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Form **990-PF**

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

2010

Departn Internal	nent of the Treasury Revenue Service	Note. The founda	ation m	ay be able to use a copy of this	s return to satisfy s	state rep	ortin	g requirements	
	lendar year 2010, or				, and ending			- · · · · · · · · · · · · · · · · · · ·	
G C	neck all that apply:	Initial return	Init	ial Return of a former p	oublic charity			F	ınal return
		Amended return	1	Address	change	Nar	ne	change	
T.7							Α	Employer identification	number
wayı	ne H. Towne Fa D. Box 16369	amily Foundat	clon	l			_	77-0454941	
	sno, CA 93755-	-6369					В	Telephone number (see t	•
	,						c	(559) 248-1 If exemption application	
							D		· · ·
H (Check type of organiz	zation: X Sectio	n 50	(c)(3) exempt private t	foundation			2 Foreign organizations m	eeting the 85% test, check
	Section 4947(a)(1) nonexempt charita	able t	rust Other taxable	private founda	ation	_	here and attach compute	ation.
	Fair market value of all ass (from Part II, column (c), lii		_	counting method. XC	ashAcc	rual	E	If private foundation sta under section 507(b)(1)	(A), check here
		1		Other (specify)	,-,,		F	If the foundation is in a	60-month termination
Part			art I,	column (d) must be or	n cash basis) I			under section 507(b)(1)	(B), check here.
Sic. es i.f		e total of amounts #	n	(a) Revenue and expenses per books	(b) Net inve		nt	(c) Adjusted net	(d) Disbursements for charitable
	colūmns (b), (c),	and (d) may not ne	eces-	expenses per books	i i i con	ıc		income	purposes
	sarily equal the a	amounts in column (ons))	(a)						(cash basis only)
	1 — —	, grants, etc, received (att	-	5,945.			·		
		foundn is not req to att So		fred to be to be to be	:r-,	Ĩ.,	_	5.14 75 11,772	**************************************
	cash investme	vings and temporar ents	у	3.			3.	3	
		erest from securities.		29,112.	2	9,11	2.	29,112	
	5a Gross rents b Net rental income	•		~~ · · · · · · · · · · · · · · · · · ·				· · · · · · · · · · · · · · · · · · ·	1
ь	or (loss)		•••	- 1 1 1 22 - 12 12 1	<u> </u>				
R E V	D Gross sales price f	m sale of assets not on line for all	e 10			~		. · · · · · · · · · · · · · · · · · · ·	
	7 Capital gain net in	come (from Part IV, line 2))	· · · · · · · · · · · · · · · · · · ·	TIS			<u></u>	
E N U	8 Net short-term			1		· · · · · · · · · · · · · · · · · · ·			
E	9 Income modifi	ications							
	10a Gross sales less returns and allowances			_	,			ı	
	b Less Cost of goods sold.			,		··			
	c Gross profit/(loss	(att sch)			}		٠,		· · · · · · · · · · · · · · · · · · ·
	11 Other income	(attach schedule)							
	12 Total Add line	no 1 through 11		25 060	2/	A 11	_	00 115	
		es 1 through 11 .	etc	35,060. 0.		9,11	<u>5.</u>	29,115	·
	14 Other employee sa								
	15 Pension plans	, employee benefits	s						
A D M	16a Legal fees (attach								
M	b Accounting fees (a	· · · · · · · · · · · · · · · · · · ·	t 1	1,150.		1,15	0.		
O İ	c Other prof fees (a	ttach sch)							<u> </u>
O P S T R A T	18 Taxes (attach schedule)	(see instr) See Str	n 2	35.		3	5.		
R R	19 Depreciation (attach					.		<u> </u>
	sch) and deple	etion							
N V G E	20 Occupancy 21 Travel, conference	ences, and meeting	s.				_	· · · · · · · · · · · · · · · · · · ·	
A E N X D P	22 Printing and p	ublications							
	23 Other expense	es (attach schedule)							
E N S	24 Tatal	m and administration 41							
Ĕ		i g and administrativ d lines 13 through 2		1,185.		1,18	5.		
•	25 Contributions, gifts	s, grants paid Part	XV	34,945.	,				34,945.
	26 Total expense	s and disbursemen	ıts. [26 120		. 10			
	Add lines 24 a 27 Subtract line 2		_	36,130.	~ · · · ·	1,18	<u>)</u>	0	34,945.
	a Excess of reve	enue over expenses	s		-		,		`
	and disburser		.		<u>~</u>	7 00			,
	D Net investment inc	ome(if negative, enter -0-)		2	7,93	U.	'	1

