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Form **990-PF**

Department of the Treasury Internal Revenue Service

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

OMB No 1545-0052

2010

For ca	lend	ar year 2010, or tax year	beginning		, and ending		
G Check all that apply Initial return				Initial return of a for	mer public charity	Final retur	n
			Amended return	Address change	<u> </u>	Name change	
Nam	e of fo	oundation			ļ	A Employer identificatio	n number
				NITY FOUNDATI		90-0043593	<u> </u>
Num	oer and	•	mail is not delivered to street	•		B Telephone number	- 0.6
-			GUPTA 950 TO	OWER LANE	1600	650-358-25	
City	or tov	wn, state, and ZIP code FOSTER CIT	Y, CA 9440	4		C If exemption application is D 1. Foreign organization	ns, check here
H C			X Section 501(c)(3) ex		.	Foreign organizations mechack here and attach of the control	neeting the 85% test, computation
<u> </u>		tion 4947(a)(1) nonexemp	nd of year J Accounting	Other taxable private foundate of the control of th	Accrual	E If private foundation st under section 507(b)(atus was terminated
		art II, col. (c), line 16)	· ! —	her (specify)	Accidal	1	
(<i>iii</i>		802		mn (d) must be on cash b	pasis.)	F If the foundation is in a under section 507(b)(
	rt I	Analysis of Revenue an	d Expenses	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
L	* * *]	(The total of amounts in colur necessarily equal the amount	mns (b), (c), and (d) may not ts in column (a))	expenses per books	Income	income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grant	s, etc., received	11,572.		N/A	
			n is not required to attach Sch. B				
	3	Interest on savings and tempo cash investments	orary .				
	4	Dividends and interest fro	om securities	8,696.	8,696.		STATEMENT 1
	5a	Gross rents					
	b	Net rental income or (loss)			***************************************	*	
ē		Net gain or (loss) from sale of		72,649.	,		
Revenue	b	Gross sales price for all assets on line 6a	391,047.		70 640		H
Řě	l	Capital gain net income (from	•		72,649.		
		Net short-term capital gai	in		******************************	ļ	
	1	Income modifications Gross sales less returns	1				
		and allowances			***************************************	· · · · · · · · · · · · · · · · · · ·	
	l	Less Cost of goods sold Gross profit or (loss)	L				
	11	Other income		25.	0.		STATEMENT 2
	12	Total. Add lines 1 through		92,942.	81,345	,	
	13 \	Compensation of officers, din	ectors, trustees, etc	0.	0.	1	0.
	14	Other employee salaries? Pénsion plans, employee	and wages co				
	15	Pension plans, employee	benefits] CE				
nses	16a	Legal fees-	UI.				
pe	b	Accounting feed EN	STMT 3	5,940.	0.		2,970.
ŭ	C	ourse providence	STMT 4	1,969.	1,969	,	0.
ţį	17	Interest	CMMM E	10			
st se	18	Taxes	STMT 5	10.	0		0.
a e e e e e e e e e e e e e e e e e e e	19	Depreciation and depletic	on			1	
9 5	20	Occupancy				 	-
֝֞֝֝֝֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֡֓֓֡֓֓֓֓֓֡֓֡֓֓֡֓	21	Travel, conferences, and Printing and publications			-	 	 -
9 6	23	Other expenses	STMT 6	7,278.	7,278		0.
	24	Total operating and adm		.,2.0.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
Operating and Administrative Expe		expenses. Add lines 13		15,197.	9,247	•	2,970.
jõ	25	Contributions, gifts, gran		143,200.			2,970. 143,200.
	26	Total expenses and disi					
		Add lines 24 and 25		158,397.	9,247	•	146,170.
5 —	27	Subtract line 26 from lin	e 12				
	a	Excess of revenue over expe	enses and disbursements	<65,455.			
	b	Net investment income	(if negative, enter -0-)		72,098		
000	C C	Adjusted net income or				N/A	
12-1	501 07-10	LHA For Paperwork	Reduction Act Notice, see	the instructions.		117 11	Form 990-PF (2010)

Page 2

Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of year			
column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value		
1 Cash - non-interest-bearing	350,897.	391,236.	391,236.		
2 Savings and temporary cash investments					
3 Accounts receivable ►					
Less: allowance for doubtful accounts					
4 Pledges receivable ►	_				
Less allowance for doubtful accounts					
5 Grants receivable					
6 Receivables due from officers, directors, trustees, and other					
disqualified persons					
7 Other notes and loans receivable		`			
Less allowance for doubtful accounts					
8 Inventories for sale or use	600				
8 Inventories for sale or use 9 Prepaid expenses and deferred charges	600.	600.	600.		
10a investments - 0.5 and state government obligations STMT /	298,984.	251,051.	253,123.		
b Investments - corporate stock STMT 8	67,520.	0.	100 201		
c Investments - corporate bonds STMT 9	94,364.	127,563.	128,391.		
11 Investments - land, buildings, and equipment basis					
Less. accumulated depreciation					
12 Investments - mortgage loans 13 Investments - other STMT 1	A	10 061	20 126		
	0 45,905.	19,061.	29,136.		
14 Land, buildings, and equipment basis					
Less, accumulated depreciation					
15 Other assets (describe					
46 Total agents (to be completed by all filers)	858,270.	789,511.	902 496		
16 Total assets (to be completed by all filers) 17 Accounts payable and accrued expenses	030,270.	109,311.	802,486.		
18 Grants payable					
1 ·					
20 Loans from officers, directors, trustees, and other disqualified persons Mortgages and other notes payable			İ		
21 Mortgages and other notes payable					
22 Other liabilities (describe	\				
			†		
23 Total liabilities (add lines 17 through 22)	0.	0.			
Foundations that follow SFAS 117, check here			1		
and complete lines 24 through 26 and lines 30 and 31.					
24 Unrestricted	858,270.	789,511.			
25 Temporarily restricted		, , , , , , , , , , , , , , , , , , , ,			
26 Permanently restricted			1		
Foundations that do not follow SFAS 117, check here					
and complete lines 27 through 31.					
27 Capital stock, trust principal, or current funds]		
28 Paid-in or capital surplus, or land, bldg, and equipment fund					
24 Unrestricted 25 Temporarily restricted 26 Permanently restricted Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. 27 Capital stock, trust principal, or current funds 28 Paid-in or capital surplus, or land, bldg, and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 30 Total net assets or fund balances]		
30 Total net assets or fund balances	858,270.	789,511.]		
			ŀ		
31 Total liabilities and net assets/fund balances	858,270.	789,511.			
Part III Analysis of Changes in Net Assets or Fun	d Balances				
			T		
1 Total net assets or fund balances at beginning of year - Part II, column (a)	, line 30				
(must agree with end-of-year figure reported on prior year's return)		1	858,270.		
2 Enter amount from Part I, line 27a		2	<65,455.		
3 Other increases not included in line 2 (itemize)		3	0.		
4 Add lines 1, 2, and 3	AD IIIOmeene	4	792,815.		
5 Decreases not included in line 2 (itemize) PRIOR PERIOR			3,304.		
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Par	i ii, column (b), line 30	6	789,511.		



