

## 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



# Form 990-PF

Department of the Treasury Internal Revenue Service

**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

OMB No 1545-0052

2010

G Check   In that apply   Member   Internal return   Address change   Amane change   Amane change   Amane change   Amane change   Amane change   Amane change   Address change   Amane cha	Fo	calen	dar year 2010, or t	ax year beginning	)	,	, 20	10, a	nd endir	ig		, 20
DOUGLAS C BEATON FAHILY FOUNDATION	G	Check	all that apply	<del>  </del>		, <del></del>	•	blic	1		Final return	
DOUGLAS C BEATON PAMILY FOURDATION   27-1039100   3 Teleptone number (region)   27-1039100   3 Teleptone number (region)   4				Amended retu	ווא	Add	ress change		Name o			
Recent and street (or P O Now nather it mate is not delivered to street address)   200   The community of the native control of th										1 ' '		
4421 W RTVERSIDE DR  Durchank, CA 91505-4051  W Section 457(9) (non-stand)  Buzchank, CA 91505-4051  W Section 457(9) (non-stand)  Section 457(9) (non-stand)  Farin market value of all assets at end of year (from Part II), color (o), line 16) > \$  200												
Comparison application is penaling, check have   District Application is penaling, check have   District Application   District Applica			•		ed to street address)					B Telephone	number (see page 10 of the	instructions)
Butchank, CA 91505-4051   Check by or of organization   X  Section 501(c)(3) exempt private foundation   Section 4947(a)(1) nonexempt charitable trust   Other taxable private foundation   X  Cash   Accrual   Fair market value of all assets at each of year (from Part II, col (c),   Other (severity)   (Part I, column (d) must be on cash basis )   Fair market value of all assets at each of year (from Part II, col (c),   Other (severity)   (Part I, column (d) must be on cash basis )   Fair market value of all assets at each of year (from Part III, col (c),   Other (severity)   (Part I, column (d) must be on cash basis )   Fair market value of all assets at each of year (from Part III, column (d) must be on cash basis )   Fair market value of all assets at each of year (from Part III, column (d) must be on cash basis )   Fair market value of all assets at each of year (d) (Part I, column (d) must be on cash basis )   Fair market value of all assets at each of year (d) (Part I, column (d) must be on cash basis )   Fair market value of all assets at each of year (d) (Part I, column (d) must be on cash basis )   Fair market value of all assets at each of year (d) (Part I, column (d) must be on cash basis )   Fair market value of all assets at each of year (d) (Part I, column (d) must be on cash basis )   Fair market value of all assets at each of year (d) (Part I, column (d) must be on cash basis )   Fair market value of all assets on the second of year (d) (Part I, column (d) must be on cash basis )   Fair market value of all assets at each of year (d) (Part I, column (d) must be one ash basis )   Fair market value of all assets at each of year (d) (Part I, column (d) must be one ash basis )   Part I, column (d) must be one ash basis (d) (Part I, column (d) must be one ash basis (d) (Part I, column (d) must be one ash basis (d) (Part I, column (d) must be one ash basis (d) (Part I, column (d) must be one ash basis (d) (Part I, column (d) must be one ash basis (d) (Part I, column (d) must be one ash basis (d) (Part I,				R				20	00			
H Check type of organization   Section 4947(a)(1) nonexempt charitable trust   Other taxable private foundation   Fair market value of all assets at end of year (from Part I, col (c))   Accounting method   X  Cash   Accrual end of year (from Part I, col (c))   Accounting method   X  Cash   Accrual end of year (from Part I, col (c))   Other (specify)		•		4051						C If exemption	on application is pending, ch	neck here
Section 494(3y)(1) nonevempt chanitable trust    Fair market value of all assets at market value of all assets at a section part (but of the fasable private foundation   1			<del> · · · · · · · · · · · · · · · · · · </del>		504(-)(0)			_				RED/ toot
Fair market value of fall assets at end of year (from Part II, col (c)   Other (specify)   Other (s	Н	_	• •	·	_					check h	ere and attach computation	55% test.
real makes value to an assets at great or lease to the composition of the company of the compan							<del></del>			E If provate for	oundation status was termin	nated under
Inne 16] ▶ \$ 20,000   (Part I, column (d) must be on cash basis )   F differendations on a no Gormath Internation							X Cash	^	ccruai	section 50	7(b)(1)(A), check here	• • • • • • • • • • • • • • • • • • •
Part I Analysis of Revenue and Expenses (The total of anousts n columns (b), (c), and (d) may not necessarily equal to anousts n columns (b) (c), and (d) may not necessarily equal to anousts n columns (b) (c), and (d) may not necessarily equal to anousts n columns (b) (c), and (d) may not necessarily equal to anousts n columns (b) (c), and (d) may not necessarily equal to anousts n columns (b) (c), and (d) may not necessarily equal to anousts n columns (b) (c), and (d) may not necessarily equal to anousts n columns (b) (c) and (d) anousts n columns (c) (d) Adousted net not not necessarily equal to anousts n columns (c) (d) Adousted net not necessarily equal to anousts n columns (c) (d) Adousted net necessarily equal to anousts n columns (c) (d) Adousted net necessarily equal to anousts n columns (c) (d) Adousted net necessarily equal to anousts n columns (c) (d) Adousted net necessarily equal to anousts n columns (c) (d) Adousted net necessarily equal to anousts n columns (c) (d) Adousted net necessarily equal to anousts n columns (c) (d) Adousted net necessarily equal to anousts n columns (c) (d) Adousted net necessarily equal to anousts n columns (c) (d) Adousted net necessarily equal to anousts n columns (c) (d) Adousted net necessarily equal to anousts not necess			•	• • •						F If the found	dation is in a 60-month term	nination