C Adjusted net income (if negative, enter -0-)

BAA For Paperwork Reduction Act Notice, see the instructions.

TEEA0504L 07/23/10

Form 990-PF (2010)

SCANNED MAY 17 2011

(see the instructions) 921,484 920,414 Rantilli Analysis of Changes in Net Assets or Fund Balances 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) 921,484. Enter amount from Part I, line 27a 2 -1,070. 3 Other increases not included in line 2 (itemize) 3 920,414 Add lines 1, 2, and 3 4 Decreases not included in line 2 (itemize) 5 Total net assets or fund balances at end of year (line 4 minus line 5)- Part II, column (b), line 30 6 920,414.

921,484

920,414

Total net assets or fund balances(see the instructions)

Total liabilities and net assets/fund balances

R

i i di	(a) List and describ	the kind(s) of property sold (e.g., i use; or common stock, 200 shares Mi	eal estate,	(b) How ac	hase	(C) Date acquired (month, day, year)	(d) Date sold (month, day, year)
	N/A	<u> </u>		D — Dona	ton		
b							
	<u> </u>					<u> </u>	<u> </u>
	<u>-</u>		-			 	
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other bas plus expense of sal			(h) Gain or (e) plus (f) m	
		· · · · · · · · · · · · · · · · · · ·				(7)	
<u>a</u>	· · · · · · · · · · · · · · · · · · ·						
	· · · · · · · · · · · · · · ·						· · · · · · · · · · · · · · · · · · ·
		 					
e				-			
`		ng gain in column (h) and owned by	the foundation on 12/31/69			(I) Garne (Cale	ıma (b)
	(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column over column (j), if a			(I) Gains (Cologain minus column (nan -0-) or Losses (fr	k), but not less
а	1						
b	<u>. </u>						
	·						
d	<u> </u>						
e	·						
2	Capital gain net income or (net	capital foss).	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) a	and (6):				
	If gain, also enter in Part I, line	8, column (c) (see the instructions).	If (loss) enter .0.				
	ın Part I, line 8		` .;;	<u></u>	3		
Par	tV数 Qualification Under	Section 4940(e) for Reduced	Tax on Net Investmer	nt Incom	1e		
Was	es,' the foundation does not qual	tion 4942 tax on the distributable aming under section 4940(e). Do not connected to the column for each year; see the	nplete this part.		s.	. Yes	X No
	(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable use ass			(d) Distribution umn (b) divided	
	2009	42,862.	704	,226.			0.060864
	2008	55,536.		3,424.			0.063950
	2007	46,404.		1,359.			0.040908
	2006	45,414.	993	3,301.		_	0.045720
	2005	44,500.	940	7,468.	•		0.047317
2	Total of line 1, column (d)				2		0.258759
	Average distribution ratio for th	e 5-year base period— divide the tota					
	number of years the foundation	has been in existence if less than 5	years	}	3		0.051752
4	Enter the net value of nonchari	table-use assets for 2010 from Part >	(, line 5	}	4		802,457.
5	Multiply line 4 by line 3				5		41,529.
6	Enter 1% of net investment inc	ome (1% of Part I, line 27b)]	6		279.
7	Add lines 5 and 6 .			. [7		41,808.
8	Enter qualifying distributions fro	om Part XII, line 4			8		34,945.
	If line 8 is equal to or greater the Part VI instructions.	nan line 7, check the box in Part VI, I	ine 1b, and complete that pa	art using a	1% t	ax rate. See the	

