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## SCANNED AUG 2 2 2011

. 990-PF

## **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

20**10** 

For	cale	endar year 2010, or ta	ax year beginning		9/9/2010 , a	nd ending	12	2/31/2010	· ·
		ck all that apply:	X Initial return ☐ Amended return		Initial return of a for Address change	· —	me c	Final re	
Na	me of f	foundation					A	Employer identification n	umber
		tel foundation						27-3419	
Nu	mber a	and street (or P O box numb	per if mail is not delivered to stre	et ado	iress)	Room/suite	B	Telephone number (see pa	ge 10 of the instructions)
		ndation Source, 501 S	ilverside Road			123	_	(800) 839	<u>-1754</u>
		wn, state, and ZIP code					CH	exemption application is p	ending, check here 🕨 🛚
_	<u>mingl</u>		<b>5</b> 0. <b>50. (10. 10. (10. (10. (10. (10. (10. (10. (10. (10. (10. <b>(10. (10. (10. <b>(10. (10. (10. (10. (10. (10. (10. (10. (10. </b></b></b>		DE	19809-1377	D 1	I. Foreign organizations, ch	eck here ►_
Ë		ck type of organization tion 4947(a)(1) nonex			npt private foundation of the staxable private			Profession organizations me check here and attach co	mputation >
	of ye	market value of all ass par (from Part II, col. (c 16) ▶\$	c). Tighther	r (sp	nethod· X Cash ecify) ) must be on cash bas		Fif	f private foundation status in inder section 507(b)(1)(A), if the foundation is in a 60-n inder section 507(b)(1)(B),	check here  nonth termination
Pa	rt I	amounts in columns (b), (c,	ie and Expenses (The total), and (d) may not necessarily e (see page 11 of the instructions	qual	(a) Revenue and expenses per books	(b) Net investm income	ent	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1	Contributions, gifts, grants,	, etc , received (attach schedule	)	349,774				
	2	_	tion is <b>not</b> required to attach Sci	-				ļ	
	3	<del>-</del>	temporary cash investmen	its	7		7	7	
	4	Dividends and interest	from securities	ļ					
		Gross rents .		ŀ				<del>                                     </del>	<del></del>
e	1	Net rental income or (loss) from	sale of assets not on line 10	<del>,  </del>	· · · · · · · · · · · · · · · · · · ·			1	
Revenue		Gross sales price for all as		' ŀ				<del> </del>	
ě	7 ~	Capital gain net income							
œ	8	Net short-term capital of	•	ľ				<u> </u>	
	9	Income modifications		I					
	10 a	l Gross sales less returns ar	nd allowances					1	
	b	Less Cost of goods so	old						
		Gross profit or (loss) (a	ittach schedule)	l					
	11	Other income (attach se	•	-	<del></del>				ļ
_	12	Total. Add lines 1 thro	ugh 11 .		349,781		7	7	
S	13	Compensation of office	ers, directors, trustees, etc		·····				
Z.	14	Other employee salane	~	ŀ					
Ď	15	Pension plans, employe		- 1			_	10.45	
Щ	1	Legal fees (attach sche	•	ŀ		<del>                                    </del>	C	IVED	
ministrative Expenses	!	<ul> <li>Accounting fees (attach</li> <li>Other professional fees</li> </ul>	•	ŀ		<del>                                     </del>		10	<del>                                     </del>
ati	17	Interest	s (attach schedule) .	ŀ	·	12 VII	<u>.</u>	<b>A</b> 2011 O	
str	18		e page 14 of the instructions)	ŀ		<del>   ⇔  AU</del>	<del>0 1</del>	10 2011   S	
Ξ	19	Depreciation (attach so	. •	l				<u>                                     </u>	
	20	Occupancy		ı		OG	DF	NIIT	
ĕ	21	Travel, conferences, ar	nd meetings .	Ì					
<u>n</u>	22	Printing and publication	•	[					
<u>0</u>	23	Other expenses (attach	n schedule)	. [					
ţ	24	· -	dministrative expenses.						
era		Add lines 13 through 23		ļ	0			P	C
Operating and Ad	25	Contributions, gifts, gra		ŀ				· · · · · · · · · · · · · · · · · · ·	
_	26		rsements. Add lines 24 and 25		0			<u> </u>	
	27	Subtract line 26 from lin						i	1
	i .		xpenses and disbursements .	ŀ	349,781	<del></del>		1	
	1		ne (if negative, enter -0-).	ŀ				7	
	٩	Adjusted net income	(IT negative, enter -U-)						

For Paperwork Reduction Act Notice, see page 30 of the instructions.

