

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



SCANNEL SEP 0 8 2011

Form **990-PF**

Department of the Treasury

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

2010

OMB No 1545-0052

Intern	al Revenu	Je Service	Note. The foun	datic	on may be able to use a copy o				
For	calendai	r year 2010, or	tax year beginning	3		<u>-</u> _	010, and end	ling	, 20
GC	heck all	that apply	Initial return		Initial return	of a former p	ublic charity	Final retu	rn
		<u> </u>	Amended re	eturi	n Address o	change	Nam	ne change	
Nam	e of four	ndation						A Employer identifi	cation number
KO	DALI	FAMILY	PRIVATE FO	נטכ	NDATION			56-2094126	
Nun	ber and	street (or PO be	ox number if mail is not	deliv	ered to street address)		Room/suite	B Telephone number	r (see instructions)
29	O RO	YAL SUNS	SET DRIVE					(910)323-52	03
City	or town,	state, and ZIP	code					C If exempt application	is pending, check here 🕨
DU	RHAM	NC 2771	.3					D 1. Foreign organiz	
H C	heck typ	oe of organization	on X Section 5	01(0	c)(3) exempt private four	dation		2. Foreign organization test, check here as	nd attach computation
	Section 4	947(a)(1) none	xempt charitable tru	st	Other taxable priva	te foundation	1	E If private foundation terminated under	
I Fa	ır marke	t value of all as	sets at end of	J	Accounting method X	Cash	Accrual	507(b)(1)(A), chec	k here ▶ _
ye	ar (from	Part II, col (c),	line 16)		Other (specify)			F If the foundation is termination under	in a 60-month
▶\$			327,287	(Pa	rt I, column (d) must be	on cash bas	ıs)	507(b)(1)(B), chec	
Pa	rt I An		nue and Expenses		(a) Revenue and	(I-X XI-4		4-1 Al.,	(d) Disbursements
	The	e total of amou & (d) may not	nts in columns (b), necessarily equal th	e	expenses per	(b) Net in	1	(c) Adjusted net income	for charitable purposes
_	amo	ounts in columi	1 (a) (see instructions)		books	11100			(cash basis only)
	1 Cor	tach cohodula)	grants, etc , received	\Box			T		
	_ `	if the f	oundation is not requi	red					
	3 Inte	_	nd temp cash investme	nts					
	4 Div	vidends and int	erest from securities	3					
	5 a Gr	oss rents				·····			
_	b Ne	rt rental come or (loss)		_					
R		•	ale of assets not on line	10	2,202				
v	b Gro	oss sales price for assets on line 6a	10,000	_				·····	
E	7 Ca	pita) gain net incor	ne (from Part IV, line 2)			• • • • • • • • • • • • • • • • • • • •	2,202		
N	8 Ne	et short-term ca	ıpıtal gaın					0	
E			ions					0	
	rtn	oss sales less is & allowances		0					
	god	ss Costof odssold							
			ss) (attach schedul	e)					
		ther income (at	•	•			2 222		
_		otal. Add lines 1			2,202		2,202	0	
O P	13 dir	ectors, trustees, e	tc		0			DEO	
Ε			salaries and wages					- REC	ElVin
R		•	nployee benefits					4	101
Т		gal fees (attach		1	C1.1			17-1	- 100
N			attach schedule) #		611	_		AUG 2	2 2011
Ğ		•	al fees (attach sche#	iet)	13			TOOPE	100
&	17 Int		dula (can instructions)						IV.
A		•	dule) (see instructions)	\n		 -			
D M		•	ch sch) and depletion						
ı		ccupancy .	es, and meetings.	• •	256		+		
N			ces, and meetings.		230_				
E			attach schedule) #	3	2,086	-			
Ρ		•	•						
E N			and administrative ines 13 through 23		2,966		0	0	0
S		ontributions, gif			12,005	-		· · · · · · · · · · · · · · · · · · ·	12,005
E S			ements Add lines 24 and		14,971		0	0	12,005
<u> </u>		ubtract line 26 f							
	a Ex		ue over expenses		-12,769]			<u></u>
			Income (if neg , enter	-0-)			2,202		
	c Ac	djusted net inc	come (if neg , enter -0-	-)				0	
_				_					

For Paperwork Reduction Act Notice, see the instructions.

Form **990–PF** (2010)

	• •	Total habilities and het assessiana balances (see the mot)	201/220		,,,	
Pŧ	art III	Analysis of Changes in Net Assets or Fund Balance	es			
1	Total	net assets or fund balances at beginning of year Part II, column (a),	line 30 (must agree w	ith		
	end-	of-year figure reported on prior year's return)			1	204,926
2	Enter	amount from Part I, line 27a			2	-12,769
3	Othe	r increases not included in line 2 (itemize) ▶			3	
4	Add	ines 1, 2, and 3			4	192,157
5	Decre	eases 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	192,157

204,926

204,926

204 926

192,157

192,157

194.255

27

29

30

C 28 and complete lines 27 through 31.

