



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



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

2010

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

For calendar year 2010, or tax year beginning _____, and ending _____		
G Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		
Name of foundation <b>SAHM FAMILY FOUNDATION C/O LUCE FORWARD</b>		A Employer identification number <b>33-0753690</b>
Number and street (or P O box number if mail is not delivered to street address) <b>P.O. BOX 2329</b>		Room/suite _____
City or town, state, and ZIP code <b>RANCHO SANTA FE, CA 92067-2329</b>		C If exemption application is pending, check here ► <input type="checkbox"/> D 1. Foreign organizations, check here ► <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation ► <input type="checkbox"/>
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here ► <input type="checkbox"/> F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ► <input type="checkbox"/>
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ► \$ <b>1,619,807.</b>	J Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____	
<b>Part I Analysis of Revenue and Expenses</b> (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).)		(a) Revenue and expenses per books (b) Net investment income (c) Adjusted net income (d) Disbursements for charitable purposes (cash basis only)
1 Contributions, gifts, grants, etc., received		<b>N/A</b>
2 Check ► <input checked="" type="checkbox"/> if the foundation is not required to attach Sch B		
3 Interest on savings and temporary cash investments		2. 2. <b>STATEMENT 1</b>
4 Dividends and interest from securities		36,236. 36,236. <b>STATEMENT 2</b>
5a Gross rents		
b Net rental income or (loss)		
6a Net gain or (loss) from sale of assets not on line 10		10,740.
b Gross sales price for all assets on line 6a		604,355.
7 Capital gain net income (from Part IV, line 2)		10,740.
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)		
11 Other income		
12 Total. Add lines 1 through 11		46,978. 46,978.
13 Compensation of officers, directors, trustees, etc		8,400. 2,800. 5,600.
14 Other employee salaries and wages		
15 Pension plans, employee benefits		
16a Legal fees		STMT 3 8,664. 1,733. 6,931.
b Accounting fees		STMT 4 4,600. 2,300. 2,300.
c Other professional fees		STMT 5 18,519. 18,519. 0.
17 Interest		
18 Taxes		STMT 6 19. 19. 0.
19 Depreciation and depletion		
20 Occupancy		
21 Travel, conferences, and meetings		
22 Printing and publications		
23 Other expenses		STMT 7 3,793. 0. 3,793.
24 Total operating and administrative expenses. Add lines 13 through 23		43,995. 25,371. 18,624.
25 Contributions, gifts, grants paid		120,000. 120,000.
26 Total expenses and disbursements. Add lines 24 and 25		163,995. 25,371. 138,624.
27 Subtract line 26 from line 12:		
a Excess of revenue over expenses and disbursements		-117,017.
b Net investment income (if negative, enter -0-)		21,607.
c Adjusted net income (if negative, enter -0-)		<b>N/A</b>

023501  
12-07-10

LHA For Paperwork Reduction Act Notice, see the instructions.

Form 990-PF (2010)