Form **990-PF** (2010)



	,		
Pa	rt III Analysis of Changes in Net Assets or Fund Balances		
1	Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with		
	end-of-year figure reported on prior year's return)	1	. 0
2	Enter amount from Part I, line 27a	2	349,781
3	Other increases not included in line 2 (itemize)	3	
4	Add lines 1, 2, and 3	4	349,781
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	349 781

-		I foundation	-441			27.	-3419857	Page 3
Fe	(a) List and describe the	d Losses for Tax on Inverse kind(s) of property sold (e.g., real esse, or common stock, 200 shs. MLC (	tate,	(b) How acquired P—Purchase	(c) Date ac		(d) Date s	
1a				D-Donation	(iiio , day	. ,,	(iiio , day	, y. /
b	<del></del>						<del></del>	
c	-						<del> </del>	
ď								
е								
	(a) Gross sales price	(f) Depreciation allowed (or allowable)		r other basis ense of sale			or (loss) ) minus (g)	
а								·
b								
С								
d								
е			l					
	Complete only for assets show	ing gain in column (h) and owne	d by the foundation	on on 12/31/69	(I) G	iaıns (Col	(h) gain minus	
	(I) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		ss of col (ı) (ı), ıf any			less than -0-) or om col (h))	· 
<u>a</u>								
<u>ь</u>				<del> </del>				
드								
<u>d</u>								
e		(If gain	i also enter in Pai	rt Llino 7				
	Capital gain net income or	(net capital loss) { If (loss),	enter -0- in Pai	rt I, line 7	2			
3		or (loss) as defined in section						
		line 8, column (c) (see pages	13 and 17 of th	ne }				
Б	instructions) If (loss), enter	ler Section 4940(e) for Re	duced Tex e	n Not Investme	3		· · · · · ·	
(Fc	or optional use by domestic p	private foundations subject to	the section 494	0(a) tax on net in	ivestment in	icome )		
lf s	ection 4940(d)(2) applies, le	ave this part blank			N/A	- 1ST Y	'EAR	
		e section 4942 tax on the dis			the base pe	nod?	Yes 🗌	No
		ot qualify under section 4940(						
1		ount in each column for each	year, see page	18 of the instruct	ions before	makıng		
	(a) Base peпod years	(b)	l	(c)	l	Distr	(d) nbution ratio	
С	alendar year (or tax year beginning i	n) Adjusted qualifying distribution	ons Net value o	of nonchantable-use a	ssets		ivided by col (c	)) .
	2009						0 (	000000
	2008							000000
	2007							000000
	2006					<del>,</del>		000000
	2005		<u> </u>				00	000000
	Total of line 1, column (d)	·		•	2		0.0	000000
3		or the 5-year base period—div			1			
	the number of years the fol	indation has been in existenc	e ir iess than 5	years	. 3	<b></b>	0.0	000000
4	Enter the net value of nonc	hantable-use assets for 2010	from Part X, lin	e 5	4			
5	Multiply line 4 by line 3				5			
6	Enter 1% of net investment	ıncome (1% of Part I, line 27	b) .		6			<u></u>
7	Add lines 5 and 6				7			0
8	Enter qualifying distribution				8			
	If line 8 is equal to or greate the Part VI instructions on p	er than line 7, check the box i page 18	n Part VI, line 1	b, and complete	that part usi	ng a 1%	tax rate. Se	e

