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Form 990-PF

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

Department of the Treasury Internal Revenue Service For calendar year 2010, or tax year beginning , and ending G Check all that apply: Initial return Initial return of a former public charity Final return Amended return Address change Name change Name of foundation A Employer identification number DENNIS AND ELIZABETH LANE FAMILY 91-2052750 FOUNDATION B Telephone number (see page 10 of the instructions) Number and street (or P O box number if mail is not delivered to street address) Room/suite 1614 NW GREGORY DRIVE If exemption application is pending, check here City or town, state, and ZIP code 1. Foreign organizations, check here VANCOUVER WA 98665 2. Foreign organizations meeting the H Check type of organization: X Section 501(c)(3) exempt private foundation 85% test, check here and attach computation Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation If private foundation status was terminated under section 507(b)(1)(A), check here X Accrual I Fair market value of all assets at J Accounting method: Cash end of year (from Part II, col (c), Other (specify) If the foundation is in a 60-month termination 134,963 line 16) ▶ \$ (Part I, column (d) must be on cash basis) under section 507(b)(1)(B), check here Part I Analysis of Revenue and Expenses (The total of (d) Disbursements (a) Revenue and (c) Adjusted net (b) Net investment expenses per for chantable amounts in columns (b), (c), and (d) may not necessarily equal books income income purposes the amounts in column (a) (see page 11 of the instructions)) (cash basis only) 48,040 Contributions, gifts, grants, etc., received (attach schedule) 2 Check ► If the foundation is **not** required to attach Sch B 3 Interest on savings and temporary cash investments 4 Dividends and interest from securities 550 550 550 5a Gross rents `b Net rental income or (loss) STMT 1 30,943 6a Net gain or (loss) from sale of assets not on line 10 54,913 Gross sales price for all assets on line 6a 0 Capital gain net income (from Part IV, line 2) €8) 0 Net short-term capital gain -93 Income modifications .10a Gross sales less returns & allowances Less Cost of goods sold . C Gross profit or (loss) (attach so ledule) 31: Other income (attach schedule) Total. Addings ((thtopgh)1) 2011 554 12 79,537 554 Compensation of officers, directors, trustees, etc. 13 Operating and Administrative Expenses Other employee salaries and wages 14 Pension plans, employee benefits 15 Legal fees (attach schedule) Accounting fees (attach schedule) STMT 2 1,780 Other professional fees (attach schedule) C 17 Interest 14 Taxes (attach schedule) (see page 14 of the instructions) STMT 3 Depreciation (attach schedule) and depletion Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 505 23 Other expenses (att sch) Total operating and administrative expenses. Add lines 13 through 23 2,299 0 0 17,025 17,025 Contributions, gifts, grants paid 19,324 0 17,025 26 Total expenses and disbursements. Add lines 24 and 25 Subtract line 26 from line 12 60,213 Excess of revenue over expenses and disbursements Net investment income (if negative, enter -0-) 554 554 Adjusted net income (if negative, enter -0-)

For Paperwork Reduction Act Notice, see page 30 of the instructions.

Form 990-PF (2010)

	Balance Sheets Attached schedules and amounts in the description column		Beginning of year Ei		nd of year		
ì	Part II	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Vatue	(c) Fair Market Value		
٦	1	Cash—non-interest-bearing					
-	2	Savings and temporary cash investments	7,672	37,622	37,622		
1	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 (attach schedule) (see page 15 of the					
		instructions)					
	7	Other notes and loans receivable (att schedule)			······························		
	,	Less allowance for doubtful accounts >					
S	8	Inventories for sale or use			· · · · · · · · · · · · · · · · · · ·		
Assets	9	Prepaid expenses and deferred charges					
ŝ	10a	Investments—U.S. and state government obligations (attach schedule)		,			
1	_	Investments—corporate stock (attach schedule) SEE STMT 5	179,910	206,524	97,341		
i	b	Investments—corporate shock (attach schedule)					
	C 44	Investments—land, buildings, and equipment basis					
	11	Less accumulated depreciation (attach sch)			•		
	40	·					
	12	Investments—mortgage loans Investments—other (attach schedule)					
	13	•					
	14	Land, buildings, and equipment basis					
	45	Less accumulated depreciation (attach sch) ► Other assets (describe ►)					
	15						
	16	Total assets (to be completed by all filers—see the	187,582	244,146	134,963		
_	47	Instructions Also, see page 1, item I)	1,218				
	17	Accounts payable and accrued expenses					
S	18	Grants payable					
≝	19	Deferred revenue Loans from officers, directors, trustees, and other disqualified persons					
Liabilities	20						
<u>"</u>	21	Mortgages and other notes payable (attach schedule)					
	22	Other liabilities (describe)	1,218	0			
_	23	Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here	2,220				
۰.		Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.					
ĕ			186,364	244,146			
aŭ	24	Unrestricted Townsorth restricted	100,501				
Net Assets or Fund Balances	25	Temporarily restricted					
Ш	26	Permanently restricted Foundations that do not follow SFAS 117, check here ▶					
Š		and complete lines 27 through 31.					
Ū.	27	Capital stock, trust principal, or current funds					
ō	27	Paid-in or capital surplus, or land, bldg., and equipment fund					
ets	28	Retained earnings, accumulated income, endowment, or other funds					
SS	29	Total net assets or fund balances (see page 17 of the					
۲	30		186,364	244,146			
Se		instructions) Total liabilities and net assets/fund balances (see page 17	200,001				
_	31		187,582	244,146			
-	Part I	of the instructions) Analysis of Changes in Net Assets or Fund Balances					
-		net assets or fund balances at beginning of year—Part II, column (a), line 30 (must	agree with				
		of-year figure reported on prior year's return)	-	1_1_	186,364		
•		r amount from Part I, line 27a		2	60,213		
3 Other increases not included in line 2 (itemize) ▶							
4 Add lines 1, 2, and 3					246,577		
5 Decreases not included in line 2 (itemize) ► SEE STATEMENT 6					2,431		
		net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b),	line 30	6	244,146		
_					- 000 DE		