amounts in columns (a), (c), and (d) may not necessarily equal the amounts in column (a) (see page 11 of the instructions)  1 Contributions, gifts, grants, etc., received (aftach schedule) 2 Check ▶				<del></del>	·	<del></del>	e on cash basis )			under sect	ion 507(b)(1)(B), check her	e • • • • • • • • • • • • • • • • • • •
The amounts in column (a) (see page 11 of the instructions)    1	P	art I	_		•	total of			(h) Not	nvartment	4-5 4 4 - 4 - 4	
1 Contributions, gifts, grants, etc. received (attach schedule) 2 Check				• • • • •								purposes
2 Check  Interest on savings and temporary cash investments	_	1 4				dula)	30 (	200				(cash basis only)
A Dividends and interest from securities  Gross rents  Net rental income or (loss)  B Net span or (loss) from sale of assets not on line 10  C Capital gain net income (from Part IV, line 2)  Net span or (loss) from sale of assets not on line 10  Net span or (loss) from sale of assets not on line 10  Net span or (loss) from sale of assets not on line 10  Net span or (loss) from sale of assets on line 6a  C Capital gain net income (from Part IV, line 2)  Net span or loss, profit or assets less returns and allowances  b Less Cost of goods sold  C Gross sales less returns and allowances  b Less Cost of goods sold  C Gross profit or (loss) (attach schedule)  11 Other income (attach schedule)  12 Total. Add lines 1 through 11  20,000  G 1  A 14 Other employee salaries and wages  d 15 Pension plans, employee benefits  16 Legal fees (attach schedule)  D Accounting fees (attach schedule)  C Other professional fees (attach schedule)  Net interest  1				. •	•	′ 1	20,0	-		•	<del>-,</del>	<del>                                     </del>
4 Dividends and interest from securities 5 Gross rests		1						_				
Sa Gross rents b Net rental income or (loss) 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales proce for all assets on line 6a 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain 9 Income modifications 10a Gross sales sear returns and allowances b Less Cost of goods sold c Gross profit or (loss) (attach schedule) 11 Other income (attach schedule) 12 Total. Add lines 1 through 11 20,000 C 13 Compensation of officers, directors, frustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits 16 Legal fees (attach schedule) 17 Ja Legal fees (attach schedule) 18 Accounting fees (attach schedule) 19 Accounting fees (attach schedule) 19 Accounting fees (attach schedule) 10 Literest 10 August 20 Depreciation (attach schedule) and depletion 16 Japan 20 Cocupancy 17 Japan 20 Cocupancy 18 Japan 20 Cocupancy 19 Japan 20 Cocupancy 19 Japan 20 Cocupancy 19 Japan 20 Cocupancy 20 Cocupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses (attach schedule) 24 Total operating and administrative expenses. 25 Contributions, gifts, grants paid 26 Contributions, gifts, grants paid 27 Subtract line 26 from line 12 28 Excess of revenue over expenses and disbursements 29 Adjusted net income (if negative, enter -0-) 20 Adjusted net income (if negative, enter -0-) 20 Codiusted net income (if negative, enter -0-) 21 Codiusted net income (if negative, enter -0-) 22 Adjusted net income (if negative, enter -0-) 23 Contributions 20 Adjusted net income (if negative, enter -0-) 24 Codiusted net income (if negative, enter -0-) 25 Contributions 26 Codiusted net income (if negative, enter -0-) 27 Adjusted net income (if negative, enter -0-) 28 Codiusted net income (if negative, enter -0-) 29 Codiusted net income (if negative, enter -0-) 20 Codiusted net income (if negative, enter -0-) 20 Codiusted net income (if negative, en		1	ŭ	, ,								
b Net rental income or (loss) 6 Net gain or (loss) from sale of assets not on line 10		1 _	_					$\dashv$				<del> </del>
8 Net gain or (loss) from sale of assets not on line 10 · · · · · · · · · · · · · · · · · ·		"."				• • • • •		$\dashv$				<del> </del>
b Gross sales price for all assets on line 6a 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain 9 Income modifications 10a Gross sales sear etums and allowances b Less Cost of goods sold c Gross profit or (loss) (attach schedule) 11 Other income (attach schedule) 12 Total. Add lines 1 through 11 20,000 C Gross profit or floss) 13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits 16 Legal fees (attach schedule) 17 Interest 18 Taxes (attach schedule) 19 Depreciation (attach schedule) 19 Depreciation (attach schedule) 19 Depreciation (attach schedule) and depletion 19 C Coupancy 20 Occupancy 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses (attach schedule) 24 Total operating and administrative expenses. 25 Contributions, gifts, grants paid 26 Total operating and administrative expenses. 27 Subtract line 26 from line 12 28 Excess of revenue over expenses and disbursements 20,000 20 Cocupancy 21 Total operating and administrative expenses. 22 Subtract line 26 from line 12 23 Excess of revenue over expenses and disbursements 24 Investment income (if negative, enter -0-) 26 Total investment income (if negative, enter -0-) 26 Total investment income (if negative, enter -0-) 26 Total investment income (if negative, enter -0-) 27 Adjusted net income (if negative, enter -0-)				·	not on line 10 -			-	<del></del>			<del> </del>
