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DLN: 93491226006001

OMB No 1545-0052

50rm 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

2010

G Cł	neck a	ll that apply	Initial retu	_	al return ress char	of a former public	•		eturn	
		indation FOUNDATION	, Amenaca i	cturii i Auu	icaa ciidi	ige i Na	iic ciic		dentification numb	er
	IX PLOT	1 00112/111011						91-2065635		
Num	ber and	street (or P O box	number if mail is	not delivered to stre	eet address) Room/suite		B Telephone n	umber (see page 10	of the instructions)
PO	BOX 75	5554						(206) 459-301	.2	
		n, state, and ZIP coo A 981750554	de						n application is pendir organizations, check h	<u>-</u>
				n 501(c)(3) exe					organizations meeting ere and attach compu	
						ble private founda		_	oundation status was	
		cet value of all a From Part II, col.		JAccounting i		I Cash I Ad	cruai		on 507(b)(1)(A), chec	
		\$ 9,529,220	(- //			_ be on cash basıs.)		l l	dation is in a 60-mont on 507(b)(1)(B), chec	. —
Pa	rt I	total of amount	ts in columns (b), (al the amounts in c	and Expense c), and (d) may no column (a) (see pag	t	(a) Revenue and expenses per books	(b)	Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1	Contributions, gift	s, grants, etc , rece	eived (attach schedu	ıle)	50,0	00			
	2	Check ► ☐ If the	e foundation is not	required to attach	Sch B					
	3	Interest on say	vings and tempo	orary cash inves	tments	6	17	647		
	4	Dividends and	ınterest from se	ecurities		287,4	79	283,479		
	5a	Gross rents .								
	ь	Net rental inco	me or (loss)		- [
Φ	6a	Net gaın or (los	ss) from sale of	assets not on lı	ne 10	128,9	75			
를	ь	Gross sales price f	or all assets on line	e 6a 2,	<u>254,770</u>					
Revenue	7	Capital gain ne	et income (from	Part IV , line 2)				128,97	5	
~	8									
	9	Income modific	cations							
	10a		eturns and allowand	-						
	ь	_	goods sold							
	C	Gross profit or								
	11			e)	- H	467.1	\1	412 101		
	12					467,1	0	413,101	+	0
	13			ctors, trustees, vages	į.		4	0		0
φ	14 15			fits	ŀ					
동	16a	• •				% 1	25	63		62
Expenses	ь	•	•	iule)	ŀ	% 11,3	-	5,694		5,695
	6			h schedule)		95 62,2	_	62,252		0,000
Ě	17				}	<u>, </u>		·		
15 15	18			4 of the instructions	ŀ	95 2,7	77	2,777		0
₫	19	•	, , , , ,) and depletion	´			·		
튜	20				ŀ					
4	21	•		ings						
and Administrative	22				ŀ					
	23	Other expense	s (attach sched	lule)		5,0	93	0		5,093
Operating	24			ative expenses.	ļ					
<u>ā</u>		Add lines 13 th	hrough 23			81,6	36	70,786		10,850
0	25	Contributions,	gıfts, grants pa	ıd		450,0	00			450,000
	26			ts. Add lines 24 and	ŀ	531,6	36	70,786		460,850
	27	Subtract line 2	6 from line 12							
	а	Excess of reve	nue over expen	ses and disburse	ments	-64,5	35			
	ь	Net investmen	t income (ıf neg	atıve, enter -0-)) [342,315		
	c	Adjusted net i	ncome (ıf negatı	ve, enter -0-)						

Par	111	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year			of year	
=		Cash—non-interest-bearing	(a) Book Value 57,765	(b) Boo	k Value 6,158	+ ` <i>'</i> -	Market Value 6,158
		Savings and temporary cash investments	757,049		875,126	+	873,498
		Accounts receivable	737,049		673,120	1	
	_	Less allowance for doubtful accounts					
		Pledges receivable				+	
		Less allowance for doubtful accounts -				+	
	_	Grants receivable				+	
		Receivables due from officers, directors, trustees, and other					
		disqualified persons (attach schedule) (see page 15 of the					
		Instructions)				 	
	7	Other notes and loans receivable (attach schedule)					
اما		Less allowance for doubtful accounts 🕨					
Assets	8	Inventories for sale or use					
š	9	Prepaid expenses and deferred charges				1	
7	.0a	Investments—U S and state government obligations (attach schedule)	191,760	<u> </u>	146,898	3	159,976
	b	Investments—corporate stock (attach schedule)	6,084,318	<u> </u>	6,185,547	7	7,129,924
	c	Investments—corporate bonds (attach schedule)	1,417,575	<u> </u>	1,198,627	,	1,223,232
1	L1	Investments—land, buildings, and equipment basis 🟲				1	
		Less accumulated depreciation (attach schedule)					
1	L2	Investments—mortgage loans				1	
1	L3	Investments—other (attach schedule)	55,206	<u> </u>	105,748	3	119,078
1	L4	Land, buildings, and equipment basis 🕨					
		Less accumulated depreciation (attach schedule) 🟲					
1			21,304	<u> </u>	2,338	; [2]	17,354
1		Total assets (to be completed by all filers—see the				1	
		ınstructions Also, see page 1, item I)	8,584,977		8,520,442	2	9,529,220
1	L7	Accounts payable and accrued expenses					
1	L8	Grants payable				1	
<u>د</u> و	L9	Deferred revenue				1	
	20	Loans from officers, directors, trustees, and other disqualified persons				1	
풀니		Mortgages and other notes payable (attach schedule)				1	
<u>ء</u> ڌ		O ther liabilities (describe 🟲)				1	
		·				1	
2	23	Total liabilities (add lines 17 through 22)	0		()	
		Foundations that follow SFAS 117, check here 🕨 🦵				1	
		and complete lines 24 through 26 and lines 30 and 31.					
Balances	24	Unrestricted					
	25	Temporarily restricted					
8 2	26	Permanently restricted					
딛		Foundations that do not follow SFAS 117, check here 🕨 🔽]	
Fund		and complete lines 27 through 31.					
	27	Capital stock, trust principal, or current funds	0		()	
	28	Paid-in or capital surplus, or land, bldg , and equipment fund	0		()	
Assets	29	Retained earnings, accumulated income, endowment, or other funds	8,584,977		8,520,442	2	
4 3	30	Total net assets or fund balances (see page 17 of the				1	
Ř		ınstructions)	8,584,977		8,520,442	2	
	31	Total liabilities and net assets/fund balances (see page 17 of				1	
		the instructions)	8,584,977		8,520,442	2	
Par		_	<u>'</u>				
1		Total net assets or fund balances at beginning of year—Part II, column	(a) line 30 (must ac	ree	 		
-		with end-of-year figure reported on prior year's return)		1		8,584,977	
2		Enter amount from Part I, line 27a		2		-64,535	
3		Other increases not included in line 2 (itemize)	3		04,333		
4		Add lines 1, 2, and 3		4		8,520,442	
5		Decreases not included in line 2 (itemize)			5		0,320,442
6		Total net assets or fund balances at end of year (line 4 minus line 5)—F		—— ne 30	6		8,520,442