,	ı			
_	990-PF (2010) ı am angel foundation 27-341			age 4
Pa	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the	inst	ructio	ons)
1 a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1 ☐			
	Date of ruling or determination letter(attach copy of letter If necessary—see 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  All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4%			i
Ŭ	of Part I, line 12, col. (b)			i
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		0	
3	Add lines 1 and 2		0	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-		0	
6	Credits/Payments:			
	2010 estimated tax payments and 2009 overpayment credited to 2010 6a 0			
	Exempt foreign organizations—tax withheld at source			
	Backup withholding erroneously withheld 6d			
7	Total credits and payments Add lines 6a through 6d		0	
8	Enter any penalty for underpayment of estimated tax. Check here. If Form 2220 is attached.		0	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed .		0	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		0	L
11	Enter the amount of line 10 to be Credited to 2011 estimated tax ▶ 0 Refunded ▶ 11		0	
Pai	t VII-A Statements Regarding Activities		· ·	_
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
	participate or intervene in any political campaign?	1a		Х
þ	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 of the			
	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			İ
	Did the foundation file Form 1120-POL for this year?	1c		x
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year	-		Ĥ
	(1) On the foundation   \$ (2) On foundation managers   \$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			i
	on foundation managers   \$			
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	3		x
4 a	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes  Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		Î
	If "Yes," has it filed a tax return on Form 990-T for this year?	4b	N/A	<u>```</u>
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		Х
	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			l
	By language in the governing instrument, or	[		ĺ
	By state legislation that effectively amends the governing instrument so that no mandatory directions	ا ا	v	ŀ
-	that conflict with the state law remain in the governing instrument?	6 7	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.  Enter the states to which the foundation reports or with which it is registered (see page 19 of the	├-	^	<del></del>
oa	Instructions) DE			l
Ł	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney			ĺ
	General (or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	х	
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)?			l
	If "Yes," complete Part XIV	9	<b>.</b>	X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing	ا ـ ـ ا		l
	their names and addresses	10	Х	Ь.

Form	990-PF (2010) ı am angel foundation 27-34	19857	P	age 5
Par	t VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see page 20 of the instructions)	11		х
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?	12		x
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address  Tababasa and Canada Sauras Tababasa a			4764
14	The books are in care of    C/o Foundation Source    Telephone no    Located at    501 Silverside Road, Suite 123 Wilmington DE    ZIP+4    19809-137		) 839-	1/54
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here			· 🗆
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2010, did the foundation have an interest in or a signature or other authority	1	Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		<u> </u>
	See page 20 of the instructions for exceptions and filing requirements for Form TD F 90-22 1. If "Yes," enter		1	
Da	the name of the foreign country			
Га	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required	<del></del>	V I	N-
4	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	$\vdash$	Yes	No
1a	During the year did the foundation (either directly or indirectly).  (1) Engage in the sale or exchange, or leasing of property with a disqualified person?  Yes X No			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	a disqualified person? Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?  Yes X No			
	for the benefit or use of a disqualified person)?  (6) Agree to pay money or property to a government official? (Exception. Check "No"			
	If the foundation agreed to make a grant to or to employ the official for a period			
	after termination of government service, if terminating within 90 days ) . Yes X No			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations		l	
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see page 22 of the instructions)?	1b	N/A	
	Organizations relying on a current notice regarding disaster assistance check here			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2010?	1c		x
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	At the end of tax year 2010, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2010? . Yes X No			
	if "Yes," list the years 20 , 20 , 20 , 20			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)			
	to all years listed, answer "No" and attach statement—see page 22 of the instructions)	2b	N/A	
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here		1 1	
_	20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?			
<b>L</b>	<del>-</del> -			
b	If "Yes," did it have excess business holdings in 2010 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved			
	by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3)			
	the lapse of the 10-, 15-, or 20-year first phase holding penod? (Use Schedule C, Form 4720, to determine			
	ff the foundation had excess business holdings in 2010 )	3ь	N/A	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? .	4a		Х
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its chantable			
	purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2010?	4b		Х

