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Form **990-PF**

Department of the Treasury

Return of Private Foundation

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

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

2009

OMB No 1545-0052

Internal Revenue Service NOV 30 2010 For calendar year 2009, or tax year beginning DEC 1 2009 and ending Final return G Check all that apply: Initial return Initial return of a former public charity Address change Amended return Name change A Employer identification number Name of foundation Use the IRS label. THE ISABEL ALLENDE FOUNDATION 91-1748486 Otherwise, Number and street (or P O box number if mail is not delivered to street address) Room/suite print B Telephone number or type. 116 CALEDONIA ST 415-331-0200 See Specific City or town, state, and ZIP code C if exemption application is pending, check here Instructions. <u>SAUSALITO, CA 94965</u> D 1. Foreign organizations, check here 2. Foreign organizations meeting the 85% test, check here and attach computation Section 501(c)(3) exempt private foundation H Check type of organization: Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation If private foundation status was terminated I Fair market value of all assets at end of year J Accounting method: Accruat under section 507(b)(1)(A), check here Other (specify) (from Part II, col (c), line 16) If the foundation is in a 60-month termination 8,831,185. (Part I, column (d) must be on cash basis.) under section 507(b)(1)(B), check here ▶\$ Part | Analysis of Revenue and Expenses (d) Disbursements (a) Revenue and (b) Net investment (c) Adjusted net (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) for charitable purposes (cash basis only) expenses per books income income 1,017,247. N/A Contributions, gifts, grants, etc., received 2 Check In the foundation is not required to attach Sch. B. Interest on savings and temporary cash investments STATEMENT 60,536 60,536 98,259 98,259 STATEMENT 4 Dividends and interest from securities 5a Gross rents b Net rental income or (loss) <34,592.> STATEMENT 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 2,295,376. 249,079 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain Income modifications 10a Gross sales less returns and allowances C-Gross profil-or (loss) 4,139 4,139 STATEMENT 11 Other income 12MABaDABa LABS in through 11 412,013 145,589. 0. 0. Compensation of officers, difectors, trustees, etc 0. Other employee saturies and wages Pension plans, employee benefits 105,332. 10,300. 95,032. 6,733. 5 13,466. 6,733 16a Legal fees STMT 4,379. 6 8.757. 4,379. **b** Accounting fees STMT 7 575. 287. 288. STMT c Other professional fees 76. 76. 0 Administrative 17 Interest 18 Taxes STMT 8 34,557. 26,798 9,416. 4,072. 0. 19 Depreciation and depletion 20 Occupancy 20,706. 22,194 0 21 Travel, conferences, and meetings -411. 411 0 22 Printing and publications Other expenses
Total operating and administra
expenses. Add lines 13 through
Contributions, gifts, grants paid STMT 9 57,169. 27,881 28,929. 24 Total operating and administrative 246,609 76,378 165,970. expenses. Add lines 13 through 23 875,495. 875,495 26 Total expenses and disbursements 122,104 1,041,465. Add lines 24 and 25 76,378 27 Subtract line 26 from line 12: 23,485 & Excess of revenue over expenses and disbursements 335,635 b Net investment income (if negative, enter -0-) N/A c Adjusted net income (if negative, enter -0-) LHA For Privacy Act and Paperwork Reduction Act Notice, see the instructions

	_	Ralance Shoots Attached schedules and amounts in the description	Beginning of year	End of y	ear
Pa	rt I	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1 1	Cash - non-interest-bearing	38,721.	35,497.	35,497.
		Savings and temporary cash investments	9,750.	6,060.	6,060.
		Accounts receivable ►			
İ		Less; allowance for doubtful accounts			
		Pledges receivable			
		Less: allowance for doubtful accounts			
	5	Grants receivable			. <u></u>
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable 500.			
		Less; allowance for doubtful accounts 🕨		500.	<u>500.</u>
ţ	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
ا ≯	0a	Investments - U.S. and state government obligations $\;$ STMT $\;$ $\;$ $\;$ $\;$ $\;$ $\;$ $\;$	1,005,103.	202,220.	209,256.
	b	Investments - corporate stock STMT 11 📙	5,112,414.	5,635,083.	6,144,584.
	C	Investments - corporate bonds STMT 12	2,111,478.	2,424,175.	2,427,157.
1	1 (investments - land, buildings, and equipment basis			
		Less accumulated depreciation			
1	2	Investments - mortgage loans			
1	-	Investments - other			
1	4	Land, buildings, and equipment: basis ► 14,864.			
		Less accumulated depreciation STMT 13 ► 6,733.	9,372.	8,131.	8,131.
1	5	Other assets (describe)			
			0 206 020	0 211 666	0 021 105
$\overline{}$		Total assets (to be completed by all filers)	8,286,838.	8,311,666. 1,343.	8,831,185.
		Accounts payable and accrued expenses		1,343.	
		Grants payable			
	_	Deferred revenue			
		Loans from officers, directors, trustees, and other disqualified persons Mortgages and other notes payable			
֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓		Other liabilities (describe)			
	.2	Other habilities (describe >			
	3	Total liabilities (add lines 17 through 22)	0.	1,343.	
\top		Foundations that follow SFAS 117, check here			
		and complete lines 24 through 26 and lines 30 and 31.			
Ses 2	24	Unrestricted			
<u>ğ</u> 2	5	Temporarily restricted			
8 2	6	Permanently restricted			
밀		Foundations that do not follow SFAS 117, check here 🕒 🛣			
Ĩ.		and complete lines 27 through 31.		_	
S 2		Capital stock, trust principal, or current funds	0.	<u> </u>	
ťΛ		Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
<u>ک</u> کے		Retained earnings, accumulated income, endowment, or other funds	8,286,838.	8,310,323.	
§ §	0	Total net assets or fund balances	8,286,838.	8,310,323.	
	. 4	Tatal liabilities and not people found belongs	8,286,838.	8,311,666.	
\equiv		Total liabilities and net assets/fund balances		0,311,000.	
Pa	rt I	Analysis of Changes in Net Assets or Fund Ba	lances		

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	8,286,838.
2	Enter amount from Part I, line 27a	2	23,485.
3	Other increases not included in line 2 (itemize)	3	0.
4	Add lines 1, 2, and 3	4	8,310,323.
5	Decreases not included in line 2 (itemize)	5	0.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	8,310,323.

91-1748486

Page 3

(a) List and describe	the kind(s) of property sold (e.g nouse; or common stock, 200 sha	., real estate,	Income	(b) Ho P - I D -	w acquired Purchase Donation		acquired day, yr.)	(d) Date (mo., da	
1a US_OBLIGATIONS									
b CORPORATE OBLIGA	ATIONS	·			<u>P</u>				
c CORPORATE SECURI					D				
d CORPORATE SECURI					P				
<u>e</u>						<u> </u>		l	
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale				Gain or (loss is (f) minus		
a 802,859.			802,88	3.					<24.
ь 500,000.		<u> </u>	482,32	0.					,680.
513,269.	·		220,23						<u>,035.</u>
d 479,248.			<u>540,86</u>	0.				<61	<u>,612.</u>
е									
Complete only for assets showing g	jain in column (h) and owned by	the foundation	оп 12/31/69			(I) Gains (Col. (h) gain	minus	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (1) col. (j), if any		(ol. (k), but Losse:	not less that (from col. (n -0-) or (h)) 	
a									<24.
b								17	,680.
С								293	,035.
d								<61	,612.
e									
2 Capital gain net income or (net capital	al loss) { If gain, also enter	r ın Part I, line I- ın Part I. line	7 7	}	2			249	,079.
3 Net short-term capital gain or (loss)	•								
If gain, also enter in Part I, line 8, col		iu (0).		1					
If (loss), enter -0- in Part I, line 8	um (o).			<i>}</i>	3		N/A		
Part V Qualification Und	der Section 4940(e) for	Reduced	Tax on Net	Inve	stment li	ncome			
Was the foundation liable for the section If "Yes," the foundation does not qualify Enter the appropriate amount in each	under section 4940(e). Do not co h column for each year; see instr	omplete this pa	ırt.	es.					X No
(a) Base period years Calendar year (or tax year beginning i			Net value of no				Distrit (col. (b) div	(d) oution ratio vided by col.	``''
2008		0,310.		7,	<u>652,20</u>	7.			67995
2007		9,898.			147,21				73235
2006		8,824.			378,11				<u> 62787</u>
2005	39	1,094.			020,23				<u> 48763</u>
		9,873.		6,	949,09	2.		.0	<u> 57543</u>
2 Total of line 1, column (d)						2		. 3:	10323
3 Average distribution ratio for the 5-ye the foundation has been in existence		on line 2 by 5,	or by the number	of year	S	3	ļ <u>.</u>	.0	62065
4 Enter the net value of noncharitable-use assets for 2009 from Part X, line 5				4		8,263	,090.		
5 Multiply line 4 by line 3				5	ļ	512	,849.		
6 Enter 1% of net investment income (1% of Part I, line 27b)					6		3	,356.
7 Add lines 5 and 6						7		516	,205.
8 Enter qualifying distributions from Part XII, line 4						8	<u> </u>	1,041	,465.
If line 8 is equal to or greater than lin See the Part VI instructions.	e /, check the box in Part VI, line	e 1b, and comp	lete that part using	g a 1% 	tax rate.				