To Capital gain net moome (from Part IV, line 2)  8 Net short-term capital gain 9 Income modifications 10a Gross sales less returns and allowances b Less Cost of goods sold c Gross profit or (loss) (attach schedule) 11 Other income (attach schedule) 12 Total. Add lines 1 through 11 20,000 0  A 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees (attach schedule) 16 Legal fees (attach schedule) 17 Interest 18 Taxes (attach schedule) 19 Depreciation (attach schedule) 10 Depreci		l .	- , ,		not on the 10 •	• • • •		$\dashv$		<del></del>		<del></del>
8 Net short-term capital gain 9 Income modifications 10a Gross sales less returns and allowances b Less Cost of goods sold c Gross profit or (loss) (attach schedule) 11 Other income (attach schedule) 12 Total. Add lines 1 through 11 20,000 C 13 Compensation of officers, directors, trustees, etc 4 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees (attach schedule) 1 Accounting fees (attach schedule) 2 Other professional fees (attach schedule) 3 Accounting fees (attach schedule) 4 Taxes (attach schedule) Cother professional fees (attach schedule) 5 Pension plans, employee benefits 6 Legal fees (attach schedule) 6 Other professional fees (attach schedule) 7 Taxes (attach schedule) Cother professional fees (attach schedule) 8 Taxes (attach schedule) and depletion 9 Coccupancy 1 Taxes (attach schedule) and depletion 1 Taxes (attach schedule) Coccupancy 1 Taxes (attach schedule) 1 Taxes (attach schedule) 1 Total operating and publications 1 Total operating and administrative expenses. 2 Add lines 13 through 23 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	е	1	*	_	/ line 2\							
9 Income modifications 10a Gross sales less returns and allowances b Less Cost of goods sold c Gross profit or (loss) (attach schedule) 11 Other income (attach schedule) 12 Total. Add lines 1 through 11 20,000 0  Add lines 2 through 11 20,000 0  Add lines 3 through 12 20,000 0  Accounting fees (attach schedule) Accounting fees (attach schedule) C Other professional fees (attach schedule) C Occupancy		1		•	, iiile 2) • • • •	• • • •	· · · · · · · · · · · · · · · · · · ·	$\dashv$				<del></del>
10a Gross sales less returns and allowances b Less Cost of goods sold c C Gross profit or (loss) (attach schedule) c Gross profit or (loss) (attach schedule) c C C Gross profit or (loss) (attach schedule) c C C Gross profit or (loss) (attach schedule) c C C Gross profit or (loss) (attach schedule) c C C Gross profit or (loss) (attach schedule) c C C Gross profit or (loss) (attach schedule) c C C Gross profit or (loss) (attach schedule) c C C Gross profit or (loss) (attach schedule) c C C Gross profit or (loss) (attach schedule) c C C Gross profit or (loss) (attach schedule) c C C Gross profit or (loss) (attach schedule) c C C Gross profit or (loss) (attach schedule) c Gross prof		1	•	•			<del> </del>					
b Less Cost of goods sold c Gross profit or (loss) (attach schedule) 11 Other income (attach schedule) 12 Total. Add lines 1 through 11 13 Compensation of officers, directors, trustees, etc 4 Other employee salaries and wages 14 Other employee selaries and wages 15 Legal fees (attach schedule) 16 Legal fees (attach schedule) 17 Other professional fees (attach schedule) 18 Taxes (attach schedule) 19 Depreciation (attach schedule) (see page 14 of the instructions) 19 Depreciation (attach schedule) and depletion 10 Depreciation (attach schedule) 10 Total operating and administrative expenses 10 Add lines 13 through 23 10 Contributions, gifts, grants paid 10 Contributions, gifts, grants paid 10 Contributions, gifts, grants paid 11 Contributions, gifts, grants paid 12 Subtract line 26 from line 12 12 Excess of revenue over expenses and disbursements 12 Adjusted net income (if negative, enter -0-) 13 Convenience 14 Convenience 15 Contributions 16 Contributions 17 Contributions 18 Contributions 19 Contributions 20 Contributions 21 Contributions 22 Contributions 23 Contributions 24 Contributions 25 Contributions 26 Contributions 27 Subtract line 26 from line 12 28 Excess of revenue over expenses and disbursements 29 Contributions 20 Contributions 20 Contributions 20 Contributions 21 Contributions 22 Contributions 23 Contributions 24 Contributions 25 Contributions 26 Contributions 27 Subtract line 26 from line 12 28 Excess of revenue over expenses and disbursements 20 Contributions 20 Contributions 21 Contributions 22 Contributions 23 Contributions 24 Contributions 25 Contributions 26 Contributions 27 Subtract line 26 from line 12 28 Contributions 29 Contributions 20 Contributions 20 Contributions 20 Contributions 21 Contributions 22 Contributions 23 Contri		1				• • • • •						<del> </del>
c Gross profit or (loss) (attach schedule)  11 Other income (attach schedule)  12 Total. Add lines 1 through 11  20,000  Compensation of officers, directors, trustees, etc.  At Other employee salaries and wages  Cother employee salaries and wages  Cother professional fees (attach schedule)  Cother professional fees (attach sched												<del></del>
11 Other income (attach schedule) 12 Total. Add lines 1 through 11 20,000 0 13 Compensation of officers, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees (attach schedule) 1 b Accounting fees (attach schedule) 1 c Other professional fees (attach schedule) 1 literest 1 at a title 1 at a title 1 at a title 1 at a title 2 at a tit			_		L						<del></del>	<del></del>
12 Total. Add lines 1 through 11 20,000 C  13 Compensation of officers, directors, trustees, etc  4 14 Other employee salaries and wages  5 Pension plans, employee benefits  16 Legal fees (attach schedule)  6 Other professional fees (attach schedule)  7 I Total Total expenses and disbursements of the investment income (if negative, enter -0-)  10 Other professional fees (attach schedule)  11 Country Double C		-		• •	•							<del> </del>