	Part IV Capital Gains a	nd Losses for Tax on Investme	nt Inco	me				
		be the kind(s) of property sold (e.g., real estate, ehouse, or common stock, 200 shs MLC Co.)			(b) How acquired P—Purchase D—Donation		ite acquired , day, yr)	(d) Date sold (mo , day, yr)
1	a N/A							
╝	b							
_	c							
	<u>d</u>					ļ <u></u> -		
	e					ļ		
_	(e) Gross sales price	(f) Depreciation allowed (or allowable)		(g) Cost or plus exper				or (loss) minus (g)
ٺ	a		··			ļ		
_	<u> </u>					<u> </u>		
_	cd					 		
_	e			 				
		gain in column (h) and owned by the four	idation or	12/31/69			(I) Gauss (Col.	(h) gain minus
	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		(k) Excess	• • • • • • • • • • • • • • • • • • • •		ol (k), but not	(h) gain minus less than -0-) or om col (h))
_;	a							····-
_	b							
_(C							
	d							
	e					·	 .	
2	Capital gain net income or (net ca	pital loss) If gain, also enter in F If (loss), enter -0- in F		•		2		
3	Net short-term capital gain or (los	s) as defined in sections 1222(5) and (6)		_				
	If gain, also enter in Part I, line 8,	column (c) (see pages 13 and 17 of the in	structions	s).]	}			
	If (loss), enter -0- in Part I, line 8					3		
		nder Section 4940(e) for Reduce				ne		···-
(Fo	or optional use by domestic private	foundations subject to the section 4940(a)	tax on ne	et investmer	it income.)			
lf s	section 4940(d)(2) applies, leave thi	s part blank.						
W	as the foundation liable for the secti	on 4942 tax on the distributable amount of	f anv vear	n the base	period?			Yes X No
		fy under section 4940(e) Do not complete	• •					
1	Enter the appropriate amount in e	ach column for each year; see page 18 of	the instru	ictions before	re making any entries	 5		
_	(a)	(b)			(c)			(d)
	Base period years Calendar year (or tax year beginning	Advented available distribution	s	Net value o	of noncharitable-use ass	ets		bution ratio vided by col. (c))
	2009		,375		37,	919		0.247238
	2008		,393		52,			0.197604
_	2007	 	,178		80,			0.436116
	2006		,425		82,0			0.259298
	2005	34	,317		66,	058		0.519498
	Total of line 1, column (d)						2	1.659754
3	•	year base period—divide the total on line	2 by 5, o	r by the		\	_	0 221051
	number of years the foundation ha	as been in existence if less than 5 years				قــا	3	0.331951
4	Enter the net value of noncharitab	le-use assets for 2010 from Part X, line 5	•				4	90,564
5	Multiply line 4 by line 3						5	30,063
			•					_
6	Enter 1% of net investment incom	e (1% of Part I, line 27b)				<u> </u>	6	6
7	Add lines 5 and 6					1	7	30,069
8	Enter qualifying distributions from	•				_ [В	17,025
	If line 8 is equal to or greater than Part VI instructions on page 18.	line 7, check the box in Part VI, line 1b, ar	nd comple	ete that part	using a 1% tax rate.	See the		
								000 DE

	990-PF (2010) DENNIS AND ELIZABETH LANE FAMILY 91-2052750			F	age 4	
<u>P</u>	irt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the Instru	ictions)				
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1.					
	Date of ruling or determination letter (attach copy of letter if necessary—see instructions)					
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check				11	
	here ▶ ☐ and enter 1% of Part I, line 27b					
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of					
	Part I, line 12, col. (b).	1				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)				0	
3	Add lines 1 and 2	- 			11	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)				0	
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	, 			11	
6	Credits/Payments	1				
а	2010 estimated tax payments and 2009 overpayment credited to 2010 6a					
b	Exempt foreign organizations—tax withheld at source					
С	Tax paid with application for extension of time to file (Form 8868)	1				
d	Backup withholding erroneously withheld					
7	Total credits and payments Add lines 6a 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 is more than line 7, enter amount owed	ļ			<u>11</u>	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	<u> </u>				
11	Enter the amount of line 10 to be: Credited to 2011 estimated tax ▶ Refunded ▶ 11	<u> </u>				
Pa	rt VII-A Statements Regarding Activities					
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it			Yes	No	
	participate or intervene in any political campaign?		1a		<u>X</u> _	
b	b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19					
	of 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					
	published or distributed by the foundation in connection with the activities.					
С	Did the foundation file Form 1120-POL for this year?		1c		<u>X</u>	
đ	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year.					
	(1) On the foundation ▶ \$ (2) On foundation managers ▶ \$					
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed					
	on foundation managers > \$					
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, articles of	į			_	
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		_3		<u> </u>	
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		X	
b	If "Yes," has it filed a tax return on Form 990-T for this year?	N/A	4b			
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	ĺ				
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either.					
	By language in the governing instrument, or	ľ				
	By state legislation that effectively amends the governing instrument so that no mandatory directions that					
	conflict with the state law remain in the governing instrument?		6	X		
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV		7	X		
8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the					
	instructions) ► WA					
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General		ا ا	J		
	(or designate) of each state as required by General Instruction G? If "No," attach explanation		8b	X		
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			ł		
	4942(j)(5) for calendar year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV on page			ļ	v	
40	27)? If "Yes," complete Part XIV	•	9		<u>X</u>	
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			ŀ	v	
	names and addresses .		10	DE	<u>X</u>	