**SAHM FAMILY FOUNDATION**  
Form 990-PF (2010) **C/O LUCE FORWARD**

33-0753690

Page 2

<b>Part II</b> <b>Balance Sheets</b> <small>Attached schedules and amounts in the description column should be for end-of-year amounts only</small>		<b>Beginning of year</b>	<b>End of year</b>	
		<b>(a) Book Value</b>	<b>(b) Book Value</b>	<b>(c) Fair Market Value</b>
1	Cash - non-interest-bearing			
2	Savings and temporary cash investments	52,801.	90,768.	90,768.
3	Accounts receivable ►			
	Less: allowance for doubtful accounts ►			
4	Pledges receivable ►			
	Less: allowance for doubtful accounts ►			
5	Grants receivable			
6	Receivables due from officers, directors, trustees, and other disqualified persons			
7	Other notes and loans receivable ►			
	Less: allowance for doubtful accounts ►			
8	Inventories for sale or use			
9	Prepaid expenses and deferred charges			
10a	Investments - U.S. and state government obligations			
b	Investments - corporate stock	STMT 8	1,160,542.	1,085,257.
c	Investments - corporate bonds	STMT 9	362,299.	292,600.
11	Investments - land, buildings, and equipment basis ►			
	Less accumulated depreciation ►			
12	Investments - mortgage loans			
13	Investments - other			
14	Land, buildings, and equipment basis ►			
	Less accumulated depreciation ►			
15	Other assets (describe ►)			
16	<b>Total assets (to be completed by all filers)</b>		1,575,642.	1,468,625.
17	Accounts payable and accrued expenses			10,000.
18	Grants payable			
19	Deferred revenue			
20	Loans from officers, directors, trustees, and other disqualified persons			
21	Mortgages and other notes payable			
22	Other liabilities (describe ►)			
23	<b>Total liabilities (add lines 17 through 22)</b>		0.	10,000.
24	Foundations that follow SFAS 117, check here ► <input checked="" type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.			
25	Unrestricted		1,575,642.	1,458,625.
26	Temporarily restricted			
27	Permanently restricted			
28	Foundations that do not follow SFAS 117, check here ► <input type="checkbox"/> and complete lines 27 through 31.			
29	Capital stock, trust principal, or current funds			
30	Paid-in or capital surplus, or land, bldg., and equipment fund			
31	Retained earnings, accumulated income, endowment, or other funds			
30	<b>Total net assets or fund balances</b>		1,575,642.	1,458,625.
31	<b>Total liabilities and net assets/fund balances</b>		1,575,642.	1,468,625.

**Part 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	1,575,642.
2	Enter amount from Part I, line 27a	2	-117,017.
3	Other increases not included in line 2 (itemize) ►	3	0.
4	Add lines 1, 2, and 3	4	1,458,625.
5	Decreases not included in line 2 (itemize) ►	5	0.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	1,458,625.

023511  
12-07-10

Form 990-PF (2010)

## SAHM FAMILY FOUNDATION

Form 990-PF (2010)

C/O LUCE FORWARD

33-0753690

Page 3

**Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)			(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a					
b	<b>SEE ATTACHED STATEMENT</b>				
c					
d					
e					
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)	
a					
b					
c					
d					
e	<b>604,355.</b>		<b>593,615.</b>	<b>10,740.</b>	
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69				(i) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))	
	(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any		
a					
b					
c					
d					
e				<b>10,740.</b>	
2 Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }			2	<b>10,740.</b>
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter -0- in Part I, line 8	{ }			3	<b>N/A</b>

**Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income**

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

 Yes  No

If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year; see instructions before making any entries.

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2009	<b>205,292.</b>	<b>1,460,147.</b>	<b>.140597</b>
2008	<b>146,056.</b>	<b>1,894,440.</b>	<b>.077097</b>
2007	<b>151,835.</b>	<b>2,273,269.</b>	<b>.066791</b>
2006	<b>242,907.</b>	<b>2,283,693.</b>	<b>.106366</b>
2005	<b>261,433.</b>	<b>1,485,569.</b>	<b>.175982</b>
2 Total of line 1, column (d)			2 <b>.566833</b>
3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years			3 <b>.113367</b>
4 Enter the net value of noncharitable-use assets for 2010 from Part X, line 5			4 <b>1,536,588.</b>
5 Multiply line 4 by line 3			5 <b>174,198.</b>
6 Enter 1% of net investment income (1% of Part I, line 27b)			6 <b>216.</b>
7 Add lines 5 and 6			7 <b>174,414.</b>
8 Enter qualifying distributions from Part XII, line 4			8 <b>138,624.</b>

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.