13 Compensation of officers, directors, trustees, etc  14 Other employee salaries and wages  15 Pension plans, employee benefits  16a Legal fees (attach schedule)  1 Cother professional fees (attach schedule)  1 Cother professional fees (attach schedule)  1 Interest  Interest  1 Interest  Inte			·	•			20 (	200			<u> </u>	<del></del>
A 14 Other employee salaries and wages	_	<del></del>		<del></del>			20,0	,00	<del> </del>			
d 15 Pension plans, employee benefits  Legal fees (attach schedule)  b Accounting fees (attach schedule)  c Other professional fees (attach schedule)  list a Bar Taxes (attach schedule) (see page 14 of the instructions)  per 20 Occupancy  Travel, conferences, and meetings  Travel, conferences, and meetings  Depreciation (attach schedule)  Travel, conferences, and meetings  Depreciation (attach schedule)  Travel conferences, and meetings  Add lines 13 through 23  Other expenses (attach schedule)  Total operating and administrative expenses.  Add lines 13 through 23  Total expenses and disbursements. Add lines 24 and 25  Total expenses and disbursements. Add lines 24 and 25  Total expenses and disbursements. Add lines 24 and 25  Adjusted net income (if negative, enter -0-)  C Adjusted net income (if negative, enter -0-)	_	14	•	•	-							<del></del>
Legal fees (attach schedule)  Oi b Accounting fees (attach schedule)  Other professional fees (attach schedule)  Interest  Taxes (attach schedule) (see page 14 of the instructions)  Depreciation (attach schedule) and depletion  Occupancy  Travel, conferences, and meetings  Other expenses (attach schedule)  Printing and publications  Other expenses (attach schedule)  Total operating and administrative expenses.  Add lines 13 through 23  Contributions, gifts, grants paid  Occupancy  Total expenses and disbursements. Add lines 24 and 25  Total expenses and disbursements. Add lines 24 and 25  Occupancy  Occupancy	A			•		}		+				+
On b Accounting fees (attach schedule)  Country of the professional fees (attach schedule)  Interest  Taxes (attach schedule) (see page 14 of the instructions)  Depreciation (attach schedule) and depletion  Occupancy  Travel, conferences, and meetings  Printing and publications  Other expenses (attach schedule)  Other expenses (attach schedule)  Total operating and administrative expenses.  Add lines 13 through 23  Add lines 13 through 23  Contributions, gifts, grants paid  Total expenses and disbursements. Add lines 24 and 25  Total expenses and disbursements. Add lines 24 and 25  Adjusted net income (if negative, enter -0-)  Country of the professional fees (attach schedule)  RECLIVED  RECLIVED  OCCUPATO  RECLIVED  OCCUPATO  AUG 3 0 2011  OCCUPATO  OCCUP		1	•	. •		,		-				<del></del>
Description of the professional fees (attach schedule)  Interest			•	•								<u> </u>
Interest	Oi ps		• •	•			F	$\dashv$	REC	EIVED		
Taxes (attach schedule) (see page 14 of the instructions)  Depreciation (attach schedule) and depletion  Cocupancy  Cocupancy  Travel, conferences, and meetings  Comparison of the instructions of the instru	et	$\Omega_{7}$					<u></u>	<del>-  </del>				<del> </del>
Travel, conferences, and meetings  Printing and publications  Other expenses (attach schedule)  Total operating and administrative expenses.  Add lines 13 through 23	a a	-18				L		<del>ا ام</del>	ALIC	n n 2011		<del></del>
Travel, conferences, and meetings  Printing and publications  Other expenses (attach schedule)  Total operating and administrative expenses.  Add lines 13 through 23	t ta	19				· .			HUL	<u>ឌ ម៉ា                                   </u>	<del>ارن</del>	-
Travel, conferences, and meetings  Printing and publications  Other expenses (attach schedule)  Total operating and administrative expenses.  Add lines 13 through 23	ηV	20		•	•	L						<del> </del>
Printing and publications  Other expenses (attach schedule)  Total operating and administrative expenses.  Add lines 13 through 23	g 6	21	, ,			L L			OGD	EN UT		-
d P 23 Other expenses (attach schedule)	nΧ	<b>↓22</b>		_			<del>0.</del>	**************************************				<del> </del>
Total operating and administrative expenses.  Add lines 13 through 23 · · · · · · · · · · · · · · · · · ·	dp	23	• •				· · · · · · · · · · · · · · · · · · ·	$\dashv$	· · · · · · · · · · · · · · · · · · ·	<del>-</del>		-
Add lines 13 through 23 · · · · · · · · · · · · · · · · · ·	ŭ	-24		•		-		+	•	·		<del> </del>
26 Total expenses and disbursements. Add lines 24 and 25 · 0 0  27 Subtract line 26 from line 12  a Excess of revenue over expenses and disbursements · · · · · · · · · · · · · · · · · · ·	S	],						٨		٨		_
26 Total expenses and disbursements. Add lines 24 and 25 · 0 0  27 Subtract line 26 from line 12  a Excess of revenue over expenses and disbursements · · · · · · · · · · · · · · · · · · ·	ۼ	25	· · · · · · · · · · · · · · · · · · ·	-							· · · · · · · · · · · · · · · · · · ·	<del></del>
27 Subtract line 26 from line 12 a Excess of revenue over expenses and disbursements · 20,000 b Net investment income (if negative, enter -0-) · · · · · · · · · · · · · · · · · · ·	=	26				L						<del></del>
a Excess of revenue over expenses and disbursements · 20,000 b Net investment income (if negative, enter -0-) · · · · · · · · · · · · · · · · · · ·	_	<del></del>						7		<del></del>		<del>                                     </del>
b Net investment income (if negative, enter -0-) · · · · · · · · · · · · · · · · · · ·					and dishurseme	nts · ·	20.0	000				
c Adjusted net income (if negative, enter -0-) · · · · · · · · · · · · · · · · · · ·		l .		-		L	20,0	-			<del></del> .	
						- F		$\dashv$		<del></del>		<del>d</del>
	For											Form 990-PF (2010)