Capital stock, trust principal, or current funds

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

Retained earnings, accumulated income, endowment, or other funds . .

Total liabilities and not assets/fund balances (see the inst.)

Total net assets or fund balances (see the instructions)

Page	:
------	---

Form 990-PF (2010) KODALI		56-2094	_				Page :
	and Losses for Tax on Inv					 1	
, ,	the kind(s) of property sold (e.g., re ouse, or common stock, 200 shs M			(b) How acquired P Purchase		te acquired day, yr)	(d) Date sold (mo , day, yr.)
1a See attachment		ile co)		D Donation	(1110	day, yr)	(mo, day, yr.)
b	#4						
C		-		-			
d			_	_			
e							
(e) Gross sales price	(f) Depreciation allowed (or allowable)		Cost or ot			, <i>,</i>	n or (loss)) minus (g)
a							
b							·
С							<u> </u>
d							
<u>e</u>		<u> </u>			-		
Complete only for assets sh	owing gain in column (h) and owner	- 1		<u> </u>			(h) gain minus
(i) F.M V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	, , ,	ver col (j)		COI		less than -0-) or om col (h))
_a			 				
b							
<u>C</u>							
e d					<u> </u>	<u> </u>	
If gain, also enter in Part I, Ii If (loss), enter -0- in Part I, I	or (loss) as defined in sections 1222 ne 8, column (c) (see the instruction ine 8	ns) 		·: }	3		2,202
Part V Qualification	Under Section 4940(e) for	Reduced	Tax on	Net Investr	nent li	ncome	
(For optional use by domestic pr	rivate foundations subject to the se	ction 4940(a)) tax on ne	et investment inc	come)		
If section 4940(d)(2) applies, lea	ve this part blank. e section 4942 tax on the distributab	ole amount o	of any vear	ın the base per	ıod?		∏Yes X No
If "Yes," the foundation does no	t qualify under section 4940(e) Do	not complete	e this part				
	int in each column for each year; se	e the instruc	ctions bero		entries		(d)
Base period years Calendar year (or tax year beg. in	Adjusted qualifying distribu	utions		(C) let value of ritable-use assets			tribution ratio divided by col (c))
2009							
2007							
2007							
2005							
	<u> </u>		-,				
2 Total of line 1, column (d)						2	0.00000
3 Average distribution ratio for	or the 5-year base period divide	the total on	line 2 by 5	5, or by the num	ber		
of years the foundation has	been in existence if less than 5 year	ars ,,,,			_	3	0.00000
4 E 4 Al a catacatica at mana	be entable tree appets for 0040 from	Dort V. line 6	E			4	
4 Enter the net value of nonc	charitable-use assets for 2010 from	Part A, line :	ο.	• • • •		4	<u>-</u>
5 Multiply line 4 by line 3				• • •	•	5	
6 Enter 1% of net investment	t income (1% of Part I, line 27b).				.	6	22

22

12,005

instructions

JVA

7 Add lines 5 and 6 ,

8 Enter qualifying distributions from Part XII, line 4.

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

Part XIV . .

►NONE

designate) of each state as required by General Instruction G? If "No," attach explanation

10

Form	990-PF (2010) KODALI FAMILY PRIVATE FOUN 56-2094126		Pa	age 5
Par	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	T		
	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		
	Website address ▶N/A			-
14	The books are in care of ▶See attachment #5 Telephone no ▶			_
	Located at ► ZIP+4 ►			
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 over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16		Х
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of the		***************************************	:
	foreign country ▶			
Par	t 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.		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?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No	-		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? . Yes X 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)?			
	(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.) \Box Yes \Box No			
þ	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 instructions)?	1b	ļ	X
	Organizations relying on a current notice regarding disaster assistance check here	ŀ		
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	ļ	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?			
	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)	l		3,7
_	to all years listed, answer "No" and attach statement see instructions)	2b	ļ	X
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here	[
_	▶ 20, 20, 20			
За	Did the foundation hold more than a 2% direct or indirect interest in any business			1
h	enterprise at any time during the year?			
ь	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	-		
		25	1	v
42	if the foundation had excess business holdings in 2010.)	3b	-	X