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Pŧ	rt VII-A Statements Regarding Activities (continued)					
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the					
	meaning of section 512(b)(13)? If "Yes," attach schedule (see page 20 of the instructions)			11	<u> </u>	X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before					
	August 17, 2008?			12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application	1?		13	X	
	Website address ► N/A					_
14		hone no.	360-6	96-	079	1
	1614 NW GREGORY DRIVE		0066			
	Located at ► VANCOUVER WA	ZIP+4 D	98665)		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here	- 1	1			▶∟
	and enter the amount of tax-exempt interest received or accrued during the year	▶ [15		r., 3	
16	At any time during calendar year 2010, did the foundation have an interest in or a signature or other authority			۱	Yes	No
	over a bank, securities, or other financial account in a foreign country?			16	l	X
	See page 20 of the instructions for exceptions and filing requirements for Form TD F 90-22 1. If "Yes," enter					
-	the name of the foreign country			<u> </u>		<u> </u>
P	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required				V	Ma
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.				Yes	No
1a	During the year did the foundation (either directly or indirectly):	□ v	X No			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes	X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	Yes	X No			
	disqualified person?	Yes	X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes	 1			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	res	X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for	Yes	X No			
	the benefit or use of a disqualified person)? (2) Associate provides a representation of the second	les	M NO			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the					
	foundation agreed to make a grant to or to employ the official for a period after	Yes	X No			
L	termination of government service, if terminating within 90 days) If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations		A NO			
b	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 22 of the instructions)?	•	N/A	1b		
	Organizations relying on a current notice regarding disaster assistance check here		▶ □	"		
_	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that					
С	were not corrected before the first day of the tax year beginning in 2010?		N/A	1c		
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			- <u>··</u>		
_	operating foundation defined in section 4942(j)(3) or 4942(j)(5)).					
а	At the end of tax year 2010, did the foundation have any undistributed income (lines 6d and					
•	6e, Part XIII) for tax year(s) beginning before 2010?	Yes	X No			
	If "Yes," list the years ▶ 20 , 20 , 20 , 20					
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)					
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to					
	all years listed, answer "No" and attach statement—see page 22 of the instructions.)		N/A	2b		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here					
	▶ 20 , 20 , 20 , 20					
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise					
	at any time during the year?	Yes	X No			
b	If "Yes," did it have excess business holdings in 2010 as a result of (1) any purchase by the foundation or		_			
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the					
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of					
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the					
	foundation had excess business holdings in 2010)		N/A	3b	L	
4 a	Did the foundation invest during the year any amount in a manner that would jeonardize its charitable purposes?			4a	1 1	Х

Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2010?

		AND ELIZABETH LANE FAMI		2052750			Page 6
P	irt VII-B Statements	Regarding Activities for Which Forn	n 4720 May Be R	equired (cont	inued)		
5a		ation pay or incur any amount to:					1
		otherwise attempt to influence legislation (section			Yes X No		
	(2) Influence the outcome of a	any specific public election (see section 4955); or	to carry on,	r			İ
	directly or indirectly, any v	oter registration drive?		<u> </u>	Yes X No		
	(3) Provide a grant to an indiv	vidual for travel, study, or other similar purposes?			Yes 🗓 No		
	(4) Provide a grant to an orga	inization other than a charitable, etc, organization	described in				
	section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see page 22 of the ins	tructions)		Yes X No		
	(5) Provide for any purpose o	ther than religious, charitable, scientific, literary, o	r educational				
	purposes, or for the preve	intion of cruelty to children or animals?		∐ '	Yes X No	1	
b	If any answer is "Yes" to 5a(1)	–(5), did any of the transactions fail to qualify und	ler the exceptions desi	cribed in			- 1
	Regulations section 53 4945 of	or in a current notice regarding disaster assistance	e (see page 22 of the in	nstructions)?	N/A	5b	
		rent notice regarding disaster assistance check he			> [_]		
C	If the answer is "Yes" to quest	ion 5a(4), does the foundation claim exemption fro	om the tax	/- 🗆			
	because it maintained expend	iture responsibility for the grant?		N/A 📗	Yes 📙 No		
	If "Yes," attach the statement i	required by Regulations section 53.4945-5(d).					
6a	Did the foundation, during the	year, receive any funds, directly or indirectly, to pa	ay premiums				
	on a personal benefit contract	?		□ ,	Yes X No		
b	Did the foundation, during the	year, pay premiums, directly or indirectly, on a pe	rsonal benefit contract	?		6b	X
	If "Yes" to 6b, file Form 8870				(C)		
7a	At any time during the tax year	r, was the foundation a party to a prohibited tax sh	nelter transaction?	, []	Yes X No		
<u>b</u>		ive any proceeds or have any net income attributa			N/A	7b	
Pa		About Officers, Directors, Trustees, F	oundation Mana	gers, Highly I	Paid Employed	es,	
	and Contract						
1 L	ist all officers, directors, trus	tees, foundation managers and their compens	sation (see page 22 o	f the Instructions	s).		
			(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit	(a) Ev	oense account,
	(a) Name and address	hours per week devoted to position	(if not paid, enter -0-)	plans and deferred		r allowances
			do totad to position		compensation	 	
DE	NNIS W. LANE	VANCOUVER	DIRECTOR	ľ	ĺ	l	
16	14 NW GREGORY DR	WA 98665	5.00	0	0	ļ	0
EL	IZABETH H. LANE	VANCOUVER	SEC/TREAS/DI	1			
16	14 NW GREGORY DR	WA 98665	5.00		0	<u> </u>	0
ນປ	STIN A. LANE	VANCOUVER	DIRECTOR])	
16	14 NW GREGORY DR	WA 98665	2.00	0	0	 	0
				ļ			
				Ĺ	Ĺ <u> </u>	<u> </u>	
2	=	st-paid employees (other than those included	on line 1 — see page	23 of the instruc	tions).		
	If none, enter "NONE."			· · · · · · · · · · · · · · · · · · ·	,		
			(b) Title, and average		(d) Contributions to employee benefit	(e) Exr	ense account,
	(a) Name and address o	of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	plans and deferred		allowances
					сотрепватол	<u> </u>	
МО	NE			•	ļ		
						ļ	
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				 		<u> </u>	
			-			 	
			1		ļ	1	
						 	