Part II

2

5

11

12

14

13

15

16

17

18

19 20

22

23

24 25

26 d

28 а 29

30

31

N

F

В а 27 Grants payable

Paid-in or capital surplus, or land, bldg, and equipment fund • • •

Retained earnings, accumulated income, endowment, or other funds

instructions) ...........

Total liabilities and net assets/fund balances (see page 17

Total net assets or fund balances (see page 17 of the

Α

	of the instructions)	0	20,	000	
Pa	art III Analysis of Changes in Net Assets or Fund Balance	es			
1	Total net assets or fund balances at beginning of year - Part II, column (a), lir	ne 30 (must agree with			
	end-of-year figure reported on prior year's return)	• • • • • • • • • • • • •		1	
2	Enter amount from Part I, line 27a · · · · · · · · · · · · · · · · · · ·			2	20,000
3	Other increases not included in line 2 (itemize)			3	
4	Add lines 1, 2, and 3			4	20,000
5	Decreases not included in line 2 (itemize) ▶			5	
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II,	column (b), line 30 · · ·		6	20,000

0

20,000

27-1039100

Form 99Q-PF (2010)

Part IV Capital Gains	and Losses for Tax on Inve	stment Income			
	e the kind(s) of property sold (e.g., real estate, louse, or common stock, 200 shs. MLC Co.)		(b) How acquired P-Purchase D-Donation	(c) Date acquired (yr, mo, day)	(d) Date sold (yr, mo, day)
1a					
_b					
<u>c</u>					
<u>d</u>					
e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other plus expense			n or (loss) f) minus (g)
а					
_ b					
С					
d					
е					
Complete only for assets sho	owing gain in column (h) and owned	by the foundation or	12/31/69	∩ Gains (C	of (h) gain minus
(i) FMV as of 12/31/69	Adjusted basis     as of 12/31/69	(k) Excess o over col (j),		col (k), but not	
а					
b					
С					
d					
е					
2 Capital gain net income or (n	let canital loss)	lso enter in Part I, lin enter -0- in Part I, lin		2	
3 Net short-term capital gain of	r (loss) as defined in sections 1222(	5) and (6)			
If gain, also enter in Part I, lir If (loss), enter -0- in Part I, lir	ne 8, column (c) (see pages 13 and	17 of the instructions	s) · · · }	3	
		duced Tev en l	Nat Invantance		
	Inder Section 4940(e) for Re				·
(For optional use by domestic pri	ivate foundations subject to the secti	ion 4940(a) tax on no	et investment ind	ome)	
If section 4940(d)(2) applies, leave	ve this part blank				
	·				
	section 4942 tax on the distributable		•	od?	Yes No
	qualify under section 4940(e) Do no	<del></del>		<del></del>	<del></del>
	t in each column for each year, see	page 18 of the instru	uctions before m	aking any entries	
(a) Base period years Calendar year (or tax year beginning in	(b) Adjusted qualifying distributions	Net value of no	(c) nchantable-use asset		(d) tribution ratio divided by col (c))
2009					
2008					
2007			-		
2006			_	1	
2005					
2 Total of line 1, column (d) •				2	<del>-</del>
3 Average distribution ratio for	the 5-year base period - divide the to	otal on line 2 by 5, o	r by the		
number of years the foundati	ion has been in existence if less than	n 5 years · · · ·		3	
4 Enter the net value of noncha	aritable-use assets for 2010 from Pa	ırt X, line 5	• • • • • • • •	4	
5 Multiply line 4 by line 3 · ·				5	0
6 Enter 1% of net investment in	ncome (1% of Part I, line 27b) • • •			6	
7 Add lines 5 and 6 · · · · ·				7	0
	from Part XII, line 4			8	
If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions on page 18					

Pa	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of the ins	struct	ions)	
1a	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)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			0
	here ▶ and enter 1% of Part I, line 27b · · · · · · · · · · · · · · · · · · ·			
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of			
_	Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) • 2			<u>°</u>
3	Add lines 1 and 2			
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) • 4			0
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0- · · · · · · · · 5			0
6	Credits/Payments			
a	2010 estimated tax payments and 2009 overpayment credited to 2010 · · 6a	•		
b	Exempt foreign organizations - tax withheld at source · · · · · · · · · · · · · · · · · · ·			
C	Tax paid with application for extension of time to file (Form 8868) · · · · · 6c  Backup withholding erroneously withheld · · · · · · · · · · · · · · · · · · ·			
d 7				
7				
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed · · · · · · · · · · · · · · · · · · ·			
10 11	<del></del>			
1a	rt VII-A Statements Regarding Activities  During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
·u	participate or intervene in any political campaign? • • • • • • • • • • • • • • • • • • •	1a	163	X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19	-14		<u> </u>
-	of the instructions for definition)? • • • • • • • • • • • • • • • • • • •	1b		Х
	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			
С	Did the foundation file Form 1120-POL for this year?	1c		х
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation > \$ (2) On foundation managers > \$	į į		
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
	on foundation managers > \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		Х
	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
4a	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? If "Yes," complete Part II, col (c), and Part XV ••	7	X	
8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the			
	instructions)	,		
þ	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	
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 2010 or the taxable year beginning in 2010 (see instructions for Part XIV on page			
	27)? 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 · · · · · · · · · · · · · · · · ·	10	X	

disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of

Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2010?

Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? • • • •

the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the

3b

4a

X

5a	During the year did the foundation pay or incur any a	imount to	0							
	(1) Carry on propaganda, or otherwise attempt to inf	fluence l	egislation (sec	tion 494	l5(e))? · ·	• • •	Yes X No	5		
	(2) Influence the outcome of any specific public elec	ction (se	e section 4955	), or to d	carry on,				'	
	directly or indirectly, any voter registration drive?	• • • •					Yes X No			
	(3) Provide a grant to an individual for travel, study, or other similar purposes? • • • • • • • • Yes X No									
	(4) Provide a grant to an organization other than a c	haritable	e, etc , organiz	ation de	scribed in			ł		
	section 509(a)(1), (2), or (3), or section 4940(d)(3)						Yes X No			
	(5) Provide for any purpose other than religious, cha				-					
	purposes, or for the prevention of cruelty to child			-			Yes X No			
b	If any answer is "Yes" to 5a(1)-(5), did any of the train			under t	he exception	ns descr				
_	Regulations section 53 4945 or in a current notice re							5b		
	Organizations relying on a current notice regarding d	-		•				<del></del> -		_
c	If the answer is "Yes" to question 5a(4), does the four						لبا -	ļ		
·	because it maintained expenditure responsibility for the		•				Yes No			
	If "Yes," attach the statement required by Regulation	_								
6-	Did the foundation, during the year, receive any fund				nremume			l		
va	on a personal benefit contract? • • • • • • • • • •						Yes X No			
h	Did the foundation, during the year, pay premiums, d							6b	Ι,	,
	If "Yes" to 6b, file Form 8870	inecity o	i indirectly, on	a perso	mai beneni c	Ontract.		00	<del>                                     </del>	<u> </u>
7.	At any time during the tax year, was the foundation a	nosti te	a arabibitad t	av shalt	or transactio	n2 -	Yes X No			
7a	If yes, did the foundation receive any proceeds or ha							7b		
<u> </u>										
Pa	rt VIII Information About Officers, Dire	ctors,	Trustees,	rouna	iation ivia	nagers	s, mignly Paid	Embio	yees,	
1 1	and Contractors  .ist all officers, directors, trustees, foundation mar	32000 2	and their com	noneati	on /see nad	a 22 of	the instructions			—
	ist an officers, directors, trustees, foundation mar		e, and average		ompensation		Contributions to	T		
	(a) Name and address	hour	's per week		paid, enter	emplo	yee benefit plans		ense account illowances	1
DOU	GLAS C BEATON DECEASED	PRESI	d to position	STM	- <del>0-)</del> 401	and den	erred compensation	<del>                                     </del>		—
	E GRINNELL DR BURBANK, CA 91501		0		0		0		(	0
	2 0 20	<del> </del>				<u> </u>	<u>_</u>	<del> </del>	<u> </u>	<u> </u>
		}								
	-							-		—
						]				
					<del></del>	-	-	<u> </u>	-	—
	Compensation of five highest-paid employees (other	or than	those include	d on lin	0 1 600 02	00 23 0	f the instructions	<u> </u>		-
	f none, enter "NONE."	ei uiaii	mose menue	u on m	ie i - See pa	ige 23 0	i tile ilistructions	,,.		
	Hone, enter NONE.		I		<u> </u>		(d) Contributions to	Γ		—
	(a) Name and address of each employee paid more than \$50,000		(b) Title, and a		(a) Compos	nastian	employee benefit		nse account	i,
	tay maine and address of edge employee paid more than \$600,000		hours per we devoted to pos		(c) Compe	isation	plans and deferred compensation	other a	llowances	
NON	E				-			<del> </del>		—
					1					
	· - · · · · · · · · · · · · · · · · · ·				<u> </u>			<del> </del>		
								<del> </del> -		—
					<del>                                     </del>		-	1		—
					-			<del> </del>		—
			i		L		L	<del>                                     </del>		—
Tota	I number of other employees paid over \$50,000 · · ·									

