

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



	XIV Private Operating Founda	itions (see pagi	e 27 of the instru	ctions and Part	VII-A, question 9)	
1a	If the foundation has received a rulin-	g or determinatio	n letter that it is a	private operating		
	foundation, and the ruling is effective for	r 2010, enter the o	date of the ruling .	· •		
b	Check box to indicate whether the fou	nundation is a private operating foundation described in section 4942(j)(3) or 4942(j)				
2a	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years		(e) Total
	investment return from Part X for	(a) 2010	(b) 2009	(c) 2008	(d) 2007	(c) Total
	each year listed			<u></u>	<u> </u>	
	85% of line 2a	ļ				
С	Qualifying distributions from Part XII. line 4 for each year listed					•
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. 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					
	(2) Value of assets qualifying under					
	section 4942(j)(3)(B)(i)					
b	"Endowment" afternative test—enter 2/2 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 royaltles) (2) Support from general public				ļ	
	and 5 or more exempt organizations as provided in section 4942()(3)(B)(iii) .					
	(3) Largest amount of support from		<del> </del>	<del> </del>	<del> </del>	
	an exempt organization		Ì	-	]	
	(4) Gross investment income			<del> </del>		
Part	XV Supplementary Information	n (Complete ti	his part only if the	he foundation h	ad \$5,000 or mo	re in assets at
	any time during the year-				,	
1	Information Regarding Foundation I		· · · · · · · · · · · · · · · · · · ·			
а	List any managers of the foundation v	vho have contribi	uted more than 29	6 of the total conti	ributions received t	by the foundation
	before the close of any tax year (but o	nly if they have co	ontributed more th	ıan <b>\$</b> 5,000). (See s	ection 507(d)(2).)	
Gary C	Blein, The Glein Family Fondation 3519 H	arborview Drive #	3 Gig Harbor, WA	98332-2183		
D	List any managers of the foundation ownership of a partnership or other en	who own 10% o luty) of which the	r more of the stoo foundation has a	ck of a corporation 10% or greater into	n (or an equally lar erest	ge portion of the
2	Information Regarding Contribution	Grant, Gift, Loa	an, Scholarship, e	tc Programs:		
2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:  Check here ▶ ☐ if the foundation only makes contributions to preselected charitable organizations and do						
	unsolicited requests for funds. If the	foundation make	es gifts, grants, et	c. (see page 28 c	of the instructions)	to individuals or
	organizations under other conditions,	complete items 2	a, b, c, and d.			
а	The name, address, and telephone nu	mber of the perso	on to whom applica	ations should be a	ddressed.	
	ilein, The Glein Family Fondation 3519 H					
b	The form in which applications should	be submitted and	d information and i	materials they sho	uld include:	
	st in Writing, no form required					
	Any submission deadlines:					
	er 31st of Calendar year to be funded  Any restrictions or limitations on aw	arde euch ee h	v goographical ==	one chartetis 4	Ida landa af fair	hubana at the
	Any restrictions or limitations on awarfactors.	arus, audii AS D	у деодгарніса ап	eas, chantable lie	nus, kings of insti	tudons, or other
ocus	areas include financial literacy, health ca	re, Gig Harbor Coi	mmunity developme	ent and natural oute	loor and mountain i	resources

Form 990-PF (2010)