Form	1 990-	PF (2010)	i am ange	el foundation								27-34	119857	F	age 6
Pa	rt V	I-B St	atements R	Regarding Activi	ties f	or Which Form	n 4	720 May Be R	equ	ired (	continued	)			
5a	Duni	ng the yea	ar did the found	dation pay or incur a	ny amo	ount to					_				
	(1)	Carry on	propaganda,	or otherwise attemp	t to infl	uence legislation (	sed	tion 4945(e))? .			Yes	X No			
	(2)			of any specific publi		•	955)	; or to carry							
		on, direc	ctly or indirectly	y, any voter registrat	ion driv	/e <sup>?</sup>		•	•		Yes	X N₀			
	(3)	Provide	a grant to an II	ndıvıdual for travel, s	tudy, c	or other similar pur	pose	es?			Yes	X No			
	(4)	Provide	a grant to an o	organization other th	an a ct	antable, etc , orga	anıza	ation described			_	_			
		ın sectio	n 509(a)(1), (2	?), or (3), or section 4	940(d	)(2)? (see page 22	of t	he instructions)			Yes	X No			
	(5)			se other than religiou or for the prevention				• •			☐ Yes	ΣNο			
ь	If an			1)-(5), did any of the		-			ns d	еѕспре					
-			•	or in a current notice		•	•	•					5ь	N/A	
	Orga	ınızatıons	relying on a ci	urrent notice regardi	ng disa	ister assistance ch	neck	here .			. )	•П		1	
С	-			stion 5a(4), does the	-							_			
	tax b	ecause it	maintained ex	penditure responsib	ility for	the grant?					Yes	☐ No			
	If "Y	es," attact	h the statemen	t required by Regula	itions s	ection 53 4945–5	(d)						ı		
6a	Did t	he founda	ation, during th	e year, receive any	funds,	directly or indirectl	y, to	pay				_			
	prem	nums on a	a personal ben	nefit contract?							Yes	X No			
b				e year, pay premiun	ıs, dıre	ctly or indirectly, o	n a	personal benefit o	contr	act?			6b		_X_
70		•	file Form 8870			nahi ta a mashihiti da		ahallas taanaastu			□v	X No			
		-		ear, was the foundati eceive any proceeds	•	•				tion?	Yes	[♥] MO	7b	N/A	
	art V			n About Officer						_	s Highly	Paid F			
			and Contra		o, <b>o</b>	colors, rruste	.00,	, i candation	Mi	iagei.	s, mgmy	I did L	iiipioy	<del>66</del> 3,	
1	List			rs, trustees, foun	datio	n managers and	i the	eir compensati	ion (	see pa	age 22 of	the insti	uction	s).	
					(b)	Title, and average	(0	) Compensation		(d) Co	ntributions to		e) Expen		unt
		(6	a) Name and add	iress		hours per week evoted to position	(11	f not paid, enter -0-)			e benefit plar ed compensa	S C		lowance	
SEI	<u>AT</u>	TACHME	NT		. T										
					.										
				·····	4										
					-										
_			<del></del>				-								
					-							1			
2	Con	npensati	ion of five hi	ighest-paid empl	ovees	(other than the	ose	included on li	ne 1	see	page 23 o	f the ins	tructio	ns)	
			er "NONE."	J		<b>,</b>					,g				
						(b) Title, and avera	age				Contributions				
(a)	Name	and addre	ess of each empl	oyee paid more than \$5	0,000	hours per week		(c) Compensation	วก		ployee benef and deferre		e) Expen	se acco lowance	
						devoted to position	n				ompensation	:u	Outer at	iowance	<del>-</del>
ΝO	ΝĒ.														
				· · · · · · · · · · · · · · · · · · ·											
							_								
				<del></del>							<del></del>				
	••••	• • • • • • • • • • • • • • • • • • • •	•••••									1			
Tot	al nu	mber of	other employ	ees paid over \$50	,000							▶			
													Form <b>9</b> 9	0-PF	(2010)