•		• .
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Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948- see	the instruc	:tions)
1 a Exempt operating foundations described in section 4940(d)(2), check here		***************************************
Date of ruling or determination letter (attach copy of letter if necessary— see instr.)	1	
b Domestic foundations that meet the section 4940(e) requirements in Part V,	1	559
check here ▶ and enter 1% of Part I, line 27b	7.7	
c All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, column (b).		
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable		
foundations only. Other's enter -0-)	2	0
3 Add lines 1 and 2	3	559
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	0
5 Tax based on investment incomeSubtract line 4 from line 3. If zero or less, enter -0	5	559
6 Credits/Payments:		
a 2010 estimated tax pmts and 2009 overpayment credited to 2010 6a 361.		
b Exempt foreign organizations – tax withheld at source 6b		
c Tax paid with application for extension of time to file (Form 8868) 6c		
d Backup withholding erroneously withheld		
7 Total credits and payments. Add lines 6a through 6d	7	361
8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached.	8	
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	198
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter theamount overpaid .	10	
11 Enter the amount of line 10 to be: Credited to 2011 estimated tax.	11	
Part VII-A Statements Regarding Activities		10
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		Yes No
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?		1b X
If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any materials pull or distributed by the foundation in connection with the activities	blished	
c Did the foundation file Form 1120-POL for this year?		1c X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:	^	
(1) On the foundation . ►\$	0.	
foundation managers >\$ 0.	OIT	
2 Has the foundation engaged in any activities that have not previously been reported to the IRS?		2 X
If 'Yes,' attach a detailed description of the activities		
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, article of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes	s	3 X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a X
h If 'Vec ' has it filed a tay return on Form 990. T for this year?		4b N/A
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5 X
If 'Yes,' attach the statement required by General Instruction T	• •	
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:		
By language in the governing instrument, or		
		4
 By state legislation that effectively amends the governing instrument so that no mandatory directions that ci with the state law remain in the governing instrument? 	onflict	6 X
7 Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV.	•	7 X
8a Enter the states to which the foundation reports or with which it is registered (see the instructions)		
		(A) 数据 数据

10 Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses See Statement 3 10 X

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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.

8b X

9

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*

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charitable purposes?

the tax year beginning in 2010?

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4a

4b

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

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

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PartivII-B Statements Regarding Activit	ies for Which Forn	n 4720 May Be Req	uired (continued	2
5a During the year did the foundation pay or incu	ir any amount to:			
(1) Carry on propaganda, or otherwise attemp	•	. , , , , ,	Yes	No No
(2) Influence the outcome of any specific pub on, directly or indirectly, any voter registra	ation drive?	•	<u> </u>	ΩNo No
(3) Provide a grant to an individual for travel,	study, or other similar	purposes?	Yes [X	∐ No
(4) Provide a grant to an organization other to in section 509(a)(1), (2), or (3), or section	han a charitable, etc, o i 4940(d)(2)? (see instr	rganization described ructions)	Yes X	ΩNo No
(5) Provide for any purpose other than religio educational purposes, or for the prevention	us, charitable, scientifi n of cruelty to children	c, literary, or or or animals?	Yes X	(No
b If any answer is 'Yes' to 5a(1)-(5), didany of t described in Regulations section 53.4945 or in (see instructions)?	he transactions fail to on a current notice regar	qualify under the except ding disaster assistance	ions e	5b N/A
Organizations relying on a current notice rega	rding disaster assistan	ce check here	. ▶[
c If the answer is 'Yes' to question 5a(4), does tax because it maintained expenditure respon	the foundation claim ex sibility for the grant?	kemption from the	N/A Yes	
If 'Yes,' attach the statement required by Regi			٠.,,٠٠٠ ال	
6a Did the foundation, during the year, receive ar on a personal benefit contract?			. Yes	(No
b Did the foundation, during the year, pay premi	iums, directly or indirec	ctly, on a personal bene	fit contract?	6b X
If 'Yes' to 6b, file Form 8870			🗀	7.
7a At any time during the tax year, was the found				No -
b If yes, did the foundation receive any proceed Part:VIII Information About Officers, D				Transpose 7b
and Contractors	irectors, Trustees,	roundation Manag	gers, mignly Palo	Employees,
1 List all officers, directors, trustees, foundation	n managers and their	compensation (see inst	nuctions)	
	(b) Title and average		(d) Contributions to	(e) Expense account,
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation	other allowances
See Statement 4			3311190110011011	
		0.	0.	0.
2 Compensation of five highest-paid employee	s (other than those inc	luded on line 1 see inst	ructions). If none, ent	ter '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	-
None			SSIMPORISATION	
				
