIST OF OFFICERS, DIRECTORS AND FOUNDATION MANAGERS			STATEMENT 4	
NAME AND ADDRESS	TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB	EXPENSE	
ELIZABETH ROSS FLAGG P.O. BOX Y MENLO PARK, CA 94026	PRESIDENT, DIR	ECTOR 0.	0.	0.	
TIM ROSS 710 BELLA VISTA MORRO BAY, CA 93442	VICE PRESIDENT 0.00	, DIRECTOR 0.	0.	0.	
NAOMI MUSTARI 1492 MCALLISTER STREET, #3 SAN FRANCISCO, CA 94115	SECRETARY, DIR	ECTOR 0.	0.	0.	
ANN JOHNSON 37005 SUN BLUFF COURT GRAND ISLAND, FL 32735	DIRECTOR 0.00	0.	0.	0.	
KRISTI ROSS 710 BELLA VISTA MORRO BAY, CA 93442	DIRECTOR 0.00	0.	0.	0.	
TOTALS INCLUDED ON 990-PF, PAGE (	5, PART VIII	0.	0.	0.	