			1				
		450,000		i		<u> </u>	
ota	number of other employees pa	ud over \$50,000	<u> </u>				0
					For	ա 990)-PF (2010)

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Part VIII Information About Officers, Directors, Trustees, Foundation I and Contractors (continued)	wanagers, Hignly Paid Emp	pioyees,
3 Five highest-paid independent contractors for professional services (see page 23 of the i	Instructions). If none, enter "NON	E."
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		_
Total number of others receiving over \$50,000 for professional services		▶ 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information organizations and other beneficiaries served, conferences convened, research papers produced, etc.	n such as the number of	Expenses
1 ELIZABETH ANN SETON CATHEDRAL - CHURCH PROVIDI GUIDANCE AND FOOD, CLOTHING AND ASSISTANCE TO		
COLDMICE MID 100D, CHOIMING MID MODIFIMICE 10	THE NUMBER	5,000
2 UNIVERSITY OF PORTLAND - PROVIDES SCHOLARSHIPS FINANCIAL AID TO STUDENTS, RESEARCH GRANTS AND		
NEW LABORATORIES AND BUILDINGS.	<u></u>	3,500
3 N W CHILDREN'S OUTREACH - HELPS FAMILIES IN THE NECESSITIES FOR THEIR CHILDREN.	HE AREA WITH	
4 SEE STATEMENT 7		2,000
		1,000
Part IX-B Summary of Program-Related Investments (see page 24 of t	he instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2		Amount
1 N/A		
2		
All other program-related investments. See page 24 of the instructions		
3		
Total. Add lines 1 through 3	—	

orn	1990-PF (2010) DENNIS AND ELIZABETH LANE FAMILY 91-2052750		Page 8
Pa	Art X Minimum Investment Return (All domestic foundations must complete this part. Foreign	ign fo	undations,
	see page 24 of the instructions.)	······	. <u> </u>
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes		
а	Average monthly fair market value of securities	1a	59,762
b	Average of monthly cash balances	1b	32,181
С	Fair market value of all other assets (see page 25 of the instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	91,943
е	Reduction claimed for blockage or other factors reported on lines 1a and] [
	1c (attach detailed explanation) 1e 0]	
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	91,943
4	Cash deemed held for charitable activities Enter 1½ % of line 3 (for greater amount, see page 25 of		
	the instructions)	4	1,379
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,379 90,564
6	Minimum investment return. Enter 5% of line 5	6	4,528
Pa	art XI Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) private operations	erating	
	foundations and certain foreign organizations check here		
1	Minimum investment return from Part X, line 6	1	4,528
2a	Tax on investment income for 2010 from Part VI, line 5		
b	Income tax for 2010. (This does not include the tax from Part VI)	1	
С	Add lines 2a and 2b	2c	11
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	4,517
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	4,517
6	Deduction from distributable amount (see page 25 of the instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII,		····
•	line 1	7	4,517
		اـــــــــــــــــــــــــــــــــــــ	
Pŧ	art XII Qualifying Distributions (see page 25 of the instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	17,025
b	Program-related investments—total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the	!	
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	17,025
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		
	Enter 1% of Part I, line 27b (see page 26 of the instructions)	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	17,025
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation	1	

Form **990-PF** (2010)

qualifies for the section 4940(e) reduction of tax in those years.

Pa	rt XIII Undistributed Income	(see page 26 of the	he instructions)			
	•		(a)	(b)	(c)	(d)
1	Distributable amount for 2010 from Part XI,	,	Corpus	Years prior to 2009	2009	2010
	line 7					4,517
2	Undistributed income, if any, as of the end	of 2010:				
	Enter amount for 2009 only	Ĭ.				
	Total for prior years 20, 20	.20	******	· · · · · · · · · · · · · · · · · · ·		
3	Excess distributions carryover, if any, to 20			, , , , , , , , , , , , , , , , , , , ,		
	From 2005	31,263				
_	From 2006	17,612				
	From 2007	31,177				
	From 2008	7,765				
	F	7,491				
_	From 2009	7,334	95,308			1
f	Total of lines 3a through e	,,,	33,300			
4	Qualifying distributions for 2010 from Part X	XII,				
	line 4 ▶ \$ 17,025				1	
	Applied to 2009, but not more than line 2a	}				<u> </u>
b	Applied to undistributed income of prior year	1				
	(Election required—see page 26 of the inst	· · · · · · · · · · · · · · · · · · ·				
С	Treated as distributions out of corpus (Elec	ction				
	required—see page 26 of the instructions)	-	··········			4 515
d	Applied to 2010 distributable amount					4,517
е	Remaining amount distributed out of corpu	s Į	12,508			
5	Excess distributions carryover applied to 2	010				
	(If an amount appears in column (d), the sa	ame				
	amount must be shown in column (a))					
6	Enter the net total of each column as					
	indicated below:					
а	Corpus. Add lines 3f, 4c, and 4e Subtract	line 5	107,816			
b	Prior years' undistributed income Subtract		·			
	line 4b from line 2b					<u></u>
С	Enter the amount of prior years' undistribut	ed	,			
	income for which a notice of deficiency has					
	been issued, or on which the section 4942	ī				
	tax has been previously assessed	` '				
d	Subtract line 6c from line 6b Taxable				,	
_	amount—see page 27 of the instructions					
6	Undistributed income for 2009 Subtract lin	ie i				
•	4a from line 2a Taxable amount—see pag					
	27 of the instructions					
f	Undistributed income for 2010. Subtract lin	es				
•	4d and 5 from line 1. This amount must be					}
	distributed in 2011					0
7	Amounts treated as distributions out of cor	ous				
•	to satisfy requirements imposed by section	•				
	170(b)(1)(F) or 4942(g)(3) (see page 27 of					
	instructions)					1
8	Excess distributions carryover from 2005 n	not }				
	applied on line 5 or line 7 (see page 27 of t					1
	• •		31,263			,
9	instructions) Excess distributions carryover to 2011.			······································		
J	Subtract lines 7 and 8 from line 6a		76,553			
10		ł	,0,555			
10	Analysis of line 9	17,612				
a	Excess from 2006	31,177				
b	Excess from 2007	7,765				
C	Excess from 2008		=	`		
d	Excess from 2009	7,491				,
е	Excess from 2010	12,508		L	L	<u> 1</u>