	(a) List and describe the kin 2-story brick warehouse, o	(b) How acquire P—Purchase D—Donation	(c) D	ate acquired o , day, yr)	(d) Date sold (mo , day, yr)			
1 a	PUBLICALLY TRADED SEC	URITIES		Р				
b	PUBLICALLY TRADED SEC	URITIES		Р				
С	CAPITAL GAINS DIVIDEN	DS		Р				
d								
e								
(€	e) Gross sales price	(f) Depreciation allowed (or allowable)		t or other basis opense of sale		(h) Gain or (loss) (e) plus (f) minus (g)		
а	453,732			431,85	31,851			
Ь	1,800,519			1,693,94	4		106,575	
С	519						519	
d								
е								
	emplete only for assets showing FM V as of 12/31/69	(j) Adjusted basis	(k) Exc	cess of col (ı)		l (k), but not l	(h) gain minus ess than -0-) or	
('')		as of 12/31/69	over	col (j), if any		Losses (fr		
а							21,881	
b							106,575	
С							519	
d								
е								
2	Capital gain net income or (n	et capital loss)	If gain, also enter If (loss), enter -0-		2		128,975	
3	Net short-term capital gain o	or (loss) as defined in section	ns 1222(5) and (6)			,	
	If gain, also enter in Part I, l If (loss), enter -0- in Part I,		13 and 17 of the i	nstructions)	}			
Part	V Qualification Under	Section 4940(e) for R	educed Tax or	Net Investm	nt Tr			
Was the If "Yes,	on 4940(d)(2) applies, leave the foundation liable for the section the foundation does not qualif	on 4942 tax on the distributa y under section 4940(e) Do	not complete this	part			┌ Yes ┌ No	
1 En	ter the appropriate amount in e	ach column for each year, se	ee page 18 of the 11	nstructions before	makın	· ·		
	(a) e period years Calendar or tax year beginning in) Adju	(b) usted qualifying distributions	(c) Net value of noncha			(d) Distribution (col (b) divided		
	2009	473,126		8,038,717			0 058856	
	2008	530,600		9,664,806			0 054900	
	2007	518,690		11,229,248			0 046191	
	2006	508,606		10,548,718			0 048215	
	2005	500,759		10,355,303			0 048358	
2	Total of line 1, column (d).				2		0 256520	
3	A verage distribution ratio for the number of years the foun				3		0 051304	
4	Enter the net value of noncha		4		8,903,72			
5	5 Multiply line 4 by line 3						456,79	
6	Enter 1% of net investment	income (1% of Part I, line 2	7b)	[6 3,4			
7	Add lines 5 and 6				7		460,220	
c	Enter quelifica destablises	from Dart VII line 4					460.95	
8	Enter qualifying distributions If line 8 is equal to or greate the Part VI instructions on n	r than line 7, check the box			8 part u	sıng a 1% tax	460,850 rate See	

ar'	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the inst	ructio	ns)	
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		:	3,423
	here 🟲 🔽 and enter 1% of Part I, line 27b			
c	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)			
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			3,423
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		:	3,423
6	Credits/Payments			
а	2010 estimated tax payments and 2009 overpayment credited to 2010 6a 15,601			
b	Exempt foreign organizations—tax withheld at source 6b			
c	Tax paid with application for extension of time to file (Form 8868) 6c			
d	Backup withholding erroneously withheld 6d			
7	Total credits and payments Add lines 6a through 6d		1 !	601,601
8	Enter any penalty for underpayment of estimated tax. Check here T if Form 2220 is attached.			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			
0	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid • 10		12	2,178
1	Enter the amount of line 10 to be Credited to 2011 estimated tax • 12,178 Refunded • 11			0
ar	t VIII-A Statements Regarding Activities			
а	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did		Yes	No
	ıt partıcıpate or ıntervene ın any political campaign?	1a		No
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		No
	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		No
d	Enter the amount (If any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation ► \$0 (2) On foundation managers ► \$0			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
	on foundation managers 🕨 \$0			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		No
	If "Yes," attach a detailed description of the activities.			
	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles			
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		No
la	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		No
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		No
	If "Yes," attach the statement required by General Instruction T.			
5	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
	By language in the governing instrument, or			
	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	Yes	
	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	Yes	
	Enter the states to which the foundation reports or with which it is registered (see page 19 of the			
	instructions) MA			
	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney		<u> </u>	
	General (or designate) of each state as required by General Instruction G? If "No," attach explanation.	8b	Yes	
	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3)			
	or 4942(j)(5) for calendar year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV on			NI-
	page 27)? If "Yes," complete Part XIV Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	9		No
0	on any persons become substantial continuators during the tax year 11 Tes, attach a schedule listing their flatties and addresses	10		No

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		No
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	
	Website address ►WWW HARVESTF ORG			
14		\ 450	2012	
1-	The books are in care of ►MARJORIE RINGNESS Located at ►PO BOX 75554 SEATTLE WA ZIP+4 ►9817505		3012	
				
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here		!	P
16	At any time during calendar year 2010, did the foundation have an interest in or a signature or other authority over			
	a bank, securities, or other financial account in a foreign country?	16		No
	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			
Pai	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1 a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a dısqualıfıed person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes 🔽 No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes V No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	ıf the foundation agreed to make a grant to or to employ the official for a period			
	after termination of government service, if terminating within 90 days) Yes 🔽 No			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts,			l
	that were not corrected before the first day of the tax year beginning in 2010?	1c		No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	At the end of tax year 2010, did the foundation have any undistributed income (lines 6d			
	and 6e, Part XIII) for tax year(s) beginning before 2010?			
ь	If "Yes," list the years > 20, 20, 20, 20 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 20 of the instructions)	2b		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here	 -		
Ī	► 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business			
	enterprise at any time during the year?			
ь	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			
	ıf the foundation had excess business holdings in 2010.)	3ь		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2010?	4b		No