JVA

	990-PF (2010)KODALI FAMILY PRIVA						Page 6
Parl	VII-B Statements Regarding Activ	vities for Which	Form 4720 May Be	Required (cont	inued)		
5 a	During the year did the foundation pay or incui	any amount to.		_	_		
	(1) Carry on propaganda, or otherwise attempt	ot to influence legislation	on (section 4945(e))?	Yes	X No		
	(2) Influence the outcome of any specific pub	lic election (see sectio	n 4955), or to carry				
	on, directly or indirectly, any voter registra	tion drive?		Yes	X No		
	(3) Provide a grant to an individual for travel,	study, or other similar	purposes?	. Yes	X No		İ
	(4) Provide a grant to an organization other th	ian a charitable, etc., o	organization described				-
	in section 509(a)(1), (2), or (3), or section	4940(d)(2)? (see instri	uctions) .	Yes	X No		
	(5) Provide for any purpose other than religion		•	U ·			ŀ
	educational purposes, or for the prevention	·	• • • • • • • • • • • • • • • • • • • •	Yes	X No	1	F
h	If any answer is "Yes" to 5a(1)-(5), did any of the	•		Lf	<u></u> •		İ
	Regulations section 53.4945 or in a current not					5b	X
			·	ons).	·· in	35	- 1
	Organizations relying on a current notice regar				▶ □		ŧ
С	If the answer is "Yes" to question 5a(4), does t		cemption from the tax	NT / 70 🖂	п.,		
	because it maintained expenditure responsibili			. N/A U Yes	∐ No		Ĺ
	If "Yes," attach the statement required by Regu		• •				
6a	Did the foundation, during the year, receive an	y funds, directly or ind	firectly, to pay premiums				-
	on a personal benefit contract?			. U Yes	X No		-
b	Did the foundation, during the year, pay premi	ums, directly or indirec	ctly, on a personal benefi	t contract?		6b	X
	If "Yes" to 6b, file Form 8870			_	_		
7a	At any time during the tax year, was the foundation	ation a party to a proh	ibited tax shelter transact	tion? Yes	X No		
b	If "Yes," did the foundation receive any proceed	ds or have any net inc	come attributable to the t	ransaction?		7b	X
Par	t VIII Information About Officers,	Directors, Truste	es, Foundation Ma	anagers, Highly	y Paid E	mploy	rees,
	and Contractors						
1	List all officers, directors, trustees, foundati	on managers and the	elr compensation (see in	nstructions).			
		(b) Title, and avg.	(c) Compensation	(d) Contributions		Expense	account,
	(a) Name and address	hours per week devoted to position	(if not paid, enter -0-)	employee benefit pland deferred cor	pians ` ' ,		wances
See	e attachment #6	•					
	0 " 4" 111 1 11 1		I	(
2	Compensation of five highest-paid employed if none, enter "NONE."	es (otner than those	included on line 1 s	ee instructions).			
	ii none, enter NONE.			(d) Contributions	to I		
(a	Name and address of each employee paid	(b) Title, and avg.	(-) (0	employee bene		Expense	account,
	more than \$50,000	hours per week devoted to position	(c) Compensation	plans and defer	red of		wances
1701	T10	devoted to position		compensation	1		
NOI	NE:						
Tota	I number of other employees paid over \$50,000	<u>l</u>	J	<u> </u>			0
JVA		ms (Software Only) - 2010	TW		Form	1 990-	PF (2010)

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. 1 2 3 4 Part IX-B Summary of Program—Related Investments (see the instructions) Describe the two largest program—related investments made by the foundation during the tax year on lines 1 and 2 Amount 1 All other program—related investments See the instructions.	Form 990-PF (2010) KODALI FAMILY PRIVATE FOUN		Page 7
(a) Name and address of each person paid more than \$50,000 (b) Type of service (c) Compensation (a) Name and address of each person paid more than \$50,000 (b) Type of service (c) Compensation (b) Type of service (c) Compensation (c) Compensation (d) Compensation (e) Compensation (f) Type of service (c) Compensation (e) Compensation (f) Type of service (c) Compensation (f) Type of service (c) Compensation (g) Comp		Foundation Managers, High	ly Paid Employees,
(a) Name and address of each person paid more than \$50,000 (b) Type of service (c) Compensation NONE Continue			
Fotal number of others receiving over \$50,000 for professional services			
Part IX-A Summary of Direct Charitable Activities		(b) Type of service	(c) Compensation
Part IX-B 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. 1 2 3 4 Part IX-B Summary of Program-Related Investments (see the instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount 1 All other program-related investments See the instructions.	NONE		
Part IX-B 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. 1 2 3 4 Part IX-B Summary of Program-Related Investments (see the instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount 1 All other program-related investments See the instructions.			
Part IX-B 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. 1 2 3 4 Part IX-B Summary of Program-Related Investments (see the instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount 1 All other program-related investments See the instructions.			
Part IX-B 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. 1 2 3 4 Part IX-B Summary of Program-Related Investments (see the instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount 1 All other program-related investments See the instructions.			
Part IX-B 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. 1 2 3 4 Part IX-B Summary of Program-Related Investments (see the instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount 1 2 All other program-related investments See the instructions.			
Part IX-B 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. 1 2 3 4 Part IX-B Summary of Program-Related Investments (see the instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount 1 All other program-related investments See the instructions.			
Part IX-B 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. 1 2 3 4 Part IX-B Summary of Program-Related Investments (see the instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount 1 All other program-related investments See the instructions.			
Part IX-B 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. 1 2 3 4 Part IX-B Summary of Program-Related Investments (see the instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount 1 All other program-related investments See the instructions.			
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. 1 2 3 4 Part IX-B Summary of Program—Related Investments (see the instructions) Describe the two largest program—related investments made by the foundation during the tax year on lines 1 and 2 Amount 1 All other program—related investments See the instructions.	Total number of others receiving over \$50,000 for professional services		▶
of organizations and other beneficiaries served, conferences convened, research papers produced, etc. 1 2 3 4 Part IX-B Summary of Program-Related Investments (see the instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount 1 All other program-related investments See the instructions.	Part IX-A Summary of Direct Charitable Activities		
2 Part IX-B Summary of Program-Related Investments (see the instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount All other program-related investments See the instructions.		i i	Expenses
Part IX-B Summary of Program-Related Investments (see the instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount All other program-related investments See the instructions.	1		· · ·
Part IX-B Summary of Program-Related Investments (see the instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount All other program-related investments See the instructions.			
Part IX-B Summary of Program-Related Investments (see the instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount All other program-related investments See the instructions.			
Part IX-B Summary of Program-Related Investments (see the instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount All other program-related investments See the instructions.	2		
Part IX-B Summary of Program-Related Investments (see the instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount All other program-related investments See the instructions.			
Part IX-B Summary of Program-Related Investments (see the instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount All other program-related investments See the instructions.	3		
Part IX-B Summary of Program-Related Investments (see the instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount All other program-related investments See the instructions.			
Part IX-B Summary of Program-Related Investments (see the instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount All other program-related investments See the instructions.			
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount All other program-related investments See the instructions.	4		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount All other program-related investments See the instructions.			
2 All other program-related investments See the instructions.	Part IX-B Summary of Program-Related Investments (see the	e instructions)	
2 All other program-related investments See the instructions.	Describe the two largest program-related investments made by the foundation d	luring the tax year on lines 1 and 2	Amount
All other program-related investments See the instructions.	1		
All other program-related investments See the instructions.			
All other program-related investments See the instructions.	2	•	
3	All other program-related investments See the instructions.		
	3		
Total. Add lines 1 through 3 ▶	Total. Add lines 1 through 3		·