		. . .		
_	990-PF (2009) THE ISABEL ALLENDE FOUNDATION 91-17484		 	Page 4
	int VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see in	Stru	Cuoi	15)
18	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.			
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)		2 2	c
t	Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1%		3,3	<u>56.</u>
	of Part I, line 27b			
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)			^
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		2 2	<u> </u>
	Add lines 1 and 2		3,3	<u> </u>
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		2 2	<u> </u>
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		<u> </u>	<u>56.</u>
6	Credits/Payments:			٠
	2009 estimated tax payments and 2008 overpayment credited to 2009 6a 3,637.			
	Exempt foreign organizations - tax withheld at source			
	Tax paid with application for extension of time to file (Form 8868)			
d	Backup withholding erroneously withheld			2 17
7	——————————————————————————————————————		3,6	<u>37.</u>
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			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		<u>2</u>	<u>81.</u>
	Enter the amount of line 10 to be: Credited to 2010 estimated tax ▶ 281 . Refunded ▶ 11			0.
	rt VII-A Statements Regarding Activities		\ <u>'</u>	N1-
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in		Yes	
	any political campaign?	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or		;	
	distributed by the foundation in connection with the activities.			
	Did the foundation file Form 1120-POL for this year?	1c_		<u>X</u>
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.			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			
	managers. ► \$0.			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	_2		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	3		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		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?	6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year?	7	X	
	If "Yes," complete Part II, col. (c), and Part XV.			
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			}
	CA			
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	8b_	X	<u></u>
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar			
	year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," complete Part XIV	9		X
10	Did any persons become substantial contributors during the tax year? If "Yes." attach a schedule listing their names and addresses STMT 14	10	X	

orm 990-PF (2009) THE ISABEL ALLENDE FOUND	ATION	 	<u>91-17484</u>	<u>86 Page 6</u>
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	л 4 945(e)) ?	Ye	s X No	
(2) Influence the outcome of any specific public election (see section 4955); of	ectly,	Ţ	1 1	
any voter registration drive?			s X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes	,?		s X No	
(4) Provide a grant to an organization other than a charitable, etc., organization				i i
509(a)(1), (2), or (3), or section 4940(d)(2)?		□ v _i	s X No	1 1
(5) Provide for any purpose other than religious, charitable, scientific, literary.	or educational nurnoses, or t			
the prevention of cruelty to children or animals?	, or caucational purposes, or i		s X No	1 1
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un	dor the avantions described i		8 LZS 110	
	·	in Negulations	N/A	ib di
section 53.4945 or in a current notice regarding disaster assistance (see instru	•			- - - - - - - - - -
Organizations relying on a current notice regarding disaster assistance check to				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f				
expenditure responsibility for the grant?		I/A L Ye	es L No	
If "Yes," attach the statement required by Regulations section 53.494				
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on			
a personal benefit contract?		Ye	es X No	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	personal benefit contract?		<u> </u>	Sb 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 s	shelter transaction?	Ye	es X No	
b If yes, did the foundation receive any proceeds or have any net income attribut				7b
Part VIII Information About Officers, Directors, Trust	ees, Foundation Ma	magers, Highly	/	
List all officers, directors, trustees, foundation managers and their		14.20	L data in the second	
(~) Name and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
(a) Name and address	to position	enter -0-)	compensation	allowances
ISABEL ALLENDE	PRESIDENT			
116 CALDONIA ST				
SAUSALITO, CA 94965	1.00	0.	0.	0.
VILLIAM C. GORDON	SECRETARY	<u> </u>		
116 CALDONIA ST				
SAUSALITO, CA 94965	1.00	0.	l o.l	0.
			ļ	
	1		j	
 				
	ļ			
	1]	
Compensation of five highest-paid employees (other than those inc	luded on line 1). If none,	enter "NONE."		
	(b) Title, and average		(d) Contributions to employee benefit plans	(e) Expense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	and deferred compensation	(e) Expense account, other allowances
ORI BARRA	EXECUTIVE DIR	ECTOP	Compensation	diowances
171 RIVIERA, SAN RAFAEL, CA 94901	40.00	103,000.	0.	0.
1/1 KIVIEKA, SAN KAPAED, CA 34301	40.00	103,000.	-	
	1			
		 -	 	
	1	1		
-				
		 	 	
- 1		L	<u> </u>	
Cotal number of other employees paid over \$50,000		 		0 DE (2000)
			Form \$	990-PF (2009)

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P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign for	undations, s	see instructions)
- 1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:	T	
а	Average monthly fair market value of securities	1a	8,262,567.
b	Average of monthly cash balances	1b	126,357.
C		1c	
d	Total (add lines 1a, b, and c)	1d	8,388,924.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0	<u>.</u>	
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	8,388,924.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	125,834.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	8,263,090.
6	Minimum investment return. Enter 5% of line 5	6	413,155.
Р	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations foreign organizations check here and do not complete this part.)	and certain	
1	Minimum investment return from Part X, line 6	1	413,155.
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	3,356.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	409,799.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	409,799.
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	409,799.
P	art 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	1,041,465.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:	1 1	
8	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	1,041,465.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	3,356.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	1,038,109.
	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.

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,				409,799.
line 7				<u> </u>
2 Undistributed income, if any, as of the end of 2009 a Enter amount for 2008 only			0.	
b Total for prior years:				
g rotation prior years.		0.		
3 Excess distributions carryover, if any, to 2009:				
a From 2004 63,948.				
b From 2005 7, 469.				
c From 2006 142,600.				
d From 2007 225,531.				
e From 2008 140,152.				
f Total of lines 3a through e	579,700.			
4 Qualifying distributions for 2009 from				
Part XII, line 4: ► \$ 1,041,465.				
a Applied to 2008, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		<u>.</u>
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			100 500
d Applied to 2009 distributable amount				409,799.
e Remaining amount distributed out of corpus	631,666.			
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	1,211,366.			<u> </u>
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		:
e Undistributed income for 2008. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2009. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2010				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.		· · · · · · · · · · · · · · · · · · ·	
8 Excess distributions carryover from 2004				
not applied on line 5 or line 7	63,948.			
9 Excess distributions carryover to 2010.				
Subtract lines 7 and 8 from line 6a	1,147,418.			
10 Analysis of line 9:				
a Excess from 2005 7, 469.				
b Excess from 2006 142,600.				
c Excess from 2007 225,531.				
d Excess from 2008 140,152. e Excess from 2009 631,666.				
e Excess from 2009 631,666.	<u></u>		<u> </u>	Form 990-PF (2009)