Part IV Capital Gains a	and Losses for Tax on In	vestment	Income		•			001	JJJI Tage 0
(a) List and descr	ibe the kind(s) of property sold (e.g. rehouse, or common stock, 200 shs	., real estate,		P-	ow acquire Purchase Donation	1 1-1	Date acqu		(d) Date sold (mo , day, yr)
1a 8,000 SHS SYMAI	NTEC CORP				P	02	2/06/	09	12/14/10
	PARTNER - FROM	K-1			P	V	RIOU	IS	VARIOUS
c SEE STATEMENT	D-1				P	V	ARIOU	JS	VARIOUS
d SEE STATEMENT	D-1				P	12	2/18/	09	12/30/10
8 CASH IN LIEU					P	V	ARIOU	IS	VARIOUS
(e) Gross sales price	(f) Depreciation allowed (or allowable)		or other basis pense of sale			((h) Gain (e) plus (f)		
a 137,517.			66,93	0.					70,587.
b 1,492.									1,492.
c 247,865.			247,34	1.					524.
d 4,053.			4,12						<74.
в 120.									120.
Complete only for assets showing	ig gain in column (h) and owned by	the foundation	on 12/31/69			(I) G	ains (Col	(h) gain	minus
(I) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		ess of col (i) col. (j), if any			col (k), but not l osses (fro	less tha	n -0-) or
а									70,587.
b									1,492.
C			-						524.
d							-		<74.
8									120.
2 Capital gain net income or (net ca	If gain, also ente			}	2				72,649.
3 Net short-term capital gain or (lo				1					
if gain, also enter in Part I, line 8,		.,] [
If (loss), enter -0- in Part I, line 8					3			N/A	<u> </u>
Part V Qualification L	Inder Section 4940(e) for	r Reduced	Tax on Net	t Inv	estmen	t Inco	me		
(For optional use by domestic privat	e foundations subject to the section	4940(a) tax on	net investment ir	ncome	e)				
If section 4940(d)(2) applies, leave t	hie nart blank								
11 30Ction 4340(a)(2) applies, leave (ins part blank		,						
Was the foundation liable for the sec	ction 4942 tax on the distributable ar	mount of any ye	ar in the base pe	riod?					Yes X No
If "Yes," the foundation does not qua									
1 Enter the appropriate amount in	each column for each year, see inst	ructions before	making any entri	ies					
(a) Base period years	(b)			(c)				Distri	(d) bution ratio
Calendar year (or tax year beginn			Net value of no	oncha			(co	ol (b) di	vided by col (c))
2009		58,770.				018.			.092930
2008		55,020.			952,				.068295
2007		55,000.			,333,				.048754
2006		55,320.			,366,				.047784
2005		82,830.		1	,464,	340.			.056565
2 Total of line 1, column (d)							2		.314328
3 Average distribution ratio for the	5-year base period - divide the total	on line 2 by 5,	or by the numbe	r of ye	ears				
the foundation has been in exist	ence if less than 5 years						3		.062866
									005 070
4 Enter the net value of noncharita	ible-use assets for 2010 from Part X	, line 5					4		805,078.
									F0 (10
5 Multiply line 4 by line 3							5		50,612.
	(10) (5) (1) (5)								700
6 Enter 1% of net investment inco	me (1% of Part I, line 27b)						6		709.
T. Addition For 10							_		E1 221
7 Add lines 5 and 6							7		51,321.
8 Enter qualifying distributions fro	om Part XII, line 4						8		146,170.
If line 8 is equal to or greater that See the Part VI instructions	an line 7, check the box in Part VI, lin	ie 1b, and comp	lete that part usi	ing a 1	% tax rate				

