

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**

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

OMB No 1545-0052

2010

Department of the Treasury Internal Revenue Service

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

For cale	ndar year 2010, or tax year beginning	, 2010,	and ending		
G Che	ck all that apply 🔲 Initial return 📋 Initia	al Return of a former pu		·	al return
	Amended return	Address o	change Name	e change	
				Employer identification num	nber
Elair	ne & Robert Lang Foundation			52-1616109	
86198	371		Ī	Telephone number (see the	instructions)
c/o F	Robert Lang 195 CR 202			(970) 247-570)4
Duran	ngo, CO 81301		Ī		_
				1 Foreign organizations, chec	· -
H Ch	neck type of organization: X Section 501	(c)(3) exempt private for		2 Foreign organizations meet	
Γ	Section 4947(a)(1) nonexempt charitable tr		private foundation	here and attach computation	on 🗡 📙
I Fai			ash X Accrual	If private foundation status	
		Other (specify)		under section 507(b)(1)(A) If the foundation is in a 60	
►\$		column (d) must be on	cash basis	If the foundation is in a 60 under section 507(b)(1)(B)	. check here.
Part I	Analysis of Revenue and				
	Expenses (The total of amounts in	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable
	columns (b), (c), and (d) may not neces-	expenses per books	income	liicome	purposes
	sarily equal the amounts in column (a)				(cash basis only)
	(see the instructions))		3.00k		
	1 Contributions, gifts, grants, etc, received (att sch)	^# # XX			x'
	2 Ck ► X if the foundn is not req to att Sch B 3 Interest on savings and temporary	W 3	·37		- ` -
j	cash investments				4
	4 Dividends and interest from securities	206.	206	206.	70.
	5a Gross rents				
	b Net rental income or (loss)	A . S	*	1.A	
R	6a Net gain/(loss) from sale of assets not on line 10		in a	J	., da., 6 -3-
R E V E N	b Gross sales price for all assets on line 6a	Y! * A.S. #470	CENTER	191 300 300	% <u>3</u> °
¥	7 Capital gain net income (from Part IV, line 2)		トレー	151	£ #
Ñ	8 Net short-term capital gain	Jan 18 18 1 1	6 1 6 2011	\\(\varphi\)\(\lambda\)	-W., %-
U	9 Income modifications	Comp. Val. Mar. 1879	\$ 7 P \$ CO.	<u> </u>	* 20 7 7 1 1
Ē	10a Gross sales less returns and	(8)	AUG 1	7	
	allowances				
	b Less Cost of goods sold.		TO DET		7 4 4 \$
	c Gross profit/(loss) (att sch)		Ular		<u> </u>
	11 Other income (attach schedule)		and the second		<u> </u>
	12 Total. Add lines 1 through 11	206.	200	206.	*** &
	13 Compensation of officers, directors, trustees, etc	0.			
	14 Other employee salaries and wages		-		-
	15 Pension plans, employee benefits				
A	16a Legal fees (attach schedule)	075			
Ň	b Accounting fees (attach sch) See St 1	975.			
, N	c Other prof fees (attach sch)				 -
O I P S T	17 Interest				
E T R R	18 Taxes (attach schedule)(see instr.)				
A A	19 Depreciation (attach sch) and depletion				ster is
1 1	20 Occupancy				
N V G E	21 Travel, conferences, and meetings				
A E	22 Printing and publications				
NY	23 Other expenses (attach schedule)			•	
E	,				
Š	24 Total operating and administrative				
S	expenses. Add lines 13 through 23	975.			1 2 2 2 2
D PENSES	25 Contributions, gifts, grants paid Part XV	17,050.			17,050
)	26 Total expenses and disbursements.	10 025] .	0.	17,050
	Add lines 24 and 25	18,025.		J. U.	17,030
	27 Subtract line 26 from line 12:		-		
	a Excess of revenue over expenses and disbursements.	-17,819.		· >ab	
	b Net investment income (if negative, enter -0-).		20	6.	
	C Adjusted net income (if negative, enter -0-)			206.	