Pa	rt VII-B	Statements	Regardir	ng Activities for Whic	h Form 47	720 May	Be Required (cont	inue	d)		<u>-9</u>
5a	During th	e year dıd the foun	dation pay	or incur any amount to			-				
	(1) Carry	on propaganda, or	otherwise	attempt to influence legis	lation (sectio	n 4945(e))? 	No No			
	(2) Influe	nce the outcome o	fany spec	ıfıc publıc election (see se	ction 4955),	or to carry	/				
	on, dı	rectly or indirectly	, any vote:	registration drive?			┌ Y es ┡	- No			
				travel, study, or other sım			☐ Yes 🔽				
			_	other than a charitable, et				-			
				r section 4940(d)(2)? (see			tions) Yes	NO			
				religious, charitable, scie evention of cruelty to child				- No			
b	If any ans	swerıs "Yes" to 5a	(1)-(5), dı	d any of the transactions f	ail to qualify i	under the e	exceptions described in				
	Regulatio	ns section 53 494	5 or in a c	urrent notice regarding dis	aster assısta	ance (see p	page 22 of the instruction	ns)?	5b		
	O rganızat	ions relying on a c	urrent not	ice regarding disaster ass	stance check	chere	▶「	_			
С	If the ans	wer is "Yes" to que	estion 5a(4), does the foundation cla	m exemption	from the					
	tax because it maintained expenditure responsibility for the grant?										
	If "Yes," a	ttach the statemen	t required b	y Regulations section 53.49	045-5(d).						
6a	Did the fo	undation, during th	ne year, re	ceive any funds, directly o	· indirectly, to	pay					
				ct?			┌ Yes ┡	- No			
ь				y premiums, directly or inc					6ь		No
		o 6b, file Form 8870		, , , , , , , , , , , , , , , , , , , ,	,,						
7a		,		ne foundation a party to a p	robibited tax	chalter tra	ansaction? Yes	- No			
				proceeds or have any net i					7ь		
	ir yes, uit									lovos	
Pa	rt VIII	and Contracto		ficers, Directors, Tru	stees, rot	inuation	managers, nigniy	Paid	ı Emp	oloyee	:5,
1				ındation managers and the	ir compensat	ion (see pa	age 22 of the instruction	ns).			
		and address	(b) Title	, and average sper week	(c) Comp (If not pa	ensation aid, enter	(d) Contributions to employee benefit plan and deferred	s	ac	xpense count,	
EDW/	ARD RINGNES	S		to position R/DIRECTOR/PRESIDENT	- 0	-) 	compensation	0	other a	llowand	es
	30 X 75554		1 00	NOTRECTORY RESIDEN		Ū		Ĭ			Ū
SEA		981750554									
			1 00	R/DIRECTOR/TREASURE	^K	0		이			0
SEA		981750554									
		tion of five highes nter "NONE."	t-paid emp	loyees (other than those i	ncluded on lii	ne 1—see p	page 23 of the instruction	ons).			
(a)		address of each e nore than \$50,000		(b) Title, and average hours per week devoted to position	(c) Compen	ısatıon	(d) Contributions to employee benefit plans and deferred compensation			se acco owance	
ИОИ	IE										
				1							
				1							
				+				-			
							. .				
Tota	I number of	t other employees	paid over 9	\$50,000			🟲	l			0

Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued) 3. Five highest-paid independent contractors for professional services (see page 23 of the instructions). If none, enter "NONE". (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. O	Form 990-PF (2010)		Page 7							
(c) Compensation NONE Total number of others receiving over \$50,000 for professional services. Total number of others receiving over \$50,000 for professional services. Total number of others receiving over \$50,000 for professional services. Total number of others receiving over \$50,000 for professional services. Total number of others receiving over \$50,000 for professional services. Total number of others receiving over \$50,000 for professional services. Total number of others receiving over \$50,000 for professional services. Total number of others receiving over \$50,000 for professional services. Total number of others receiving over \$50,000 for professional services. Total number of others receiving over \$50,000 for professional services. Total number of others receiving over \$50,000 for professional services. Total number of others receiving over \$50,000 for professional services. Total number of others receiving over \$50,000 for professional services. Total number of others receiving over \$50,000 for professional services. Total number of others receiving over \$50,000 for professional services. Total number of others receiving over \$50,000 for professional services. Total number of others receiving over \$50,000 for professional services. Total number of others receiving over \$50,000 for professional services. Total number of others receiving over \$50,000 for professional services. Total number of others receiving over \$50,000 for professional services. Total number of others receiving over \$50,000 for professional services. Total number of others receiving over \$50,000 for professional services. Total number of others receiving over \$50,000 for professional services. Total number of others receiving over \$50,000 for professional services. Total number of others receiving over \$50,000 for professional services. Total number of others receiving over \$50,000 for professional services. Total number of others receiving over \$50,000 for professional services.										
Total number of others receiving over \$50,000 for professional services. Description Descripti	3 Five highest-paid independent contractors for professional serv	vices (see page 23 of the instructions). If none, e	:nter "NONE".							
Total number of others receiving over \$50,000 for professional services. Del the foundation's four largest direct charitable Activities List the foundation's four largest direct charitable activities during the lax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. 1 2 3 4 Part IX-B Summary of Program-Related Investments (see page 24 of the instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount 1 Amount Total. Add lines 1 through 3.	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation							
Dart IX-B Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficianes served, conferences convened, research papers produced, etc. 1 2 3 3 4 4 Part IX-B Summary of Program-Related Investments (see page 24 of the instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 A mount 1 A mount	NONE									
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Total Add Illies I tillough St		_ 1								
	Iotal. Add lines 1 through 3									

Form	990-PF (2010)		Page 8
Pa	Minimum Investment Return (All domestic foundations must complete this part. For see page 24 of the instructions.)	reign	foundations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc ,		
	purposes		
а	A verage monthly fair market value of securities	1a	8,472,453
b	A verage of monthly cash balances	1b	566,862
c	Fair market value of all other assets (see page 24 of the instructions)	1 c	0
d	Total (add lines 1a, b, and c)	1d	9,039,315
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)	<u> </u>	
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	9,039,315
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see page 25		
	of the instructions)	4	135,590
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	8,903,725
6	Minimum investment return. Enter 5% of line 5	6	445,186
Dai	Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(
	foundations and certain foreign organizations check here 🕨 🗀 and do not complete t	hıs pa	rt.)
1	Minimum investment return from Part X, line 6	1	445,186
2a	Tax on investment income for 2010 from Part VI, line 5 2a 3,423	<u> </u>	
b	Income tax for 2010 (This does not include the tax from Part VI) 2b		
c	Add lines 2a and 2b	2c	3,423
3	Distributable amount before adjustments Subtract line 2c from line 1	3	441,763
4	Recoveries of amounts treated as qualifying distributions	4	0
5	Add lines 3 and 4	5	441,763
6	Deduction from distributable amount (see page 25 of the instructions)	6	0
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	7	441,763
Par	Qualifying Distributions (see page 25 of the instructions)		
1	A mounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	460,850
b	Program-related investments—total from Part IX-B	1b	0
2	A mounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc ,		
	purposes	2	
3	A mounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
ь	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	460,850
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	3,423
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	457,427
-	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whet		
	the section 4940(e) reduction of tax in those years		

For	m 990-PF (2010)				Page 9
Р	art XIII Undistributed Income (see page	26 of the instruct	ions)		
		(a) Corpus	(b) Years prior to 2009	(c) 2009	(d) 2010
1	Distributable amount for 2010 from Part XI, line 7				441,763
2	Undistributed income, if any, as of the end of 2010				
а	Enter amount for 2009 only			392,439	
b	Total for prior years 20, 20, 20		0		
	Excess distributions carryover, if any, to 2010				
а	From 2005				
b	From 2006				
c	From 2007				
d	From 2008				
	From 2009	•			
	Total of lines 3a through e	0			
4	Qualifying distributions for 2010 from Part				
	XII, line 4 🕨 \$ 460,850			202.420	
	Applied to 2009, but not more than line 2a			392,439	
ь	Applied to undistributed income of prior years (Election required—see page 26 of the instructions)		0		
_	Treated as distributions out of corpus (Election				
C	required—see page 26 of the instructions)	0			
d	Applied to 2010 distributable amount				68,411
	Remaining amount distributed out of corpus	0			
	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:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	0			
	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		
а	Subtract line 6c from line 6b Taxable				
u	amount—see page 27 of the instructions		0		
e	Undistributed income for 2009 Subtract line				
	4a from line 2a Taxable amount—see page 27			0	
	of the instructions			0	
f	Undistributed income for 2010 Subtract				
	lines 4d and 5 from line 1 This amount must be distributed in 2011				373,352
7	A mounts treated as distributions out of				
-	corpus to satisfy requirements imposed by				
	section 170(b)(1)(F) or 4942(g)(3) (see page 27	0			
	of the instructions)				
8	Excess distributions carryover from 2005 not				
	applied on line 5 or line 7 (see page 27 of the instructions)	0			
9	Excess distributions carryover to 2011.				
-	Subtract lines 7 and 8 from line 6a	0			
10	Analysis of line 9				
а	Excess from 2006				
b	Excess from 2007				
	Excess from 2008				
	Excess from 2009				
е	Excess from 2010				