DOUGLAS C BEATON FAMILY FOUNDATION

Part VII-B | Statements Regarding Activities for Which Form 4720 May Be Required (continued)

Form 99Q-PF (2010)

27-1039100

Page 6

and Contractors (continued)  3. Five highest-paid independent contractors for professional services (see	page 23 of the instructions). If none	e, enter "NONE."
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
ONE		
	1	
<del></del>		**
al number of others receiving over \$50,000 for professional services · · · ·		<b>&gt;</b>
art IX-A Summary of Direct Charitable Activities		
ist the foundation's four largest direct chantable activities during the tax year. Include relevant statistica	I information such as the number of	Expenses
rganizations and other beneficianes served, conferences convened, research papers produced, etc		Cxperises
NONE SINCE THE FOUNDATION HAS JUST STARTED AND JUST		
RECEIVED TAX EXEMPT STATUS		
art IX-B   Summary of Program-Related Investments (see p	age 24 of the instructions)	<b>_</b>
escribe the two largest program-related investments made by the foundation during the tax year on line		Amount
other program-related investments. See page 24 of the instructions		
tal. Add lines 1 through 3		<b>D</b>
	EEA	Form <b>990-PF</b> (2

Pa	Minimum Investment Return (All domestic foundations must complete this part. Foreign for see page 24 of the instructions.)	indations,	
1.	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		<del></del>
	purposes		
а	Average monthly fair market value of securities	1a	0
b	Average of monthly cash balances · · · · · · · · · · · · · · · · · · ·	1b	0
C	Fair market value of all other assets (see page 25 of the instructions)	1c	20,000
d	Total (add lines 1a, b, and c)	1d	20,000
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) · · · · · · · · · · · · · · · · · · ·		
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d · · · · · · · · · · · · · · · · · ·	3	20,000
4	Cash deemed held for charitable activities   Enter 1 1/2% of line 3 (for greater amount, see page 25 of		
	the instructions)	4	300
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4 · ·	5	19,700
6	Minimum investment return. Enter 5% of line 5 · · · · · · · · · · · · · · · · · ·	6	985
Pa	rt XI Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) private of	erating	
	foundations and certain foreign organizations check here   and do not complete this part )		
1	Minimum investment return from Part X, line 6	1	985
2a	Tax on investment income for 2010 from Part VI, line 5 · · · · · · · · 2a		
b	Income tax for 2010 (This does not include the tax from Part VI ) • • • • 2b		
С	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments Subtract line 2c from line 1 · · · · · · · · · · · · · · · · · ·	3	985
4	Recoveries of amounts treated as qualifying distributions · · · · · · · · · · · · · · · · · · ·	4	
5	Add lines 3 and 4 · · · · · · · · · · · · · · · · · ·	5	985
6	Deduction from distributable amount (see page 25 of the instructions) • • • • • • • • • • • • • • • • • • •	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1 · · · · · · · · · · · · · · · · · ·	7	985
Pa	rt XII Qualifying Distributions (see page 25 of the instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		_
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26 · · · · · · · · · · · · · · · · · ·	1a	0
þ	Program-related investments - total from Part IX-B · · · · · · · · · · · · · · · · · · ·	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes · · · · · · · · · · · · · · · · · ·	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	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	
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		
	Enter 1% of Part I, line 27b (see page 26 of the instructions) · · · · · · · · · · · · · · · · · · ·	5	_
6	Adjusted qualifying distributions. Subtract line 5 from line 4 · · · · · · · · · · · · · · · · · ·	6	
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether	the founda	ation
	qualifies for the section 4940(a) reduction of tax in those years		