JVA 10 990PF7 TWF 39334 Copyright Forms (Software Only) - 2010 TW

Form **990-PF** (2010)

`	see 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 securities	1a	
b	Average of monthly cash balances	1b	
С	Fair market value of all other assets (see the instructions),,	1c	
d	Total (add lines 1a, b, and c)	1d	0
	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation),, 1e		
2	Acquisition indebtedness applicable to line 1 assets	2	_
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for charitable activities Enter 1 1/2 % of line 3 (for greater amount, see		
	the instructions)	4	
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	
6	Minimum investment return. Enter 5% of line 5	6	
Par	XI Distributable Amount (see the instructions) (Section 4942(j)(3) and (j)(5) private operating		
1 4.	foundations and certain foreign organizations check here		
1	Minimum investment return from Part X, line 6	1	
	Tax on investment income for 2010 from Part VI, line 5		
	Income tax for 2010. (This does not include the tax from Part VI) 2b	1	
c	Add lines 2a and 2b	2c	22
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	
6	Deduction from distributable amount (see the instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII,		
•		7	0
	line 1	1 - 1	
Par	Qualifying Distributions (see the instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes	T	
a	5 And State of the	1a	12,005
b		1b	
2	Program-related investments total from Part IX-B	- 	
2		2	
	purposes		
3	Amounts set aside for specific charitable projects that satisfy the	20	
	Suitability test (prior IRS approval required)	3a	
	Cash distribution test (attach the required schedule)	3b	12 005
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4.	4	12,005
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income	_	2.2
	Enter 1% of Part I, line 27b (see the instructions)	5	22
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	11,983
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether t	ne foundation	on
	qualifies for the section 4940(e) reduction of tax in those years		

Par	XIII Undistributed income (see	the instructions)			
•		(a)	(b)	(c)	(d)
1	Distributable amount for 2010 from Part XI,	Corpus	Years prior to 2009	2009	2010
	line 7				0
2	Undistributed income, if any, as of the end of 2010	,	, i		
а	Enter amount for 2009 only				
b	Total for prior years 20 , 20 , 20				
3	Excess distributions carryover, if any, to 2010				
а	From 2005				
b	From 2006 .				
С	From 2007				
d	From 2008				
	From 2009				
	Total of lines 3a through e	0			
4	Qualifying distributions for 2010 from Part XII,				
·	line 4 ▶ \$ 12,005				
а	Applied to 2009, but not more than line 2a				
	Applied to undistributed income of prior years				
-	(Election required see the instructions)				
c	Treated as distributions out of corpus				
•	(Election required see the instructions)				
d	Applied to 2010 distributable amount				
	Remaining amount distributed out of corpus				
5	Excess distributions carryover applied to 2010				
3	(If an amount appears in column (d), the same				
6	amount must be shown in column (a).) Enter the net total of each column as				
0	Indicated below:				
_					
	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5				
D	Prior years' undistributed income Subtract				
_	line 4b from line 2b				
С	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				~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
a	Subtract line 6c from line 6b Taxable				
	amount see the instructions				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
е	Undistributed income for 2009 Subtract				
	line 4a from line 2a Taxable amount				
	see the instructions				
f	Undistributed income for 2010. Subtract				
	lines 4d and 5 from line 1 This amount				
	must be distributed in 2011				
7	Amounts treated as distributions out of				
	corpus to satisfy requirements imposed				
	by section 170(b)(1)(F) or 4942(g)(3) (see				
	the instructions)				
8	Excess distributions carryover from 2005				
	not applied on line 5 or line 7 (see the				
	instructions)	· - · · · · · · · · · · · · · · · · · ·			
9	Excess distributions carryover to 2011.				
	Subtract lines 7 and 8 from line 6a				
10	Analysis of line 9				
а	Excess from 2006				
b	Excess from 2007				
	Excess from 2008 , ,	1			
d	Excess from 2009	1			
_	Excess from 2010	1	1	1	i