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), or4948 - see instructions)			-00435			age 4
Date of ruling or determination letter			3 - see in	stru	ction	ıs)
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here	1a					
of Part I, line 27b 2 Tax under section 511 (domestic section 4947(a)(1) frusts and taxable foundations only. Others enter -0-) 3 Add lines 1 and 2 5 Tax based on Investment Income. Subtract line 4 from line 3.1 zero or less, enter -0- 5 Tax based on Investment Income. Subtract line 4 from line 3.1 zero or less, enter -0- 5 Tax based on Investment Income. Subtract line 4 from line 3.1 zero or less, enter -0- 5 Tax based on Investment Income. Subtract line 4 from line 3.1 zero or less, enter -0- 5 Tax based on Investment Income. Subtract line 4 from line 3.1 zero or less, enter -0- 5 Tax based on Investment Income. Subtract line 4 from line 3.1 zero or less, enter -0- 5 Tax based on Investment Income. Subtract line 4 from line 3.1 zero or less, enter -0- 5 Tax based on Investment Income. Subtract line 4 from line 3.1 zero or less, enter -0- 5 Tax based on Investment Income. Subtract line 4 from line 3.1 zero or less, enter -0- 5 Tax based on Investment Income. Subtract line 4 from line 3.1 zero or less, enter -0- 5 Tax based on Investment Income. Subtract line 4 from line 3.1 zero or less, enter -0- 5 Tax based on Investment Income. Subtract line 4 from line 3.1 zero or line 3.2 zero enter -0- 6 Better any genetity for underpayment or subtract line 4 from line 3.2 zero enter -0- 6 Better any genetity for underpayment or subtract line 4 from 220 subtraction 4 genetity or line 4 g			-			
E All other domestic foundations enter 2% of time 27b Exempt foreign organizations enter 4% of Part I, line 12, cot (b) 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 3 Add line 5 is no 2 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 5 Tax based on Investment incomes. Subtract line 4 from line 3.11 zero or less, enter -0- 5 Tax based on Investment incomes. Subtract line 4 from line 3.11 zero or less, enter -0- 5 Cendst/Payments. 2 2010 estimated tax payments and 2009 overpayment credited to 2010 6 Exempt foreign organizations - tax withheld at source 6 Tax pad with application for extension of time to the (Form 8868) 6 Exempt foreign organizations - tax withheld at source 7 Tax daw in a policitor for extension of time to the 16 form 8868) 8 2 2,000. 8 Enter any apenatry for underpayment of estimated tax Check here	þ	, , , , , , , , , , , , , , , , , , , 			72	21.
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 3 7.21. 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 5 Tax based on investment income. Subtract line 4 from line 3. It zero or less, enter -0- 5 Tax based on investment income. Subtract line 4 from line 3. It zero or less, enter -0- 5 Tax based on investment income. Subtract line 4 from line 3. It zero or less, enter -0- 5 Tax based on investment income. Subtract line 4 from line 3. It zero or less, enter -0- 5 Textify and the companyments and 2009 overpayment credited to 2010 6 Esempt foreign organizations - tax withheld at source 8 B 1 Tax due. If the total of line 5 Sand 8 subtract line 4 from 220 is attached 6 Enter any penalty for underpayment of estimated tax. Poster amount owed 8 Tax due. If the total of lines 5 and 8 sero is than line 7, enter amount owed 9 Tax due. If the total of lines 5 and 8 sero is than line 7, enter amount owed 10 Overpayment. If line 7 is more than the total or lines 5 and 8 sero is than line 7, enter amount owed 10 Overpayment. If line 7 is more than the total or lines 5 and 8 sero is than line 7, enter amount owed 10 Overpayment. If line 7 is more than the total or lines 5 and 8 sero is than line 7, enter amount owed 10 Overpayment. If line 7 is more than the total or lines 5 and 8 sero is than line 7, enter amount owed 10 Overpayment. If line 7 is more than the total or lines 5 and 8 sero is than line 7, enter amount overpaid 11 Overpayment. If line 7 is more than the total or lines 3 and 8 is more than line 7, enter amount overpaid 12 overpayment. If line 7 is more than the total or lines 3 and 8 is more than line 7, enter amount overpaid 13 overpayment. If line 8 is more than line 7 is enter amount overpaid 14 Overpayment. If line 8 is more than line 7 is enter amount overpaid 15 overpayment. If line 8 is more than line 7 is enter amount overpaid 16 overpayment. If line 8 is more than line 7 is enter amou						
3 Add lines 1 and 2 Subtills A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- 5 Credits/Payments. 5 2010 estimated tax payments and 2009 overpayment credited to 2010 8 Earph foreign organizations - tax withheld at source 1 Tax pad with application for eatherson of time to the (Form 8868) 6 Backup withholding erroneously withheld 7 Total credits and payments Add lines 6 shrough 60 8 2 2. 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount of were a first any appearing for underspanned of estimated tax. Check here ☐ if Form 2220 is attached 8 2 2. 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount of were 1 line 7 is more than line 10 to be 'Credited to 2011 estimated tax.' 1 Derpt YII-A Statements Regarding Activities 1 2 Juring the lax year, did the foundation attempt to influence any anional, state, or local legislation or did it participate or intervene in any political campaign? 1 Did it spend more than \$100 duning the year (either directly or indirectly) for political purposes (see instructions for definition)? 1 If the answer is "Yes" to 1a or 1b, affach a detailed description of the activities and copies of any materials published or distributed by the foundation in Form 1120-POL for the year? 2 Enter the rembursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers b 0 0 (2) On foundation ma						
4 Subtlité à (morme) bax (domestre section 4947(b)(1) trusts and taxable foundations only. Others enter-0-) 5 Tax based on investment income. Subtract line 4 from line 3. it zero or less, enter-0- 6 Credits/Payments. 2 2010 estimated tax payments and 2009 overpayment credited to 2010 6 Bax on programations - tax withheld at source 6 Tax paid with application for extension of time to file (Form 8968) 6 Credits/Payments. 8 Desempt foreign organizations - tax withheld at source 6 Tax paid with application for extension of time to file (Form 8968) 8 Credits and payments Add lines 6s through 6d 8 Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached 8 Credits and payments Add lines 6s through 6d 8 Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached 9 Tax due. If the total of lines 5 and 8, enter the amount ower paid 10 Overpayment. If the 7 is more than the total of lines 5 and 8, enter the amount ower paid 10 Overpayment. If the 7 is more than the total of lines 5 and 8, enter the amount overpaid 11 Overpayment. If the 7 is more than the total of lines 5 and 8, enter the amount overpaid 12 Overpayment. If the 7 is more than the total of lines 5 and 8, enter the amount overpaid 13 During the tax year, did the foundation mitimance any national, state, or local legislation or did it participate or intervene in any potitical campaign? 13 During the tax year, did the foundation mitimance any national, state, or local legislation or did it participate or intervene in any paticinal campaign? 14 If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any maternals published or distributed by the foundation in connection with the activities. 15 Did the foundation here in the foundation funging the year? 16 If the reminister of the foundation in connection with the activities. 2 Did the foundation have unrelated business gross on substantial counting the year? 2 Did the foundation have unrelated business gro			<u>:</u>			
5 Tax based on Investment Incomes. Subtract line 4 from line 3. If zero or less, enter -0- 5 Cradists/Pyments. a 2010 estimated tax payments and 2009 overpayment credited to 2010 b Exempt foreign organizations - tax withheld at source 5 Tax pad with application for setsension of time to this (Form 8868) 6 Etax pay with application for setsension of time to this (Form 8868) 6 Etax payments and inness 5 and 8 is more than line 7, enter amount ower 7 Total credits and payments Add lines 5 and 7 to enter the amount ower paid 7 Total credits. If line 7 is more than line 7, enter amount ower 8 Part VIII-4 Is line 7 is more than the total of lines 5 and 8 is more than line 7, enter amount ower 9 Total credits. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 1 Diverpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 1 Diverpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 1 Diverpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 1 Diverpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 1 Diverpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 1 Diverpayment. If line 7 is more family 1 Diverpayment of line 10 to be Credited to 2011 estimated tax ≥ 1, 277. Instructions for definition? 1 Diversity 1 Diverpayment of 1 Di	3	·	<u>; </u>		<u> </u>	<u>21.</u>
5 Credits/Psyments. a 2010 estimated tax payments and 2009 overpayment credited to 2010 be Everngt foreign organizations - Lax withheld at source c Tax paid with application for extension of time to the (Form 8868) be Sc 1,400. 5 But 1,400. 5 But 1,400. 6 Credits and payments Add lines 5a through 6d c Enter any penalty for underpayment of estimated tax. Check here in the Form 2220 is attached c Enter any penalty for underpayment of estimated tax. Check here in the Form 2220 is attached c Enter any penalty for underpayment of estimated tax. Check here in the Form 2220 is attached c Format Villa in the total of lines 5 and 8 is more than in the 7, enter amount overpaid c Format Villa in the total of lines 5 and 8 is more than in the 7, enter amount overpaid c Format Villa in the total of lines 5 and 8 is more than in the 7, enter amount overpaid c Format Villa in the total of lines 5 and 8 is more than in the 7, enter amount overpaid c Format Villa in the total of lines 5 and 8, enter the amount overpaid c Format Villa in the total of lines 5 and 8, enter the amount overpaid c Format Villa in the total of lines 5 and 8, enter the amount overpaid c Format Villa in the Common of the 11 to 12 or 12 o		· · · · · · · · · · · · · · · · · · ·	<u> </u>			<u>0.</u>
a 2010 estimated tax payments and 2009 overpayment credited to 2010 b Exempt foreign organizations - tax withheld at source 1 Tax paid with application for extension of time to the (Form 8868) d Backup withholding erroneously withheld 7 7 2,000 . 8 Enter any penalty for underpayment of estimated tax. Check here in the form 2220 is attached 8 2 . 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 11 277 . Refunded ▶ 10 11 277 . 11 Enter the amount of line 10 to be: Credited to 2011 estimated tax ▶ 10 1 2, 277 . 12 Enter the amount of line 10 to be: Credited to 2011 estimated tax ▶ 1, 277 . Refunded ▶ 11 12 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? 15 Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)? 16 If the answer is "Yes" to 1a or 1a, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities. 16 Did it spendiden his Form 1120-PU1 to this year? 17 If the emboursement (if any) paid by the foundation during the year of political expendidure tax imposed on foundation managers ▶ \$ 0. 18 Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year? 19 If "Yes," attach a detailed description of the activities. 19 If "Yes," has it field a tax return on Form 990-1 for this year? 20 If "Yes," has the did at a vareturn or Form 990-1 for this year? 30 If the foundation his Form 1120-1120-1120-1120-1120-1120-1120-1120		· · · · · · · · · · · · · · · · · · ·	<u>j</u>		7:	21.
b Exempt foreign organizations - tax withhelic at source 1 Tax paid with application for extension of time to file (Form 8868) 2 Secure withholding erroneously withheld 7 Total credits and payments Add lines 6a through 6d 7 Total credits and payments Add lines 6a through 6d 7 Total credits and payments Add lines 6a through 6d 8 2. 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 11 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 12 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 11 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 12 Overpayment. If line 7 is more than the lines 5 and 8, enter the amount overpaid 10 Overpayment. If lines 7 is the standard overpaid 11 overpayment 12 overpayment 12 overpayment 12 overpayment 12 overpayment 12 overpayment 12 ov						
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b If "Yes," did it have excess business holdings in 2010 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, N/A 3b X 4a

N/A

Yes X No

2b

Form **990-PF** (2010)

statement - see instructions)

during the year?