Part	II I	Balance Sheets Attached schedules and amounts in the des	cription	Beginning of year				year		_
1 411		(See instructions)	Jy	(a) Book Value	(b) Bo	ok Value		(c) Fair Ma	arket Value	_
		Cash — non-interest-bearing					_			_
		Savings and temporary cash investments		335,223 <u>.</u>		317,40	4.			-
	3	Accounts receivable								ل
	_	Less: allowance for doubtful accounts			,		-+			-,
ļ	4	Pledges receivable				*		<u> </u>	, у	ٺـ
	_	Less allowance for doubtful accounts					\dashv			_
	5	Grants receivable					-			_
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see the instructions)								
	7	Other notes and loans receivable (attach sch)		· * · · · · ·	٤	¥		-\(\frac{1}{2} \)	7	٥١
A		Less allowance for doubtful accounts								_
Š	8	Inventories for sale or use		-					_	_
A S E T	9	Prepaid expenses and deferred charges	1							
Š	10a	a Investments – U S and state government obligations (attach schedule)								_
	t	b Investments — corporate stock (attach schedule)			_					_
	•	c Investments — corporate bonds (attach schedule)			_					
	11	Investments — land, buildings, and equipment basis			AND C	en e			y	X
		Less accumulated depreciation (attach schedule)								
	12	Investments – mortgage loans								_
	13	Investments - other (attach schedule)								
	14	Land, buildings, and equipment basis.		do de a color chance			<u> </u>	* 'Jan	- 14.	
		Less accumulated depreciation (attach schedule)	_ 							_
		Other assets (describe)							_
	16	Total assets (to be completed by all filers — see instructions. Also, see page 1, item 1)		335,223.		317,40	4.		0	<u> </u>
Ļ	17	Accounts payable and accrued expenses							9 A	, }
Å B	18							įri,	(h.A.)	. [
В	19				<u> </u>			"	: All	1
Ļ	20	, , , , , , , , , , , , , , , , , , , ,	S		<u> </u>					7
Ť	21				 				No American St.	Ī
- 1	22	Other liabilities (describe	- - · ⁾				-		er ere	1
E S	23	Total liabilities (add lines 17 through 22)		0.			0.	e .	ý je	
		Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 3	<u>×</u> 1.							-
NF	24	Unrestricted		335,223.		317,40)4.	^		, 4944 48
E U T N	25	Temporarily restricted						· Parker	ratio or some	4
D	26	Permanently restricted						an '	*	į
A B S A L T A		Foundations that do not follow SFAS 117, check her and complete lines 27 through 31.	·e ►	<u> </u>				` , "	· ' ' · · · · · · · · · · · · · · · · ·	Statement
E L T A	27	Capital stock, trust principal, or current funds			ļ			4	, , & .	years 40 mg
SŅ	28	Paid-in or capital surplus, or land, building, and equipment fund			ļ			-6	, i4	and deline
OE	29	Retained earnings, accumulated income, endowment, or other funds						; · · ,	* * .	-
RS	30		ns)	335,223.		317,40)4.	`· &	*	A CONTRACTOR OF THE PERSON OF
	31	Total liabilities and net assets/fund balances (see the instructions)		335,223.		317,40)4.	» · ·	*	
Par	t,	Analysis of Changes in Net Assets or Fund	Balanc	es						_
1	Tota	al net assets or fund balances at beginning of year - F	art II, col	umn (a), line 30 (must	agree with		4		225 222	
_		l-of-year figure reported on prior year's return)					2		335,223 -17,819	
		er amount from Part I, line 27a					3	_	11,019	÷
3		r increases not included in line 2 (itemize) I lines 1, 2, and 3				+	4		317,404	_
4 5		eases not included in line 2 (itemize)				<u> </u>	5			Ť
_		al net assets or fund balances at end of year (line 4 mil	nus line 5)) - Part II, column (b),	line 30		6		317,404	-
				<u> </u>						_