Part XIV Private Operating Fo		etructions and Part VI		N/A	/48486 Page 10
1 a If the foundation has received a ruling of	·		TA, question 5)	N/A	
foundation, and the ruling is effective for		, , ,			
b Check box to indicate whether the found		=	in section	4942(J)(3) or	1942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	ny roditation described	Prior 3 years	4342(])(3) 01	1342())(0)
income from Part I or the minimum	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total
investment return from Part X for	(0) 2000	(0) = 000	(0) 200	(5)	
each year listed	İ				
b 85% of line 2a			 		
c Qualifying distributions from Part XII,				 	
line 4 for each year listed	I				
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities	1				
e Qualifying distributions made directly					
for active conduct of exempt activities.	1				
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the					
alternative test relied upon:					
a "Assets" alternative test - enter: (1) Value of all assets		}			
```	<del></del>	<del> </del>	<del>                                     </del>	<del>-   </del>	
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter		<del>                                     </del>		<del></del>	
2/3 of minimum investment return					
shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:				<del></del>	-
(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	1				
organizations as provided in	1				
section 4942(j)(3)(B)(iii) (3) Largest amount of support from			<del> </del>		
an exempt organization	i		ļ		
· -			<del> </del> -	- <del></del>	
(4) Gross investment income  Part XV   Supplementary Info	rmation (Comple	te this part only	if the foundation	on had \$5,000 or m	nore in assets
at any time during t			ii tilo loulluuti	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	10.0 11. 400010
1 Information Regarding Foundatio			<u> </u>		
a List any managers of the foundation who		than 2% of the total cont	ributions received by t	he foundation hefore the cl	ince of any tay
year (but only if they have contributed m			indulions received by i	ne loundation before the ci	ose of any tax
ISABEL ALLENDE	, , , ,	. , , , ,			
b List any managers of the foundation who	own 10% or more of th	ne stock of a corneration	or an equally large no	rtion of the ownership of a	nartnership or
other entity) of which the foundation has			(or all equally large po	rtion of the ownership of a	partitor bring or
NONE					
2 Information Regarding Contributi	on Grant Gift Loan	Scholarship etc. Pr	ourams.		
Check here ► X if the foundation of				s not accept unsolicited red	nuests for funds. If
the foundation makes gifts, grants, etc. (					
a The name, address, and telephone numb	<del>`</del>			<del></del>	· - · · · · · · · · · · · · · · · · · ·
a mo mamo, accress, and telephone numi	,or or and person to will	пт арупоацопа эпоин ос			
b The form in which applications should b	e submitted and informa	tion and materials they s	hould include:	<del></del>	·
b The form in which applications should b	5 Submitted and informa	tion and materials they s	nound iniciado.		
c Any submission deadlines:				· · · · · · · · · · · · · · · · · · ·	
a very sabrinssion academics.					
d Any restrictions or limitations on awards	such as by geographic	al areas, charitable fields	kinds of institutions of	or other factors:	
2 1 my roomotions or miniations on awards	, seem as ay goograpino	a. a. vao, onantaoto noto,	ao or montanono, c		
923601 02-02-10				······································	Form 900-PF (2000)

Part XV Supplementary Information	(continued)			
3 Grants and Contributions Paid During the Ye	ar or Approved for Future I	Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Contribution	
a Paid during the year	or substantial contributor	recipient		
SEE STATEMENT 15				
Total	1	1	▶ 3a	875,495.
b Approved for future payment  NONE  Total		•	<b>▶</b> 3b	0

923611 02-02-10

ter gross amounts unless otherwise indicated.	Unrelated t	usiness income		y section 512, 513, or 514	(e)
•	(a) Business	(b) Amount	(C) Exclu- sion code	( <b>d)</b> Amount	Related or exempt function income
Program service revenue:	code	<del></del>	1000		
a			+-+	<del></del>	
b		· · · · · · · · · · · · · · · · · · ·	+ - + -		
<u> </u>		<del> </del>	<del>                                     </del>	· · · · · ·	<del></del> _
d	<del></del>		+		<del></del>
e			+		
' <del></del>			<del>                                     </del>		·
g Fees and contracts from government agencies					
Membership dues and assessments					
Interest on savings and temporary cash			1 4	60 526	
nvestments			14	60,536.	
Dividends and interest from securities			14	98,259.	
Net rental income or (loss) from real estate:			+		
Debt-financed property			<del>                                     </del>		
Not debt-financed property			+		
Net rental income or (loss) from personal					
property	-		1 1	4 120	
Other investment income			14	4,139.	
Gain or (loss) from sales of assets other				24 500	
than inventory			18	<34,592.	<u> </u>
Net income or (loss) from special events					
Gross profit or (loss) from sales of inventory			1		
Other revenue:					
1		<del></del>	<u> </u>		
b			<del> </del>		
c			<del>                                     </del>		
d					
e			1		
Subtotal. Add columns (b), (d), and (e)		0 .	<u>,                                    </u>	128,342.	
Subtotal. Add coldinis (b), (d), and (e)				13	128,34
Total. Add line 12, columns (b), (d), and (e)					
Total. Add line 12, columns (b), (d), and (e)	s.)	<u> </u>			
Fotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation		nplishment of E	xempt P	urposes	
Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculation art XVI-B  Relationship of Activities	es to the Accon			<del></del>	
Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculation art XVI-B  Relationship of Activities	es to the Accon			<del></del>	plishment of
Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculation art XVI-B  Relationship of Activities	income is reported in c	column (e) of Part XVI-		<del></del>	plishment of
rotal. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculation art XVI-B  Relationship of Activitie  Relationship of Activities  Explain below how each activity for which	income is reported in c	column (e) of Part XVI-		<del></del>	plishment of