N/A

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

Check here ▶ X if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see page 28 of the instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

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

N/A

b	The form in which applications should be submitted and information and materials they should include
	/-

N/A

Any submission deadlines:

N/A

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

N	1	2
7.4	,	•

DAA

Part XV Supplementary Information (co 3 Grants and Contributions Paid During the	ontinued) Year or Approved for F	uture Payment		
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
	any foundation manager	recipient	contribution	17,02!
Total	J	,!	▶ 3a	17,02
b Approved for future payment N/A				
Total			▶ 3b	

DAA

Part XVI-A	Analysis of Income-Producing Ac	tivities				
	unts unless otherwise indicated.	Y	d business income	Exclude	d by section 512, 513, or 514	(e)
•		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See page 28 of
1 Program ser				 		the instructions)
a		-		 		
		-		 		
c		-		 		
d		-		 		
		-		 		
f		-	ļ	 		
_	d contracts from government agencies		<u> </u>	 -		
•	dues and assessments			 		
	avings and temporary cash investments			 		550
	d interest from securities		ļ	1		550
	come or (loss) from real estate:	\ <u>'`</u>		 		· · · · · · · · · · · · · · · · · · ·
	nnced property			 		
	-financed property			<u> </u>		
	come or (loss) from personal property			 		
7 Other investr				 		30,943
•) from sales of assets other than inventory			}		30,343
	or (loss) from special events			 		
	or (loss) from sales of inventory			 		
	e a			 		
		- }		 		
		-		 		
		-		┼──		
ee	d columns (b), (d), and (e)	-	C	1	0	31,497
	ne 12, columns (b), (d), and (e)	L.,	<u></u>	<u> </u>	13	31,497
	n line 13 instructions on page 29 to verify calculation	ne I				0=710.
Part XVI-B	Relationship of Activities to the A		ent of Exempt Pu	rpose	s	
Line No.	Explain below how each activity for which income					-
▼	accomplishment of the foundation's exempt purpoinstructions)					the
N/A						
	·					 -
						<u> </u>
	<u> </u>					
			_ 			
						-
			···= · · · · · ·			
					· · · · · · · · · · · · · · · · · · ·	
			<u> </u>			
ł						

Part X	VII	Informat Exempt	U	_	insters to and	I Iransactio	ns and Relation	onsnips With	Noncharitable			
1 Did	the orga				in any of the follow	ing with any oth	er organization de	scribed			Yes	No
					501(c)(3) organiza					ľ		
	nızatior		(0			,	, ,	•				
-			rtıng founda	tion to a non	charitable exempt	organization of				- 1		
	Cash		.		•	J			1	a(1)		X
٠.	Other a	ssets					•		Г	a(2)		X
	er trans								<u> </u>			***************************************
			noncharital	ole exempt o	rganization				1	b(1)	ĺ	X
٠,,				•	xempt organization					b(2)		X
				or other asse					_	b(3)		X
		rsement arra		, 00, 2000					Г	b(4)		X
٠,		or loan guara	-						<u> </u>	b(5)		X
		-		mbership or	fundraising solicital	tions			<u></u>	b(6)		X
٠,				•	er assets, or paid e				<u> </u>	1c		X
					lete the following s		n (b) should always	s show the fair m	arket			
					en by the reporting							
					, show in column (
(a) Lin		T	nt involved		of noncharitable exen				nsactions, and sharing ar	ranger	nents	
I/A		1		· · · · · · · · · · · · · · · · · · ·								
•/												
												
 -												
												
***		1										
		†										
		 										
				·		· · · · · · · · · · · · · · · · · · ·						
		 		-							-	
				ļ			 					
		 			···-		 					
		<u> </u>										
												