20-37677-6 Page 12

Enter g	ross amounts unless otherwise indicated.	Unrelated by	ızıness income	Excluded by sect	on 512, 513, or 514	(e)
		(a) Business code	(b) Amount	(o) Exclusion code	(d) Amount	Related or exempt function income (See page 28 of the instructions.)
ר ר a	rogram service revenue.	}	<del></del>	<b> </b>		
a b	NONE	}		-		<del></del>
c		<del> </del>	<del></del>			<del> </del>
d		<del></del>		<del> </del>		
e		ļ				<del> </del>
ŕ		<del></del>	<u> </u>			<del></del>
•	Fees and contracts from government agencies		<del></del>	<del> </del>	<del></del>	<del>                                     </del>
9 2 M	embership dues and assessments	}	<del></del>	<del> </del>		
	terest on savings and temporary cash investments	<del></del>	<del></del>	ļ	<del></del>	<del></del>
	ividends and interest from securities	<del> </del>	<del></del>	<del> </del>		<del></del>
	et rental income or (loss) from real estate:	3 3 4 3 4 5	148 For 1 1 1 1 1 1 1 1	123-433,434	41.87-17 6 3-1-	1 LCC E
	Debt-financed property		- 42 di - 14 - 34 ** 1- 2 -	1.18 . 3 2.24 K. 25.24	3 3 3 3 4 10 5	
	Not debt-financed property		<u> </u>	<u> </u>		<del> </del>
	et rental income or (loss) from personal property	<del></del>		<u> </u>		
	ther investment income	<del></del>	·	<u></u>		
	ain or (loss) from sales of assets other than inventory	<del></del>		<del> </del> -	<u> </u>	†
	et income or (loss) from special events	<del></del>	<del> </del>	<del> </del>		
		<del></del>		<del></del>		<del>                                     </del>
	Ab	<del></del>	<del></del>		<del></del>	<del> </del>
	ther revenue: a	<u> </u>		<del></del>	<del></del>	
b		<b></b>			<del></del>	<del></del>
Ç		<u></u>		<del></del>	<del></del>	<del> </del>
d		<b></b>	<u> </u>	<del> </del>		
e	4) (2 - 4()	3-20-20		- 1- 1-3 100 L		<del> </del>
12 S	ubtotal Add columns (b), (d), and (e)		<u> </u>	三线连续		<u> </u>
13 T	otal, Add line 12, columns (b), (d), and (e) .			. , .	13	
13 To See w	otal. Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions on page 29 to verif	. , . y calculations.)			13	
13 To See w Part	otal, Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions on page 29 to verify  XVIE: Relationship of Activities to the A	y calculations.)	ent of Exemp	t Purposes		mportantly to the
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## Schedule B

(Form 890, 990-EZ. or 990-PF)

Copartment of the Treasury Internal Revenue Service

## **Schedule of Contributors**

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

OMB No 1545-0047

2010

Name of the organization				Employer identification number				
The Glein Family Foundation					•	20-376776		
Organi	zation type (check	опе):						
Filers o	of:	Sec	tion:					
Form 990 or 990-EZ			] 501(c)( ) (enter number) organization					
			4947(a)(1)	nonexempt charitable trus	st not treated as a private f	oundation		
			527 political organization					
Form 990-PF		•	501(c)(3) exempt private foundation					
			4947(a)(1)	nonexempt charitable trus	st treated as a private found	dation		
			501(c)(3) ta	xable private foundation				
				eneral Rule or a Special	·····			
nstruct	ions.	c)(7), (8),	or (10) orga	nization can check boxes	for both the General Rule a	and a Special Rule See		
G <b>өлө</b> гө	al Rule							
Ø				90-EZ, or 990-PF that recomplete Parts I and II.	eived, during the year, \$5,0	)00 or more (in money or		
Special	l Rules							
	For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 331/3 % 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 Part 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.					itable, scientific, literary, or		
	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, chantable, 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.							
990-EZ,	or 990-PF), but it	must an	swer "No" q	n Part IV, line 2 of its Form	the Special Rules does no n 990, or check the box on ements of Schedule B (Forr	it file Schedule 8 (Form 990, line H of its Form 990-EZ, or or		

	(Form 990, 990-EZ, or 990-PF) (2010)		Page 1 of 1 of Part
	n Family Foundation	. En	nployer identification number 20-3761776
Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	Gary & Linda Glein  3519 Harborview Drive #3  Gig Harbor, WA 98332-2183	\$ 38,580	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 Oncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II if there is a noncash contribution
(a) No.	(b) Name, eddress, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
-		\$	Person Payroll Onncash Ochmete 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

Schedule 6 (Form 990, 990-EZ, or 990-PF) (2010) Page 1 of 1 of Part II Name of organization Employer identification number The Glein Family Foundation 20-3761776 Part II Noncash Property (see instructions) (a) No. (c) FMV (or estimate) (b) from Description of noncash property given Date received Part I (see instructions) 800 Shares of Raven Stock (RAVN) A public traded stock Value per NASDAQ at market 12/23/2010 38,580 (a) No. (c) (d) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions) (a) No. (b) (d) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions) (a) No. (c) FMV (or estimate) (b) (d) from Description of noncash property given Date received Part I (see instructions) (a) No. (c) **(b)** (d) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions) (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions)

Schedule B (Form 990, 990-EZ, or 990-PF) (2010)