## SAHM FAMILY FOUNDATION

Form 990-PF (2010)

C/O LUCE FORWARD

33-0753690

Page 4

**Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions)**

1a	Exempt operating foundations described in section 4940(d)(2), check here ► <input type="checkbox"/> and enter "N/A" on line 1.	(attach copy of letter if necessary-see instructions)	1	432.
1b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here ► <input type="checkbox"/> and enter 1% of Part I, line 27b			
1c	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 , 204 .	2	0 .
3	Add lines 1 and 2			
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			
5	<b>Tax based on investment income.</b> Subtract line 4 from line 3. If zero or less, enter -0-			
6	Credits/Payments:			
6a	2010 estimated tax payments and 2009 overpayment credited to 2010	6a 6b 6c 6d	7	2 , 204 .
6b	Exempt foreign organizations - tax withheld at source			
6c	Tax paid with application for extension of time to file (Form 8868)			
6d	Backup withholding erroneously withheld			
7	Total credits and payments. Add lines 6a through 6d			
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	8 9	8	2 , 204 .
9	<b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b> ►			
10	<b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b> ►			
11	Enter the amount of line 10 to be: <b>Credited to 2011 estimated tax</b> ► 1 , 772 .   <b>Refunded</b> ► 11	10	11	1 , 772 . 0 .

**Part VII-A Statements Regarding Activities**

1a	During the tax year, did the foundation attempt to <u>influence any national, state, or local legislation</u> or did it participate or intervene in any political campaign?	1a 1b 1c	Yes X X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)? <i>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.</i>		
c	Did the foundation file Form 1120-POL for this year?		
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. ► \$ 0 . (2) On foundation managers. ► \$ 0 .	2 3 4a 4b 5 6 7 8a 9 10	2 , 204 . X X N/A X X X X X X
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ► \$ 0 .		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? <i>If "Yes," attach a detailed description of the activities.</i>		
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? <i>If "Yes," attach a conformed copy of the changes</i>		
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year? b If "Yes," has it filed a tax return on Form 990-T for this year?		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? <i>If "Yes," attach the statement required by General Instruction T.</i>		
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?		
7	Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col. (c), and Part XV.</i>		
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ► CA		
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation		
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)? If "Yes," complete Part XIV		
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		

Form 990-PF (2010)

023531  
12-07-10

15471104 795635 SAHMXX1601

2010.04050 SAHM FAMILY FOUNDATION C/O SAHMXX11

**SAHM FAMILY FOUNDATION**  
**C/O LUCE FORWARD**

Form 990-PF (2010)

33-0753690

Page 5

**Part 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 instructions) 11  X

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  X

Website address ► **N/A** Telephone no. ► **858 558-9200**  
 Located at ► **4225 EXECUTIVE SQ, STE 1150, LA JOLLA, CA** ZIP+4 ► **92037**

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 ► **15** ► **N/A** ►

16 At any time during calendar year 2010, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? 16  Yes  No X  
 See page 20 of the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of the foreign country ►

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required**

**File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.**

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  No

(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? □ Yes  No

(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? □ Yes  No

(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? □ Yes  No

(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  No

(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  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 section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 22 of the instructions)?

Organizations relying on a current notice regarding disaster assistance check here ► □

c 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?

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)):

a 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  No

If "Yes," list the years ► \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_

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 instructions.)

c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.

► \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_

3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? □ Yes  No

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 period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2010.) N/A

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

b 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? 3b  4a  4b

Form 990-PF (2010)

023541  
 12-07-10

**SAHM FAMILY FOUNDATION**  
**C/O LUCE FORWARD**

Form 990-PF (2010)

33-0753690

Page 6

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

5a During the year did the foundation pay or incur any amount to:

- (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?
- (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?
- (3) Provide a grant to an individual for travel, study, or other similar purposes?
- (4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)?
- (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?

Yes  No

Yes  No

Yes  No

Yes  No

Yes  No

b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?

N/A

►

5b

Organizations relying on a current notice regarding disaster assistance check here

c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?

N/A

Yes  No

If "Yes," attach the statement required by Regulations section 53.4945-5(d).

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?

Yes  No

b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

If "Yes" to 6b, file Form 8870.

Yes  No

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?

Yes  No

b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?

Yes  No

N/A

6b

X

7b

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**

1 List all officers, directors, trustees, foundation managers and their compensation.

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
SEE STATEMENT 10		8,400.	0.	0.