							<u> </u>					
2a le th	oo found	lation directly	v or indirect	lv affiliated w	rith, or related to, or	ne or more tax-e	xempt organization	ns	 			
					han section 501(c)				Į.] Ye	s X	No
		mplete the fo			nan accion so reg	077 01 117 30011011	02.7.				• ===	
<u> </u>		a) Name of org		<u> </u>	(b) Type of o	organization		(c) Descript	ion of relationship			
N/I	<u>`</u>	7	<u></u>		,,,,,,,			<u> </u>				
-17	=,										_	
			·									
T	Under n	enalties of per	ury I declare	that I have ex	amined this rearn, inc	duding accompany	ing schedules and sta	etements, and to the	best of my knowledge a	nd		
	belief, it	is true, correc	t, and comple	te Declaration	of prepare (other tha	an taxpayer or fidu	ciary) is based on all i	nformation of which	preparer has any knowle	dge		
Sign		16	11	11/	Kan	18	22-11	DIRE	CTOR			
Here	Sig	nature of office	er or trustee	112		Dat	e	Title				
	Print/	Type preparer	's name			Preparer's sign	ature _	<u> </u>	Date		Check	\Box
Paid		21 F F				(Character)	Ω	. <i>ומיו</i> .	01.0	///	self-em	" إلـــا ployed
	GREG	ORY J.	NELSON.	, CPA	4	Longo	y newson	CUM	8/10/	11		
Jse Only		name 🕨	CALE		BOCIATES				PTIN POO	360	422	
	1	address >	P. 0	BOX 3					Firm's EIN ▶ 91-1	19	018	2
				OUVER,		5			Phone no 360-			

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

Name of the organization

DENNIS AND ELIZABETH LANE FAMILY FOUNDATION

Employer identification number

91-2052750

Organization type (check	one):	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	ition
	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 . c)(7), (8), or (10) organization can check boxes for both the General Rule and a S	ipecial Rule. See
General Rule		
	in filing Form 990, 990-EZ, or 990-PF that received, during the year, $5,000$ or more contributor. Complete Parts I and II.	ore (in money or
Special Rules		
sections 509(a)(1)	(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a coor (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ,	contribution of the
the year, aggregation	(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any of the contributions of more than \$1,000 for use exclusively for religious, charitable, s ses, or the prevention of cruelty to children or animals. Complete Parts I, II, and II	cientific, literary, or
the year, contribut aggregate to more year for an exclus	(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any organism for use exclusively for religious, charitable, etc., purposes, but these contributes than \$1,000. If this box is checked, enter here the total contributions that were relively religious, charitable, etc., purpose. Do not complete any of the parts unless than because it received nonexclusively religious, charitable, etc., contributions.	utions did not eceived during the the General Rule
990-EZ, or 990-PF), but it	that is not covered by the General Rule and/or the Special Rules does not file Sch must answer "No" on Part IV, line 2 of its Form 990, or check the box on line H o to certify that it does not meet the filing requirements of Schedule B (Form 990, 99	f its Form 990-EZ, or on
For Paperwork Reduction A	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) of 1Name of organization **Employer Identification number** DENNIS AND ELIZABETH LANE FAMILY 91-2052750 Part I Contributors (see instructions) (a) (c) (d) No Name, address, and ZIP + 4 Aggregate contributions Type of contribution 1 DENNIS W. AND ELIZABETH H. LANE Person 1614 NW GREGORY DRIVE Payroll 48,040 Noncash VANCOUVER WA 98665 (Complete Part II if there is a noncash contribution) (b) (c) (a) (d) No. Name, address, and ZIP + 4 Aggregate contributions Type of contribution Person Payroll Noncash (Complete Part II if there is a noncash contribution) (d) (a) (b) (c) No. Name, address, and ZIP + 4 Aggregate contributions Type of contribution Person Payroll Noncash (Complete Part II if there is a noncash contribution) (a) (b) (c) (d) Name, address, and ZIP + 4 Type of contribution No. Aggregate contributions Person Payroll Noncash (Complete Part II if there is a noncash contribution) (b) (c) (d) (a) Name, address, and ZIP + 4 Aggregate contributions Type of contribution No. Person Payroll \$ Noncash (Complete Part II if there is a noncash contribution) (b) (c) (d) (a) Name, address, and ZIP + 4 Aggregate contributions Type of contribution No. Person Payro!! \$ Noncash (Complete Part II if there is

a noncash contribution.)

1051440 Dennis and Elizabeth Lane Family

Federal Statements

91-2052750 FYE: 12/31/2010 Statement 1 - Form 990-PF, Part I, Line 6a - Sale of Assets

٠	Net Gain / Loss	30,943	30,943	Charitable	Purpose		0	
	Depreciation	₩.	\$ 0			χ. 	\$ 0	
		ស	\$ 0	ees Adiusted	Net			
	Expense	\$ 02	\$ 04	Accounting F	ent	\$	\$	18 - Taxes
	Cost	23,970 \$	23,970	t I, Line 16b -	Investment	\$	Ş	F. Part I. Line
How Received	Sale Price	PURCHASE 54,913 \$	54,913 \$	Statement 2 - Form 990-PF, Part I, Line 16b - Accounting Fees	Total	1,780	1,780	ent 3 - Form 990-PF, Part I, Line 18 - Taxes
	Date Sold	12/31/09 5/03/10 \$	ี่ _เ ง	Statement 2 -		ω	.v.	Statement
Description	Date Acquired	12/31/09			no	FEES		
	Whom Sold	1000 DENDREON	TOTAL		Description	INDIRECT ACCOUNTING FEES	TOTAL	

Charitable Purpose

Adjusted Net

Net Investment

Total

INDIRECT FEDERAL TAXES

TOTAL

Description

1051440 Dennis and Elizabeth Lane Family 91-2052750 FYE: 12/31/2010

Federal Statements

	Charitable Purpose	\$
benses	Adjusted Net	w
4 - Form 990-PF, Part I, Line 23 - Other Expenses	Net Investment	O
Statement 4 - Form 990-PF, P	Total	10 495
Sta	Description	EXPENSES INDIRECT STATE FEE/LICENSE INDIRECT ASSOCIATION FEE TOTAL