worksheet in line 13 instructions to verify calculation  art XVI-B Relationship of Activitie  e No. Explain below how each activity for which	income is reported in c	column (e) of Part XVI-		<del></del>	plishment of
Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculation art XVI-B Relationship of Activitie ne No. Explain below how each activity for which	income is reported in c	column (e) of Part XVI-		<del></del>	plishment of
Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculation art XVI-B Relationship of Activitie ne No. Explain below how each activity for which	income is reported in c	column (e) of Part XVI-		<del></del>	plishment of
Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculation art XVI-B Relationship of Activitie ne No. Explain below how each activity for which	income is reported in c	column (e) of Part XVI-		<del></del>	plishment of
Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculation art XVI-B Relationship of Activitie ne No. Explain below how each activity for which	income is reported in c	column (e) of Part XVI-		<del></del>	plishment of
rotal. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculation art XVI-B  Relationship of Activitie  Relationship of Activities  Explain below how each activity for which	income is reported in c	column (e) of Part XVI-		<del></del>	plishment of
worksheet in line 13 instructions to verify calculations  art XVI-B Relationship of Activities  e No. Explain below how each activity for which	income is reported in c	column (e) of Part XVI-		<del></del>	plishment of
worksheet in line 13 instructions to verify calculations  art XVI-B Relationship of Activities  e No. Explain below how each activity for which	income is reported in c	column (e) of Part XVI-		<del></del>	plishment of
worksheet in line 13 instructions to verify calculation  art XVI-B Relationship of Activitie  e No. Explain below how each activity for which	income is reported in c	column (e) of Part XVI-		<del></del>	plishment of
worksheet in line 13 instructions to verify calculations  art XVI-B Relationship of Activities  e No. Explain below how each activity for which	income is reported in c	column (e) of Part XVI-		<del></del>	plishment of
worksheet in line 13 instructions to verify calculation  art XVI-B Relationship of Activitie  e No. Explain below how each activity for which	income is reported in c	column (e) of Part XVI-		<del></del>	plishment of
worksheet in line 13 instructions to verify calculations  art XVI-B Relationship of Activities  e No. Explain below how each activity for which	income is reported in c	column (e) of Part XVI-		<del></del>	plishment of
Fotal. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculation art XVI-B  Relationship of Activitie te No.  Explain below how each activity for which	income is reported in c	column (e) of Part XVI-		<del></del>	plishment of
Fotal. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculation art XVI-B  Relationship of Activitie te No.  Explain below how each activity for which	income is reported in c	column (e) of Part XVI-		<del></del>	plishment of
Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculation art XVI-B Relationship of Activitie ne No. Explain below how each activity for which	income is reported in c	column (e) of Part XVI-		<del></del>	plishment of

					FOUNDATION	91-174			age <b>13</b>
<u>P</u>	art X	VII Information R Exempt Organ		Transfers To	o and Transactions a	and Relationships With Noncha	ritabl	е	
_	D.d.4	<del></del>				- d	_	Yes	No
1						on described in section 501(c) of		163	140
					527, relating to political organ	nzations?	1		
•		fers from the reporting found	dation to a nor	ncnaritable exempt	organization of		4-14		37
	(1) (						1a(1)		X
	٠,,	Other assets					1a(2)		X
ı		transactions;							
		Sales of assets to a noncharit	·	•			1b(1)	<u> </u>	X
		Purchases of assets from a ne		, -	n		1b(2)	<u> </u>	X
	• •	Rental of facilities, equipment	•	ets			1b(3)		<u>X</u> _
		Reimbursement arrangement	S				1b(4)		X
		oans or loan guarantees					1b(5)	1	X
	(6) F	erformance of services or m	embership or	fundraising solicit	ations		1b(6)	ļ	X
(		ng of facilities, equipment, m	-				1c	l	X_
(	i if the	answer to any of the above is	s "Yes," compl	ete the following s	chedule. Column ( <b>b)</b> should alw	vays show the fair market value of the goods,	other as:	sets,	
	or se	vices given by the reporting	foundation. If	the foundation red	eived less than fair market valu	e in any transaction or sharing arrangement,	show in		
_		nn (d) the value of the goods	<del></del>						
(a)	Line no	(b) Amount involved	(c) N	Name of noncharite	able exempt organization	(d) Description of transfers, transactions, and	sharing a	тапдете	ents
				N/2	<u> </u>				
			<u> </u>						
_								_	
	_							-	
				• •					
							\.		
_					<u></u>				•
_			<del> </del>						
_			<u> </u>						
2:	ls the	foundation directly or indire	rtly affiliated w	with or related to	one or more tax-exempt organiz	zations described			
		tion 501(c) of the Code (other	•			[	Yes	T	□No
		s," complete the following sci		1 00 1(0)(0)) 01 111 3	SCOUGH SEY	_	163		<u> </u>
<u> </u>	<u>, ,, (o</u>	(a) Name of or			(b) Type of organization	(c) Description of relations	ship		
_		N/A			(-) -)	(0)			
		1/A							
		<del></del>					·		
				<del></del>		<del></del>			
				<del></del> -					
	Under n	enalties of person I declare that I	have evamined t	this return, including a	accompanying schedules and statem	lents, and to the best of my knowledge and belief, it is	true corre	act	
					on all information of which preparer		, 1100, 00,11		
				_	. 1	· DDEGIDENIM			
စု	ন ন	gnature of officer or trustee	<del>-/</del>	1. 18 6 CO	Va Pate 1/22/1	PRESIDENT			
手	<b>y</b> 31	· · · · · · · · · · · · · · · · · · ·	- Jen	yereca.	de Date [ [22]]	Title  Oate Check If Prepar	er's identi	Nina niir	nber
Sign Here	ر د م	Preparer's	111	<i></i>	ַטן - <b>ו</b> ו	self-	J. J. 14011(III	i jiriyi ildi	
ŝ	Zer id	signature /	UV =			employed			
	Paid Preparer's Use Only		LIAN M.		, CPA	EIN ►			
	కైప	if self-employed), 384	TESCON	VI COURT		,	\ <b>-</b> -		

(707) 578-4444 Form **990-PF** (2009)

if self-employed).

384 TESCONI COURT
SANTA ROSA, CA 95401

Phone no.