2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

Total number of other employees paid over \$50,000

►

0

Form 990-PF (2010)

SAHM FAMILY FOUNDATION  
Form 990-PF (2010) C/O LUCE FORWARD

33-0753690 Page 7

**Part VIII** **Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**

**3 Five highest-paid independent contractors for professional services. If none, enter "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**

► 0

**Part IX-A** **Summary of Direct Charitable Activities**

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

Expenses

1	N/A	
2		
3		
4		

**Part IX-B** **Summary of Program-Related Investments**

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.

Amount

1	N/A	
2		

All other program-related investments. See instructions.

3		

**Total. Add lines 1 through 3**

► 0.

Form 990-PF (2010)

SAHM FAMILY FOUNDATION  
Form 990-PF (2010) C/O LUCE FORWARD

33-0753690 Page 8

**Part X Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a Average monthly fair market value of securities	1a	1,480,571.
b Average of monthly cash balances	1b	79,417.
c Fair market value of all other assets	1c	
d Total (add lines 1a, b, and c)	1d	1,559,988.
e Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	0.
2 Acquisition indebtedness applicable to line 1 assets	2	0.
3 Subtract line 2 from line 1d	3	1,559,988.
4 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	23,400.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,536,588.
6 Minimum investment return. Enter 5% of line 5	6	76,829.

**Part XI Distributable Amount** (see 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	76,829.
2a Tax on investment income for 2010 from Part VI, line 5	2a	432.
b Income tax for 2010. (This does not include the tax from Part VI.)	2b	
c Add lines 2a and 2b	2c	432.
3 Distributable amount before adjustments. Subtract line 2c from line 1	3	76,397.
4 Recoveries of amounts treated as <u>qualifying distributions</u>	4	0.
5 Add lines 3 and 4	5	76,397.
6 Deduction from distributable amount (see instructions)	6	0.
7 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	76,397.

**Part XII Qualifying Distributions** (see instructions)

1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26	1a	138,624.
b Program-related investments - total from Part IX-B	1b	0.
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3 Amounts set aside for specific charitable projects that satisfy the:		
a 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	138,624.
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b	5	0.
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	138,624.

**Note.** The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

Form 990-PF (2010)

SAHM FAMILY FOUNDATION  
C/O LUCE FORWARD

Form 990-PF (2010)

33-0753690 Page 9

**Part XIII Undistributed Income** (see instructions)

	(a) Corpus	(b) Years prior to 2009	(c) 2009	(d) 2010
1 Distributable amount for 2010 from Part XI, line 7				76,397.
2 Undistributed income, if any, as of the end of 2010			0.	
a Enter amount for 2009 only				
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2010:				
a From 2005	188,151.			
b From 2006	130,770.			
c From 2007	41,130.			
d From 2008	51,973.			
e From 2009	132,519.			
f Total of lines 3a through e	544,543.			
4 Qualifying distributions for 2010 from Part XII, line 4: ► \$ 138,624.			0.	
a Applied to 2009, but not more than line 2a				
b Applied to undistributed income of prior years (Election required - see instructions)		0.		
c Treated as distributions out of corpus (Election required - see instructions)	0.			
d Applied to 2010 distributable amount			76,397.	
e Remaining amount distributed out of corpus	62,227.			
5 Excess distributions carryover applied to 2010 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:	606,770.			
a Corpus Add lines 3f, 4c, and 4e Subtract line 5				
b Prior years' undistributed income. Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed			0.	
d Subtract line 6c from line 6b. Taxable amount - see instructions			0.	
e Undistributed income for 2009. Subtract line 4a from line 2a. Taxable amount - see instr.				0.
f Undistributed income for 2010. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2011				0.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2005 not applied on line 5 or line 7	188,151.			
9 Excess distributions carryover to 2011. Subtract lines 7 and 8 from line 6a	418,619.			
10 Analysis of line 9:				
a Excess from 2006	130,770.			
b Excess from 2007	41,130.			
c Excess from 2008	51,973.			
d Excess from 2009	132,519.			
e Excess from 2010	62,227.			