i am angel foundation		27-3419037 Page 1
Part VIII Information About Officers, Directors, Trustees, and Contractors (continued)	, Foundation Managers, Highly Paid	l Employees,
3 Five highest-paid independent contractors for professional services (se	ee page 23 of the instructions). If none, ente	r "NONE."
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services	<u>.                                    </u>	
Part IX-A Summary of Direct Charitable Activities		· · · · · · · · · · · · · · · · · · ·
List the foundation's four largest direct chantable activities during the tax year. Include releval the number of organizations and other beneficiaries served, conferences convened, research		Expenses
1		
	,	
2		
3		
4		<del>.</del> .
		l
Part IX-B Summary of Program-Related Investments (see	page 24 of the instructions)	
Describe the two largest program-related investments made by the foundation during the tax	year on lines 1 and 2	Amount
1 <u></u>		l
		L
2		
		l
All other program-related investments See page 24 of the instructions		
<b></b>		I
		0
Total. Add lines 1 through 3	<b>&gt;</b> _	0

Form 990-PF (2010)

Form 9	990-PF (2010) ı am angel foundation	27-3419857	Page 8
Par	TX Minimum Investment Return (All domestic foundations must complete this part. Foreign	foundations,	•
	see page 24 of the instructions )		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes		
а	Average monthly fair market value of secunties	1a	0
b	Average of monthly cash balances	1b	43,723
С	Fair market value of all other assets (see page 25 of the instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	43,723
e	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	7 2 ]	
3	Subtract line 2 from line 1d	3	43,723
4	Cash deemed held for charitable activities Enter 1½ % of line 3 (for greater amount, see page 25		
	of the instructions)	4	656
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4 .	5	43,067
6	Minimum investment return. Enter 5% of line 5 MIR PRORATED - SHORT TAX YEAR	6	673
Par	t XI Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) private	operating	
	foundations and certain foreign organizations check here  and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	673
2a	Tax on investment income for 2010 from Part VI, line 5 2a	0	
b	Income tax for 2010 (This does not include the tax from Part VI) . 2b	ol	
С	Add lines 2a and 2b	7 2c	0
3	Distributable amount before adjustments Subtract line 2c from line 1	3	673
4	Recoveries of amounts treated as qualifying distributions	4	0
5	Add lines 3 and 4	5	673
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	673
Pari	Qualifying Distributions (see page 25 of the instructions)		
1	Amounts paid (including administrative expenses) to accomplish chantable, etc., purposes	T I	
а	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	0
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	0
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	0
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	0
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	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	0
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the four	ndation	
	qualifies for the section 4940(e) reduction of tax in those years		

Form 9	90-PF (2010) i am angel foundation			27-3	3419857 Page <b>9</b>
Part	XIII Undistributed Income (see page 26 of t	the instructions)			
1	Distributable amount for 2010 from Part XI,	(a) Corpus	(b) Years prior to 2009	(c) 2009	(d) 2010
•	line 7				673
2	Undistributed income, if any, as of the end of 2010:				
a	Enter amount for 2009 only .			0	<del></del>
_	Total for prior years 20, 20, 20		0	-	<del></del>
3	Excess distributions carryover, if any, to 2010 From 2005				
a b	From 2006 . 0				
	From 2007 0				
d	From 2008				
e	From 2009 0				
f	Total of lines 3a through e	0			
4	Qualifying distributions for 2010 from Part				
•	XII, line 4. ► \$0				
а	Applied to 2009, but not more than line 2a			o	
	Applied to undistributed income of prior years				
	(Election required—see page 26 of the instructions)		0		
C	Treated as distributions out of corpus (Election				
	required—see page 26 of the instructions)				
d	Applied to 2010 distributable amount				0
е	Remaining amount distributed out of corpus	0			
5	Excess distributions carryover applied to 2010	0			0
	(If an amount appears in column (d), the same amount must be shown in column (a) )		:		
6	Enter the net total of each column as indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	0			
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				
d	Subtract line 6c from line 6b Taxable				
	amount—see page 27 of the instructions		0	<del>~··</del>	
е	Undistributed income for 2009 Subtract line				
	4a from line 2a Taxable amount—see page 27 of the				
	Instructions			0	<del></del>
T	Undistributed income for 2010 Subtract				
	lines 4d and 5 from line 1. This amount must				670
7	be distributed in 2011			<del> </del>	673
•	corpus to satisfy requirements imposed by				
	section 170(b)(1)(F) or 4942(g)(3) (see page 27 of				
	the instructions)				
8	Excess distributions carryover from 2005		· · · · · · · · · · · · · · · · · · ·	<del></del>	
	not applied on line 5 or line 7 (see page 27 of the				1
	instructions)	0			
9	Excess distributions carryover to 2011.				
	Subtract lines 7 and 8 from line 6a	. 0			
10	Analysis of line 9				
а	Excess from 2006 0				
b	Excess from 2007 . 0			İ	
C	Excess from 2008 . 0				
d	Excess from 2009 . 0				
е	Excess from 2010 . 0				