				
	-			<u> </u>
				
Total number of other employees paid over \$50,000 BAA			<u> </u>	Form 990-PF (2010)

77-0454941

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Form 990-PF (2010) Wayne H. Towne Family Foundation 77-0454941 Part XIII Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1 Fair market value of assets not used a Average monthly fair market value of	i (or held for use) directly in carryin	ig out charitable, etc,	purposes:	1 a	792,387.
,			•	1 b	22,290.
b Average of monthly cash balances					22,290.
c Fair market value of all other assets	(see instructions)			1c	014 (77
d Total (add lines 1a, b, and c)				1 d	814,677.
e Reduction claimed for blockage or o	ther factors reported on lines Ta an	1 1			
(attach detailed explanation)		1e	0.	_	•
2 Acquisition indebtedness applicable	to line 1 assets			2	0.
3 Subtract line 2 from line 1d	•			3	814,677.
4 Cash deemed held for charitable act (for greater amount, see instructions	ivities. Enter 1-1/2% of line 3			4	12,220.
5 Net value of noncharitable-use asse	etsSubtract line 4 from line 3. Enter	here and on Part V	line 4	5	802,457.
6 Minimum investment return Enter 5	% of line 5			6	40,123.
PartXI Distributable Amount (see instructions) (Section 49	942(j)(3) and (j)(5) private opera	ating four	ndations
and certain foreign organ			mplete this pa		
1 Minimum investment return from Pai	rt X, line 6			1	40,123.
2a Tax on investment income for 2010	from Part VI, line 5	2a	559.		
b Income tax for 2010. (This does not	include the tax from Part VI.)	2b			
c Add lines 2a and 2b				2c	559.
3 Distributable amount before adjustm	ents. Subtract line 2c from line 1			3	39,564.
4 Recoveries of amounts treated as qu				4	
5 Add lines 3 and 4				5	39,564.
6 Deduction from distributable amount	(see instructions)			6	
7 Distributable amountas adjusted. So	·	e and on Part XIII. III	ne 1	7	39,564.
		,		- 1	
<u> Part XII</u> Qualifying Distributions	(see instructions)				
4 A					
1 Amounts paid (including administrati a Expenses, contributions, gifts, etc —	total from Part I. column (d). line 2	ible, etc, purposes:		1a	34,945.
b Program-related investments – total				1b	<u> </u>
2 Amounts paid to acquire assets used		ng out charitable, etc	, purposes	2	
3 Amounts set aside for specific charit			' '		
a Suitability test (prior IRS approval re				3a	
b Cash distribution test (attach the req	•			3b	
4 Qualifying distributions Add lines 1	•		t XIII, line 4	4	34,945.
5 Foundations that qualify under section Enter 1% of Part I, line 27b (see ins	on 4940(e) for the reduced rate of the tructions	ax on net investment	income.	5	
6 Adjusted qualifying distributions Su	•		·	6	34,945.
, , , , ,					•
Note. The amount on line 6 will be a qualifies for the section 4940(used in Part V, column (b), in subse (e) reduction of tax in those years.	equent years when c	alculating whether 	the founda	ation