- a The name, address, and telephone number of the person to whom applications should be addressed
- **b** The form in which applications should be submitted and information and materials they should include
- c Any submission deadlines
- **d** Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to status of A mount any foundation manager contribution recipient Name and address (home or business) or substantial contributor a Paid during the year See Additional Data Table 450,000 **b** Approved for future payment

I-A Analysis of Income-Products amounts unless otherwise indicated	ina Astivitia				Page 1 2
		siness income	Excluded by section	512, 513, or 514	(e)
n service revenue	(a) Business code	(b) A mount	(c) Exclusion code	(d) A mount	Related or exempt function income (See page 28 of the instructions)
and contracts from government agencies ership dues and assessments on savings and temporary cash investments and interest from securities			14 14 14		4,000
al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions on page 2 I-B Relationship of Activities to Explain below how each activity for whi	the Accomp	ulations) olishment of E	Exempt Purpose e) of Part XVI-A co	3	417,101 ntly to
	vorksheet in line 13 instructions on page 2 I-B Relationship of Activities to Explain below how each activity for whi the accomplishment of the organization page 28 of the instructions)	and contracts from government agencies ership dues and assessments	and contracts from government agencies ership dues and assessments	and contracts from government agencies ership dues and assessments	and contracts from government agencies ership dues and assessments on savings and temporary cash investments indicate the accomplishment of Exempt Purposes page 28 of the instructions on page 28 of the instructions of page 28 of the instructions of the decomplasment of the organization's exempt purposes (other than by providing funds for such purposes)

Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations Yes	Form 99	90-PF (2	2010)							Рa	ge 13
Solicio of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? a Transfers from the reporting foundation to a noncharitable exempt organization of (1) Cash. (2) Other assets. b Other transactions (3) Sales of assets to a noncharitable exempt organization. (3) Rental of facilities, equipment, or other assets. (4) Reimburs ement arrangements. (5) Loans or loan guarantees. (6) Performance of services or membership or fundraising solicitations. c Sharing of facilities, equipment, mailing lists, other assets, or paid employees. d If the answer to any of the above is "Yes," complete the following schedule: Column (b) should always show the fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services given by the reporting foundation if the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received (a) Inne No (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangement (a) Name of organization (c) Uniform the fair market value in any transaction of prepared to the following schedule (b) Inne No (c) Description of transfers, transactions, and sharing arrangement (d) Name of organization (c) Name of organization (c) Description of relationship (d) Tress, complete the following schedule (d) Name of organization (e) Name of organization (c) Description of relationship (d) Tress, complete the following schedule (d) Name of organization (e) Name of organization (e) Name of organization (f) Tress of my knowledge and belief, it is true, correct, and complete the following schedule and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer or fiduciary) based on all information of which preparer has any knowledge Date Date PTIN Check it self- amployed F	Part	XVII				ransac	ctions and Relation	ships With			
a Transfers from the reporting foundation to a noncharitable exempt organization of (1) Cash.	1 Did t	the organi	zation directly or indirectly	y engage in any	of the following with any oth	ner organız	ation described in section			Yes	No
(1) Cash. 1a(3) (2) Other assets. 1a(3) (3) Seles of assets to a noncharitable exempt organization. 1b(3) (2) Purchases of assets from a noncharitable exempt organization. 1b(3) (3) Rental of fecilities, equipment, or other assets. 1b(3) (4) Reimbursement arrangements. 1b(4) (5) Loans or loan guarantees. 1b(5) (6) Performance of services or membership or fundraising solicitations. 1b(6) (7) Loans or loan guarantees. 1b(6) (8) If the answer to any of the above is "Ves, complete the following schedule Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation if the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received (a) Line No (b) Amount involved (c) Name of noncharidable exempt organization (b) Amount involved (c) Name of noncharidable exempt organization (c) Description of transfers, transactions, and sharing arrangement described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? (a) Interpolate the following schedules (b) Interpolate the following schedules (c) Name of organization (c) Description of mistronship (c) Description of mistronship (d) Description of transfers, transactions, and sharing arrangement (e) Name of organization (e) Preparer (and complete Declaration of preparer (other than spayer or fiduciary) based on all information of which preparer has any knowledge Date Date PTIN	501(c) of the	Code (other than section	501(c)(3) organ	nizations) or in section 527, re	elating to p	oolitical organizations?				
(2) Other assets. (3) Sales of assets to a noncharitable exempt organization. (1) Sales of assets from a noncharitable exempt organization. (2) Purchases of assets from a noncharitable exempt organization. (3) Rental of facilities, equipment, or other assets. (4) Reimbursement arrangements. (5) Loans or loan guarantees. (6) Performance of services or membership or fundraising solicitations. (6) Performance of services or membership or fundraising solicitations. (7) Sales of services or according to the sales of services or membership or fundraising solicitations. (8) Endowed Teachilities, equipment, mailing lists, other assets, or paid employees. (9) It is also shown as the sales of services given by the reporting foundation if the foundation neceived laminary transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received (a) Line No (b) Amount involved (c) Name of nonchantable exempt organization (d) Description of transfers, transactions, and sharing arrangeme described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? (2) If Yes, Complete the following schedule of the property of the property of the section 501 (c) of the Code (other than section 501(c)(3)) or in section 527? (a) Name of organization (b) Type of organization (c) Description of relationships and statements, and the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than texpayer or fiduciary) based on all information of which preparer has any knowledge Vision of the property of the following schedules and statements, and the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than texpayer or fiduciary) based on all infor	a Trai	nsfers fr	om the reporting four	ndation to a r	oncharitable exempt or	ganızatıc	on of				
b Other transactions (1) Sales of assests to a noncharitable exempt organization. (2) Purchases of assests from a noncharitable exempt organization. (3) Rental of facilities, equipment, or other assets. (4) Reimbursement arrangements. (5) Loans or loan guarantees. (6) Performance of services or membership or fundraising solicitations. (7) Sales of facilities, equipment, mailing lists, other assets, or paid employees. (8) Performance of services or membership or fundraising solicitations. (9) Sales or facilities, equipment, mailing lists, other assets, or paid employees. (1) Casharing of facilities, equipment, mailing lists, other assets, or paid employees. (1) Sales of facilities, equipment, mailing lists, other assets, or paid employees. (1) Sales of facilities, equipment, mailing lists, other assets, or paid employees. (1) Sales of facilities, equipment, mailing lists, other assets, or paid employees. (2) Sales of facilities, equipment, sales of the goods, other assets, or services given by the reporting foundation if the foundation received less than fair market value in any transaction or sharing arrangement, show in column (2) the value of the goods, other assets, or services received (2) Une No (3) Amount involved (4) Description of transfers, transactions, and sharing arrangement described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? (a) Une No (b) Amount involved (c) Name of machantable exempt organization (d) Description of transfers, transactions, and sharing arrangement described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? (a) Description of transfers, transactions, and sharing arrangement described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? (b) Preys, "complete the following schedule (a) Bame of organization (c) Description of peacing the section 527? (c) Description of estimating the section 527? (d) Description of transfers are section 527? (e) Description of estimating the section 52	(1)	Cash.							1a(1)		No
(a) Sales of assets to a noncharitable exempt organization. (b) Purchases of assets from a noncharitable exempt organization. (c) Purchases of assets from a noncharitable exempt organization. (d) Reimbursement arrangements. (d) Reimbursement arrangements. (d) Reimbursement arrangements. (e) Performance of services or membership or fundraising solicitations. (e) Performance of services or membership or fundraising solicitations. (f) Performance of services or membership or fundraising solicitations. (g) Reimbursement arrangement, mailing lists, other assets, or paid employees. (g) Line No line above is "Yes," complete the following schedule Column (b) should always show the far market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services given by the reporting foundation if the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received (a) Line No line Market (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangement of the service of the goods, other assets, or services received described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? (a) Line No line for general section 501(c) of the Code (other than section 501(c)(3)) or in section 527? (b) If "Yes," complete the following schedule (c) Signature of officer or trustee (b) Type of organization (c) Description of relationship. (e) Description of transfers, transactions, and statements, and the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer or fiduciary) based on all information of which preparer has any knowledge (b) Type of organization of preparer (other than taxpayer or fiduciary) based on all information of which preparer has any knowledge (c) Date Check if Self-employed in the proper of the general s	(2)	Othera	issets						1a(2)		No
(2) Purchases of assets from a noncharitable exempt organization. (3) Rental of facilities, equipment, or other assets. (4) Reimbursement arrangements. (5) Loans or loan guarantees. (6) Performance of services or membership or fundraising solicitations. (7) Staring of facilities, equipment, mailing lists, other assets, or paid employees. (8) If the answer to any of the above is "Yes," complete the following schedule Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation if the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or sharing arrangement, show in column (d) the value of the goods, other assets, or services received (a) Line No (b) Amount involved (c) Name of nonchantable exempt organization (d) Description of bransfers, transactions, and sharing arrangement described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?. (a) If "Yes," complete the following schedule (b) Type of organization (c) Description of relationship (c) Description of perpury, I declare that I have examined this return, including accompanying schedules and statements, and the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer or fiduciary) based on all information of which preparer has any knowledge Preparer's Patrick E GREEN Date Date Prink Check if self-employed Pri	b Oth	er trans	actions								
(3) Rental of facilities, equipment, or other assets. (4) Reimburs ement arrangements. (5) Loans or loan guarantees. (6) Performance of services or membership or fundraising solicitations. (6) Performance of services or membership or fundraising solicitations. (7) In the answer to any of the above is "Yes," complete the following schedule Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation if the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received (a) Line No (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangement arrangement in the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? (a) Line No (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangement described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? (b) If "Yes," complete the following schedule (a) Name of organization (b) Type of organization (c) Description of relationship Under penalties of perjury. I declare that I have examined this return, including accompanying schedules and statements, and the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer or fiduciary) based on all information of which preparer has any knowledge Under penalties of perjury. I declare that I have examined this return, including accompanying schedules and statements, and the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer or fiduciary) based on all information of which preparer has any knowledge Signature of officer or trustee Date	(1)	Sales o	fassets to a noncha	rıtable exem	pt organization				1b(1)		No
(4) Reimbursement arrangements. (5) Loans or loan guarantees. (6) Performance of services or membership or fundraising solicitations. (6) Performance of services or membership or fundraising solicitations. 2 Sharing of facilities, equipment, mailing lists, other assets, or paid employees. 3 Ib(6) 4 If the answer to any of the above is "Yes," complete the following schedule Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation if the foundation received is set in fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received (a) Line No (b) Amount involved (c) Name of nonchantable exempt organization (d) Description of transfers, transactions, and sharing arrangement described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? 5 If "Yes," complete the following schedule (d) Name of organization (e) Transfers, transactions, and sharing arrangement described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? 6 Name of organization (b) Trye of organization (c) Description of relationship (d) Name of organization of which preparer has any knowledge 10 Line No (e) Description of relationship (e) Description of relationship (e) Description of reparer (other than taxpayer or fiduciary) based on all information of which preparer has any knowledge 2011-08-04 3 Signature of officer or trustee 2011-08-04 4 ****** Check if self- employed > Check if self-	(2)	Purcha	ses of assets from a	noncharitabl	e exempt organization.				1b(2)		No
(5) Loans or loan guarantees. (6) Performance of services or membership or fundraising solicitations. (7) Saring of facilities, equipment, mailing lists, other assets, or paid employees. (8) If the answer to any of the above is "Yes," complete the following schedule Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation if the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received (a) Line No (b) Amount involved (c) Name of nonchantable exempt organization (d) Description of transfers, transactions, and sharing arrangement in the value of the goods, other assets, or services received (a) Line No (b) Amount involved (c) Name of nonchantable exempt organization (d) Description of transfers, transactions, and sharing arrangement (e) Description of transfers, transactions, and sharing arrangement described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? (a) If "Yes," complete the following schedule (a) Name of organization (e) Description of relationship Description of relationship Description of relationship Description of relationship Descriptionship Description of relationship Description of relationship Description of relationship Description of relationship Description of reparer (other than taxpayer or fiduciary) based on all information of which preparer has any knowledge Description of preparer (other than taxpayer or fiduciary) based on all information of which preparer has any knowledge Description of preparer (other than taxpayer or fiduciary) based on all information of which preparer has any knowledge Description of preparer (other than taxpayer or fiduciary) based on all information of which pre	(3)	Rental	of facilities, equipme	nt, or other a	ssets				1b(3)		No
(5) Loans or loan guarantees. (6) Performance of services or membership or fundraising solicitations. (7) Saring of facilities, equipment, mailing lists, other assets, or paid employees. (8) If the answer to any of the above is "Yes," complete the following schedule Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation if the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received (a) Line No (b) Amount involved (c) Name of nonchantable exempt organization (d) Description of transfers, transactions, and sharing arrangement in the value of the goods, other assets, or services received (a) Line No (b) Amount involved (c) Name of nonchantable exempt organization (d) Description of transfers, transactions, and sharing arrangement (e) Description of transfers, transactions, and sharing arrangement described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? (a) If "Yes," complete the following schedule (a) Name of organization (e) Description of relationship Description of relationship Description of relationship Description of relationship Descriptionship Description of relationship Description of relationship Description of relationship Description of relationship Description of reparer (other than taxpayer or fiduciary) based on all information of which preparer has any knowledge Description of preparer (other than taxpayer or fiduciary) based on all information of which preparer has any knowledge Description of preparer (other than taxpayer or fiduciary) based on all information of which preparer has any knowledge Description of preparer (other than taxpayer or fiduciary) based on all information of which pre	(4)	Reımbu	rsement arrangemer	nts					1b(4)		No
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees. d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting floring foundation. If If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (a) Line No. (b) Amount involved. (c) Name of noncharitable exempt organization. (d) Description of transfers, transactions, and sharing arrangement. Show in column (d) the value of the goods, other assets, or services received. (a) Line No. (b) Amount involved. (c) Name of noncharitable exempt organization. If the good is considered in the good is considered in the good in									1b(5)		No
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees. d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting floring foundation. If If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (a) Line No. (b) Amount involved. (c) Name of noncharitable exempt organization. (d) Description of transfers, transactions, and sharing arrangement. Show in column (d) the value of the goods, other assets, or services received. (a) Line No. (b) Amount involved. (c) Name of noncharitable exempt organization. If the good is considered in the good is considered in the good in	(6)	Perform	ance of services or n	nembership o	r fundraising solicitatio	ns			1b(6)		No
d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (a) Line No (b) Amount involved (c) Name of nonchantable exempt organization (d) Description of transfers, transactions, and sharing arrangement and the second of the color of the				•	_				<u> </u>		No
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described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?	(4) 2		(D) ranounc involved	(c) Hame or .	ionananable exempt organiz		(a) Bescription of dansiers,	transactions, and one	aring arra	gee.	
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?											
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described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?											
the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer or fiduciary) based on all information of which preparer has any knowledge ****** 2011-08-04	des	crıbed ır	n section 501(c) of the splete the following s	ne Code (othe schedule	er than section 501(c)(3	3)) or in s	section 527?			ıs F	No
based on all information of which preparer has any knowledge ****** Signature of officer or trustee Date Preparer's PATRICK E GREEN Signature Preparer's Signature PATRICK E GREEN Signature		Under	penalties of perjury,	I declare tha	it I have examined this	return, ır	ncluding accompanying s	chedules and sta	tement	s, and	to
Signature of officer or trustee Date Date Check if self-employed Signature Preparer's Signature		based	on all information of			plete De	1		r or fidu	ciary)	IS
Date Check if self- employed F Signature PTIN		Sid	nature of officer or t	rustee				Title			
Check if self- employed > \(\)		- <u>'</u>	I				Data	1	LDTIN		
Preparer's Signature PATRICK E GREEN Signature Firm's name SMITH BUNDAY BERMAN BRITTON PS Firm's EIN	2						Date	Check if self-	FIIN		
SMITH BUNDAY BERMAN BRITTON PS FIRM'S EIN ►	gnHƙ		Preparer's PATRICK E GREEN employed ▶ ☐								
	S	Paid Preparer Use Only	Firm's name 🕨		SMITH BUNDAY BER	MAN BR	ITTON PS	Firm's EIN ►	<u> </u>		
11808 NORTHUP WAY SUITE 240		<u></u>			11808 NORTHUP WA	Y SUITE	E 240	7			
Firm's address BELLEVUE, WA 980051922 Phone no (425) 827-8255		"-	Firm's address 🕨		BELLEVUE, WA 9800	051922		Phone no (425	5) 827-	8255	