	990-PF (2010) DOUGLAS C BEATON FAMI	<del></del>		27-1039100	Page <b>9</b>
Par	1 XIII Undistributed Income (see page 26 o	f the instructions)	Ţ <del></del>	·	
1	Distributable amount for 2010 from Part XI,	(a) Corpus	(b) Years pnor to 2009	(c) 2009	(d) 2010
	line 7		<del> </del>		985
2	Undistributed income, if any, as of the end of 2010				
a	Enter amount for 2009 only · · · · · · · · · · · · · · · · · · ·	···			
	Total for prior years,		<del>                                     </del>		
3	Excess distributions carryover, if any, to 2010 From 2005 · · · · · · · ·				
a	From 2006				
b	From 2007 · · · · · · ·				
c d	From 2008 · · · · · · ·				
u e	From 2009 · · · · · · · ·				
f	Total of lines 3a through e				
4	Qualifying distributions for 2010 from Part XII,	·	<del>                                     </del>		
	line 4 🕨 \$				
	Applied to 2009, but not more than line 2a · · ·		<u> </u>		
b	Applied to undistributed income of prior years				
	(Election required - see page 26 of the instructions)		1		
С	Treated as distributions out of corpus (Election				
	required - see page 26 of the instructions) · · ·				
	Applied to 2010 distributable amount		<u> </u>		
e	Remaining amount distributed out of corpus • • •				
5	Excess distributions carryover applied to 2010 • [	·	-		
	(If an amount appears in column (d), the same				
6	amount must be shown in column (a) ) Enter the net total of each column as				
Ū	indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5 •				
b					<del></del>
-	line 4b from line 2b · · · · · · · · · · · ·				
С	_ i ii i i i i i i i i i i i i i i i i				
_	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)				
	tax has been previously assessed				
d	Subtract line 6c from line 6b Taxable				-
	amount - see page 27 of the instructions				
е	Undistributed income for 2009 Subtract line				
	4a from line 2a Taxable amount - see page				
	27 of the instructions · · · · · · · · · ·				
f	Undistributed income for 2010 Subtract lines				
	4d and 5 from line 1. This amount must be				
	distributed in 2011		1		985
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (see page 27 of the				
	instructions)	<del> · · · · · · · · · · · · · · · · · ·</del>			
8	Excess distributions carryover from 2005 not				
	applied on line 5 or line 7 (see page 27 of the				
•	instructions) · · · · · · · · · · · · · · · · · · ·		1		<del></del>
9	Excess distributions carryover to 2011.				
40	Subtract lines 7 and 8 from line 6a · · · · · · ·	· · · · · · · · · · · · · · · · · · ·			
10	Analysis of line 9				
a	Excess from 2006 · · · · · Excess from 2007 · · · · ·				
D ~	Excess from 2007 · · · · · · ·				
ų A	Excess from 2009 · · · ·				
u A	Excess from 2010 · · · · ·				
	E10000 Holli E010 - 1 1 1 1 1	·	1		

	XIV Private Operating Foun				on 9)	
1a	, , ,					
	<u> </u>	for 2010, enter the date of the ruling · · · · · · · · · · · · · · · · ·				
b	•	ndation is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)				
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>(b)</b> 2009	(c) 2008	(d) 2007	
_	each year listed · · · · · · ·					
b	85% of line 2a · · · · · · · ·	<del></del>				
С	Qualifying distributions from Part XII, line 4 for each year listed • • • • •					
đ	Amounts included in line 2c not used directly for active conduct of exempt activities		-			- · · · · · · · · · · · · · · · · · · ·
е	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					
а	"Assets" alternative test - enter  (1) Value of all assets • • • • • •					
	``					· · · · · · · · · · · · · · · · · · ·
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
С	"Support" alternative test - enter					
	(1) Total support other than gross investment income (interest,					
	dividends, rents, payments on					
	securities loans (section 512(a)(5)), or royalties)					
	(2) Support from general public					
	and 5 or more exempt organizations as provided in					
	section 4942(j)(3)(B)(iii) · · · ·					
	(3) Largest amount of support from an exempt organization • • • •				-	
	(4) Gross investment income · · ·		<del> </del>		-	•
Part	<del>``,                                     </del>	tion (Complete th	is part only if th	e foundation had	\$5,000 or more in	n assets at
	any time during the year		•		, , , , , , , , , , , , , , , , , , ,	
1	Information Regarding Foundation N					
а	List any managers of the foundation wh					
	before the close of any tax year (but or	ily if they have contribi	uted more than \$5,000	) (See section 507(d)	(2))	
	DOUGLAS C BEATON,	•				· · · · · · · · · · · · · · · · · · ·
b	List any managers of the foundation wh				ge portion of the	
	ownership of a partnership or other ent	ity) of which the found	ation has a 10% or gre	eater interest		
	Lafarrandian B	0	- h - l			
2	Information Regarding Contribution					
	Check here ▶ X if the foundation onl	y makes contributions	to preselected charita	able organizations and	does not accept	
	unsolicited requests for funds. If the for organizations under other conditions, c			28 of the instructions)	to individuals or	
	The name, address, and telephone nur			ould be addressed		
a	name, address, and telephone flui	or the person to t	om apphoadono on	Jaia do addicesta		
b	The form in which applications should I	pe submitted and infor	mation and materials	they should include		
				•		
_	<u> </u>					
С	Any submission deadlines					
	Any restrictions or limitations on award	e euch ae hy geograp	hical areas charitable	fields kinds of institut	tions or other	
d	factors	s, such as by geograp	incai aicas, chantable	i neius, kiilus ol ilistitul	nons, or other	

Page 11

Part;XV. Supplementary Information (continue	Part:XV. Supplementary Information (continued)  3 Grants and Contributions Paid During the Year or Approved for Future Payment					
3 Grants and Contributions Paid During the	Year or Approved	l	ayment 	<del> </del>		
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount		
Name and address (home or business)	or substantial contributor					
a Paid during the year						
			_			
Total · · · · · · · · · · · · · · · · · · ·		<u> </u>	▶ 3a			
b Approved for future payment		<u> </u>				
	1					
Total · · · · · · · · · · · · · · · · · · ·	• • • • • • • • • • • • • • • • • • • •	• • • • • • • • •	3b			