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Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2009	(c) 2009	(d) 2010
Distributable amount for 2010 from Part XI, line 7				39,564.
2 Undistributed income, if any, as of the end of 2010.	,	· · · · · · · · · · · · · · · · · · ·		33,304.
a Enter amount for 2009 only	i.		34,945.	
b Total for prior years: 20, 20, 20	,	0.		
3 Excess distributions carryover, if any, to 2010:		-		
a From 2005	_			
b From 2006 .				
c From 2007			!	
d From 2008				
e From 2009				
f Total of lines 3a through e	0.		1	··
4 Qualifying distributions for 2010 from Part				
XII, line 4: ► \$ 34,945.		}		
a Applied to 2009, but not more than line 2a	· · · · · · · · · · · · · · · · · · ·		34,945.	
b Applied to undistributed income of prior years	,	ا م	'	
(Élection required – see instructions)		0.	· · · · · · · · · · · · · · · · · · ·	
c Treated as distributions out of corpus	0.	,		
(Election required – see instructions)	<u>U.</u>			
d Applied to 2010 distributable amount e Remaining amount distributed out of corpus	0.	,		0.
5 Excess distributions carryover applied to 2010	0.			0.
(If an amount appears in column (d), the		· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·
same amount must be shown in column (a))			,	-
C. Franciska maddadal of a charles as lesson as		'		, - •
6 Enter the net total of each column as indicated below:	ļ			
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.		•	,
b Prior years' undistributed income. Subtract				.~
line 4b from line 2b		0.		
c Enter the amount of prior years' undistribut-				
ed 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				İ
line 2a. Taxable amount — see instructions		· · · · · · · · · · · · · · · · · · ·	0.	
f Undistributed income for 2010. Subtract lines	'			
4d and 5 from line 1. This amount must be distributed in 2011				39,564.
7 Amounts treated as distributions out of				39,304.
corpus to satisfy requirements imposed				
by section 170(b)(1)(F) or 4942(g)(3) (see instructions)	0.			
` '			 	······································
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				
b Excess from 2007	j	ľ		
c Excess from 2008				
d Excess from 2009		,		ļ
e Excess from 2010				

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PartXIX Private Operating Foundations (see instructions and Part VII-A, question 9) N/A						
1a If the foundation has received a ruling or is effective for 2010, enter the date of the	ruling	•		· · •]	4942(j)(5)	
b Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or						
2a Enter the lesser of the adjusted net	Tax year		Prior 3 years			
income from Part I or the minimum 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						
 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:						
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)						
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)						
(3) Largest amount of support from an exempt organization						
(4) Gross investment income						
Supplementary Information assets at any time during the	Complete this) ne year — see ir	part only if the structions.)	organization h	ad \$5,000 or mo	re in	
Information Regarding Foundation Mana a List any managers of the foundation who close of any tax year (but only if they hav None	have contributed m	ore than 2% of the than \$5,000). (See	total contributions section 507(d)(2).)	received by the found	dation before the	
b List any managers of the foundation who a partnership or other entity) of which the None	own 10% or more of foundation has a 1	of the stock of a cor 0% or greater inter	poration (or an equest.	ally large portion of	the ownership of	
2 Information Regarding Contribution, Gra	nt Gift Loan Scho	larshin etc Progra			· · · · · · · · · · · · · · · · · · ·	
Check here X if the foundation only requests for funds. If the foundation make	makes contributions	to preselected cha	arıtable organization	ns and does not acce ganizations under oth	pt unsolicited er conditions,	
complete items 2a, b, c, and d. a The name, address, and telephone numb	er of the nerson to	whom applications	should be addressed			
a The Hame, address, and telephone humb	er of the person to	whom applications	siloulu de addresse	·u.		
b The form in which applications should be	submitted and info	mation and materia	als they should inclu	ude:		
c Any submission deadlines:						
						
d Any restrictions or limitations on awards,	such as by geograp	phical areas, charita	ible fields, kinds of	institutions, or other	factors:	