efile GRAPHIC print	- DO NOT PROCESS	As Filed Data -			DLN: 93491226006001					
Schedule B		Schedu	le of Contributors		OMB No 1545-0047					
(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service		► Attach to F	orm 990, 990-EZ, or 990-PF.		2010					
Name of organization HARVEST FOUNDATION	1			Employer id	entification number					
				91-206563	35					
Organization type (ch	neck one)									
Filers of:	Section:									
Form 990 or 990-EZ	F 501(c)() (enter number) or	ganızatıon							
	- 4947(a)(1)	nonexempt charitat	ole trust not treated as a private founda	ition						
	□ 527 politica	527 political organization								
Form 990-PF	▽ 501(c)(3) €	exempt private found	dation							
	~ 4947(a)(1)	nonexempt charitat	ple trust treated as a private foundation							
	5 01(c)(3) t	axable private found	dation							
property) from	tion filing Form 990, 99 any one contributor Co		t received, during the year, \$5,000 or m	ore (in money or						
Special Rules										
under sections	509(a)(1) and 170(b)(1	l)(A)(vı), and receiv	0-EZ, that met the 33 ¹ /3% support test of red from any one contributor, during the 990, Part VIII, line 1h, or (ii) Form 990-EZ	year, a contribut						
		-	m 990, or 990-EZ, that received from an	•	r,					
			000 for use <i>exclusively</i> for religious, challon of cruelty to children or animals. Coi		and					
during the year, not aggregate to the year for an applies to this o	contributions for use of more than \$1,000 If the exclusively religious, conganization because it	exclusively for religing this box is checked, haritable, etc., purporeceived nonexclus	m 990, or 990-EZ, that received from an lous, charitable, etc , purposes, but these enter here the total contributions that wose. Do not complete any of the parts unively religious, charitable, etc , contributions.	se contributions of ere received dur nless the Gener tions of \$5,000 or	did ring al Rule r more					
990-EZ, or 990-PF), but	ıt must answer "No"	on Part IV, line 2 of i	and/or the Special Rules does not file S ts Form 990, or check the box on lin Ho not meet the filing requirements of Sch	of its						

Name of organization HARVEST FOUNDATION Employer identification number

91-2065635

Part I	Contributors (see Instructions)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution		
1	EDWARD AND MARJORIE RINGNESS PO BOX 75554 SEATTLE, WA 981750554	- \$50,000	Person		
(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		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution		
_		\$	Person Payroll Noncash Noncash (Complete Part II if there is a noncash contribution)		

Name of organization
HARVEST FOUNDATION

Employer identification number
91-2065635

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

Name of organization HARVEST FOUNDATION **Employer identification number**

91-2065635

No. om art I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and	(e) Transfer of gift ZIP + 4 Relatio	enship of transferor to transferee
No. om art I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and	(e) Transfer of gift ZIP + 4 Relatio	enship of transferor to transferee
No. om art I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and	(e) Transfer of gift ZIP + 4 Relatio	onship of transferor to transferee
No.	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
- _	Transferee's name, address, and	(e) Transfer of gift 7IP + 4 Relatio	onship of transferor to transferee

Part III Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations

Additional Data

Software ID: Software Version:

EIN: 91-2065635

Name: HARVEST FOUNDATION

Form 990PF Part XV Line 1a - List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000).