1051440 Dennis and Elizabeth Lane Family 91-2052750 FYE: 12/31/2010

Federal Statements

Fair Market Value	846 3,590 7,180 34,920 45,675 5,130	97,341
,	<i>ι</i> .	ጭ"
Basis of Valuation	COST COST COST COST COST	
End of Year	11,788 20,100 82,800 35,700 51,162 4,974	206,524
ļ	w	w
Seginning of Year	11,788 20,100 82,800 26,400 38,822	179,910
_	₩.	w
Description	475 SHRS NAUTILUS INC 10,000 SHRS ELIXIR CORP 20,000 SHRS ELIXIR CORP 1000 SHR DENDREON CORP 3750 SHR UMPQUA HOLDINGS CORP 27,000 SOLIGENIX	TOTAL

1051440 Dennis and Elizabeth Lane Family
91-2052750 Federal Statements

91-2052750

FYE: 12/31/2010

Statement 6 - Form 990-PF, Part III, Line 5 - Other Decreases

	Description						Amount		
BOOK/TAX DIFFERENCE	IN	BASIS	FOR	STOCK	SALE	\$	2,431		
TOTAL						\$	2,431		

1051440 Dennis, and Elizabeth Lane Family

91-2052750

Federal Statements

FYE: 12/31/2010

Statement 7 - Form 990-PF, Part IX-A, Line 4 - Summary of Direct Charitable Activities

Description

LATINO COMMUNITY ASSOC. - TO ENABLE FULL PARTICIPATION OF LATINOS IN OUR COMMUNITIES BY PROVIDING AND PROMOTING EDUCATION, IMPROVING ACCESS TO RESOURCES AND OPPORTUNITIES, AND BUILDING MEANINGFUL CONNECTIONS BETWEEN LATINOS AND THE COMMUNITY.

1051440 Dennis and Elizabeth Lane Family
91-2052750 Federal Statements

FYE: 12/31/2010

Form 990-PF, Part XV, Line 1a - Managers Who Contributed Over 2% or \$5,000

Name of Manager	 Amount		
DENNIS W. AND ELIZABETH H. LANE	\$ 48,040		
TOTAL	\$ 48,040		

1051440 Dennis and Elizabeth Lane Family

Federal Statements

91-2052750 FYE: 12/31/2010

atement 8 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the	Year
--	------

1,000 1,000 5,000 500 500 500 200 250 350 100 750 100 150 100 3,500 25 2,000 1,000 Amount CONSERVATION OF NATURAL RESOURCES ASSISTANCE TO INDIGENT FAMILIES ASSISTANCE TO CANCER PATIENTS FELLOWSHIPS AND SCHOLARSHIPS INVESTIGATIONS OF INJUSTICE Purpose SERVICES TO THE BLIND UNIFORMS FOR YMCA SCHOLARSHIPS SCHOLARSHIPS SCHOLARSHIPS Status 5000 N WILLAMETTE BLVD SE CHKALOV DRIVE 400 WASHINGTON AVE Relationship 3400 MAIN STREET Address SE 14TH AVE 1130 NW HAMMAN NONE NONE 821 516 LEUKEMIA & LYMPHOMA SOCIE ST ELIZS AN SETON CATHOLI CAMPAIGN FOR EQUAL ANTIC MONTGOMERY AL 36104 VANCOUVER LIONS CLUB VANCOUVER WA 98683 UNIVERSITY OF PORTLAND PORTLAND OR 97203 VANCOUVER WA 98663 LATINO COMMUNITY ASSOC BEND OR 97701 PORTLAND OR 97214 SW MEDICAL FOUNDATION NW CHILDRENS OUTREACH SOUTHERN POVERTY LAW GLENWOOD COMM CHURCH Address OUR LADY OF LOURDES U OF WA FOUNDATION NATURE CONSERVANCY U OF W LAW SCHOOL ATHLETE'S CORNER Name SALVATION ARMY ST ANDREWS YMCA

ω

1051440 Dennis and Elizabeth Lane Family

Federal Statements

91-2052750 FYE: 12/31/2010

Statement 8 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year (continued)

Amount Purpose Status Relationship Address Address Name

17,025

TOTAL

ω

Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

Department of the	ne Treasury e Service	► File a	a separate a	application for each return.				
• Jare	filing for an Au	tomatic 3-Month Extension, complet	e only Part	I and check this box			▶ X	
• If you are	filing for an Ad	ditional (Not Automatic) 3-Month Ext	ension, cor	mplete only Part II (on page 2 of this fo	rm)			
Do not compl	ete Part II unle	ess you have already been granted an	automatic 3	3-month extension on a previously filed	Form 88	68		
Electronic fili	ng (e-file) You	can electronically file Form 8868 if yo	ou need a 3-	month automatic extension of time to f	le (6 mo	nths for		
a corporation	required to file	Form 990-T), or an additional (not auto	omatic) 3-m	onth extension of time. You can electro	nically fil	le Form		
8868 to reque	st an extension	of time to file any of the forms listed i	n Part I or P	art II with the exception of Form 8870,	Informat	ion		
Return for Tra	nsfers Associa	ited With Certain Personal Benefit Con	itracts, whic	h must be sent to the IRS in paper form	nat (see			
instructions) l	or more detail	s on the electronic filing of this form, v	ısıt www ırs	gov/efile and click on e-file for Charitie	& Nonp	rofits		
Part I	Automati	c 3-Month Extension of Time.	. Only sul	omit original (no copies neede	d)			
A corporation	required to file	Form 990-T and requesting an automa	atic 6-month	extension-check this box and complet	е		_	
Part I only							>	
All other corpo	orations (includ	ing 1120-C filers), partnerships, REMIC	Cs, and trus	ts must use Form 7004 to request an e	xtension	of time		
to file income	tax returns						·····	
Type or	Name of exe	mpt organization			Emplo	yer identi	ification number	
print		AND ELIZABETH LANG	E FAMI	LY ,				
File by the	FOUNDA	TION			91-	20527	50	
due date for filing your return See	•	, street, and room or suite no. If a P.O. box, see instructions. NW GREGORY DRIVE						
Instructions	City, town or	post office, state, and ZIP code. For a	foreign add	tress, see instructions				
	VANCOU	VER WA	98665	5				
Enter the Retu	ırn code for the	e return that this application is for (file a	separate a	pplication for each return)			04	
Application			Return	Application			Return	
` `nr			Code	ls For			Code	
990			01	Form 990-T (corporation)			07	
Form 990-B	L .		02	Form 1041-A			08	
Form 990-E	Z		03	Form 4720			09	
Form 990-P	F		04	Form 5227	10			
Form 990-T	(sec 401(a) o	r 408(a) trust)	05	Form 6069	11			
Form 990-T	(trust other tha	an above)	06	Form 8870	12			
		DENNIS LANE						
		1614 NW GREGORY DRIVE	2					
		► VANCOUVER				W	A 98665	
Telephone	e No ▶ 36	0-696-0791	FAX No	▶			, [
•		not have an office or place of business					▶ [_]	
		irn, enter the organization's four digit G			this is		•	
-	group, check th	_	the group, o	check this box	ch			
		s of all members the extension is for						
		3-month (6 months for a corporation returns, to file the exempt organization returns)			ı ıs			
-	rganization's re							
	calendar year							
▶ 📙	tax year begini	ning , and ending						
L)	x year entered hange in accou	in line 1 is for less than 12 months, ch inting period	eck reason	Initial return Final return				
3a If this ap	plication is for	Form 990-BL, 990-PF, 990-T, 4720, o	r 6069, ente	er the tentative tax, less any		T		
•	•	See instructions			3a	\$	0	
		Form 990-PF, 990-T, 4720, or 6069, e	nter any ref	undable credits and				