# 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

Employer identification number

Name of the organizati	Employer identification number					
	THE ISABEL ALLENDE FOUNDATION	91-1748486				
Organization type (chec	ck one).					
Filers of:	Section:					
Form 990 or 990-EZ	501(c)( ) (enter number) organization					
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation					
	527 political organization					
Form 990-PF	X 501(c)(3) exempt private foundation					
	4947(a)(1) nonexempt charitable trust treated as a private foundation					
	501(c)(3) taxable private foundation					
	on is covered by the <b>General Rule</b> or a <b>Special Rule</b> . I (c)(7), (8), or (10) organization can check boxes for both the General Rule and a Spec	ial Rule See instructions.				
General Rule						
	ition filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more mplete Parts I and II.	(in money or property) from any one				
Special Rules						
509(a)(1) and 1	01(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of th 70(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution 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 <b>General Rule</b> applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year.						
_	n that is not covered by the General Rule and/or the Special Rules does not file Sche					
	on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or one filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)	line 2 of its Form 990-PF, to certify				
LHA For Privacy Act a	nd Paperwork Reduction Act Notice, see the Instructions Sche	dule B (Form 990, 990-EZ, or 990-PF) (2009)				

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

1 of 2 of Part I

Name of organization

Employer identification number

THE I	SABEL ALLENDE FOUNDATION	91	-1748486
Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	ISABEL ALLENDE  116 CALDONIA ST	\$97,403.	Person Payroll Noncash X
	SAUSALITO, CA 94965		(Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
2	ISABEL ALLENDE  116 CALDONIA ST  SAUSALITO, CA 94965	\$127,373.	Person Payroll 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
3	ISABEL ALLENDE  116 CALDONIA ST  SAUSALITO, CA 94965	\$161,910.	Person Payroll 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
4	ISABEL ALLENDE  116 CALDONIA ST  SAUSALITO, CA 94965	\$\$.	Person Payroll 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
5	ISABEL ALLENDE  116 CALDONIA ST  SAUSALITO, CA 94965	\$ 58,488.	Person Payroll 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
6	ISABEL ALLENDE  116 CALDONIA ST  SAUSALITO, CA 94965	\$ 57,805.	Person Payroll Noncash X (Complete Part II if there is a noncash contribution)
		Cahadula B (Form	990 990-F7 or 990-PF) (2009)

Page 2 of 2 of Part I

Name of organization

Employer identification number

### THE ISABEL ALLENDE FOUNDATION

91-1748486

THE I	SABEL ALLENDE FOUNDATION		1748486
Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
7	ISABEL ALLENDE  116 CALDONIA ST  SAUSALITO, CA 94965	\$ 58,253.	Person Payroll 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
8	ISABEL ALLENDE  116 CALDONIA ST  SAUSALITO, CA 94965	\$\$.	Person Payroll 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
9	ISABEL ALLENDE  116 CALDONIA ST  SAUSALITO, CA 94965	\$\$\$	Person Payroll 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
10	ISABEL ALLENDE  116 CALDONIA ST  SAUSALITO, CA 94965	\$\$.	Person Payroli 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
11	ISABEL ALLENDE  116 CALDONIA ST  SAUSALITO, CA 94965	\$	Person Payroll 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
12	ISABEL ALLENDE  116 CALDONIA ST	\$	Person Payroll Noncash X  (Complete Part II if there
923452 02-0	SAUSALITO, CA 94965	Schedule R (Form	s a noncash contribution ) 990, 990-EZ, or 990-PF) (2009)

**Employer identification number** 

### THE ISABEL ALLENDE FOUNDATION

91-1748486

Part II	Noncash Property (see instructions)		
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	1,300 SHARES BHP BILLITON		
1		s97,403.	09/22/10
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	1,700 SHARES BHP BILLITON		
2		<u> </u>	09/22/10
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	6,000 SHARES ORACLE		
3		\$\\$\\$\	09/22/10
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
4	1,000 SHARES THE MOSAIC CO.		
		\$ 68,185.	11/29/10
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	100 SHARES GOOGLE		
<u> </u>			11/20/10
		\$ 58,488.	11/29/10
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
6	1,000 SHARES NEWMONT MINING		
	·	\$ 57,805.	_11/29/10_
923453 02-0	1-10	Schedule B (Form 9	90, 990-EZ, or 990-PF) (2009

2 of 2 of Part II

Name of organization

Employer identification number

#### THE ISABEL ALLENDE FOUNDATION

91-1748486

Part II	Noncock Branesty (see notrictors)		-1740400
	Noncash Property (see instructions)	<del></del>	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
7	1,300 SHARES AUTOMATIC DATA PROCESSING		
		\$ 58,253.	11/29/10
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
8	600 SHARES AUTOMATIC DATA PROCESSING		
		\$ 26,886.	11/29/10
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
9	1,100 SHARES AUTOMATIC DATA PROCESSING		
		\$ 49,291.	11/29/10
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
10	3,000 SHARES PHILIP MORRIS INTL		
		\$ 150,210.	12/15/09
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
11	1,000 SHARES BHP BILLITON		· · · ·
		\$ 74,600.	12/15/09
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
12	1,400 SHARES CONOCOPHILLIPS		
		\$71,029.	
453 02-0	1-10	Schedule B (Form 9	90, 990-EZ, or 990-PF) (2

923454 02-01-10

Relationship of transferor to transferee

Transferee's name, address, and ZIP + 4

2009 DEPRECIATION AND AMORTIZATION REPORT FORM 990-PF PAGE 1

990-PF

Ćurrent Year Deduction	0	992.	751.	253.	331.	805.	160.	617.	130.	33.	4,072.				
Current Sec 179		-									0	·			
Accumulated Depreciation	19,667.	3,886.	1,627.	485.	552.	503.	100.	386.		-	27,206.			 	
Basis For Depreciation	20,000.	4,961.	3,753.	1,263.	1,655.	2,516.	501.	1,929.	2,594.	653.	39,825.	-			
Reduction In Basis											0		-		
Bus % Excl														 	
Unadjusted Cost Or Basis	20,000.	4,961.	3,753.	1,263.	1,655.	2,516.	501.	1,929.	2,594.	653.	39,825.				
Line	16	16	16	16	16	17	17	17	19B	19B		····			
Life	2.00	5.00	5.00	5.00	5.00	5.00	5.00	5.00	5.00	5.00					