EDWARD RINGNESS

MARJORIE RINGNESS

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

				-
Recipient 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	Purpose of grant or contribution	A mount
a Paid during the year	or substantial contributor			
ACT THEATRE 700 UNION STREET SEATTLE, WA 98101		501(C)(3)	YOUNG PLAYWRIGHTS PROGRAM	10,000
BENSON HIGH SCHOOL 546 NE 12TH AVE PORTLAND,OR 97232		501(C)(3)	COMMUNICATIONS TECHNOLOGY LAB	10,000
BOOK-IT REPERTORY THEATRE 305 HARRISION ST SEATTLE, WA 98109		501(C)(3)	PAGE TO STAGE RESIDENCY	10,000
BOYS & GIRLS AID 018 SW BOUNDARY CT PORTLAND, OR 97239		501(C)(3)	TRANSITIONAL LIVING PROGRAM	10,000
BOYS & GIRLS CLUBS OF KING COUNTY 603 STEWARD ST SUITE 300 SEATTLE, WA 98101		501(C)(3)	MICROSOCIETY PROGRAM	10,000
CENTER FOR MUSIC BY PEOPLE WITH DISABILITIES 415 WEST CENTRAL AVE MISSOULA,MT 59801		501(C)(3)	GENERAL OPERATING SUPPORT	10,000
COMMUNITY SCHOOL COLLABORATION 16256 MILITARY RD SOUTH SEA TAC, WA 98188		501(C)(3)	FULL-SERVICE COMMUNITY SCHOOLS	10,000
EDITH BISHEL CENTER FOR THE BLIND AND VISUALLY IMPAIRED 628 N ARTHUR ST KENNEWICK, WA 99336		501(C)(3)	INDEPENDENT LIVING PROGRAM	10,000
COCOON HOUSE 2929 PINE STREET EVERETT, WA 98201		501(C)(3)	EDUCATION & LIFE SKILLS PROGRAM FOR HOMELESS TEENS	10,000
EL CENTRO DE LA RAZA 2524 16TH AVE S SEATTLE, WA 98144		501(C)(3)	SENIOR WELLNESS AND CONGREGATE PROGRAM	10,000
FAITH IN ACTION 1121 228TH AVE SE SAMMAMISH,WA 98075		501(C)(3)	GENERAL OPERATING SUPPORT	10,000
ELDERLY OPPORTUNITY AGENCY 134 N WASHINGTON AVENUE EMMETT,ID 83617		501(C)(3)	SENIOR TRANSPORTATION SERVICES	10,000
FRANCISCAN FOUNDATION WASHINGTON PO BOX 182 VAUGHN, WA 98394		501(C)(3)	MUSTARD SEED PROJECT	10,000
GIANT MAGNET 305 HARRISION ST SEATTLE, WA 98109		501(C)(3)	INTERNATIONAL ARTS CONSORTIUM	10,000
IMPACT NORTHWEST PO BOX 33530 PORTLAND, OR 97292		501(C)(3)	SENIOR GUARDIANSHIP ASSISTANCE PRO GRAM	10,000
Total				450,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
GLADSTONE SCHOOL DISTRICT 17789 WEBSTER ROAD GLADSTONE,OR 97027		501(C)(3)	CAREER READINESS IN THE 21ST CENTURY	10,000
GREATER MAPLE VALLEY COMMUNITY CENTER 22010 SE 248TH ST MAPLE VALLEY, WA 98038		501(C)(3)	SENIOR PROGRAM	10,000
HOUSING HOPE 5830 EVERGREEN WAY EVERETT,WA 98203		501(C)(3)	COLLEGE OF HOPE PROGRAM	10,000
ICICLE ARTS PO BOX 775 LEAVENWORTH,WA 98826		501(C)(3)	PROFESSIONAL ARTIST OUTREACH PROGRAM	10,000
LEARNING LAB 308 E 36TH ST GARDEN CITY,ID 83714		501(C)(3)	ADULT LITERACY	10,000
SEATTLE EDUCATION ACCESS 6920 ROOSEVELT WAY NE 355 SEATTLE, WA 98115		501(C)(3)	GENERAL OPERATING SUPPORT	10,000
LOPEZ ISLAND FAMILY RESOURCE CENTER PO BOX 732 LOPEZ ISLAND, WA 98261		501(C)(3)	SMALL BUSINESS AND FAMILY LITERACY PROGRAM	10,000
MOUNTAIN STATES GROUP 1607 W JEFFERSON ST BOISE,ID 83702		501(C)(3)	FRIENDS IN ACTION PROGRAM	10,000
NEIGHBORCARE HEALTH 905 SPRUCE ST 300 SEATTLE,WA 98104		501(C)(3)	SERVICES FOR SENIORS AT PIKE MARKET MEDICAL CLINIC	10,000
TECHNOLOGY ACCESS FOUNDATION 4436 RAINER AVE S SUITE B SEATTLE,WA 98118		501(C)(3)	PROFESSIONAL TEACHER DEVELOPMENT PROGRAM	10,000
NEIGHBORHOOD HOUSE 905 SPRUCE ST SEATTLE, WA 98104		501(C)(3)	SENIOR SERVICES PROGRAM	10,000
NORTHWEST CENTER 7272 W MARGINAL WAY S SEATTLE, WA 98108		501(C)(3)	SCHOOL-TO-WORK PROGRAM	10,000
OPERATION NIGHTWATCH PO BOX 21181 SEATTLE,WA 98111		501(C)(3)	SENIOR HOUSING PROGRAM	10,000
PORTLAND YOUTH BUILDERS 4816 SE 92ND AVE PORTLAND,OR 97266		501(C)(3)	GREEN BUILD IMPLEMENTATION	10,000
FARESTART 700 VIRGINIA STREET SEATTLE,WA 98101		501(C)(3)	GENERAL OPERATING SUPPORT	10,000
Total				450,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	A mount
. ,	or substantial contributor			
a Paid during the year				
HELPING HAND HOUSE PO BOX 710 PUYALLUP, WA 98371		501(C)(3)	EMPLOYMENT PREPARATION AND RETENTION PROJECT	10,000
POWERFUL SCHOOLS 3301 S HORTON ST SEATTLE, WA 98144		501(C)(3)	PO WERFUL ARTS PROGRAM	10,000
PROVAIL 12550 AURORA AVE N SEATTLE,WA 98133		501(C)(3)	TRANSITION PROGRAM	10,000
SANCTUARY ART CENTER 1604 NE 50TH ST SEATTLE,WA 98105		501(C)(3)	ART EDUCATION PROGRAMS	10,000
SEATTLE GOODWILL 1765 SIXTH AVE S SEATTLE,WA 98137		501(C)(3)	EXPANDED SUPPORT SERVICES AT JOB TRAINING	10,000
SEATTLE YOUTH SYMPHONY ORCHESTRA 11065 FIFTH AVE NE SUITE A SEATTLE,WA 98125		501(C)(3)	SYSO IN THE SCHOOLS PROGRAM	10,000
SENIOR SERVICES OF SNOHOMISH COUNTY 8225 44TH AVE W SUITE O MULKITEO, WA 98275		501(C)(3)	MEALS ON WHEELS PROGRAM	10,000
SENIOR SERVICES SEATTLE 2208 2ND AVE SUITE 100 SEATTLE, WA 98121		501(C)(3)	GENERAL OPERATING SUPPORT	10,000
TRANSITIONS PROGRAMS FOR WOMEN 1002 N SUPERIOR SPOKANE, WA 99202		501(C)(3)	NEW LEAF BAKERY CAFE JOB TRAINING PROGRAM	10,000
YWCA OF SEATTLEKINGSNOHOMISH 905 SPRUCE STREET STE 100 SEATTLE,WA 98104		501(C)(3)	YOUNG PARENT PROGRAM	10,000
UPPER ROGUE COMMUNITY CENTER PO BOX 216 SHADY COVE,OR 97539		501(C)(3)	SENIOR DISABLED TRANSPORTATION PROGRAM	10,000
VASHON MAURY SENIOR SERVICES PO BOX 848 VASHON, WA 98070		501(C)(3)	GENERAL OPERATING SUPPORT	10,000
TACOMA COMMUNITY HOUSE PO BOX 5107 TACOMA,WA 98415		501(C)(3)	COMPUTER LAB PROGRAM	10,000
YWCA OF GREATER PORTLAND 111 SW 10TH AVE PORTLAND, OR 97205		501(C)(3)	EAST COUNTY SENIOR SERVICES	10,000
LITERACY COUNCIL OF KITSAP 616 - 5TH STREET BREMERTON, WA 98337		501(C)(3)	GENERAL OPERATING SUPPORT	10,000
Total				450,000