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

Balance due. Subtract line 3b from line 3a Include your payment with this form, if required, by using EFTPS

estimated tax payments made. Include any prior year overpayment allowed as a credit

(Electronic Federal Tax Payment System) See instructions

Form 8868 (Re	ev 1-2011)					Page 2	
	iling for an Additional (Not Automatic) 3-Mont	h Extension, con	nplete only Part II and check this box			▶ X	
	nplete Part II if you have already been granted a			8868		11	
-	iling for an Automatic 3-Month Extension, con						
	Additional (Not Automatic) 3-Month	Extension o	of Time. Only file the original (10 соріє	s needed)).	
Ty, JI	Name of exempt organization			Emplo	yer identifica	ation number	
print	DENNIS AND ELIZABETH L	ANE FAMI	ĽY				
File by the	FOUNDATION			91-	2052750)	
extended	Number, street, and room or suite no. If a P.O.						
due date for filing your	1614 NW GREGORY DRIVE						
retuin See	City, town or post office, state, and ZIP code. F						
instructions	VANCOUVER	WA 98665	<u> </u>				
Enter the Retur	n code for the return that this application is for (f	ile a separate apr	olication for each return)			04	
Application		Return	Application			Return	
Is For		Code	Is For			Code	
Foun 990		01					
Form 990-BI		02	Form 10-11-A		· · · · · · · · · · · · · · · · · · ·	08	
Form 990-EZ		03	Form 4720			09	
Form 990-PF		04	Form 5227			10	
	sec. 401(a) or 408(a) trust)	05	Form 6069			11	
Form 990-3 (trust other than above) 06 Form 8870						12	
STOP! Do not	complete Part II if you were not already grant	ted an automatic	3-month extension on a previously f	iled Form	8868		
	DENNIS LANE						
	1614 NW GREGORY DE	ETVE					
	re in the care of VANCOUVER				WA	98665	
Telephone	No ▶ 360-696-0791	FAX No	>				
• If the organ	ization does not have an office or place of busing	ess in the United	States, check this box			▶ [_]	
thus is for	a Group Return, enter the organization's four dig	gil Group Exempli	on Number (GEN) If this	ıs			
: whole gi	oup, check this box	r part of the group	, check this box	allach a			
	nes and EINs of all members the extension is for				···-		
4 Trequest		11/15/11					
5 For caler	ndar year 2010 , or other tax year begin	ning	, and ending				
()	year entered in line 5 is for less than 12 months,	check reason.	Initial return Final return				
∐ Ch	ange in accounting period						
	letail why you need the extension						
SEE	STATEMENT 1						
					T		
	olication is for Form 990-BL, 990-PF, 990-T, 4720	0, or 6069, enter t	he tentative tax, less any	{ _		_	
	duble credits. See instructions	0	dalda a adda a ad	<u>8a</u>	\$	0	
	plication is for Form 990-PF, 990-T, 4720, or 606	•		}			
	d tax payments made. Include any prior year ove	rpayment allowed	as a credii and any		1	0	
	Part Subtract less 81 from two 84 from two	and the same	form the coursed by some CETTIC	8b	\$	0	
	Due, Subtract line 8b from line 8a Include your parties of Tax Payment System) See instruction	•	iorm, ir required, by using EF 125			0	
(Electron	ic Federal Tax Fayment System) See instituction		nd Verification	8c	_\$	0	
Indu modelli v. s	f perjury, I declare that I have examined this form, includ	-		فالسنوية بر	a produced of		
	r perpay, r deciare mar r nave examined mis form; incidi complete, and that I am authorized to prepare this form	അ സേന്വിവുന്നു ട	energines and statements, and to the nest of H	y virowiedą	anu pellet, il t	,	
	\bigcirc $+$ \bigcirc					, ,	
Signature 🕨 🗀	Bustin Blewer	Tu	lle ▶ CPA		Date 🕨	8/15/11	
					Form 8	3868 (Rev. 1-2011)	