(a) List and describ	LOSSES FOR LAX ON INVESTMEN e the kınd(s) of property sold (e g , ro se; or common stock, 200 shares ML	eal estate, C. Company)	How acquired P — Purchase	(C) Date acquired (month, day, year)	(d) Date sold (month, day, year)
1a N/A		,	D - Donation		
b					
c					
d	· · · · · · · · · · · · · · · · · · ·			 	
е		 ·		 	
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (e) plus (f) m	
a					
b					
С					
d					
е					
Complete only for assets show	ring gain in column (h) and owned by	the foundation on 12/31/69	·	(I) Gains (Col	ımn (h)
(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column (i) over column (j), if any		gain minus column (lian -0-) or Losses (fi	(), but not less
a					
b					
C					
d					
e					
2 Capital gain net income or (ne	et capital loss)	enter in Part I, line 7 ter -0- in Part I, line 7	2		
3 Net short-term capital gain or	(loss) as defined in sections 1222(5)	and (6)			
If gain, also enter in Part I, lin in Part I, line 8	e 8, column (c) (see the instructions)) If (loss), enter -0-	3		
Part V Qualification Unde	r Section 4940(e) for Reduce	d Tax on Net Investmen	t Income	•	
If 'Yes,' the foundation does not qua	ction 4942 tax on the distributable an alify under section 4940(e) Do not co in each column for each year, see th	mplete this part	•	Yes	X No
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use asset		(d) Distributioi lumn (b) divided	
	19,481.	3/10	194.		0.057264
2009	12,388.		567.		0.035337
2007	18,816.		557.		0.053828
2006	8,616.		470.		0.024940
2005	8,500.		549.		0.024887
2 Total of line 1, column (d)	7,000		2		0.196256
3 Average distribution ratio for to number of years the foundation	he 5-year base period — divide the to on has been in existence if less than	otal on line 2 by 5, or by the 5 years	3		0.039251
•	ritable-use assets for 2010 from Part		4		322,798.
5 Multiply line 4 by line 3		,	5		12,670.
· · · · · · · · · · · · · · · · · ·	some (1% of Part Libra 27h)		6		2.
	Come (1 /6 Or 1 art 1, Illie 2/0)				12,672.
7 Add lines 5 and 6			7		
8 Enter qualifying distributions to If line 8 is equal to or greater	from Part XII, line 4 than line 7, check the box in Part VI,	line 1b, and complete that pa	8 art using a 1	// // // // // // // // // // // // //	17,050. the
Part VI instructions BAA					m 990-PF (2010)

BAA

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 to the state of the state

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)

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?

Form **990-PF** (2010)

3b

4a

ΝľΑ

X

Form 990-RF (2010) Elaine & Robert La	ng Foundation		52-161	.6109 Page 6
Part VII-B Statements Regarding Activities		4720 May Be Requ		
5a During the year did the foundation pay or incur	•	-		
(1) Carry on propaganda, or otherwise attemp	t to influence legislation	n (section 4945(e))?	Yes X	No
(2) Influence the outcome of any specific publ on, directly or indirectly, any voter registra	ic election (see section tion drive?	4955), or to carry		No
(3) Provide a grant to an individual for travel,	study, or other similar p	purposes?	Yes X	No l
(4) Provide a grant to an organization other th in section 509(a)(1), (2), or (3), or section	an a charitable, etc, ord 4940(d)(2)? (see instru	ganization described ictions)	Yes X	No
(5) Provide for any purpose other than religious educational purposes, or for the prevention	us, charitable, scientific n of cruelty to children o	, literary, or or animals?	Yes X	No S
b If any answer is 'Yes' to 5a(1)-(5), did any of to described in Regulations section 53 4945 or in (see instructions)?	the transactions fail to d a current notice regard	qualify under the except ding disaster assistance	ions	5b N/A
Organizations relying on a current notice regar	ding disaster assistanc	e check here	▶ □	
c If the answer is 'Yes' to question 5a(4), does that tax because it maintained expenditure response of 'Yes,' attach the statement required by Regulation.	sibility for the grant? Ilations section 53 4945	5-5(d)		No
6a Did the foundation, during the year, receive an on a personal benefit contract?	y funds, directly or indi	rectly, to pay premiums	Yes X	No .
b Did the foundation, during the year, pay premi	ums, directly or indirect	tly, on a personal benef	it contract?	6b X
If 'Yes' to 6b, file Form 8870			—	
7a At any time during the tax year, was the found				No S
b If yes, did the foundation receive any proceeds				N/A 7b
and Contractors	rectors, trustees,	roundation Manag	jers, nigiliy Falu E	ilipioyees,
1 List all officers, directors, trustees, foundatio	n managers and their o	compensation (see inst	ructions).	
(a) Name and address	(b) Title and average hours per week devoted to position	1	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
Elaine Lang	Trustee	0.	0.	0
401 E Linton Blvd #227	0	· ·		
Delray Beach, FL 33483	•			
Robert Lang	Trustee	0.	0.	0
195 CR 202	0			
Durango, CO 81301				
2 Compensation of five highest-paid employee	es (other than those inc	cluded on line 1 – see ir	nstructions). If none, e	nter '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				
				