Par	t XIV Private Operating Found	ations (see instru	ctions and Part VII-A	, question 9)		
Jа	If the foundation has received a ruling or	determination letter	that it is a private op	erating		
	foundation, and the ruling is effective for	2010, enter the date	of the ruling	. •	N/	A
b	Check box to indicate whether the found	ation is a private op	erating foundation de	escribed in section	4942(j)(3) or	4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		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	(,	(-,			
b	85% of line 2a					
~	•	<u>.</u>				
С	Qualifying distributions from Part XII, line 4 for each year listed					
	, , , , , , , , , , , , , , , , , , , ,					
d	Amounts included in line 2c not used directly for active conduct exempt act.					
	·				 	
е	Qualifying distributions made directly					
	for active conduct of exempt activities.				+	
	Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the alternative					
	test relied upon					
а	"Assets" alternative test enter					
	(1) Value of all assets					
	(2) Value of assets qualifying under					
	section 4942(j)(3)(B)(i) "Endowment" alternative test enter					
b	2/3 of min. investment return shown in					
	Part X, line 6 for each year listed					
С	"Support" alternative test enter:					
	(1) Total support other than gross					•
	investment income (interest, dividends, rents, payments on					
	securities loans (section 512(a)					
	(5)), or royalties)					
	(2) Support from general public and					
	5 or more exempt organizations as provided in section 4942(j)(3)					
	(B)(III)					
	(3) Largest amount of support from an					
	exempt organization				<u></u>	
	(4) Gross investment income.			<u> </u>		
Pa	t XV Supplementary Informat			the foundation	had \$5,000 or i	more in assets
	at any time during the y		instructions.)			
1	Information Regarding Foundation Ma	-				
а	List any managers of the foundation who				ceived by the founda	tion before the
	close of any tax year (but only if they have	e contributed more	than \$5,000) (See s	ection 507(d)(2))		
	None					
b	List any managers of the foundation who				lly large portion of the	e ownership
	of a partnership or other entity) of which	the foundation has	a 10% or greater inte	erest.		
	None		<u> </u>			
2	Information Regarding Contribution, G					
	Check here ► X if the foundation only					
	requests for funds if the foundation make	es gifts, grants, etc.	(see the instructions) to individuals or or	ganizations under of	her conditions,
	complete items 2a, b, c, and d.		- ,			
а	The name, address, and telephone num	ber of the person to	whom applications s	should be addressed	d .	
	221.					
 -	The form in which applications should be			la sharr about a raction		
b	The form in which applications should be	e submitted and info	rmation and materia	is they should includ	ae	
	/.					
	NA					
С	Any submission deadlines					
	1)/A					
	Any restrictions or limitations on awards,	such as by deodrar	hical areas charitah	le fields, kinds of ins	stitutions or other fac	tors
u	N/A	out, at by goograp	a. aroao, oriainab	Allian of the		

Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	Amazzat
	any foundation manager	status of recipient	contribution	Amount
Name and address (home or business)	or substantial contributor	1		
a Paid during the year				
See attachment #7				
		,		
	,			
Total		,		12,00
b Approved for future payment				
			'	

Form 990-PF (2010) KODALI FAMILY PRIVATE FOUN 56-2094126

Excluded (c) Excluded code	d by section 512, 513, or 514 (d) Amount	(e) Related or exempt function income (See the instructions)
Excl		function income (See the
I	Amount	(See the
		
02		
02	0	0
<u> </u>	<u> </u>	2,202
	" —	
f Exempt	Purposes	
		tantly to the
	nn (e) of Part	