PartXV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Foundation Recipient Purpose of grant or contribution show any relationship to status of recipient Amount any foundation manager or substantial contributor Name and address (home or business) a Paid during the year Howard Woodside Sierra College Foundation Alma Mater 2,745. Scholarship Fund 5000 Rocklin Road Rocklin, CA 95677 None Exhibits 200. Maywood Cemetery P. O. Box 5 Maywood, NE 69038 Valley Public Television None Educational 10,000. 1544 Van Ness Avenue programming Fresno, CA 93721 Alma Mater Calif. State Univ. San Jose Endowment towards 20,000. One Washington Square scholarships for San Jose, CA 95192 accounting majors. Scottish Rite Foundation None Memorial for 2,000. 1455 "L" Street deceased members of the Scottish Rite. Fresno, CA 93721 34,945. Total **b** Approved for future payment 3ь Total

Part XVI Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrela	ted business income	Exclude	d by section 512, 513, or 514	(e)
•	(a) Business code	(b) Amount	(c) Exclu- sion	(d) Amount	Related or exempt function income (see the instructions)
1 Program service revenue:	ļ		code		
a					
b					
c			ļ		
d			ļ		
e					
f					
g Fees and contracts from government agence	es				
2 Membership dues and assessments			<u> </u>		
3 Interest on savings and temporary cash investments					3.
4 Dividends and interest from securities					29,112.
5 Net rental income or (loss) from real estate:	2		A17.09		
a Debt-financed property .	<u> </u>				
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income .			<u> </u>		
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:			以外数		
a			l		
b					
С					
d					
е					
Subtotal. Add columns (b), (d), and (e)					29,115.
13 Total. Add line 12, columns (b), (d), and (e)				13	29,115.
(See worksheet in line 13 instructions to verify cal-	culations.)			,	

Rate XVI BE 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). (See the instructions.)
N/A	

Form 990-PF (2010) Wayne H. Towne Family Foundation 77-0454941 [PartXXVII : Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

									Yes	No
1 Di	d the	organization directly	or indirectly	engage in any of the fol other than section 501(c	lowing wit	h any other organizat	ion 5 5 2 7			
re	lating	to political organizat	tions?	Julei ulari Section 301(c)(3) organ	izations) or in section	1 327,			
	_			a noncharitable exemp	t organiza	ation of:		ľ		
(1) Casi	h				• •		1a (1)		X
(2) Othe	er assets				•		1a (2)		X
b O	ther tra	ansactions:								
ď) Sale	es of assets to a non	charitable ex	empt organization				1b(1)		X
- '	•			able exempt organization	n			1b (2)		X
•	•	tal of facilities, equip				•		1b (3)		X
•	•	nbursement arrangei	•				• ••	1b (4)		X
	•	ns or loan guarantee		•				1b (5)		$\frac{x}{x}$
•	•	•		nip or fundraising solicit	atione	••		1b (6)	\vdash	$\frac{x}{X}$
•	•			sts, other assets, or par			• •	1c		$\frac{\mathbf{x}}{\mathbf{x}}$
C 31	lailiy	or racinges, equipme	ent, maining n	sts, other assets, or par	u employe			10		
d If	the an	swer to any of the a	bove is 'Yes.'	complete the following	schedule.	Column(b) should alv	wavs show the f	aır market valu	e of	
th	e good	ds, other assets, or s	ervices giver	complete the following by the reporting foundation	tion. If th	e foundation received	l léss than fair r	market value in		
	<u> </u>			show in column(d) the va						
(a) Line	no.	(b) Amount involved	(c) Name	of noncharitable exempt organ	ization	(d) Description of tr	ansfers, transaction	s, and sharing arra	ngement	<u>s</u>
N/A				 						
										
										
				<u> </u>						
		 								
						· · · · · · · · · · · · · · · · · · ·				
							-			
		*					-			
						············				
2-1-	4h a 6a		malina attica affili							
∠a is de	escribe	d in section 501(c) o	of the Code (c	lated with, or related to, other than section 501(c)	one or m	ore tax-exempt organ section 527?	iizations	Yes	X :	No
		complete the follows	,		(-), -:				٠ نت ،	•••
		Name of organization		(b) Type of org	anization		(c) Description	of relationship		
N/A		Traine of organization		(a) Type of org	<u>annearon</u>		(c) Bescription	or relationship		
,					- · · · · · · · · · · · · · · · · · · ·					
										