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

3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time

Form 4720, to determine if the foundation had excess business holdings in 2010.)

had not been removed from jeopardy before the first day of the tax year beginning 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

(a) Name and address (b) Title, and average hours per week devoted (if not paid, enter "b) account, other allowances (c) Compensation (if not paid, enter "b) account, other allowances (c) Compensation (if not paid, enter "b) account, other allowances (c) Compensation (if not paid, enter "b) and deterring and detering and deterring and deterring and deterring and deterring and d	OF STATE OF			0-004359	Page 6
(1) Carry on propaganda, or otherwise attento to influence begintion (seed in 34945(s))? (2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration directly. (3) Provide a grant to an individual for travel, study, or other similar purposes? (4) Provide a grant to an individual for travel, study, or other similar purposes? (5) Provide for any purpose other than religious, charable, scientific, Merary, or educational purposes, or for the prevention of cruelty to children or animals? In any any ware if xe's 16 54(1)-54, and any of the transactions fail to qualify under the exceptions described in Regulations section 53 4945 or in a current notice regarding disaster assistance check here if the animals in xe's 16 54(1)-54, and any of the transactions fail to qualify under the exceptions described in Regulations section 53 4945 or in a current notice regarding disaster assistance check here if the animals in xe's 16 (a) (a) daily of the transactions (see instructions)? Organizations relying on a current notice regarding disaster assistance check here if the animals in xe's 16 (a) (a) daily of the framsaction 53,4945-5(g). So by the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal beant constact the statement required by Regulations section 53,4945-5(g). So by the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal beant contract? If 'Yes' 168, fine form 870. Yes \text{ No BB } X If 'Yes' 168, fine form 870. Part VIII Part 168, fine form 870. Part VIII Part 268, fine form 870. Part VIII Part 268, fine form 870. Part VIII Part 268, fine form 870. ARJUN GUPTA PRESIDENT Part VIII Part 268, fine form 870. Part		orm 4720 May Be R	equired (continu	ed)	
23 Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration directly (s) Provide a grant to an individual for travel, study, or other similar purposes? Yes No		4045(5))2		. ▼ No	
Service agree to an indevidual for travel, study, or other similar purposes?		• ••		I A NU	
(3) Provide a grant to an organization other than a charabble, etc. organization described in section 508(a)(1), (2), or (3), or section 4940(a)(2)? (5) Provide for any purpose other than reliquous, charlabble, scientific, literary, or educational purposes, or for the prevention of curety to children or animas? b) If any answer is "ves" to \$14(1)(5), did any of the transactions fail to qualify under the exceptions described in Regulations section \$3.9495 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here if the answer is "ves" to question \$4(4), does the foundation disaster assistance check here if the answer is "ves" to question \$4(4), does the foundation disaster assistance check here if the answer is "ves" to \$6, file Form 870. If "Yes," attach the statement required by Regulations section \$3.4945-5(d). B) did the foundation, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? If "Yes" to \$6, file Form 870. S) A at any time during the tix year, was the foundation a party to a principated tax chefter transaction? b) If It's, and did this foundation acrees any proceeds or have any net income attributable to the transaction? It still all officers, directors, frustees, Foundation managers and their compensation. Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Information Abo	• •	to carry on, unochy or mane.		X No	
(4) Provide a grant to an organization other than a charitable, etc. organization described in section \$509(3)(1), (2), or (3), or section 4940(4)(2)? (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? If any answer is "ves to 54(1)-50, dut any of the transactions fail to qualify under the exceptions described in Regulations section 53 4945 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance (see instructions)? If 'Yes,' and the foundation, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? If 'Yes I No Bit In foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If 'Yes I No Bit I'Yes,' and the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If 'Yes I No Bit I'Ses,' did the foundation receive any proceeds or have any relia income attributable to the transaction? Yes IX No Bit I'Ses,' did the foundation did be tax year, was the loundation attributable to the transaction? Yes IX No Bit I'Ses,' did the foundation did be tax year, was the loundation at a stributable to the transaction? Yes IX No Bit I'Ses,' did the foundation of the foundation aparty to a prohibited tax shelter transaction? Yes IX No Bit I'Ses,' did the foundation did be tax year, was the loundation at a stributable to the transaction? Yes IX No Bit I'Ses,' did the foundation did be tax year,	•	?			
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58 Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? If "Yes" to 6b, file Form 8870. 7a At any time during the biax year, was the foundation a party to a prohibited tax shelter transaction? 1b If "Ses," difference were my proceeded or have any net income attributable to the transaction? 1 List all officients, directors, trustees, foundation managers and their compensation. (a) Name and address (b) Title, and average house prevention and address (a) Name and address (b) Title, and average house prevention and address (b) Title, and average house prevention and address (c) Compensation (fill not paid, entire to the paid Employees, and Contractors 1 List all officients, directors, trustees, foundation managers and their compensation. (a) Name and address (b) Title, and average house prevention and address (fill not paid, entire to the paid enti			/ A Ye	S NO	
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POSTER CITY, CA 94404 2.00 0.0. Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (a) Name and address of each employee paid more than \$50,000 NONE (b) Title, and average hours per week devoted to position (c) Compensation (d) Combutors to employee account, other allowances (e) Expense account, other allowances		<u> </u>	0.	υ.	0.
2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (a) Name and address of each employee paid more than \$50,000 (b) Title, and average hours per week devoted to position (c) Compensation (d) Computers to employee paid more than \$50,000 (e) Expense addetend compensation (ii) Title, and average hours per week devoted to position (c) Compensation (iii) Title, and average hours per week devoted to position		SECKETARI	· ·		
2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (a) Name and address of each employee paid more than \$50,000 (b) Title, and average hours per week devoted to position NONE (c) Compensation employee benefit plans and deterred compensation allowances (a) None and address of each employee paid more than \$50,000 (b) Title, and average hours per week devoted to position (c) Compensation employee paid more than \$10 wances		2 00	n	0	0
(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) Combutions to employee breefit plans and determed compensation (e) Expense account, other allowances	PODIER CITT, CR 74404	2.00	 		<u> </u>
(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) Combutions to employee breefit plans and determed compensation (e) Expense account, other allowances		_			
(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) Combutions to employee breefit plans and determed compensation (e) Expense account, other allowances		1			
(a) Name and address of each employee paid more than \$50,000 NONE (c) Compensation employee paid more than \$50,000 NONE (c) Compensation employee paid more than \$50,000 Abouts per week devoted to position (c) Compensation employee paid more than \$50,000 Abouts per week devoted to position (c) Compensation employee paid more than \$50,000 Abouts per week devoted to position (c) Compensation employee paid more than \$50,000 Abouts per week devoted to position (c) Compensation employee paid more than \$50,000 Abouts per week devoted to position	2 Compensation of five highest-paid employees (other than those in	cluded on line 1). If none,	enter "NONE."		
	(a) Name and address of each employee paid more than \$50,000	hours per week	(c) Compensation	employee benefit plans and deferred	account, other
Total number of other employees paid over \$50,000	NONE				
Total number of other employees paid over \$50,000					
Total number of other employees paid over \$50,000					
Total number of other employees paid over \$50,000					·
Total number of other employees paid over \$50,000		-			
Total number of other employees paid over \$50,000			<u> </u>		
Total number of other employees paid over \$50,000		-			1
Total number of other employees paid over \$50,000 ▶ 0			 	-	
Total number of other employees paid over \$50,000		†			1
	Total number of other employees paid over \$50,000	-1,. , , , , , , , , , , , , , , , , , , 	<u> </u>	•	0