JVA

Pa	rt XVII	Information F Exempt Orga		insfers To and Transa	ictions a	nd Relationsh	nips With Nor	ncharit	able	
<u>.</u>	Did the			ge in any of the following with	any other	organization desc	ribed in section		Yes	No
•				3) organizations) or in section					1.00	110
а	• •	•		oncharitable exempt organiza		ing to political orgi	211124B0110.			İ
a		sh		· -				1a(1)		Х
		ner assets				• •		1a(2)		X
.	• •	ansactions			•			12(2)	<u> </u>	
J			charitable evemn	t organization				1b(1)	1	Х
	` '		•	e exempt organization				1b(2)	-	X
	• •			ssets				1b(3)		X
	` '	, , ,						1b(4)		Х
		-						1b(5)		X
	• •	-		or fundraising solicitations				1b(6)	 -	X
С	` '		·	other assets, or paid employe				1c		Х
d	If the ar	nswer to any of the al	bove is "Yes," cor	mplete the following schedule	. Column (l	b) should always				
u				reporting foundation If the fo						
	or shar	ng arrangement, sho	w in column (d) t	he value of the goods, other	assets, or s	ervices received.				
(a) ı	ine no. (k) Amount involved	(c) Name of nor	ncharitable exempt organization	on (d) Des	cription of transfers.	transactions, and sha	rıng arran	aements	
(-/ -		,	(-/	······································	1 '		·			
	•									
			ļ							
		<u> </u>								
2 a		•	•	I with, or related to, one or me		mpt organizations	described in		_	a
	section	501(c) of the Code (other than section	1 501(c)(3)) or in section 527?	' .			Ye	s X	No
b	If "Yes,	" complete the follow	ing schedule							
	(a) Name of organiza	tion	(b) Type of organiza	tion	(c)	Description of rela	ationship	<u> </u>	
			1							
						1				
						1				
						1				
	l be	ider penalties of perjury, lief, it is true, correct, and	l declare that i have e d complete. Declarati	examined this return, including acco on of preparer (other than taxpayer	mpanying sci or fiduciary)	hedules and statemer is based on all inform	its, and to the best o ation of which prepa	t my know rer has an	ledge ar y knowl	ıd edge
Sig	n		0		1					
He	re 📗	\/al	<u> </u>	ladall'	8		resident			
		Signature of officer	or trustee	•	Date		Title			
Pai	٨	Print/Type prepare	r's name	Preparer's signature		Date	Check ıf	PTIN		
		Mathew J V	ressman	1 (attres / Tress	uan	8/11/2011	self-employed	<u> 1</u>		_
	eparer	Firm's name ► MA		ĎRESSMAN CPA,	P.C.		m's EIN ▶			
US	e Only	Firm's address ▶ 4	705 UNIV	ERSITY DRIVE S	TE 10	0 Ph	one no (919)	493-	<u> 591</u>	6

TWF 39340

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

OMB No 1545-0047

2010

Employer Identification number

KODALI FAMILY PRIVATE FOUNDATION 56-2094126 Organization type (check one) Filers of: Section: Form 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation 527 political organization X 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions **General Rule** 🛛 For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor Complete Parts I and II Special Rules For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1 Complete Parts I and II For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals Complete Parts I, II, and III For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year Caution. An organization that is not covered by 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

For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF.

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

Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

990 SCHEDULE OF ACCOUNTING FEES

Attachment 1: page 1 - 990-	PF Page 1, Pa	art I, Line	16b				
Open to Public							
Inspection For calendar year 2010, or tax per	nod beginning	beginning , and ending .					
Name of Organization				mployer Identification Number			
KODALI FAMILY PRIVATE FOUND	ATTON		56-2094126				
Accounting Category	Amount	Net Investment	Adjusted	Disbursements for			
		Income	Net Income	Charity			
ACCOUNTING FEE	611						
ļ							
Total:	611	<u> </u>					
i Otal.		<u> </u>	l	10 EOPEGR25			

990 SCHEDULE OF OTHER PROFESSIONAL FEES

Attachment 2: page 1 - 990-F	PF Page 1, Pa	art I, Line	16c							
Open to Public										
Inspection For calendar year 2010, or tax period beginning , and ending . Name of Organization Employer Identification Number										
Name of Organization KODALI FAMILY PRIVATE FOUNDA	\ T ∩ NI									
		Net Investment	56-2094126 stment Adjusted Disbursements for							
Category	Amount	Income	Net Income	Charity						
OTHER PROFESSIONAL FEE	13	moorne	THE INCOME	Onany						
1										
Total:	13									

990 OTHER EXPENSES SCHEDULE

Attachment 3: page 1 990-PF	Page 1, Par	t I, Line 23					
Open to Public							
Inspection For calendar year 2010, or tax per Name of Organization	riod beginning	, and (ending Employer Ide	ntification Number			
	ATION	56-2094126					
Description of Activity	Revenue and Expenses	Net Investment Income	Adjusted Net Income	Disbursements for Charity			
Description of Activity BANK CHARGE WEBSITE DEVELOPMENT	Revenue and		Adjusted	Disbursements for			
Total:	2,086						