	-			
			-	-
		1	1	1

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

■ 0

BAA TEEA0306L 07/23/10

Form 990-PF (2010)

BAA

Form 990-PF (2010)

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

Qualifying distributions Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

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 instructions)

Adjusted qualifying distributions. Subtract line 5 from line 4

BAA

Form **990-PF** (2010)

4

5

6

17,050.

2. 17.048.

Part XIII Undistributed Income (see instructions)

	(a Cor	a) pus	Years	(b) s prior to	2009	2	(c) 2009		(d) 2010	0
1 Distributable amount for 2010 from Part XI, line 7				_					1	6,138.
2 Undistributed income, if any, as of the end of 2010		 							,	
a Enter amount for 2009 only					0.		14,804	╬		
b Total for prior years: 20, 20, 20 3 Excess distributions carryover, if any, to 2010					<u>U.</u>			+		1
a From 2005							*	1%	*	1
b From 2006	1								*	1
c From 2007		**	*		>				s⇒ [°] .	
d From 2008										
e From 2009							*	57		!
f Total of lines 3a through e		0.			****			*	*	
4 Qualifying distributions for 2010 from Part XII, line 4 ► \$ 17,050.					ļ		&	Ì		
a Applied to 2009, but not more than line 2a	*	٠,	*	ď "	İ		14,804		~	!
b Applied to undistributed income of prior years		· - ·//·································	<u> </u>	· · · · · · · · · · · · · · · · · · ·			······································			
(Election required — see instructions)	· 62		28.	****	0.		<u></u>	<u> </u>	48	
 Treated as distributions out of corpus (Election required — see instructions) 		0.		\$						
d Applied to 2010 distributable amount			1 3/10		<u>.</u>	.,	- i	+		2,246.
e Remaining amount distributed out of corpus		0.		*				á		
5 Excess distributions carryover applied to 2010		0.	â	· %						0.
(If an amount appears in column (d), the same amount must be shown in column (a))	**	*	MÎ,			<i>₹</i> **	₡.	*	Ž.	*
came amount must be enound in column (e),	Ž				٠,	*			*	~
6 Enter the net total of each column as	3) j.	- 🔐	· * '	44 ° ,	٤	į.	4	
indicated below: a Corpus. Add lines 3f, 4c, and 4e Subtract line 5		0.		₩.		*				ŀ
b Prior years' undistributed income Subtract		. (4)				/ ·*	53	*		Å,
line 4b from line 2b	748		ļ. —	_	0.		****	_		***
c Enter the amount of prior years' undistributed income for which a notice of deficiency		î,				* .				. 8:
has been issued, or on which the section 4942(a) tax has been previously assessed	,	2,254	ŀ		0.	s#*		3		* ** 1
					<u> </u>		*	\top		
d Subtract line 6c from line 6b Taxable amount — see instructions	3 2	**			0.	1.	<u></u>	1		
e Undistributed income for 2009 Subtract line 4a from			,				<u></u>			
line 2a Taxable amount — see instructions	¥	······································	7 3		- 4			<u>'- -</u>	<u> </u>	<u> </u>
f Undistributed income for 2010 Subtract lines										
4d and 5 from line 1. This amount must be distributed in 2011.		**				12.			1	3,892.
7 Amounts treated as distributions out of						· · · · · · · · · · · · · · · · · · ·		×		
corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3)										
(see instructions)		0.	ļ							
8 Excess distributions carryover from 2005 not applied on line 5 or line 7 (see instructions)		0.								
9 Excess distributions carryover to 2011.			*	*						*
Subtract lines 7 and 8 from line 6a		0.			·			+		-
10 Analysis of line 9 a Excess from 2006			,*·				,4			
b Excess from 2007	-		1							
c Excess from 2008	1 1									
d Excess from 2009			,							
e Excess from 2010						<u> </u>				DF (0010)