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न्यमक	ARJUN GUPTA	COMMINITOR	FOINDATION
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90-	v	v	4		2	"	1

Page 7

3 Five highest-paid independent contractors for professional services. If none, enter "NONE."	
	Compensation
NONE	
	
Total number of others receiving over \$50,000 for professional services	0
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc	enses
37/3	
1 N/A	
2	
3	
4	
Part IX-B Summary of Program-Related Investments	
	ount
1 N/A	
2	
All other program-related investments. See instructions	
3	
Total. Add lines 1 through 3	0.

Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes 1 Average monthly fair market value of securities 500,152 1a b Average of monthly cash balances 317,186 1b Fair market value of all other assets 10 817,338. d Total (add lines 1a, b, and c) 10 e Reduction claimed for blockage or other factors reported on lines 1a and 0. 1c (attach detailed explanation) Acquisition indebtedness applicable to line 1 assets Subtract line 2 from line 1d 3 3 Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions) 4 805,078. Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4. 5 Minimum investment return. Enter 5% of line 5 Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here and do not complete this part.) 40,254. Minimum investment return from Part X, line 6 721. Tax on investment income for 2010 from Part VI, line 5 Income tax for 2010 (This does not include the tax from Part VI.) c Add lines 2a and 2b 2c 3 Distributable amount before adjustments. Subtract line 2c from line 1 3 Recoveries of amounts treated as qualifying distributions 4 5 Add lines 3 and 4 5 6 Deduction from distributable amount (see instructions) 6 39,533 Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1 Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes. 146,170. Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 Program-related investments - total from Part IX-B 1b Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes 2 Amounts set aside for specific charitable projects that satisfy the. Suitability test (prior IRS approval required) 3a Cash distribution test (attach the required schedule) 3b 146,170 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 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 Adjusted qualifying distributions. Subtract line 5 from line 4 6 Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

Form **990-PF** (2010)

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2009	(c) 2009	(d) 2010
1 Distributable amount for 2010 from Part XI.				
line 7				39,533.
2 Undistributed income, if any, as of the end of 2010		•		
a Enter amount for 2009 only			14,977.	
b Total for prior years				***************************************
		0.		
3 Excess distributions carryover, if any, to 2010	******************************			*************************************
a From 2005				
b From 2006				
¢ From 2007				
d From 2008				
e From 2009				
1 Total of lines 3a through e	0.			
4 Qualifying distributions for 2010 from		······································		
Part XII, line 4 ▶\$ 146,170.				
a Applied to 2009, but not more than line 2a			14,977.	
b Applied to undistributed income of prior	-			***************************************
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus			 	114114111111111111111111111111111111111
(Election required - see instructions)	0.			
d Applied to 2010 distributable amount		 	*****************************	39,533.
e Remaining amount distributed out of corpus	91,660.			37/333.
5 Excess distributions carryover applied to 2010	0.	*************************************		0.
(If an amount appears in column (d), the same amount must be shown in column (a))				.
6 Enter the net total of each column as indicated below:				
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	91,660.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.	,	
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2009 Subtract line	······			
4a from line 2a Taxable amount - see instr			0.	•
f Undistributed income for 2010 Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2011				0.
7 Amounts treated as distributions out of		<u> </u>	······································	
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.	,		
8 Excess distributions carryover from 2005				
not applied on line 5 or line 7	0.	,		
9 Excess distributions carryover to 2011.				
Subtract lines 7 and 8 from line 6a	91,660.	,		
10 Analysis of line 9				
a Excess from 2006				
b Excess from 2007				
c Excess from 2008]			
d Excess from 2009				
e Excess from 2010 91,660.				
		-		

art XIV Private Operating Fo	undations (see ins	tructions and Part VI	I-A, question 9)	N/A	
a If the foundation has received a ruling or	determination letter that	it is a private operating			
foundation, and the ruling is effective for	2010, enter the date of the	he ruling	•		
b Check box to indicate whether the found	ation is a private operatin	g foundation described	in section	4942(j)(3) or 49)42(j)(5)
a 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					
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not	,				1
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 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(1)(3)(B)(i)					
b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
s "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					
art XV Supplementary Info	rmation (Comple	ete this part onl	y if the foundation	n had \$5,000 or m	ore in assets
at any time during				·	
Information Regarding Foundation	on Managers:				
a List any managers of the foundation wi year (but only if they have contributed	no have contributed more		intributions received by th	e foundation before the cl	ose of any tax
RJUN GUPTA	•				
b List any managers of the foundation we other entity) of which the foundation has			n (or an equally large port	ion of the ownership of a	partnership or
ONE	•				
Information Regarding Contribu					
Check here ► X If the foundation the foundation makes gifts, grants, etc	(see instructions) to ind	ividuals or organization	s under other conditions, o	complete items 2a, b, c, a	quests for funds lif
a The name, address, and telephone nur	nber of the person to who	om applications should	be addressed [.]		
b The form in which applications should	be submitted and inform	ation and materials they	should include		
c Any submission deadlines					
d Any restrictions or limitations on aware					

Page 11

Grants and Contributions Paid During the Recipient	If recipient is an individual, show any relationship to		Purpose of grant or contribution	Amount
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	contribution	Amount
a Paid during the year				
SEE STATEMENT 12				
Total b Approved for future payment			> 3a	143,200
- , , , , , , , , , , , , , , , , , , ,				
NONE				
Total			▶ 3b	0

Р	ลดย	1	2

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated	Unrelate	Unrelated business income		section 512, 513, or 514	(e)	
1 Program service revenue	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income	
		, , , , , , , , , , , , , , , , , , ,	 			
a	-	<u> </u>				
b	1					
·	i					
d						
8						
f						
g Fees and contracts from government agencies						
2 Membership dues and assessments .					<u> </u>	
3 Interest on savings and temporary cash			1 1			
investments						
4 Dividends and interest from securities			14	8,696.		
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			14	25.		
8 Gain or (loss) from sales of assets other		 	 	23.		
•			18	72,649.		
than inventory			1-10	12,043.		
9 Net income or (loss) from special events			 - - - 			
10 Gross profit or (loss) from sales of inventory	•	<u> </u>				
11 Other revenue.			1	1		
a		<u> </u>				
b		ļ				
C						
d						
8						
12 Subtotal Add columns (b), (d), and (e)			0.	81,370.	0.	
13 Total. Add line 12, columns (b), (d), and (e)				13	81,370.	
(See worksheet in line 13 instructions to verify calculations	s.)					
Part XVI-B Relationship of Activities Line No. Explain below how each activity for which the foundation's exempt purposes (other to be activity for which the foundation's exempt purposes (other to be activities).	ıncome is reported	I in column (e) of Part X	VI-A contributed		plishment of	
	·	-				
						