Fom	1 990-PF (2010) I am angel foundation				27-3419	
Pai	1 XIV Private Operating Foundations (s	ee page 27 of the	e instructions ai	nd Part VII-A, qu	estion 9)	N/A
1 a	If the foundation has received a ruling or determination, and the ruling is effective for 2010, entitled			. •		
b	Check box to indicate whether the foundation is a	private operating four	ndation described ii	n section	4942(J)(3) or	4942(J)(5)
	Enter the lesser of the adjusted net	Tax year	<del></del>	Prior 3 years		
	income from Part I or the minimum	(a) 2010	(b) 2009	(c) 2008	(d) 2007	(e) Total
	investment return from Part X for each year listed .	0	(-,	.,	, ,	0
<b>.</b>	85% of line 2a	0	0	0	0	0
	Qualifying distributions from Part XII,					
·	line 4 for each year listed	ا				0
d	Amounts included in line 2c not used directly					
	for active conduct of exempt activities .					0
е	Qualifying distributions made directly					
	for active conduct of exempt activities			_	_	_
•	Subtract line 2d from line 2c	0	0	. 0	0	0
3	Complete 3a, b, or c for the alternative test relied upon					
а	"Assets" alternative test—enter	1				
	(1) Value of all assets					0
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i) .					0
b	"Endowment" alternative test—enter 2/3					<u>.</u> _
	of minimum investment return shown in				i	
_	Part X, line 6 for each year listed .	0				0
C	"Support" alternative test—enter.  (1) Total support other than gross	i				
	investment income (interest,					
	dividends, rents, payments			ļ		
	on secunties loans (section 512(a)(5)), or royalties) .					0
	(2) Support from general public					
	and 5 or more exempt					
	organizations as provided in section 4942(j)(3)(B)(iii)					0
	(3) Largest amount of support			-		<u>_</u>
	from an exempt organization .					0
	(4) Gross investment income					.0
Pa	rt XV Supplementary Information (Co	mplete this part	only if the fou	ndation had \$5,	000 or more in	
	assets at any time during the ye	ar—see page 28	of the instruc	tions.)		
1	Information Regarding Foundation Manag	ers:				
а	List any managers of the foundation who have cor				the foundation	
	before the close of any tax year (but only if they ha	ave contributed more	than \$5,000) (See	section 507(d)(2) )		
	NE	/	of a semantian (s	or on oqually large p	ortion of the	<del></del>
Ľ	List any managers of the foundation who own 10% ownership of a partnership or other entity) of which	h the foundation has	a 10% or greater in	or arrequally large pr iterest	ordon or the	
NC	NE					
2	Information Regarding Contribution, Gran	it, Gift, Loan, Sch	olarship, etc., Pr	rograms:		
_	Check here  IX if the foundation only makes		•	-	oes not accept	
	unsolicited requests for funds If the foundation ma	akes gifts, grants, etc	(see page 28 of the	ne instructions) to inc	dividuals or organizat	ions
_	under other conditions, complete items 2a, b, c, a			<u> </u>		
a	The name, address, and telephone number of the	person to whom app	lications should be	addressed		
k	The form in which applications should be submitted	d and information an	d materials they sh	ould include		
_	: Any submission deadlines					<del></del>
•	, rais submission dedumes					
_			·			
-	Any restrictions or limitations on awards, such as	by geographical area	s, chantable fields,	kinds of institutions,	or other	
	factors					