Form 990-PF (2010) Elaine & Robert I	Lang Foundat	ion		52-1616109	Page 10
Part Private Operating Foundation					N/A
1a If the foundation has received a ruling or d is effective for 2010, enter the date of the	ruling	•		_	
b Check box to indicate whether the foundation		erating foundation de		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		
investment return from Part X for each year listed.	(a) 2010	(b) 2009	(c) 2008	(d) 2007	(e) Total
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					
(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					
c 'Support' alternative test - enter					
 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			<u> </u>	1.45.000	
Supplementary Information assets at any time during th	(Complete this	s part only if the	organization na	ad \$5,000 or moi	e in
Information Regarding Foundation Managers at List any managers of the foundation who is close of any tax year (but only if they have None	gers:	nore than 2% of the t	total contributions resection 507(d)(2))	eceived by the found	lation before the
b List any managers of the foundation who	own 10% or more of	of the stock of a corr	ooration (or an equa	ally large portion of t	he ownership of
a partnership or other entity) of which the None	foundation has a 1	10% or greater intere	est	any lange person or	
		· .			
2 Information Regarding Contribution, Gran Check here if the foundation only requests for funds If the foundation make	nakes contribution	s to preselected cha	rıtable organızatıon		
complete items 2a, b, c, and d	y of the narrow to	whom applications of	hould be addressed		
a The name, address, and telephone number	er of the person to	whom applications s	snould be addressed	u	
See Statement 3					
b The form in which applications should be	submitted and info	rmation and materia	ls they should inclu	ıde	
See Statement for Line 2a					
c Any submission deadlines					
See Statement for Line 2a					
d Any restrictions or limitations on awards,	such as by geogra	phical areas, charita	ble fields, kinds of	ınstıtutıons, or other	factors
See Statement for Line 2a					
BAA	т	TEEA0310L 02/16/11			orm 990-PF (2010)

Page 11

	(continuou)			
3 Grants and Contributions Paid During the	Year or Approved for Fut	ure Paymen	t	
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	substantial contributor	recipient	Continbution	
a Paid during the year				
See Statement 4				
		1		
		1		
		1		
		1		
		1		
		1		
		i		
			İ	
T-1-1			<u>▶</u> 3:	17,050.
Total	-	-	- 3	17,030.
b Approved for future payment				
		1		
		1		
			1	
			1	
			▶ 3	
Total			* 3	DI

Form **990-PF** (2010)

BAA

nter gross amounts unless otherwise indicated	Unrelated	business income	Excluded by s	section 512, 513, or 514	(e)
Program service revenue	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	Related or exempt function income (see the instructions
a					
b					
с					
d					-
e					
f	† .			-	
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			14	206.	
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			+		
Gross profit or (loss) from sales of inventory			 		
1 Other revenue		•			
	****			. 38 19-	
b			 		
c				· · · · · · · · · · · · · · · · · · ·	
d	i i			·	
e				·	
2 Subtotal Add columns (b), (d), and (e)			35.7	206.	
3 Total. Add line 12, columns (b), (d), and (e)	***			13	200
see worksheet in line 13 instructions to verify calculate	tions)				
<u> </u>	-				
art XVI-B Relationship of Activities to th	e Accomplisi	nment of Exem	pt Purpose	S	
Line No. Explain below how each activity for which	incomo la roport	od in column (a) of	Port VI/L A o	ontributed importan	tly to the
Line No. Explain below how each activity for which accomplishment of the foundation's exempt	ot purposes (othe	er than by providing	funds for suc	ch purposes) (See	the instructions)
N/A				·	
11/ 41		<u> </u>			
				-	
	_ _ _				

TEEA0502L 02/17/11

Page **13**

Form 990-PF (2010) Elaine & Robert Lang Foundation 52-1616109 Part XVIII- Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