	-							 		
Т	Hadar a	analtae of namuni I dadar	e that I have evan	anned thus return undustring a con-		adulas and statements and	to the best of an law		A A	
	correct,	and complete Declaration	of preparer (other	nined this return, including according to the fax payer or fiduciary) is ba	npanying scri ised on all in	formation of which preparer	to the best of my knowledge	owledge and belier, i	t is true,	
Sign		1 1				ríal				
Here	\	10011	(111)			1/5/4	▶ Presid	lent		
	Sign	nature of officer or trustee				Date	Title			
		Print/Type preparer's nam	ne	Dam's signature	/h 1	Date	Check if X	If PTIN		
D -: -:		PATRICIA A. TOW	NE. C.P.A	PATRICIA A.	TOWNE, C	P.A. + 5/3/1	self-employe	ا ا ا		
Paid	***			Towne, CPA			Firm's EIN ► N			
Prepai		_	•	Vishon Avenue		<u> </u>	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
Use O	nıy		resno, CA 9				H _{Phone no /}	5591 2 <i>44</i> _610	5	
BAA	-	<u> </u>	.,				Phone no (559) 244-519		2010
DAA								Form 99	U-PF ()	2010)

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, 990-EZ, or 990-PF

OMB No 1545-0047

2010

Name of the organization		Employer Identification number
Wayne H. Towne Family For	77-0454941	
Organization type (check one):		-
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trustnot treate	ed as a private foundation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated a	s a private foundation
	501(c)(3) taxable private foundation	
Check if your organization is covered b Note . Only a section 501(c)(7), (8), or (y the General Rule or a Special Rule (10) organization can check boxes for both the General Rule	and a Special Rule. See instructions.
General Rule		
For an organization filing Form 990 contributor. (Complete Parts I and I	, 990-EZ, or 990-PF that received, during the year, \$5,000 o ll.)	r more (in money or property) from any one
Special Rules		
509(a)(1) and 170(b)(1)(A)(vi), and	n filing Form 990 or 990-EZ, that met the 33-1/3% support to received from any one contributor, during the year, a contril 90, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete P	oution of the greater of \$5,000 or
aggregate contributions of more that	organization filing Form 990 or 990-EZ, that received from a an \$1,000 for use <i>exclusively</i> for religious, charitable, scientifi or animals. Complete Parts I, II, and III.	any one contributor, during the year, c, literary, or educational purposes, or
contributions for use exclusively for If this box is checked, enter here the	organization filing Form 990 or 990-EZ, that received from a religious, charitable, etc, purposes, but these contributions are total contributions that were received during the year for a parts unless the General Rule applies to this organization be	did not aggregate to more than \$1,000. arex <i>clusively</i> religious, charitable, etc.
religious, charitable, etc, contributio	ons of \$5,000 or more during the year	▶ \$
990-PF) but it must answer 'No' on Par	vered by the General Rule and/or the Special Rules does no t IV, line 2 of their Form 990, or check the box on line H of i the filing requirements of Schedule B (Form 990, 990-EZ, o	ts Form 990 EZ, or on line 2 of its Form
BAA For Paperwork Reduction Act No. 990EZ, or 990-PF.	otice, see the Instructions for Form 990, Sch	edule B (Form 990, 990-EZ, or 990-PF) (2010