	·					
						
				_ 		
		·		· · · · -		
					· · · · · · · · · · · · · · · · · · ·	
					<u>.</u>	
					· · · · · · · · · · · · · · · · · · ·	

Form 990-PF (2010)
Part XVII Ir Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

Did the or	ganization directly or indire	ectly engage in any of	the following	with any other organization	n described in sect	ion 501(c) of		Yes	No
the Code	(other than section 501(c)((3) organizations) or i	n section 527	, relating to political organiz	zations?				
a Transfers	from the reporting foundat	tion to a noncharitabl	e exempt orga	inization of					
(1) Cash							1a(1)		<u>X</u>
(2) Other	r assets						1a(2)		X
b Other tran	nsactions								
(1) Sales	s of assets to a noncharitab	ole exempt organizatio	on				1b(1)		X
(2) Purc	hases of assets from a non	icharitable exempt or	ganization				1b(2)		X
	al of facilities, equipment, o	or other assets					1b(3)		<u>X</u>
	nbursement arrangements						1b(4)		<u>X</u>
	is or loan guarantees						1 <u>b(5)</u>		X
	ormance of services or mer	•	•				1b(6)	ļ	X
_	of facilities, equipment, mai			•			10	L	X
				lule Column (b) should alw				sets,	
				d less than fair market valu	e in any transactio	n or sharing arrangei	nent, show in		
	d) the value of the goods, (avamet arganization	1 (4) -			·	
a) Line no	(b) Amount involved	(c) Name of		exempt organization	(0) Description	on of transfers, transactio	ns, and shanng ar	rangeme	ents
			N/A						
				·					
				 					
					- 				
	:								
									
_					 -				
						· · · · · · · · · · · · · · · · · · ·			
						· · · · · · · · · · · · · · · · · · ·			
					_				
									
									
			-						
	···-								
2a la tha fa	undation directly or indirec	the offiliated with or a	ninted to one	or mare tay-everant ergan	rations described				
	<u>-</u>	=		or more tax-exempt organi	izations described		Yes	FS.	☐ No
	n 501(c) of the Code (othe complete the following sch		(3)) UI III SECL	1011 327 7			162	الح	יון ויי
<u>р II 185,</u>	(a) Name of org			(b) Type of organization	T	(c) Description of re	elationshin		
	N/A	901112011011		(b) Type of organization	 	(b) bosomption of it	nutionionip		
	11/11				 	 -			
				· · · · · · · · · · · · · · · · · · ·	 				
					 				
Un	der penalties penury, I decla	e that I have examined the	nis return, includ	ing accompanying schedules an	nd statements, and to	the best of my knowledge	e and belief, it is t	rue, con	ect,
Sign				ased on all information of which		wiedg		•	٠
Here		LN_		1 871	2011	115517	EM_		
	Signature of officer or tr	rustee		Date	<u> </u>	Title			
	Print/Type preparer's n		Preparer's s		Date	Check If	PTIN		
	, p s propulsi s ii	-	1		1	self- employed			
Paid	RACHEL R.	CALDWELL	Rock	R. Caldwell	6/24/11		P01274	1062)
Prepare			· VIIIVIIII	M. Communication		Firm's EIN ► 3			
Use Only						11111321117			
		00 FIRST S	TREET.	SUITE 1600					
		AN FRANCIS				Phone no 4	15-764-	-270	0
			<u> </u>	***		• • • • • • • • • • • • • • • • • • • •	Form 99		

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

TH	HE ARJUN GUPTA COMMUNITY FOUNDATION	90-0043591
Organization type (check o	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	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
	is covered by the General Rule or a Special Rule. (7), (8), or (10) organization can check boxes for both the General Rule and a Special Ru	ıle. See instructions.
General Rule		
	on filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in molete Parts I and II.	oney or property) from any one
Special Rules		
509(a)(1) and 170	(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the region (b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II.	-
aggregate contrib	(c)(7), (8), or (10) organization filling Form 990 or 990-EZ that received from any one controutions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, cruelty to children or animals. Complete Parts I, II, and III.	- ·
contributions for If this box is chec purpose. Do not	(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contruse exclusively for religious, charitable, etc., purposes, but these contributions did not acked, enter here the total contributions that were received during the year for an exclusive complete any of the parts unless the General Rule applies to this organization because pile, etc., contributions of \$5,000 or more during the year.	ggregate to more than \$1,000. ely religious, charitable, etc.,
but it must answer "No" o	that is not covered by the General Rule and/or the Special Rules does not file Schedule on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line illing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).	•

LHA 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)

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

Page 1 of 1 of Part I

Name of organization

Employer Identification number

THE ARJUN GUPTA COMMUNITY FOUNDATION

90-0043591

Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	ARJUN GUPTA 950 TOWER LANE, SUITE 1600 FOSTER CITY, CA 94404	\$ 11,572.	Person Payroll Noncash X (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroli Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		 \$	Person Payroli Noncash (Complete Part II if there is a noncash contribution.)

Name of organization

Employer identification number

THE ARJUN GUPTA COMMUNITY FOUNDATION

90-0043591

art II	Noncash Property (see instructions)		
(a) No. from Part i	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	PRIVATE EQUITY AND COMMON STOCK DETAILED INFORMATION AVAILABLE UPON REQUEST	- 11 572	WARTOUG
		\$ 11,572.	VARIOUS
(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
		_	
		_ \$	



FORM 990-PF DIVIDE	NDS AND	INTERE	ST FROM	SECU	RITIES	STATEMENT	1
SOURCE		GROSS	TNUOMA		ITAL GAINS IVIDENDS	COLUMN (A AMOUNT	.)
INTEREST (SUNRISE EQUITY	•						
PARTNERS) MERRILL LYNCH			218. 8,472.		0. 0.	2 8,4	18.
SCHWAB			6.		0.	0,1	6.
TOTAL TO FM 990-PF, PART I,	LN 4		8,696.		0.	8,6	96.
FORM 990-PF	0	THER IN	ICOME			STATEMENT	2
DESCRIPTION		I	(A) REVENUE PER BOOK		(B) NET INVEST- MENT INCOME		
OTHER INCOME				25.	0	•	
TOTAL TO FORM 990-PF, PART	T. LINE	. 11		25.	0	<u> </u>	
	-,			====			
FORM 990-PF	AC	COUNTI	NG FEES			STATEMENT	3
DESCRIPTION	EXPE	A) INSES BOOKS	(B) NET INV MENT IN	EST-	(C) ADJUSTED NET INCOM		
ACCOUNTING FEES		5,940.	•	0 .	•	2,9	970.
TO FORM 990-PF, PG 1, LN 16	БВ	5,940.		0		2,9	70.
FORM 990-PF	OTHER	PROFES	SIONAL F	EES		STATEMENT	<u> </u>
DESCRIPTION	EXP	(A) ENSES BOOKS	(B) NET INV MENT IN	EST-	(C) ADJUSTED NET INCOM		
INVESTMENT MANAGEMENT FEES		1,969.	1	,969	•		0.
TO FORM 990-PF, PG 1, LN 16		1,969.		,969			0 .
TO FORM 330-PF, PG 1, LN 10	, .	1,,,,,,,,	-	.,	•		•