							Yes	No
describ	e organization directly bed in section 501(c) on to political organizat	of the Code (oth	gage in any of the followiner than section 501(c)(3)	ng with any o organizations	ther organization s) or in section 527,	- 18		
	J ,		noncharitable exempt or	ganization of				
(1) Ca	•		•			1a (1)		X
(2) Ot	ther assets					1a (2)		X
• •	transactions							
(1) Sa	ales of assets to a non	charitable exer	npt organization			1 b (1)		<u>X</u>
(2) Pu	urchases of assets fror	m a noncharitat	ole exempt organization			1 b (2)		_X
(3) Re	ental of facilities, equip	oment, or other	assets			1 b (3)		X
	eimbursement arrange					1 b (4)		X
(5) Lc	oans or loan guarantee	es				1 b (5)		<u>X</u>
(6) Pe	erformance of services	or membershij	o or fundraising solicitatio	ns		1 b (6)		X
c Sharın	ng of facilities, equipm	ent, mailing list	s, other assets, or paid e	mployees		1c		X
Liza.		.h IV (and the fellowing och	adula Calum	n (h) chould always show	the fair market val	ıa of	
the an	nods other assets or s	services diven t	by the reporting foundation	n If the found	n (b) should always show ation received less than fas, other assets, or service	air market value in	ue 01	
(a) Line no	(b) Amount involved	(c) Name of	f noncharitable exempt organizati	on (d	Description of transfers, transa	octions, and sharing arrai	igement	ts
N/A								
			<u></u>					
						·		
								
					<u> </u>			
		-			-			
_					-	·		
		-						
						<u> </u>		
						· ·		
		 -	· · ·		·			
descri	foundation directly or libed in section 501(c) s,' complete the follow	of the Code (ot	ated with, or related to, on her than section 501(c)(3)	e or more tax) or in section	-exempt organizations 1 527?	Ye	X	No
	(a) Name of organizat		(b) Type of organ	ızatıon	(c) Descrip	tion of relationship		
N/A	· · ·		, , , , <u></u>			<u> </u>		
				_			_	
	-			-		<u></u>		
Und	ler penalties of perjury, I declaration	are that I have exami	ined this return, including accompa	anying schedules a	and statements, and to the best of n of which preparer has any knowle	my knowledge and belief,	it is true	₽,
	ect, and complete declaration	ir of preparer (other)	man taxpayer or nuuciary) is base		· ·	n .		
Sign Here ►	1//			1.4	1-7.201 S	readan.		
Jeie	Signature of officer or trustee	7		Dai		according.		
1	Print/Type preparer's na	ame	Preparer's Algnature		Date Check	ıf PTIN		
ם הנא	PATRICIA	Corso	()XIE	<u> </u>	7/2 n/1/ CHECK	mployed N/A		
Paid Branarar	1.	Patricia G	Cobb. PC		Firm's EIN			
Preparer Use Only	. []	1069 Main						
use Utily	🔻 I Firm's address 🔛 💳		IA 02339		Phone no	(781) 878-	3933	3
BAA		,				Form 9		

20	•
ZU	u

Federal Statements

Page 1

Elaine & Robert Lang Foundation 8619871

52-1616109

Statement 1 Form 990-PF, Part I, Line 16b Accounting Fees

		(a) Expenses per Books	(b) Net Investment <u>Income</u>	(c) Adjusted <u>Net Income</u>	(d) Charitable Purposes
Accounting services	Total	\$ 975. \$ 975.	\$ 0.	\$ 0.	\$ 0.

Statement 2 Form 990-PF, Part VII-A, Line 8b Copies of Form 990-PF to State Officials

Filing of Form 990F with the State of Colorado is not required by Colorado law.

Statement 3 Form 990-PF, Part XV, Line 2a-d **Application Submission Information**

Name of Grant Program:

Name:

Care Of:

Robert Lang 195 CR 202

Street Address: City, State, Zip Code: Telephone:

Durango, CO 81301

Form and Content: Submission Deadlines: Restrictions on Awards:

Statement 4 Form 990-PF, Part XV, Line 3a **Recipient Paid During the Year**

Name and Address	Donee Relationship	Found- ation <u>Status</u>	Purpose of Grant	<u> A</u> _	mount
Save our Seminary PO Box 8274 Silver Spring, MD 20907		509(a)	Charitable	\$	100.
San Juan Citizens Alliance PO Box 2461 1022 1/2 Main Avenue Durango, CO 81302		509(a)	Charitable		500.
Central Asia Institute PO Box 7209 Bozeman, MT 59771		509(a)	Charitable		300.