	B (Form 990, 990-EZ, or 990-PF) (2010)	. Р	age 1	of 1	of Part I
Name of org			1	Identification number	er
Wayne	H. Towne Family Foundation		11-04	154941	 .
(Parti)	Contributors (see instructions.)				
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregat contributio	e ons	(d) Type of con	
1_	Wayne_H. Towne			Person X Payroll	
	85 East Garland Avenue	\$5	<u>, 945 .</u>	Noncash (Complete Pa	rt II if there
	Fresno, CA 93704	·		is a noncash c	ontribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contribution	e ns	(d) Type of con	
		\$		Person Payroll Noncash	
				(Complete Pa is a noncash c	ontribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributio	ns	(d) Type of con	
		\$	- -	Person Payroll Noncash (Complete Pa	rt II if there
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributio	e	(d) Type of con	
		\$		Person Payroll Noncash (Complete Pa	rt II if there
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributio	ns	(d) Type of con	
		\$		Person Payroll Noncash (Complete Pa	
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributio	e ns	(d) Type of con	tribution
		\$	-	Person Payroll Noncash (Complete Pa	rt II if there

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

of 1 ___ of Part II

Name of organization Wayne H. Towne Family Foundation Employer Identification number 77-0454941

Partill Noncash Property (see instructions.)

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	N/A		
		\$\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$\$	_
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$\$	

BAA

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

Name of organization

Employer identification number

Wayne H. Towne Family Foundation

77-0454941

Part III	Exclusively religious, charitable, e organizations aggregating more t	etc, individual contributionan \$1.000 for the year.	ns to secti	on 501(c)(7), (8), or (10)	
	For organizations completing Part III, enter contributions of \$1,000 or less for the year.	total of <i>exclusively</i> religious, cha	arıtable, etc.		
(a) No. from Part I	(b)	(c) Use of gift		(d) Description of how gift is held	
	(e) Transfer of gift Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held	
	(e) Transfer of gift Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee		
(a) No. from Part !	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held	
	(e) Transfer of gift Transferee's name, address, and ZIP + 4		Rela	Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held	
	(e) Transfer of gift Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee		

2010	Federal Statements	Page 1			
Wayne H. Towne Family Foundation					
Statement 1 Form 990-PF, Part I, Line 16b Accounting Fees					
Accounting Fees	(a) (b) Net (c) Expenses Investment Adjuste per Books Income Net Income \$ 1,150. \$ 1,150. \$ 1,150. \$ 1,150. \$ \$ 1,150. \$ \$ 1,150.	(d) Charitable Purposes 0. \$ 0.			
Statement 2 Form 990-PF, Part I, Line 18 Taxes					
Franchise Tax Board . Registry of Charitable Trust	(a) (b) Net (c) Expenses Investment Adjuste per Books Income Net Income \$ 10. \$ 10. 25. 25. Total \$ 35. \$ 35. \$	(d) Charitable Purposes 0. \$ 0.			
Statement 3 Form 990-PF, Part VII-A, Line 10 Substantial Contributors During the	Tax Year				
Name of Substantial Contribu	Name of Substantial Contributor Address of Substantial Contributor				
Wayne H. Towne	85 East Garland Avenue Fresno, CA 93704				
Statement 4 Form 990-PF, Part VIII, Line 1 List of Officers, Directors, Trustees,	and Key Employees				
Name and Address	Average Hours Compen- buti	ntri- Expense ion to Account/ & DC Other			
Paul T. Chambers P. O. Box 16369 Fresno, CA 93755-6369	President \$ 0.\$	0. \$ 0.			
J. Wesley Merritt P. O. Box 16369 Fresno, CA 93755-6369	Secretary 0.	0. 0.			

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2010

Federal Statements

Page 2

Wayne H. Towne Family Foundation

77-0454941

Statement 4 (continued)
Form 990-PF, Part VIII, Line 1
List of Officers, Directors, Trustees, and Key Employees

Name and Address	Title and Average Hours <u>Per Week Devoted</u>	Compen- sation	Contri- bution t EBP & DO	o Account/
Mary J. Towne-Merritt P. O. Box 16369 Fresno, CA 93755-6369	Vice President O	\$	0.\$0	. \$ 0.
Janet L. Towne P. O. Box 16369 Fresno, CA 93755-6369	Director 0		0. 0	. 0.
Patricia A. Towne P. O. Box 16369 Fresno, CA 93755-6369	Treasurer 0	ı	0. 0	0.
	Total	\$	0. \$ 0	<u>\$</u> 0.