	art Avi-A   Analysis of income-r roducing A	TCHVILLES	·	<del></del>		<del></del>
•	iter gross amounts unless otherwise indicated  Program service revenue	(a) Business	(b) Amount	(c) Exclusion code	(d) Amount	(e)  Related or exempt function income (See page 28 of the instructions)
	a		<u> </u>	1		<u> </u>
	b			<del>                                     </del>		
						<del></del>
	d	-				
	e			1		
	f			1		
-	g Fees and contracts from government agencies · · ·	<u> </u>		1		
2	Membership dues and assessments · · · · · · · · ·					<del></del>
	Interest on savings and temporary cash investments •		1	-		
	Dividends and interest from securities · · · · · · · ·					
	Net rental income or (loss) from real estate	<b> </b>	<del></del> -			
٠	a Debt-financed property · · · · · · · · · · · · · · · · · · ·		+	<del> </del>	<del></del>	<del> </del>
	b Not debt-financed property · · · · · · · · · · · · · · · · · · ·			+ +		
6	Net rental income or (loss) from personal property · · ·	<b>}</b>		-		<del>                                     </del>
	Other investment income • • • • • • • • • • • • • • • • • • •			+		
	Gain or (loss) from sales of assets other than inventory.		<del> </del>			· ·
	•			+		<del> </del>
	Net income or (loss) from special events · · · · · ·					
	Gross profit or (loss) from sales of inventory	ļ		<del> </del>		
71	Other revenue a					ļ
	b	<u> </u>		+		
	<u> </u>			<del> </del> -		<u> </u>
	d		<del> </del>	ļ	<del></del>	ļ
	е					
	Subtotal Add columns (b), (d), and (e)					<u> </u>
	Total. Add line 12, columns (b), (d), and (e)			• • • • • • •	13	
	ee worksheet in line 13 instructions on page 29 to verify ca					
LP	art XVI-B Relationship of Activities to the					
Ł	Explain below how each activity for which inc accomplishment of the foundation's exempt instructions )				-	
					· · · =	
				· · · · · · · · · · · · · · · · · · ·		
			· · · · · · · · · · · · · · · · · · ·			·····
					· ·	<del></del>
_			<del></del>			
_						<del></del>
		· · · · · ·				
					<del></del>	
-						
_						···· ·· ·· ·· ·· ·· ·· ·· ·· ·· ·· ·· ·
				<del></del>		
					<del></del>	
_		<del></del>			<del></del>	
	I					

Preparer

Use Only

Firm's name

Firm's address

John F Pfaffl CPA

Burbank CA 91502

348 E Olive Ave Ste L

Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable **Exempt Organizations** Did the organization directly or indirectly engage in any of the following with any other organization described No in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? a Transfers from the reporting foundation to a noncharitable exempt organization of 1a(1) (2) Other assets · 1a(2) **b** Other transactions (1) Sales of assets to a noncharitable exempt organization .... 1b(1) (2) Purchases of assets from a noncharitable exempt organization • 1b(2) (3) Rental of facilities, equipment, or other assets . . . . . . . . . . . 1b(3) 1b(4) 1b(5) Х (6) Performance of services or membership or fundraising solicitations · · · · 1b(6) Х c Sharing of facilities, equipment, mailing lists, other assets, or paid employees ..... 1c d If the answer to any of the above is "Yes," complete the following schedule Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements (a) Line no Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations b If "Yes," complete the following schedule (a) Name of organization (b) Type of organization (c) Description of relationship Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge Sign DOI reasuren Here Title Signature of officer or trustee PTIN Print/Type preparer's name Preparer's signature Date Check **Paid** pardnor Bartleto 08-25-2011 Gardner Bartlett P01294654

Firm's EIN

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

2010

Name of the organization		Employer identification number
DOUGLAS C BEATON F	AMILY FOUNDATION	27-1039100
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 f	oundation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private found	dation
	501(c)(3) taxable private foundation	
	s covered by the <b>General Rule</b> or a <b>Special Rule</b> . (7), (8), or (10) organization can check boxes for both the General Rule an	nd a Special Rule See
General Rule		
	filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 one contributor. Complete Parts I and II.	or more (in money or
Special Rules		
sections 509(a)(1)	e)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support to and 170(b)(1)(A)(vi), and received from any one contributor, during the yea 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1h or (iii) Form 990-EZ, line 1h or (iii) Form 990-EZ, line 1h or (iiii) Form 990-EZ, line 1h or (iiii) Form 990-EZ, line 1h or (iiii) Form 990-EZ, line 1h or (iiiii) Form 990-EZ, line 1h or (iiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii	r, a contribution of the greater
the year, aggregate	e)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from contributions of more than \$1,000 for use exclusively for religious, charitates, or the prevention of cruelty to children or animals. Complete Parts I, II,	ble, scientific, literary, or
the year, contribution aggregate to more year for an exclusive applies to this organ	c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from sons for use exclusively for religious, charitable, etc., purposes, but these contracts than \$1,000. If this box is checked, enter here the total contributions that we religious, charitable, etc., purpose. Do not complete any of the parts undication because it received nonexclusively religious, charitable, etc., contracts.	ontributions did not vere received during the nless the <b>General Rule</b> ibutions of \$5,000 or more
990-EZ, or 990-PF), but it n	nat is not covered by the General Rule and/or the Special Rules does not finust answer "No" on Part IV, line 2 of its Form 990, or check the box on line. PF, to certify that it does not meet the filing requirements of Schedule B (F	ne H of its Form 990-EZ,

Name of organization Employer identification number DOUGLAS C BEATON FAMILY FOUNDATION 27-1039100

Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
_1	DOUGLAS C BEATON  827 GRINNELL DRIVE  Burbank, CA 91501	\$20,000	Person X 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 Complete Part II if there is a noncash contribution )
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II if there is a noncash contribution )
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		<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 Noncash (Complete Part II if there is a noncash contribution)

#### **Federal Supporting Statements** 2010 PG 01 Name(s) as shown on return FEIN DOUGLAS C BEATON FAMILY FOUNDATION 27-1039100

Form 990PF, Part VII-A, Line 10 Substantial Contributors Schedule

Statement #114

Name

DOUGLAS C BEATON

Address

827 GRINNELL DRIVE

Burbank

CA 91501

PG01

Form 990PF, Part VIII Compensation Explanation

Name

DOUGLAS C BEATON, DECEASED

Explanation DOUGLAS BEATON RECEIVED NO COMPENSATION OF ANY KIND.