20	10
	. •

Federal Statements Elaine & Robert Lang Foundation 8619871

Page 2

52-1616109

Statement 4 (continued) Form 990-PF, Part XV, Line 3a Recipient Paid During the Year

Name and Address	Donee Relationship	Found- ation Status	Purpose Grant		Amount
Food Bank of the Rockies 10700 East 45th Avenue Denver, CO 80239		509(a)	Charitable	\$	150.
Nooksack Salmon Enhancement Assoc 2445 East Bakerview Road Bellingham, WA 98226		509(a)	Charitable		250.
LaPlanta County Humane So 1111 South Camino Del Rio Durango, CO 81303		509(a)	Charitable		50.
Old School Square 51 N Swinton Ave Delray Beach, FL 33444		509(a)	Charitable		1,000.
Advocates for the West PO Box 1612 Boise, ID 83701		509(a)	Charitable		8,000.
Durango Discover Museum 1333 Camino Del Rio Durango, CO 81301		509(a)	Charitable		150.
Mai Coastal Land Trust 2371 Vinyard Street Wailuku, HI 96793		509(a)	Charitable		500.
Rocky Mountains BPS 1089 Bannock Street Denver, CO 80204		509(a)	Charitable		200.
Carbondale Council on the Arts 645 Main Street Carbondale, CO 81623		509(a)	Charitable		100.
Hand Across The World 5 Washington Street Suite 200 Sherborn, MA 01770		509(a)	Charitable		750.
Habitat for Humanity International 121 Habitat Street Americus, GA 31709		509(a)	Charitable		2,500.
Trinity Lutheran Church 400 No Swinton Ave DelRay Beach, FL 33444		509(a)	Charitable		2,500.
				Total 🕏	17,050.

Form **8868** (Rev January 2011)

Application for Extension of Time To File an Exempt Organization Return

Department of the Treasury Internal Revenue Service

payment instructions

BAA For Paperwork Reduction Act Notice, see Instructions.

File a separate application for each return.

OMB No 1545-1709

Form 8868 (Rev 1-2011)

If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box X If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form) Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868 Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www irs gov/efile and click on e-file for Charities & Nonprofits Part Automatic 3-Month Extension of Time. Only submit original (no copies needed). A corporation required to file Form 990-T and requesting an automatic 6-month extension — check this box and complete Part I only All other corporations (including 1120-C filers), partnerships, REMICS, and trusts must use Form 7004 to request an extension of time to file income tax returns Name of exempt organization Type or Elaine & Robert Lang Foundation print 52-1616109 8619871 File by the due date for Number, street, and room or suite number. If a P.O. box, see instructions filing your return See instructions c/o Robert Lang 195 CR 202 City, town or post office, state, and ZIP code. For a foreign address, see instructions Durango, CO 81301 04 Enter the Return code for the return that this application is for (file a separate application for each return) Application Is For Application Is For Return Return Code Code 01 Form 990-T (corporation) 07 Form 990 Form 1041-A 08 Form 990-BL 02 03 Form 4720 09 Form 990-EZ 10 Form 990-PF 04 Form 5227 05 Form 6069 11 Form 990-T (section 401(a) or 408(a) trust) 06 Form 8870 12 Form 990-T (trust other than above) The books are in the care of ► Robert Lang Telephone No. ► 970-799-1763_____ 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) 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 1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until 8/15 _ _ , 20 11 _ , to file the exempt organization return for the organization named above The extension is for the organization's return for X calendar year 20 10 or tax year beginning _____, 20 ___, and ending ____, 20 ___ 2 If the tax year entered in line 1 is for less than 12 months, check reason Initial return Final return Change in accounting period 3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any 3a|\$ nonrefundable credits See instructions b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax 481. 3Ы\$ payments made Include any prior year overpayment allowed as a credit c Balance due. Subtract line 3b from line 3a Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions 0. Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for