Grante and Contributions Boid During 4	No Vear or Approved	for Eutura D	avmont	
Grants and Contributions Paid During th		TOT FULLITE P	ayment T	· · · · · · · · · · · · · · · · · · ·
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amoun
Name and address (home or business)	or substantial contributor	recipient		
Paid during the year				
Total	<u> </u>		▶ 3a	
Approved for future payment				

art XVI-A Analysis of Income-Producing Ac	<del>- , · · · · · · · · · · · · · · · · · · </del>	······································	T = T :		<del> </del>
nter gross amounts unless otherwise indicated	Unrelated bus (a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exemp
1 Program service revenue	Dusiness and	741106111	EXCIDION COO	, unount	(See page 28 of the instructions)
a b					
C					
d e		· · · · · · · · · · · · · · · · · · ·	<del>                                     </del>	7	
f					
g Fees and contracts from government agencies  Membership dues and assessments			-		
Interest on savings and temporary cash investments .			14	7	
Dividends and interest from securities .					
5 Net rental income or (loss) from real estate  a Debt-financed property	<u> </u>		<del> </del>		
b Not debt-financed property .					
6 Net rental income or (loss) from personal property .		<del></del>			
7 Other investment income			1		
9 Net income or (loss) from special events					
Gross profit or (loss) from sales of inventory			<u> </u>		
to the revenue a					
c					
d					
			1 1		
e Subtotal Add columns (b), (d), and (e)		(		7	
e				7 13	
e Subtotal Add columns (b), (d), and (e)  3 Total. Add line 12, columns (b), (d), and (e)  ee worksheet in line 13 instructions on page 29 to venfy cal	culations)				
e	culations) ccomplishment me is reported in colu	of Exempt P	Purposes (VI-A contributed in	13	
e 2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) 4 see worksheet in line 13 instructions on page 29 to verify cal 5 art XVI-B Relationship of Activities to the A 6 ine No. 6 Explain below how each activity for which inco 6 the accomplishment of the foundation's exemp	culations) ccomplishment me is reported in colu	of Exempt P	Purposes (VI-A contributed in	13	
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Here

**Paid** 

Preparer

**Use Only** 

der or trustee

► FOUNDATION SOURCE

Firm's address ► 55 WALLS DRIVE, FAIRFIELD, CT 06824

Preparer's signature

Jeffrey D. Haskell

Date

3/11/2011

PTIN

Check III if

self-employed

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
ı am angel foundation			27-3419857
Organization type (check	one)		
Filers of:	Section:		
Form 990 or 990-EZ	501(c)(	) (enter number) organization	
	4947(a)(1) r	nonexempt chantable trust not treated as a	private foundation
	527 political	organization	
Form 990-PF	X 501(c)(3) ex	kempt private foundation	
	4947(a)(1) r	nonexempt charitable trust treated as a priv	ate foundation
	501(c)(3) ta	xable private foundation	
Note. Only a section 501( instructions General Rule	c)(7), (8), or (10) orga	anization can check boxes for both the Gen	eral Rule and a Special Rule See
	on filing Form 990, 990 y one contributor Cor	0-EZ, or 990-PF that received, during the yi πplete Parts I and II	ear, \$5,000 or more (in money or
Special Rules			
sections 509(a)(1)	and 170(b)(1)(A)(vi)	ng Form 990 or 990-EZ that met the 33 1/3', , and received from any one contributor, du on (i) Form 990, Part VIII, line 1h or (ii) Form	ring the year, a contribution of the greater
the year, aggrega	te contributions of mo	anization filing Form 990 or 990-EZ that recore than \$1,000 for use exclusively for relign of cruelty to children or animals.	ious, chantable, scientific, literary, or
the year, contributing aggregate to more year for an exclusion	tions for use <i>exclusive</i> e than \$1,000 If this b cively religious, chant	anization filing Form 990 or 990-EZ that recely for religious, chantable, etc., purposes, box is checked, enter here the total contribuable, etc., purpose. Do not complete any of received nonexclusively religious, charitable	but these contributions did not tions that were received during the the parts unless the General Rule
Caution. An organization	that is not covered by	y the General Rule and/or the Special Rules	does not file Schedule B (Form 990,