TOTAL TO FORM 990-PF, PART II, LINE 10B

FORM 990-PF	TAX	TAXES				
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVES MENT INCO		(C) ADJUSTED NET INCOME	(D) CHARITAI PURPOSI	
TAXES	10.		0.			0.
TO FORM 990-PF, PG 1, LN 18	10.		0.			0.
FORM 990-PF	OTHER E	XPENSES			STATEMENT	6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVES MENT INCO		(C) ADJUSTED NET INCOME	(D) CHARITAI E PURPOS	
K-1 PORTFOLIO DEDUCTIONS	7,278.	7,3	278.			0.
TO FORM 990-PF, PG 1, LN 23	7,278.	7,:	278.			0.
FORM 990-PF U.S. AND	STATE/CITY G	GOVERNMENT	OBL	IGATIONS	STATEMENT	
DESCRIPTION	Մ. S GOV <i>'</i>		во	OK VALUE	FAIR MARKE VALUE	T.
MERRILL LYNCH GOVERNMENT SEC	URITIES X	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		251,051.	253,1	23.
TOTAL U.S. GOVERNMENT OBLIGA	TIONS	•		251,051.	253,1	23.
TOTAL STATE AND MUNICIPAL GO	VERNMENT OBI	LIGATIONS			-,,-,-	••
TOTAL TO FORM 990-PF, PART I	I, LINE 10A			251,051.	253,1	23.
FORM 990-PF	CORPORA	TE STOCK			STATEMENT	{
DESCRIPTION			во	OK VALUE	FAIR MARKE VALUE	T
SYMANTIC CORP - 8,000 SHS TICKET MASTER - 50 SHS				0.	· · · · · · · · · · · · · · · · · · ·	0.
						

0.

•

FORM 990-PF	990-PF CORPORATE BONDS			STATEMENT	9
DESCRIPTION			BOOK VALUE	FAIR MARKE VALUE	T
MERRILL LYNCH CORPORATE BON	DS	•	127,563.	128,3	91.
TOTAL TO FORM 990-PF, PART	II, LINE 10	OC .	127,563.	128,3	91.
FORM 990-PF	OTHER	INVESTMENTS		STATEMENT	10
DESCRIPTION		VALUATION METHOD	BOOK VALUE	FAIR MARKE VALUE	T
SUNRISE EQUITY PARTNERS		COST	19,061.	29,1	36.
TOTAL TO FORM 990-PF, PART	II, LINE 1	3	19,061.	29,1	36.
FORM 990-PF LIST		TIAL CONTRIB A, LINE 10	UTORS	STATEMENT	11
NAME OF CONTRIBUTOR	A	DDRESS			
ARJUN GUPTA		50 TOWER LAN	-		

90-0043591

FORM 990-PF

GRANTS	AND CONTRIBUTIONS	
PAID	DURING THE YEAR	

STATEMENT 12

RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT	RECIPIENT STATUS	AMOUNT
	GENERAL OPERATING		10,000.
THE ASPEN INSTITUTE P.O. BOX 222 QUEENSTOWN, MD 21658	N/A GENERAL OPERATING PURPOSES		36,200.
	N/A GENERAL OPERATING PURPOSES		15,000.
THE SAPLING FOUNDATION 250 HUDSON ST RM 102 NEW YORK, NY 10013			15,000.
UC DAVIS FOUNDATION 140 DREW AVENUE DAVIS, CA 95616	N/A GENERAL OPERATING PURPOSES		10,000.
FACE AIDS P.O. BOX 46 PALO ALTO, CA 94302	N/A GENERAL OPERATING PURPOSES		1,000.
THE DEAN'S FUND AT THE GSB 655 KNIGHT WAY STANFORD, CA 94305	N/A GENERAL OPERATING PURPOSES		10,000.
CITY OF HOPE 1500 EAST DUARTE ROAD DUARTE, CA 91010	N/A GENERAL OPERATING PURPOSES		10,000.

THE ARJUN GUPTA COMMUNI FOUND	ATION	90-0043591
BONNIE J. ADDARIO LUNG CANCER FOUNDATION 601 4TH STREET SUITE 215 SAN FRANCISCO, CA 94107	N/A GENERAL OPERATING PURPOSES	5,000.
HARLEM ACADEMY 1330 FIFTH AVENUE NEW YORK, NY 10026	N/A GENERAL OPERATING PURPOSES	1,000.
WILDAID 744 MONTGOMERY STREET, SUITE 300 SAN FRANCISCO, CA 94111	N/A GENERAL OPERATING PURPOSES	25,000.
PACIFIC LINKS FOUNDATION 534 VALLEY WAY MILIPITAS, CA 95035	N/A GENERAL OPERATING PURPOSES	1,000.
MAKE-A-WISH FOUNDATION GREATER BAY AREA 55 HAWTHORNE STREET, SUITE 800 SAN FRANCISCO, CA 94105	N/A GENERAL OPERATING PURPOSES	500.
CHARITY WATER 200 VARICK STREET, SUITE 201 NEW YORK, NY 10014	N/A GENERAL OPERATING PURPOSES	500.
MSU FOUNDATION 2727 ALLIANCE DRIVE, SUITE C LANSING, MI 48910	N/A GENERAL OPERATING PURPOSES	3,000.
TOTAL TO FORM 990-PF, PART XV, L	INE 3A	143,200.



		2010 CA	PITAL GAIN A	2010 CAPITAL GAIN AND LOSS TRANSACTIONS	NSACTIONS			
Security Description	Quantity	Date Acquired Cover of Short	Date Liquidated Short Sale	Amortization/Accretion Year-to-Date Life-to-D	/Accretion Life-to-Date	Sales Price	Cost Basis	Gain or (Loss)
CUODI TEDAS CADITAL CAIME								
BERKSHIRF HATHAWA 2 12% 13	1000 0000(B) 02/12/10	01/21/20	11/09/10	(0.82) (A)	(0 82) (A)	1,030.78	1,002.49 (C)	28 29
GOLDMAN SACHS GRO 4 75% 13	1000.0000(B) 07/13/10	07/13/10	11/09/10	(5.93) (A)	(5.93) (A)	1,078.73	1,049.61 (C)	29.12
CITIGROUP INC 4.12% 2010	5000 0000(B) 12/14/09	12/14/09	02/22/10	(25.23) (A)	(31 55) (A)	5,000.00	5,000.00 (C)	0.00
CVS CORP 5.75%AUG15 11	3000.0000(B) 07/13/10	07/13/10	11/09/10	(45.79) (A)	(45 79) (A)	3,106.38	3,103.22 (C)	3.16
CONOCO FUNDING 6 35% 2011	5000.0000(B) 12/11/09	12/11/09	08/03/10	(153.14) (A)	(163 83) (A)	5,345.07	5,314.52 (C)	30.55
GOLDMAN SACHS GRO 4.50% 10	10000.0000(B) 12/09/09	12/09/09	06/15/10	(183.47) (A)	(201.80) (A)	10,000.00	10,000.00 (C)	0.00
IPMORGAN CHASE & 3.12% 11	5000 0000(B) 12/08/09	12/08/09	11/09/10	(95.82) (A)	(101.83) (A)	5,144.30	5,115.37 (C)	28.93
VERIZON COMMUN 5 25% 2013	1000 0000(B) 07/13/10	07/13/10	01/10/10	(11.57) (A)	(11.57) (A)	1,100.88	1,084.57 (C)	16.31
VFRIZON GLOBAL FD 7.25% 10	5000.0000(B) 12/09/09	12/09/09	01/01/10	(172.34) (A)	(187.93) (A)	5,136.10	5,134.27 (C)	1.83
WAL-MART STORES 4 55% 2013	1000 0000(B) 06/17/10	06/17/10	11/09/10	(11.66) (A)	(11.66) (A)	1,091.05	1,073.70 (C)	17.35
SHELL INTE FIN 1.30% 2011	2000.0000(B) 12/09/09	12/09/09	11/09/10	(8.21) (A)	(8.65) (A)	2,011.08	2,008.05 (C)	3.03
FEDERAL HOME LN MTG CORP	10000.0000(B) 12/08/09	12/08/09	01/21/10	(33.86) (A)	(37.29) (A)	10,187.81	10,121,44 (C)	66.37
FEDERAL NATL MTG ASSOC	5000.0000(B) 04/13/10	04/13/10	01/13/10	(31.08) (A)	(31.08) (A)	5,428.12	5,342.70 (C)	85.42
US TSY 1.750% NOV 15 2011	10000 0000(B)	12/08/09	01/71/90	(50.66) (A)	(56.53) (A)	10,169.89	10,149.36 (C)	20.53
	20000 0000(B) 12/08/09 10000 0000(B) 12/08/09	12/08/09	08/10/10 10/12/10	(131.44) (A) (83.98) (A)	(143 19) (A) (89 85) (A)	20,343.68 10,162.86		46.82
	S	Security Subtotal		•		40,676.43	40,534.00	142.43