Method						200DB	200DB	200DB	200DB	200DB		- ··		 	
Date Acquired	GS300110104SL	010506SL	092207SL	011208SL	032408SL	122908200DB5.00	050509200DB5.00	090409200DB5.00	091410200DB5.00	092510200DB5.00					
Description	(D)2001 LEXUS GS300		3COMPUTER EQUIPMENT	4COMPUTER PRINTER	SCOMPUTER - APPLE	6COMPUTER PRINTER	7COMPUTER PRINTER	8COMPUTER - APPLE	9COMPUTER - APPLE	10MAC MINI	330 - FF FG				
Asset No	न	77	m	-ਚਾ	Ŋ	9		Φ	ס	10				 	

(D) - Asset disposed

928102 06-24-09

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

FORM 99	0-PF	G	AIN OR (1	LOSS)	FROM	SALE	OF	A	SSETS		STA	TEMEN'	r 1
DESCRIF	(A) TION OF	PROPERTY							ANNER QUIRED	DA ACQU	TE IRED	DATE	SOLD
US OBLI	GATIONS		_				F	PUR	CHASED				
	GR	B) OSS PRICE	(C) VALUE TIME OF		EX	(D) PENSE SALE	OF	ŗ	(E)	c.	GAIN	(F)	oss
		802,859.	80:	2,883	•	<u>,</u>	C			0.			<24.>
DESCRIE	(A) PTION OF	PROPERTY							ANNER QUIRED	DA ACQU	TE IRED	DATE	SOLD
CORPORA	TE OBLI	GATIONS	<del></del>				I	PUR	CHASED				
	GR	B) OSS PRICE	(C) VALUE TIME OF		EX	(D) PENSE SALE	OF	ट	(E)	c.	GAIN	(F)	oss
		500,000.	48	2,320	•	, .	C	<u> </u>		0.		17	,680.
DESCRIE	(A) PTION OF	PROPERTY							ANNER QUIRED		TE IRED	DATE	SOLD
CORPORA	TE SECU	RITIES	_				_	DO	NATED				
	GR	B) OSS PRICE	(C) VALUE TIME OF		EX	(D) PENSE SALE	OI	F	(E) DEPRE	c.	GAIN	(F) I OR L	oss
	<del></del>	513,269.	50	3,905	•		(	0.		0.		9	,364.

DESCRIPT	(A) ION OF PROPERTY	•				ANNER QUIRED	DA' ACQU	TE IRED	DATE	SOLD
CORPORAT	E SECURITIES	<del>-</del>			PUR	CHASED		<del></del>		
	(B) GROSS SALES PRICE	(C) VALUE AT TIME OF ACQ		(D) KPENSE ( SALE	OF	(E) DEPRE		GAIN	(F)	SS
	479,248.	540,86	0.		0.		0.		<61,	612.>
CAPITAL	GAINS DIVIDENDS	FROM PART I	v							0.
TOTAL TO	FORM 990-PF, P	ART I, LINE	6A				-		<34,	592.>
							=			
FORM 990	-PF INTEREST C	N SAVINGS AN	D TEM	PORARY	CASH	INVEST	MENTS	STA	TEMENT	2
SOURCE									AMOUNT	
UNION BA									60,	534.
TOTAL TO	FORM 990-PF, P	ART I, LINE	3, COI	LUMN A					60,	536.
FORM 990	-PF DI	VIDENDS AND	INTER	EST FRO	M SE	CURITIE	S	STA	TEMENT	3
SOURCE		(	GROSS	AMOUNT		APITAL DIVIDE			LUMN (	
UNION BA	NK			98,259	•	- <del></del> -	0.		98,	259.
		_								

98,259.

0.

98,259.

TOTAL TO FM 990-PF, PART I, LN 4

FORM 990-PF	OTHER	INCOME		STATEMENT	4
DESCRIPTION		(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTEI NET INCOM	
CLASS ACTION LAWSUIT PROCEEDS	3	4,139.	4,139.		
TOTAL TO FORM 990-PF, PART I,	LINE 11 =	4,139.	4,139.	-	
FORM 990-PF	LEGA	L FEES		STATEMENT	5
DESCRIPTION	(A) EXPENSES PER BOOKS		(C) ADJUSTED NET INCOME		
	13,466	. 6,733	• .	6,7	33.
TO FM 990-PF, PG 1, LN 16A =	13,466	6,733	•	6,7	33.
FORM 990-PF	ACCOUNT	ING FEES		STATEMENT	6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITAI PURPOSI	
	8,757	. 4,379	•	4,3	79.
TO FORM 990-PF, PG 1, LN 16B	8,757	4,379	•	4,3	79.
FORM 990-PF C	THER PROFE	SSIONAL FEES		STATEMENT	7
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITAI PURPOSI	
	575	. 287	•	28	88.
TO FORM 990-PF, PG 1, LN 16C	575	. 287	•	28	88.

28,929.

FORM 990-PF	TAX	ES	STATEMENT 8		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
FEDERAL EXCISE TAX FOREIGN TAXES PAYROLL TAXES	<1,657. 25,752. 10,462.	> 0. 25,752. 1,046.		0. 0. 9,416.	
TO FORM 990-PF, PG 1, LN 18	34,557.	26,798.		9,416.	
FORM 990-PF	OTHER E	XPENSES	S	TATEMENT 9	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
AUTO BANK CHARGES CONTRACT LABOR INTERNET EXPENSE INVESTMENT ADVISOR MISCELLANEOUS POSTAGE PROMOTION SUPPLIES TECH SUPPORT TELEPHONE UTILITIES BUSINESS MEALS FEES INSURANCE REFERENCE SEMINARS/EDUCATION	131. 2,329. 7,670. 2,116. 25,589. 78. 3,450. 1,926. 5,998. 500. 4,036. 391. 1,333. 152. 580. 300. 590.	0. 2,292. 0. 0. 25,589. 0. 0. 0. 0. 0. 0.		131. 0. 7,670. 1,866. 0. 78. 3,440. 1,926. 5,998. 500. 4,065. 391. 1,242. 152. 580. 300. 590.	

57,169.

27,881.

TO FORM 990-PF, PG 1, LN 23

FORM 990-PF U.S. AND STATE/CITY GOV	ERNMENT	OBLIGATIONS	STATEMENT 10		
U.S. DESCRIPTION GOV'T	OTHER GOV'T	BOOK VALUE	FAIR MARKET VALUE		
SEE STATEMENT ATTACHED - US GOVT X		0.	0.		
SEE STATEMENT ATTACHED - STATE AND MUNICIPAL OBLIGATIONS	X	202,220.	209,256.		
TOTAL U.S. GOVERNMENT OBLIGATIONS	-				
TOTAL STATE AND MUNICIPAL GOVERNMENT OBLIG	ATIONS	202,220.	209,256.		
TOTAL TO FORM 990-PF, PART II, LINE 10A	=	202,220.	209,256.		
FORM 990-PF CORPORATE	STOCK		STATEMENT 11		
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE		
SEE STATEMENT ATTACHED - CORP STOCK	_	5,635,083.	6,144,584.		
TOTAL TO FORM 990-PF, PART II, LINE 10B	=	5,635,083.	6,144,584.		
FORM 990-PF CORPORATE	BONDS		STATEMENT 12		
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE		
SEE STATEMENT ATTACHED - CORP BONDS	-	2,424,175.	2,427,157.		
TOTAL TO FORM 990-PF, PART II, LINE 10C	=	2,424,175.	2,427,157.		
FORM 990-PF DEPRECIATION OF ASSETS NOT H	IELD FOR	INVESTMENT	STATEMENT 13		
COST DESCRIPTION OTHER E		ACCUMULATED DEPRECIATION	BOOK VALUE		
COMPUTER EQUIPMENT COMPUTER PRINTER COMPUTER - APPLE COMPUTER PRINTER COMPUTER PRINTER	3,753. 1,263. 1,655. 2,516. 501.	2,378. 738. 883. 1,308. 260.	1,375. 525. 772. 1,208. 241.		

THE ISABEL ALLENDE FOUNDATION			9:	1-1748	486
COMPUTER - APPLE COMPUTER - APPLE MAC MINI	1,929. 2,594. 653.	1,003. 130. 33.		2,4	26. 64. 20.
TOTAL TO FM 990-PF, PART II, LN	14 14,864.	6,733.		8,1	31.
	UBSTANTIAL CONTRIBUTORS T VII-A, LINE 10		STATI	EMENT	14
NAME OF CONTRIBUTOR	ADDRESS				
ISABEL ALLENDE	116 CALDONIA ST SAUSALITO, CA 9496	5			
	S AND CONTRIBUTIONS D DURING THE YEAR		STAT	EMENT	15
RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONS AND PURPOSE OF GRA		PIENT ATUS	A MOI	
826 VALENCIA				AMOU	NT
	NONE EDUCATION, LITERACY, EMPOWERMENT OF CHILDREN	PUBLIC			OO.
FRANCISCO, CA 94110  A HOME AWAY FROM HOMELESSNESS FORT MASON, BUILDING 9 SAN	EDUCATION, LITERACY, EMPOWERMENT OF	PUBLIC		5,0	00.
FRANCISCO, CA 94110  A HOME AWAY FROM HOMELESSNESS FORT MASON, BUILDING 9 SAN FRANCISCO, CA 94123  ACLU OF NORTHERN CALIFORNIA 39 DRUMM STREET SAN FRANCISCO,	EDUCATION, LITERACY, EMPOWERMENT OF CHILDREN  NONE PROTECTION OF CHILDR  NONE	PUBLIC EN PUBLIC		5,0	000.
FRANCISCO, CA 94110  A HOME AWAY FROM HOMELESSNESS	EDUCATION, LITERACY, EMPOWERMENT OF CHILDREN  NONE PROTECTION OF CHILDR  NONE SUPPORTING EMPOWERME OF WOMEN  NONE PROTECTION AND EMPOWERMENT OF MIGRA	PUBLIC EN PUBLIC		5,0	000.

THE ISABEL ALLENDE FOUNDATION			91-1748486