SAHM FAMILY FOUNDATION  
C/O LUCE FORWARD

**Form 990-PF (2010)**

C/O LUCE FORWARD

33-0753690

Page 10

**Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)**

N/A

1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2010, enter the date of the ruling  
b Check box to indicate whether the foundation is a private operating foundation described in section

4942(l)(3) or  4942(l)(5)

2 a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed

b 85% of line 2a

c Qualifying distributions from Part XII, line 4 for each year listed

d Amounts included in line 2c not used directly for active conduct of exempt activities

e Qualifying distributions made directly for active conduct of exempt activities.

Subtract line 2d from line 2c

3 Complete 3a, b, or c for the alternative test relied upon:

a "Assets" alternative test - enter

**Part XV** **Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see the instructions.)**

## 1 Information Regarding Foundation Managers:

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)

## RAMONA SAHM

**b** List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

NONE

**2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:**

Check here ►  if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

**a The name, address, and telephone number of the person to whom applications should be addressed:**

**b. The form in which applications should be submitted and information and materials they should include:**

**c Any submission deadlines:**

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

SAHM FAMILY FOUNDATION  
C/O LUCE FORWARD

Form 990-PF (2010)

33-0753690 Page 11

**Part XV** **Supplementary Information** (continued)

**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

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)				
<i>a Paid during the year</i>				
<i>SEE STATEMENT 11</i>				
<i>Total</i>			► 3a	120,000.
<i>b Approved for future payment</i>				
NONE				
<i>Total</i>			► 3b	0.

023611 12-07-10

Form 990-PF (2010)

SAHM FAMILY FOUNDATION  
Form 990-PF (2010) C/O LUCE FORWARD

33-0753690 Page 12

**Part XVI-A Analysis of Income-Producing Activities**

Enter gross amounts unless otherwise indicated.

1 Program service revenue:

- a \_\_\_\_\_
- b \_\_\_\_\_
- c \_\_\_\_\_
- d \_\_\_\_\_
- e \_\_\_\_\_
- f \_\_\_\_\_
- g Fees and contracts from government agencies \_\_\_\_\_

2 Membership dues and assessments \_\_\_\_\_

3 Interest on savings and temporary cash investments \_\_\_\_\_

4 Dividends and interest from securities \_\_\_\_\_

5 Net rental income or (loss) from real estate:

- a Debt-financed property \_\_\_\_\_
- b Not debt-financed property \_\_\_\_\_

6 Net rental income or (loss) from personal property \_\_\_\_\_

7 Other investment income \_\_\_\_\_

8 Gain or (loss) from sales of assets other than inventory \_\_\_\_\_

9 Net income or (loss) from special events \_\_\_\_\_

10 Gross profit or (loss) from sales of inventory \_\_\_\_\_

11 Other revenue:

- a \_\_\_\_\_
- b \_\_\_\_\_
- c \_\_\_\_\_
- d \_\_\_\_\_
- e \_\_\_\_\_

12 Subtotal. Add columns (b), (d), and (e) \_\_\_\_\_

13 Total. Add line 12, columns (b), (d), and (e) \_\_\_\_\_

(See worksheet in line 13 instructions to verify calculations.)

	Unrelated business income		Excluded by section 512, 513, or 514 (c) Exclusion code	(e) Related or exempt function income
	(a) Business code	(b) Amount		
1 Program service revenue:				
a				
b				
c				
d				
e				
f				
g Fees and contracts from government agencies				
2 Membership dues and assessments				
3 Interest on savings and temporary cash investments			14	2.
4 Dividends and interest from securities			14	36,236.
5 Net rental income or (loss) from real estate:				
a Debt-financed property				
b Not debt-financed property				
6 Net rental income or (loss) from personal property				
7 Other investment income				
8 Gain or (loss) from sales of assets other than inventory			18	10,740.
9 Net income or (loss) from special events				
10 Gross profit or (loss) from sales of inventory				
11 Other revenue:				
a				
b				
c				
d				
e				
12 Subtotal. Add columns (b), (d), and (e)	0.	46,978.		0.
13 Total. Add line 12, columns (b), (d), and (e)			13	46,978.

**Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes**

Line No.	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).
12-07-10	023621
12-07-10	12
12-07-10	Form 990-PF (2010)
12-07-10	15471104 795635 SAHMXX1601
12-07-10	2010.04050 SAHM FAMILY FOUNDATION C/O SAHMXX11

SAHM FAMILY FOUNDATION  
C/O LUCE FORWARD

**Form 990-PF (2010)**

C/O LUCE FORWARD

33-0753690 Page 13

**Part XVII** Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

		Yes	No
1	Did the organization directly or indirectly engage in any of the following with any other organization described 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:		
	(1) Cash	1a(1)	X
	(2) Other assets	1a(2)	X
b	Other transactions:		
	(1) Sales of assets to a noncharitable exempt organization	1b(1)	X
	(2) Purchases of assets from a noncharitable exempt organization	1b(2)	X
	(3) Rental of facilities, equipment, or other assets	1b(3)	X
	(4) Reimbursement arrangements	1b(4)	X
	(5) Loans or loan guarantees	1b(5)	X
	(6) Performance of services or membership or fundraising solicitations	1b(6)	X
c	Sharing of facilities, equipment, mailing lists, other assets, or paid employees	1c	X
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.		

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?

<p>b If "Yes," complete the following schedule.</p> <table border="1"> <thead> <tr> <th>(a) Name of organization</th><th>(b) Type of organization</th><th>(c) Description of relationship</th></tr> </thead> <tbody> <tr> <td>N/A</td><td></td><td></td></tr> <tr> <td></td><td></td><td></td></tr> <tr> <td></td><td></td><td></td></tr> <tr> <td></td><td></td><td></td></tr> </tbody> </table>			(a) Name of organization	(b) Type of organization	(c) Description of relationship	N/A											
(a) Name of organization	(b) Type of organization	(c) Description of relationship															
N/A																	

**Sign  
Here**

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.

Signature of officer or trustee

Das

**DIRECTOR**

**Title**

Signature of preparer or trustee		Date	File	
<b>Paid Preparer Use Only</b>	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed
	<b>MARK W. LINDSAY</b>	<i>Mark W. Lindsay</i>	<b>NOV 04 2011</b>	PTIN
	Firm's name ► <b>LINDSAY &amp; BROWNELL, LLP</b>		Firm's EIN ►	
Firm's address ► <b>4225 EXECUTIVE SQUARE, SUITE 1150 LA JOLLA, CA 92037</b>		Phone no. <b>858 5589200</b>		

**Form 990-PF (2010)**

023622  
04-20-11

Part IV Capital Gains and Losses for Tax on Investment Income

	(a) List and describe the kind(s) of property sold, e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a	MELLON BANK - SEE ATTACHED	P	VARIOUS	VARIOUS
b	MELLON BANK - SEE ATTACHED	P	VARIOUS	VARIOUS
c	WELLS FARGO - SEE ATTACHED	P	VARIOUS	VARIOUS
d	WELLS FARGO - SEE ATTACHED	P	VARIOUS	VARIOUS
e	250 SHS ISHARES S&P GSCI COMMODITY	P	10/10/07	12/27/10
f	CLASS ACTION PROCEEDS	P	VARIOUS	VARIOUS
g	CAPITAL GAINS DIVIDENDS			
h				
i				
j				
k				
l				
m				
n				
o				

	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a	40,122.		38,889.	1,233.
b	286,845.		288,166.	-1,321.
c	111,500.		96,697.	14,803.
d	157,189.		158,343.	-1,154.
e	8,475.		11,520.	-3,045.
f	223.			223.
g	1.			1.
h				
i				
j				
k				
l				
m				
n				
o				