			2010 CA	PITAL GAIN A	2010 CAPITAL GAIN AND LOSS TRANSACTIONS	ISACTIONS			
	Security Description	Quantity	Date Acquired Cover of Short	Date Liquidated Short Sale	Amortization/Accretion Year-to-Date Life-to-D.	Accretion Life-to-Date	Sales Price	Cost Basis	Gain or (Loss)
	US TSY 1.375% FEB 15 2012	10000.0000(B) 12/08/09 6000.0000(B) 12/08/09	12/08/09 12/08/09	11/09/10	(40.92) (A) (27.17) (A)	(43 73) (A) (28 86) (A)	10,148 40 6,077 79	10,069.58 (C) 6,039.13 (C)	78 82 38 66
	FEDERAL NATL MTG ASSOC	Security Su 5000 0000(B) 12/08/09 15000 0000(B) 12/08/09	Security Subtotal 3) 12/08/09 3) 12/08/09	04/13/10 11/09/10	(41.14) (A) (368.51) (A)	(48.90) (A) (391.80) (A)	16,226.19 5,157.28 15,241.52	16,108.71 5,153.78 (C) 15,216.24 (C)	3 50 25 28
	FEDERAL NATL MTG ASSOC	Security Sul 5000 0000(B) 12/08/09 15000 0000(B) 12/08/09	Security Subtotal 3) 12/08/09 3) 12/08/09	02/12/10 06/17/10	(19 30) (A) (206.90) (A)	(27 17) (A) (230.51) (A)	20,398.80 5,221.00 15,527.24		28.78 4 29 26 09
ST	FEDERAL NATL MTG ASSOC	Security Su 5000.0000(B) 12/08/09	Security Subtotal 3) 12/08/09	01/71/90	(25.41) (A)	(28.30) (A)	20,748.24 5,102.69	20,717.86 5,082.96 (C)	30.38 19 73
ATE		έs	Short Term Capital	Capital Gains Subtotal			158,812.65	158,163.49	649.16
MEN	SHORT TERM CAPITAL LOSSES		1	1					-004
T D		5000.0000(B) 12/08/09	12/08/09	04/13/10	(31.86) (A)	(37.87) (A)	5,175.65	5,179.33 (C)	(3.68)
-1		15000.0000(B) 12/08/09	12/08/09	04/13/10	(223.05) (A)	(265.32) (A)	15,699.66	15,701.39 (C)	(1 73)
	US TSY 4.500% FEB 28 2011	30000.0000(B)	12/08/09	01/01/10	(40.64) (A)	(108.37) (A)	31,328.81	31,411.65 (C)	(82.84)
	US TSY 4.750% MAR 31 2011	5000.0000(B)	12/08/09	01/01/10	(7.15) (A)	(19 05) (A)	5,251.35	5,263.58 (C)	(12.23)
	US TSY 4.875% MAY 31 2011	5000.0000(B) 12/08/09 15000.0000(B) 12/08/09	12/08/09 12/08/09	03/09/10 04/13/10	(43.10) (A) (193.04) (A)	(55.24) (A) (229.46) (A)	5,268.34	5,270.16 (C) 15,746.77 (C)	(1 82) (16 74)
	US TSY 4.875% JUL 31 2011	Security Su 10000.0000(B) 12/08/09	Security Subtotal 3) 12/08/09	03/09/10	(84.47) (A)	(108.04) (A)	20,998.37 10,599.19	21,016.93 10,604.49 (C)	(18.56) (5.30)
		ક્ક	Short Term Capital	Capital Losses Subtotal			89,053.03	89,177.37	(124.34)
	NET SHORT TERM CAPITAL GAIN (LOSS)	N (LOSS)							524.82
	LONG TERM CAPITAL LOSSES								
	KRAFT FOODS INC 5.62% 2011	4000.0000(B) 12/18/09	12/18/09	12/30/10	(149 55) (A)	(152.84) (A)	4,052.92	4,127.08 (C)	(74.16)
		Lor	Long Term Capital Losses Subtotal	osses Subtotal			4,052.92	4,127.08	(74.16)
	NET LONG TERM CAPITAL GAIN (LOSS)	(ross)							(74.16)

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

Form 8868 (Rev. 1-2011)

 $\triangleright [X]$ If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box • 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. 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 Lonly 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 Employer identification number print THE ARJUN GUPTA COMMUNITY FOUNDATION 90-0043591 File by the Number, street, and room or suite no. If a P.O. box, see instructions. due date for filing your C/O ARJUN GUPTA 950 TOWER LANE, NO. 1600 return See City, town or post office, state, and ZIP code. For a foreign address, see instructions. instructions FOSTER CITY, CA 94404 Enter the Return code for the return that this application is for (file a separate application for each return) 0 4 **Application** Return **Application** Return Is For Code Is For Code Form 990 01 Form 990-T (corporation) 07 Form 990-BL 02 Form 1041-A 08 Form 990-EZ 03 Form 4720 09 Form 990-PF 04 Form 5227 10 Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 6069 11 Form 990-T (trust other than above) 06 Form 8870 12 AL HOWARD The books are in the care of ▶ 950 TOWER LANE - FOSTER CITY, CA 94404 Telephone No. ► 650-358-2506 FAX No. ▶ If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for. I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until AUGUST 15, 2011 , to file the exempt organization return for the organization named above. The extension is for the organization's return for: ► X calendar year 2010 or tax year beginning If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Change in accounting period If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any 2,000. nonrefundable credits. See instructions. За If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and 600. estimated tax payments made. Include any prior year overpayment allowed as a credit. 3ь 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. 1,400. Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

For Paperwork Reduction Act Notice, see Instructions.