990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

	orm 990, 990-EZ, or 990-PF) (2010)		Page I of I of Part I
Name of org	<del>-</del>		Employer identification number
i am angel	foundation		27-3419857
Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	Scholarship America c/o Barb Weber, One Scholarship Way Saint Peter MN 56082 Foreign State or Province: Foreign Country	\$349,774	Person X Payroli 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
2	Foreign State or Province. Foreign Country	\$0	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
3	Foreign State or Province Foreign Country.	\$ <u>o</u>	Person Payroli 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
4	Foreign State or Province Foreign Country	\$ <u>o</u>	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
5	Foreign State or Province Foreign Country:	\$ <u>0</u>	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
6	Foreign State or Province Foreign Country	\$0	Person Payroll Noncash (Complete Part II if there is a noncash contribution)

	Form 990, 990-EZ, or 990-PF) (2010)		Page 1 of 1 of Page
	rganization		Employer identification number
Part II	Noncash Property (see instructions)		27-3419857
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	.0
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	.0
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	.0
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	.0
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	0

(a) No. from Part I

(b)
Description of noncash property given

(d) Date received

(c)
FMV (or estimate)
(see instructions)

Schedule B (F	orm 990, 990-EZ, or 990-PF) (2010)			Page 1 of 1 of Page	art III
Name of or	ganization		<u>, , , , , , , , , , , , , , , , , , , </u>	Employer identification number	
i am angel				27-3419857	
Part III	Exclusively religious, charitable, etc., aggregating more than \$1,000 for the year organizations completing Part III, entercontributions of \$1,000 or less for the year	ear. Complete er the total of e	columns (a) through (e) exclusively religious, cha	and the following line entry. ritable, etc,	0
(a) No. from	(b) Purpose of gift	(с	) Use of gift	(d) Description of how gift is held	
Part I			<u> </u>		
			***************************************		
•••••					
		L			
		(e) 1	ransfer of gift		
	Transferee's name, address, and	ZIP + 4	Relationsh	ip of transferor to transferee	
				• • • • • • • • • • • • • • • • • • • •	••
	For Prov. Country				<u></u>
(a) No. from Part I	(b) Purpose of gift	(c	) Use of gift	(d) Description of how gift is held	1
					••
		<u> </u>			
		(e) T	ransfer of gift		
	Transferee's name, address, and	71D ± 4	Pelationeh	ip of transferor to transferee	
	Transferee's maine, address, and		Reladolish	ip of dansieror to dansieree	
					••
	For Prov Country				
(a) No. from Part I	(b) Purpose of gift	(c	) Use of gift	(d) Description of how gift is held	j .
		(e) T	ransfer of gift		
	Transferee's name, address, and	ZIP + 4	Relationsh	ip of transferor to transferee	
					••
					•-
	For Prov Country				••
(a) No. from Part I	(b) Purpose of gift	(c	) Use of gift	(d) Description of how gift is held	j .
			.,		
		(e) 1	ransfer of gift		
	Transferee's name, address, and	ZIP + 4	Relationsh	ip of transferor to transferee	
	For Prov Country				
	L 1 OI 1 IOV COUNTRY		i.		

ı am angel foundation

	State Zip Code Foreign Country	MN 56082								
Substantial Contributors	Street	Saint Peter								
Form 990-PF, Part VII-A, Line 10 - Substantial Contributors	Name		<b>6</b>	4	v	9	7	- α	æ	10

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ĭ	MIII 990-Fr, Fait VIII, LIII		Ciliceis, Diece	1	nstees	Form 990-PF, Part VIII, Line 1 - Compensation of Officers, Directors, Trustees and Foundation Managers	ers	0	°	0
$ldsymbol{ld}}}}}}$	Name	Street	City	State	Zip Code	Trtle	Avg E	Сотр	Benefit	Expense Account
	Kate Yording	c/o Foundation Source 501 Silverside Road Suite 123	Wilmington	DE	19809	President / Director / Secretary	40	0	0	0
2										
<u>ب</u>							:			
4										
ro.										
ေ										
•										
6										
10										