990 PART IV CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

	e 1 - 990-PF Page	3, Part IV	/, line 1		
	year 2010 or tay period beginning		and endin	a	
	your 2010 of tax period beginning		, and criain		cation Number
ALI FAMILY PRI					
• •			(b) How Acquired	1	(d) Date Sold
			D Donation	(mo , day, yr)	(mo , day, yr)
420.172 SHARES 3,	OF PABRAI INVESTM	ENT FUND	P	10-01-2004	01-01-2010
(e) Gross Sales Price	(f) Depreciation Allowed (or allowable)				r (loss)) Minus (g)
			T 700		2,202
Complete only for assets si	howing gain in column (h) and owne	d by the foundation	on 12/31/69	(I) Gains (Col (h) Gain Minus
(I) F M V as of 12/31/69	(J) Adjusted Basis				Less Than -0-) or
	as of 12/31/69	Over Col.	(j), if Any	Losses (fro	om col (h)) 2,202
)	complete only for assets si	rit to Public ection For calendar year 2010 or tax period beginning of Organization ALI FAMILY PRIVATE FOUNDATION (a) List and Describe the Kind(s) of Property Sold (e.g., 1.2-story Brick Warehouse, or Common Stock, 200 shs. 4.20.172 SHARES OF PABRAI INVESTM. 3, (e) Gross Sales Price (f) Depreciation Allowed (or allowable) 10,000 Complete only for assets showing gain in column (h) and owner (l) FM V as of 12/31/69 (j) Adjusted Basis	rection For calendar year 2010 or tax period beginning of Organization ALI FAMILY PRIVATE FOUNDATION (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.) 420.172 SHARES OF PABRAI INVESTMENT FUND 3, (e) Gross Sales Price (f) Depreciation Allowed (g) Cost or Of Plus Expen 10,000 Complete only for assets showing gain in column (h) and owned by the foundation (l) FMV as of 12/31/69 (l) Adjusted Basis (k) Excess if	Por calendar year 2010 or tax period beginning And ending of Organization	rin to Public ecition For calendar year 2010 or tax period beginning , and ending of Organization ALI FAMILY PRIVATE FOUNDATION

990 BOOKS ARE IN CARE OF

At.tachment	5 - 990-PF	Page 5, Part	VII-A,	Line	14			
Open to Public Inspection	For calendar year 201	0, or tax period beginning			, and ending		_	
Name of Organization		<u>, , , , , , , , , , , , , , , , , , , </u>			, ,	Employe	er Identification I	Number
•	ILY PRIVATE	FOUNDATION					94126	
Part VII-A - Line 14	1					•		
Individual Name		•	V.	ALLI K	CODALI			
or								
Business Name								
	· · · · · · · · · · · · · · · · · · ·	. <u>-</u>						
Street Address			<u>2</u>	90 ROY	AL SENSE	T DR	IVE	
			_					
U S. Address								
U.S. Address								
7	27713	City DURHAM				. NC		
·	2//13	City DURITAIN	 .		Sta	te <u>NC</u>		
or								
Foreign Address								
City								
Oity								
Province or	State							
			-					
Country								
,	, ,,,,,,,,	. ,,,,,,,,			•			··· —
Postal code								
Dhana Mara	L						(010) 20	7 0060
Phone Num	ber					• • • •	(910)30	1-9269
Face Nivers Is as								
Fax Number	•	•				•		

990 CURRENT OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

. Attachment 6: page 1 - 99	0-PF Page 6.	Part VIII						
Open to Public								
Inspection For calendar year 2010, or tax	period beginning	, and	ending					
Name of Organization KODALI FAMILY PRIVATE FOU	ΝΟΣΤΙΟΝ	Employer Identification Number 56-2094126						
(A) Name and Address	(B) Title and Average	(C) Compensation (If		to Employee	(E) Expense Account			
()	Hrs. per Week	not pald, enter 0)		s & Def Comp.				
VALLI KODALI								
210 TECUMSEH COURT				•				
Raleigh, NC 27607 USHA KODALI		0		0	0			
210 TECUMSEH COURT								
Raleigh, NC 27607		0		0	0			
3 ,		i						
				'				
			1					

990 GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

Attachment 7: page 1 990-PF Page 11, Part XV Line 3a Open to Pu Inspection For calendar year 2010, or tax period beginning , and ending Name of Organization Employer Identification Number KODALI FAMILY PRIVATE FOUNDATION 56-2094126 If Recipient is an Individual, Show any Relationship to Any Foundation Manager Purpose of Grant or Recipient Status of Amount Contribution Recipient Name and Address (home or business) or Substantial Contributor SRI VENKA TESWARA TEMPLE NONE OF NC P.O. BOX 4388 Cary NC 27519 11,232 NONE WESTERN WAKE TENNIS 2474 WALNUT ST. NO. 306 773 Cary NC 27518 Total: 12,005

Form **8868**

(Rev January 2011)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an **Exempt Organization Return**

► File a separate application for each return.