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	(l) Losses (from col. (h)) Gains (excess of col. (h) gain over col. (k), but not less than "-0-")
a			1,233.
b			-1,321.
c			14,803.
d			-1,154.
e			-3,045.
f			223.
g			1.
h			
i			
j			
k			
l			
m			
n			
o			

2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 If (loss), enter "-0-" in Part I, line 7 }	2	10,740.
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter "-0-" in Part I, line 8	3	N/A

## FORM 990-PF INTEREST ON SAVINGS AND TEMPORARY CASH INVESTMENTS STATEMENT 1

SOURCE	AMOUNT
BOSTON SAFE DEPOSIT & TRUST	2.
TOTAL TO FORM 990-PF, PART I, LINE 3, COLUMN A	2.

## FORM 990-PF DIVIDENDS AND INTEREST FROM SECURITIES STATEMENT 2

SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	COLUMN (A) AMOUNT
MELLON BANK - DIVIDENDS	9,020.	0.	9,020.
MELLON BANK - INTEREST	4,902.	0.	4,902.
WELLS FARGO - #6089	12,286.	1.	12,285.
WELLS FARGO - #7222	44.	0.	44.
WELLS FARGO - INTEREST	9,985.	0.	9,985.
TOTAL TO FM 990-PF, PART I, LN 4	36,237.	1.	36,236.

## FORM 990-PF LEGAL FEES STATEMENT 3

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
LEGAL FEES	8,664.	1,733.		6,931.
TO FM 990-PF, PG 1, LN 16A	8,664.	1,733.		6,931.

## FORM 990-PF ACCOUNTING FEES STATEMENT 4

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING FEES	4,600.	2,300.		2,300.
TO FORM 990-PF, PG 1, LN 16B	4,600.	2,300.		2,300.

## FORM 990-PF

## OTHER PROFESSIONAL FEES

## STATEMENT

5

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
INVESTMENT FEES	18,519.	18,519.		0.
TO FORM 990-PF, PG 1, LN 16C	18,519.	18,519.		0.

## FORM 990-PF

## TAXES

## STATEMENT

6

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
FOREIGN TAXES	19.	19.		0.
TO FORM 990-PF, PG 1, LN 18	19.	19.		0.

## FORM 990-PF

## OTHER EXPENSES

## STATEMENT

7

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
INSURANCE	3,793.	0.		3,793.
TO FORM 990-PF, PG 1, LN 23	3,793.	0.		3,793.

## FORM 990-PF

## CORPORATE STOCK

## STATEMENT

8

DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
	1,085,257.	1,226,765.
TOTAL TO FORM 990-PF, PART II, LINE 10B	1,085,257.	1,226,765.

FORM 990-PF	CORPORATE BONDS	STATEMENT	9
-------------	-----------------	-----------	---

DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
	292,600.	302,274.
TOTAL TO FORM 990-PF, PART II, LINE 10C	292,600.	302,274.

FORM 990-PF	PART VIII - LIST OF OFFICERS, DIRECTORS TRUSTEES AND FOUNDATION MANAGERS	STATEMENT	10
-------------	--	-----------	----

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
DAVID A. EBERSHOFF 555 SOUTH FLOWER STREET, 41ST FLOOR LOS ANGELES, CA 90071	DIRECTOR 1.00	2,400.	0.	0.
JAMES COWLEY 6050 EL TORDO RANCHO SANTA FE, CA 92067	DIRECTOR 1.00	2,400.	0.	0.
CHRISTOPHER SAHM 1618 VIA SAGE SAN CLEMENTE, CA 92673	DIRECTOR 1.00	2,400.	0.	0.
RAMONA SAHM P.O. BOX 1516 RANCHO SANTA FE, CA 92067	DIRECTOR 0.50	0.	0.	0.
LINDA GUINN 6793 CAMBRIDGE FRESNO, CA 93727	DIRECTOR 1.00	1,200.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6, PART VIII		8,400.	0.	0.