AMNESTY INTERNATIONAL 5 PENN PLAZA NEW YORK, NY 10001	NONE HUMAN RIGHTS ADVOCACY	PUBLIC	1,000.
CAMINOS/PATHWAYS LEARNING CENTER 1470 VALENCIA STREET SAN FRANCISCO, CA 94110	NONE EDUCATION AND LITERACY PROGRAMS	PUBLIC	5,000.
CANAL ALLIANCE 91 LARKSPUR STREET SAN RAFAEL, CA 94901	_,	PUBLIC	12,000.
CARE 151 ELLIS ST NE ATLANTA, GA 303032440	NONE HEALTH	PUBLIC	1,000.
CATHOLICS CHARITIES CYO 180 HOWARD STREET STE 100 SAN FRANCISCO, CA 94105		PUBLIC	2,500.
CENTRO CHILENO LAUTARO 15 AVALON COURT ALAMO, CA 94507		PUBLIC	2,500.
CENTRO LEGAL DE LA RAZA 3022 INTERNATIONAL BLVD STE 410 OAKLAND, CA 94601		PUBLIC	2,500.
CENTROS CULTURALES MAPUCHE ASOCIACION GREMIAL CALLE ENRIQUE BARRAZA NO 18 LORENZO ARENAS NO 1 CONCEPCION,	NONE HUMAN RIGHTS ADVOCACY	FOREIGN	5,000.
CEO WOMEN 405 14TH STREET, ST 712 OAKLAND, CA 94612	NONE EMPOWERMENT AND EDUCATION OF WOMEN	PUBLIC	5,000.
CHILDHOOD MATTERS 221 OAK STREET STE B OAKLAND, CA 94607	NONE LITERACY PROGRAMS FOR CHILDREN	PUBLIC	5,000.

THE ISABEL ALLENDE FOUNDATION			91-1748486
CHILDRENS BOOK PROJECT 45 HOLLY PARK CIRCLE SAN FRANCISCO, CA 94110	NONE LITERACY PROGRAMS FOR CHILDREN	PUBLIC	2,000.
CIRCULO DE VIDA CANCER SUPPORT AND RESOURCE CENTER 2601 MISSION STREET, STE 702 SAN FRANCISCO, CA 94110	NONE HEALTH, EDUCATION, ADVOCACY, COUNSELING FOR LATINAS	PUBLIC	5,500.
CITY OF JOY AID, INC 9501 4TH PLACE LORTON, VA 22079	NONE HEALTHCARE FOR CHILDREN IN INDIA	PUBLIC	7,500.
CUMBERLAND VALĖEY BREAST CARE ALLIANCE 344 LEEDY WAY EAST CHAMBERSBURG, PA 17201	NONE HEALTH	PUBLIC	250.
EDGEWOOD CENTER FOR CHILDREN AND FAMILIES 1801 VICENTE STREET SAN FRANCISCO, CA 94116	NONE PROTECTION OF CHILDREN FROM VIOLENCE AND ABUSE	PUBLIC	2,500.
FAIRFAX SAN ANSELMO CHILDREN'S CENTER 199 PORTEOUS AVE FAIRFAX, CA 94930	NONE PROVIDES CHILDCARE AND SUPPORT SYSTEM TO FAMILIES	PUBLIC	9,500.
FAMILY SERVICE AGENCY OF MARIN CHILDHOOD TRAUMA PROGRAM 555 NORTHGATE DRIVE SAN RAFAEL, CA 94903	NONE PROTECTION OF WOMEN AND CHILDREN	PUBLIC	7,500.
FEMINIST MAJORITY FOUNDATION 1600 WILSON BLVD, STE 801 ARLINGTON, VA 22209	NONE EMPOWERS AND PROTECTS WOMEN	PUBLIC	1,000.
FREEDOM FIRM USA 38 18TH AVE S HOPKINS, MN 55343	NONE PROTECTION OF WOMEN FROM VIOLENCE AND ABUSE	PUBLIC	6,500.
FRIENDS INTERNATIONAL 107 EAST MAIN STREET ,STE 27 MEDFORD, OR 97501	NONE PROTECTION OF WOMEN FROM VIOLENCE AND ABUSE	PUBLIC	4,000.

THE ISABEL ALLENDE FOUNDATION			91-1748486
FUNDACION COLECTIVO ALQUIMIA FONDO PARA MUJERES CONDELL 1325 PROVIDENCIA SANTIAGO, CHILE	NONE EMPOWERMENT OF WOMEN	FOREIGN	5,000.
FUNDACION DE LOS SAGRADO CORAZONES CALLE SEIS NO. 4584 JAIME EYZAGUIRRE MACUL SANTIAGO,	NONE PROTECTION OF WOMEN AND CHILDREN IN CHILE	FOREIGN	1,000.
GIRLS FOR A CHANGE PO BOX 1436 SAN JOSE, CA 95109-1436	NONE EMPOWERMENT OF YOUNG WOMEN	PUBLIC	2,500.
GIRLS INCORPORATED OF ALAMEDA COUNTY 13666 EAST 14TH STREET SAN LEANDRO, CA 94578	NONE EMPOWERMENT OF YOUNG WOMEN	PUBLIC	2,500.
HISPANICS IN PHILANTHROPY 55 SECOND STREET STE 1500 SAN FRANCISCO, CA 94105	NONE EMPOWERMENT OF LATINOS	PUBLIC	250.
HOMELESS PRENATAL PROGRAM 2500 18TH STREET SAN FRANCISCO, CA 94110	NONE ASSISTING HOMELESS PREGNANT WOMEN	PUBLIC	7,500.
HUCKLEBERRY YOUTH PROGRAMS 555 COLE STREET SAN FRANCISCO, CA 94117	NONE EMPOWERMENT OF THE YOUTH	PUBLIC	5,000.
IRAQI STUDENT PROJECT 1154 EAST COLFAX AVE SOUTH BEND, IN 46617	NONE SCHOLARSHIPS FOR YOUNG WOMEN	PUBLIC	5,000.
JAMESTOWN COMMUNITY CENTER 3382-26TH STREET SAN FRANCISCO, CA 94110	NONE EMPOWERMENT OF THE YOUTH	PUBLIC	5,000.
KQED 2601 MARIPOSA SAN FRANCISCO, CA 941101426	NONE EDUCATION THROUGH PUBLIC RADIO AND TV	PUBLIC	2,500.

THE ISABEL ALLENDE FOUNDATION			91-1748486
LA CONCINA 2948 FOLSOM STREET SAN FRANCISCO, CA 94110	NONE EMPOWERING FAMILIES	PUBLIC	2,500.
LEGAL SERVICES FOR CHILDREN 1254 MARKET STREET SAN FRANCISCO, CA 94102	NONE DIRECT LEGAL AND SOCIAL SERVICES TO LOW INCOME YOUTH	PUBLIC	5,000.
MADRE 121 WEST 27TH STREET NEW YORK, NY 10001	NONE PROTECTING HUMAN RIGHTS OF WOMEN AND CHILDREN	PUBLIC	8,000.
MAPENDO INTERNATIONAL 689 MASSACHUSETTS AVE, 2ND FLOOR CAMBRIDGE, MA 02139	NONE HEALTH AND EDUCATION FOR LOW INCOME FAMILIES	PUBLIC	3,500.
MARIN FOOD BANK 75 DIGITAL DRIVE NOVATO, CA 94949	NONE HUMAN SERVICES FOR LOW INCOME FAMILIES	PUBLIC	5,000.
10,000 DEGREES 781 LINCOLN AVE, STE 140 SAN RAFAEL, CA 94901	NONE SCHOLARSHIPS FOR LATINO WOMEN	PUBLIC	29,500.
MS FOUNDATION FOR WOMEN 12 METROTECH CENTER 26TH FLOOR NEW YORK, NY 11201	NONE EMPOWERMENT OF WOMEN	PUBLIC	3,500.
MUJERES UNIDAS Y ACTIVAS 3543 18TH STREET, #23 SAN FRANCISCO, CA 94110	NONE EMPOWERMENT OF WOMEN AND THEIR RIGHTS	PUBLIC	7,500.
NEPALESE YOUTH OPPORTUNITY FOUNDATION 3030 BRIDGEWAY, ST 123 SAUSALITO, CA 94965	NONE EMPOWERMENT OF WOMEN	PUBLIC	12,500.
NOVATO YOUTH WELLNESS COLLABORATIVE 680 WILSON AVE NOVATO, CA 94947	NONE HEALTH SERVICES FOR YOUTH	PUBLIC	7,500.

THE ISABEL ALLENDE FOUNDATION			91-1748486
OASIS FOR GIRLS/THE TIDES CENTER 245 11TH STREET 3RD FLOOR SAN FRANCISCO, CA 94610	-	PUBLIC	2,500.
PARENT SERVICES PROJECT, INC 79 BELEVEDERE ST, STE 101 SAN RAFAEL, CA 94901	NONE EMPOWERING FAMILIES	PUBLIC	7,000.
PARTNERS IN HEALTH 888 COMMMONWEALTH AVE 3RD FLOOR BOSTON, MA 02215	NONE HEALTH AND EMPOWERMENT	PUBLIC	2,500.
PLANNED PARENTHOOD FEDERATION OF AMERICA, INC 434 WEST 33RD STREET NEW YORK, NY 10001	NONE EMPOWERMENT OF WOMEN	PUBLIC	2,500.
PROGRAM FOR TORTURE VICTIMS 3655 SOUTH GRAND AVENUE #290 LOS ANGELES, CA 90007	NONE SUPPORTING VICTIMS OF VIOLENCE AND TORTURE	PUBLIC	3,000.
PROJECT OPEN HAND 730 POLK STREET SAN FRANCISCO, CA 94109	NONE FOOD AND HEALTHCARE FOR UNINSURED/HOMELESS WOMEN WIT	PUBLIC	5,000.
RAPHAEL HOUSE OF SAN FRANCISCO 1065 SUTTER ST SAN FRANCISCO, CA 94109		PUBLIC	4,000.
	NONE EDUCATION AND EMPOWERMENT OF WOMEN	PUBLIC	1,500.
SAN JOSE STATE UNIVERSITY ONE WASHINGTON SQUARE SAN JOSE, CA 951920091	NONE SCHOLARSHIPS FOR LOW INCOME YOUTH	PUBLIC	5,000.
SHANTI PROJECT 730 POLK STREET, 3RD FL SAN FRANCISCO, CA 94109	NONE HELPING WOMEN WITH CANCER WHO ARE HOMELESS OR NO HEA	PUBLIC	2,500.

THE ISABEL ALLENDE FOUNDATION			91-1748486
ST BONIFACE HAITI FOUNDATION, INC 400 NORTH MAIN STREET RANDOLPH, MA 02368	NONE HEALTH AND EMPOWERMENT	PUBLIC	2,500.
STREETSIDE STORIES 3130 20TH STREET, STE 311 SAN FRANCISCO, CA 94110	NONE FOR LITERACY PROGRAMS SERVING CHILDREN	PUBLIC	2,500.
SURVIVORS INTERNATIONAL 703 MARKET STREET, STE 301 SAN FRANCISCO, CA 94131	NONE PROTECTION OF WOMEN FROM VIOLENCE	PUBLIC	3,000.