OMB No 1545-1709

	e filing for an Automatic 3-Month Extension, com e filing for an Additional (Not Automatic) 3-Monti	-			rm)	▶ ⋈				
Do not con	nplete Part II unless you have already been grante	ed an automati	c 3-month extension on a previo	usly filed	Form 8868.					
corporation request an Associated	filing (e-file). You can electronically file Form 8868 required to file Form 990-T), or an additional (not extension of time to file any of the forms listed in Pawith Certain Personal Benefit Contracts, which muling of this form, visit www.irs.gov/efile and click or	automatic) 3-n art I or Part II w st be sent to th	nonth extension of time You can with the exception of Form 8870, I be IRS in paper format (see instru	electroni Informatio	cally file Form 88 on Return for Trai	68 to nsfers				
Part I	Automatic 3-Month Extension of Time	e. Only submit	original (no copies needed)							
	on required to file Form 990-T and requesting an a		nth extension check this box	and comp	olete	▶ []				
All other cortax returns.	rporations (including 1120-C filers), partnerships, F	REMICs, and tr	usts must use Form 7004 to requ	iest an ex	tension of time to	o file income				
Type or print	Name of exempt organization KODALI FAMILY PRIVATE FOU		***************************************	Emplo 56 - 2	on number					
File by the due date for	Number, street, and room or suite no If a PO. be 290 ROYAL SUNSET DRIVE	ox, see instruct	ions							
filing your return See instructions.		City, town or post office, state, and ZIP code. For a foreign address, see instructions								
Enter the R	eturn code for the return that this application is for	(file a separate	application for each return)			04				
Application	1	Return	Application			Return				
ls For		Code	Is For			Code				
Form 990		01	Form 990-T (corporation)		07					
Form 990-E		02	Form 1041-A			08				
Form 990-E		03	Form 4720			09				
Form 990-F	**-'- 	04	Form 5227		10					
	(sec 401(a) or 408(a) trust)	05	Form 6069		11					
Form 990-1	(trust other than above)	06	Form 8870			12				
Telepho	one No		FAX No >			- n				
	rganization does not have an office or place of bus ifor a Group Return, enter the organization's four c			•		► ∐ . If this is				
	le group, check this box	<u> </u>	part of the group, check this box			and attach				
	ne names and EINs of all members the extension is	ш .	sart of the group, enough the box	•] 44 44077				
1 I reques	st an automatic 3-month (6 months for a corporation and automatic 3-month (6 months for a corporation and automatic 3-month (6 months for a corporation and automatic 3-month (6 months for a corporation and automatic 3-month (6 months for a corporation and automatic 3-month (6 months for a corporation and automatic 3-month (6 months for a corporation and automatic 3-month (6 months for a corporation and automatic 3-month (6 months for a corporation and automatic 3-month (6 months for a corporation and automatic 3-month (6 months for a corporation and automatic 3-month (6 months for a corporation and automatic 3-month (6 months for a corporation and automatic 3-month (6 months for a corporation and automatic 3-month (6 months for a corporation and automatic 3-month (6 months for a corporation and automatic 3-month (6 months for a corporation and automatic 3-month (6 months for a corporation and automatic 3-month (6 months for a corporation and automatic 3-months for a corporation and automatic 3-months (6 months for a corporation and automatic 3-months for a corporation and automatic 3-months (6 months for a corporation and automatic 3-months for a corporation and automatic 3-months (6 months for a corporation and automatic 3-months for a corporation and automatic 3-months (6 months for a corporation and automatic 3-months for a corporation and automatic 3-months (6 months for a corporation and automatic 3-months for a corporation and automatic 3-months (6 months for a corporation and automatic 3-months for a corporation and automatic 3-months (6 months for a corporation and automatic 3-months for a corporation and automatic 3-months (6 months for a corporation and automatic 3-months for a corporation and automatic 3-months (6 months for a corporation and automatic 3-months for a corporation and automatic 3-months (6 months for a corporation and automatic 3-months for a corporation and automatic 3-months (6 months for a corporation and automatic 3-months for a corporation and automatic 3-months (6 months for a co	n required to			extension is					
	organization's return for. calendar year 20 1 0 or									
		, 20 , and	ending	, 20						
2 If the ta	x year entered in line 1 is for less than 12 months,	check reason	☐ Initial return ☐ Final re	turn 📗	Change in accou	unting period				
	pplication is for Form 990-BL, 990-PF, 990-T, 472	0, or 6069, ent	er the tentative tax,		· · · · · · · · · · · · · · · · · · ·					
	y nonrefundable credits. See instructions			3a \$		22_				
	pplication is for Form 990-PF, 990-T, 4720, or 606					•				
	ed tax payments made. Include any prior year over			3b \$	<u> </u>	0				
	e due. Subtract line 3b from line 3a Include your p		iis ioini, ii requirea, by using	3c \$		22				
	(Electronic Federal Tax Payment System). See inst you are going to make an electronic fund withdraw		m 8868, see Form 8453-FO and	<u> </u>						

for payment instructions.