FORM 990-PF

GRANTS AND CONTRIBUTIONS  
PAID DURING THE YEAR

STATEMENT 11

RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT	RECIPIENT STATUS	AMOUNT
CEDAR SPRINGS WALDORF SCHOOL 6029 GOLD MEADOWS ROAD PLACERVILLE, CA 95667	N/A GENERAL SUPPORT	PUBLIC CHARITY	25,000.
CHILDREN OF THE NIGHT 14530 SYLVAN ST VAN NUYS, CA 91411	N/A GENERAL SUPPORT	PUBLIC CHARITY	10,000.
GLOBAL AIDS INTERFAITH ALLIANCE P.O. BOX 29110 SAN FRANCISCO, CA 94129	N/A GENERAL SUPPORT	PUBLIC CHARITY	35,000.
GRAND PERFORMANCES 350 S. GRAND AVE LOS ANGELES, CA 90071	N/A GENERAL SUPPORT	PUBLIC CHARITY	10,000.
MEALS ON WHEELS 203 S. UNION ST ALEXANDRIA, VA 22314	N/A GENERAL SUPPORT	PUBLIC CHARITY	10,000.
PRO KIDS GOLF ACADEMY & LEARNING CENTER 4085 52ND ST SAN DIEGO, CA 92105	N/A GENERAL SUPPORT	PUBLIC CHARITY	10,000.
THE SAN DIEGO FOUNDATION 1420 KETTNER AVE, STE 500 SAN DIEGO, CA 92101	N/A MONTE VISTA H.S. & AA TEACHER'S PROGRAM	PUBLIC CHARITY	10,000.
YMCA OF SAN DIEGO COUNTY 4715 VIEWRIDGE AVE, STE 100 SAN DIEGO, CA 92123	N/A GENERAL SUPPORT	PUBLIC CHARITY	10,000.
TOTAL TO FORM 990-PF, PART XV, LINE 3A			120,000.

- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only Part II and check this box

Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.

- If you are filing for an **Automatic 3-Month Extension**, complete only Part I (on page 1)

<b>Part II Additional (Not Automatic) 3-Month Extension of Time.</b> Only file the original (no copies needed).		
<b>Type or print</b>	Name of exempt organization <b>SAHM FAMILY FOUNDATION</b> <b>C/O LUCE FORWARD</b>	Employer identification number <b>33-0753690</b>
<small>File by the extended due date for filing your return. See instructions.</small>	Number, street, and room or suite no. If a P.O. box, see instructions. <b>P. O. BOX 2329</b>	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. <b>RANCHO SANTA FE, CA 92067-2329</b>	

Enter the Return code for the return that this application is for (file a separate application for each return)

**0 4**

Application Is For	Return Code	Application Is For	Return Code
Form 990	01		
Form 990-BL	02	Form 1041-A	08
Form 990-EZ	03	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

**STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.**

**LINDSAY & BROWNELL, LLP**

- The books are in the care of ► **4225 EXECUTIVE SQ, STE 1150 - LA JOLLA, CA 92037**

Telephone No. ► **858 558-9200** FAX No. ► \_\_\_\_\_

- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) \_\_\_\_\_. If this is for the whole group, check this box ►  . If it is for part of the group, check this box ►  and attach a list with the names and EINs of all members the extension is for.

4 I request an additional 3-month extension of time until **NOVEMBER 15, 2011**

5 For calendar year **2010**, or other tax year beginning \_\_\_\_\_, and ending \_\_\_\_\_.

6 If the tax year entered in line 5 is for less than 12 months, check reason:  Initial return  Final return  
 Change in accounting period

7 State in detail why you need the extension \_\_\_\_\_

**ADDITIONAL TIME IS REQUIRED TO GATHER THE INFORMATION TO FILE A COMPLETE AND ACCURATE RETURN.**

8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	8a	\$ <b>432.</b>
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	8b	\$ <b>2,204.</b>
c Balance due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	8c	\$ <b>0.</b>

#### Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature ►

Title ► **CPA**

Date ► \_\_\_\_\_

Form 8868 (Rev. 1-2011)