THE CENTER FOR YOUNG WOMEN'S DEVELOPMENT 832 FOLSOM STREET STE 700 SAN FRANCISCO, CA 94107	NONE HEALTH, EDUCATION, PROTECTION AND LITERACY FOR WOMEN	PUBLIC	10,500.
THE GLOBAL FUND FOR WOMEN 222 SUTTER STREET, STE 500 SAN FRANCISCO, CA 94108	NONE HEALTH, EDUCATION, PROTECTION AND LITERACY FOR WOMEN	PUBLIC	30,500.
TOM STEEL CLINIC BAY CLUB 220 TOWN CENTER CORTE MADERA, CA 94925	NONE HEALTH	PUBLIC	500.
TRIPS FOR KIDS 138 SUNNYSIDE MILL VALLEY, CA 94941	NONE EDUCATION AND EMPOWERMENT OF LOW INCOME CHILDREN	PUBLIC	3,000.
UN TECHO PARA MI PAIS 440 SAN JOAQUIN SANTIAGO, CHILE	NONE HEALTH AND EDUCATION FOR LOW INCOME FAMILIES	FOREIGN	21,365.
WAGES - WOMENS ACTION TO GAIN ECONOMIC SECURITY 1904 FRANKLIN ST. STE 801 OAKLAND, CA 94612	NONE PROMOTE THE ECONOMIC WELL-BEING OF LOW-INCOME WOMEN	PUBLIC	2,500.
WOMEN'S INITIATIVE FOR SELF EMPLOYMENT 1398 VALENCIA ST SAN FRANCISCO, CA 94110	BUSINESS TRAINING FOR	PUBLIC	7,500.

THE ISABEL ALLENDE FOUNDATION			91-1748486
WOMEN'S RECOVERY SERVICES PO BOX 1356 SANTA ROSA, CA 95402	NONE EMPOWERMENT OF WOMEN	PUBLIC	5,500.
ORITEL 1221 BRICKELL AVE. SUITE 1590 MIAMI, FL 33131	NONE HUMAN SERVICES FOR LOW INCOME FAMILIES	PUBLIC	500,000.
SAN FRANCISCO ZEN CENTER 300 PAGE STREET SAN FRANCISCO, CA 94102	NONE HUMAN RIGHTS ADVOCACY	PUBLIC	2,500.
WORLD PULSE 4223A NE FREEMONT STREET PORTLAND, OR 97213	NONE EMPOWERMENT	PUBLIC	130.
SAN DOMENICO DEVELOPMENT OFFICE 1500 BUTTERFIELD ROAD SAN ANSELMO, CA 94960	NONE EDUCATION AND SCHOLARSHIPS	PUBLIC	2,500.
EXIL ASSOCIATION AV REPUBLICA ARGENTINA 6 40 2A BARCELONA, SPAIN 08023	NONE HUMAN SERVICES FOR LOW INCOME FAMILIES	PUBLIC	5,000.
MARIN LITERACY PROGRAM 1100 E STREET SAN RAFAEL, CA 94901	NONE EDUCATION/SCHOLARSHIPS	PUBLIC	2,000.
MINGA PO BOX 610004 NEWTON, MA 02461	NONE EMPOWERMENT	PUBLIC	5,000.
THE ART OF YOGA PROJECT 555 BRYANT ST #232 PALO ALTO, CA 94301	NONE HEALTH AND EMPOWERMENT	PUBLIC	2,500.
THE HANNA PROJECT C/O MARIN CITY CDC 630 DRAKE AVE MARIN CITY, CA 94965	NONE EDUCATION	PUBLIC	3,000.
TOTAL TO FORM 990-PF, PART XV, LI	NE 3A		875,495.

Department of the Treasury Internal Revenue Service (99) Name(s) shown on return

# **Depreciation and Amortization** 990-PF (Including Information on Listed Property)

► See separate instructions. ► Attach to your tax return. OMB No 1545-0172

Attachment Sequence No 67

Business or activity to which this form relates

Identifying number

THE ISA	BEL ALLENDE FO	UNDATION	F	ORM 9	990-P	F PAGE	1		91-1748486
	ection To Expense Certain Prope							fore yo	
	amount. See the instruction							1	250,000.
2 Total cost	t of section 179 property plac	ced in service (see	instructions)					2	
3 Threshold cost of section 179 property before reduction in limitation								3	800,000.
4 Reduction in limitation. Subtract line 3 from line 2 If zero or less, enter -0-								4	
5 Dollar limitat	ion for tax year. Subtract line 4 from lin	ne 1 If zero or less, enter	-0- If married filing separately,	see instruc	tions			5	
6	(a) Description of p	roperty	(b) Cost (b	ısıness use	only)	(c) Electe	d cost		-
	<del></del>								
7 Listed pro	perty. Enter the amount fron	n line 29			7				
8 Total elec	ted cost of section 179 prop	erty. Add amounts	s in column (c), lines 6 a	nd 7				8	
9 Tentative	deduction. Enter the smaller	r of line 5 or line 8						9	
10 Carryover	of disallowed deduction from	m line 13 of your 2	008 Form 4562					10	
11 Business	income limitation. Enter the s	smaller of busines:	s income (not less than	zero) or	lın <del>e</del> 5			_11	
12 Section 1	79 expense deduction. Add l	lines 9 and 10, but	t do not enter more than	line 11				12	
13 Carryover	of disallowed deduction to 2	2010 Add lines 9 a	and 10, less line 12	<b></b>	13				
Note: Do not	use Part II or Part III below fo	or listed property. I	nstead, use Part V.						
Part II	Special Depreciation Allowa	ance and Other D	epreciation (Do not in	clude list	ed prope	erty.)			
14 Special de	epreciation allowance for qua	alified property (ot)	ner than listed property)	placed	ın service	e during			
the tax ye	ar							14	
15 Property	subject to section 168(f)(1) el	lection						15	
16 Other dep	preciation (including ACRS)							16	2,327.
Part III	MACRS Depreciation (Do no	ot include listed pi	roperty ) (See instructio	ns.)					
			Section A		<u></u> -	<u> </u>			
17 MACRS d	eductions for assets placed	in service in tax ye	ears beginning before 2	009				17	1,582.
18 If you are ele	cting to group any assets placed in se	rvice during the tax year	into one or more general asset	accounts, o	heck here	▶ □			
	Section B - Assets	s Placed in Servic	e During 2009 Tax Yea	ar Using	the Ger	neral Depreci	atior	Syste	em
(a)	Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only - see instructions)	(d	Recovery period	(e) Convention	(f) N	fethod	(g) Depreciation deduction
<b>19a</b> 3-yea	r property								
<b>b</b> 5-yea	r property		3,24	7. 5	YRS.	MQ	20	0DB	163.
c 7-year	rproperty								
<b>d</b> 10-ye	ar property								
е 15-уе	ar property								
f 20-ye	ar property								
<b>g</b> 25-yea	ar property			1 2	25 yrs.			S/L	
L D		/		2	7 5 yrs	MM		S/L	
h Resid	ential rental property	/		2	7 5 yrs	MM		S/L	
: N		/		3	39 yrs	MM	٤	S/L	
i Nonre	esidential real property	/				MM	5	S/L	
	Section C - Assets I	Placed in Service	During 2009 Tax Year	Using t	he Alter	native Depre	ciatio	on Sys	tem
20a Class	life							S/L	
<b>b</b> 12-yea	ar			-	12 yrs.		9	S/L	
<b>c</b> 40-yea	ar	/		4	10 yrs.	MM	9	S/L	
Part IV	Summary (See instructions )								
21 Listed pro	perty Enter amount from lin	e 28						21	
•	d amounts from line 12, lines		es 19 and 20 in column	(g), and	line 21				
	and on the appropriate lines	•				tr		22	4,072.
	s shown above and placed in	•						$\neg$	
	onown above and placed in	i service during tin	e cument year, enter the	,	1 1			l l	
portion of 916251 11-04-09 LHA	the basis attributable to sec	-		' 	23				

Part VI Amortization					
(a) Description of costs	(b) Date amortization begins	(C) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
42 Amortization of costs that begins durin	g your 2009 tax year				
43 Amortization of costs that began before	43				
44 Total. Add amounts in column (f) See the instructions for where to report					

916252 11-04-09

Form 4562 (2009)