TY 2010 Accounting Fees Schedule

Name: HARVEST FOUNDATION

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
SMITH BUNDAY BERMAN BRITTON, PS - FORM 990-PF PREPARATION	11,389	5,694		5,695

Name: HARVEST FOUNDATION

DLN: 93491226006001

EIN: 91-2065635

	EIN: 91-2065635					
ldentifier	Return Reference	Explanation				
FEES DETAIL	PART 1, LINE 16	PART I, LINE 16, COLUMN (A) LINE 16A, LEGAL FEES NAME OF PROVIDER - JEPPESEN GRAY SAKAI PS TYPE OF SERVICE PROVIDED - GENERAL CORPORATE COUNSELINGAMOUNT PAID - \$125LINE 16B, ACCOUNTING FEES NAME OF PROVIDER - SMITH BUNDAY BERMAN BRITTON, PS TYPE OF SERVICE PROVIDED - FORM 990-PF PREPARATIONAMOUNT PAID - \$11,389LINE 16C, OTHER PROFESSIONAL FEES NAME OF PROVIDER - MERRILL LYNCHTYPE OF SERVICE PROVIDED - INVESTMENT SERVICESAMOUNT PAID - \$62,252				
US AND STATE GOVERNMENT OBLIGATIONS	PART 2, LINE 10A	STATEMENT 8 - SUPPORTING SCHEDULE DETAIL OF PART II, LINE 10A - BALANCE SHEET - U S AND STATE GOVERNMENT OBLIGATIONS FACE AMT COST BASIS FAIR MARKET VALUE U S GOVERNMENT OBLIGATIONS US TREASURY NOTE RATE 1 875% MATURES 7/15/2015 \$45,000 \$46,865 \$54,811 SUBTOTAL - U S GOVERNMENT OBLIGATIONS \$46,865 \$54,811 STATE AND MUNICIPAL GOVERNMENT OBLIGATIONS NORTH THURSTON PUB SCHS WASH RATE 4% MATURES 12/1/2017 \$50,000 \$50,005 \$53,752 IOWA STATE HOSP REVENUE BONDS RATE 4% MATURES 9/1/2019 50,000 \$50,028 \$51,413 SUBTOTAL - STATE & MUNIGOVERNMT OBLIGATIONS \$100,033 \$105,165 TOTAL \$146,898 \$159,976				
INVESTMENTS - COPORATE STOCK	PART II, LINE 10B	TAT TEMPERT 3 - SUPPORTIVE SCHEDILLEIFAL OF PART 1 LINE IDBBALANCE SHAFT - CORPRIVATE STOOL MICESTRATIST SHES DESCRIPTION COST EARS IS FAR AMERICAT VALLEDSON GAHARES STOOLS SYSTEMS INC. 101 201 101 110 1635 SHARRES CHE OF CROLP 27, 366: 40, 173 1000 SHARRES IS STOOLS SYSTEMS INC. 101 202 101 115 105 835 SHARRES CHE OF CROLP 27, 366: 40, 173 1000 SHARRES IS SHARES INFENDITY, 744, 341, 734, 422 2000 SHARES RYDEX SAP PEULAL WEIGHT 69, 376: 40 200 SHARES IT SAR SHARES ANGEN LOC 21, 184 22, 729 52 SHARES APPLE NO 10, 262: 1173 1273 118 AMERIS SASA ABLOVY AB ART 11, 151 118 104 225 SHARES BALL CORP 11,728 175 SHARES SHARES SHARES SHARES SHARES SHARES ANGEN LOC 21, 184 22, 729 52 SHARES APPLE NO 10, 262: 1173 1273 118 AMERIS SHARES SHARES SHARES CHE OF CROSS SHARES SHA				
INVESTMENTS - CORPORATE BONDS	PART II, LINE 10C	STATEMENT 10 - SUPPORTING SCHEDULE DETAIL OF PART II, LINE 10C - BALANCE SHEET - CORP BONDS INVESTMENTS FACE AMT COST BASIS FAIR MARKET VALUE GENERAL ELECTRIC CAPITAL CORP RATE 4 0% MATURES 11/15/12 50,000 50,000 51,171 00CIT GROUP INC SECD NT-A RATE 7% MATURES 5/1/2013 9,919 11,253 10,117 00 CIT GROUP INC SECD NT-A RATE 7% MATURES 5/1/2014 14,879 16,879 15,028 00 CIT GROUP INC SECD NT-A RATE 7% MATURES 5/1/2015 14,879 16,879 14,916 00 CIT GROUP INC SECD NT-A RATE 7% MATURES 5/1/2016 24,799 28,133 24,892 00 CIT GROUP INC SECD NT-A RATE 7% MATURES 5/1/2017 34,719 39,386 34,806 00 COUNTRY WIDE HOME LOANS RATE 5 5% MATURES 5/16/18 55,000 56,380 54,298 00 AETNA INC RATE 6% MATURES 6/15/2016 140,000 147,461 159,650 00 BELLSOUTH TELECOM RATE 6 375% MATURES 6/1/2028 140,000 145,585 147,934 00 MERRILL LYNCH & CO INC RATE 6 22% MATURES 9/15/2026 140,000 142,986 132,846 00 NEW YORK TELE CO RATE 6 7% MATURES 11/11/2023 140,000 146,060 147,913 00 CATERPILLAR FINANCIAL SVCS CORP RATE 4 625% MATURES 6/1/2015 70,000 69,305 75,847 00 AMERICAN INTERNATION GROUP INC 5 05% MATURES 10/1/2015 50,000 48,076 51,328 00 GE CAPITAL INTERNOTES 5 75% MATURES 12/15/2015 40,000 40,005 42,981 00 VERIZON COMMUNICATIONS INC 5 5% MATURES 2/15/2018 50,000 49,956 54,947 00 HARTFORD FINANCIAL SERVICES 6 0% MATURES 1/15/2019 50,000 50,456 52,108 00 JOHNS HOPKINS UNIVERSITY 5 25% MATURES 7/1/2019 139,000 139,827				
INVESTMENTS	PART II,	152,450 00 TOTAL \$1,198,627 \$1,223,232 STATEMENT 11 - SUPPORTING SCHEDULE DETAIL OF PART II, LINE 13 - BALANCE SHEET - INVESTMENTS- OTHER OTHER INVESTMENTS - PET COST FAIR MARKET VALUE 1240 SHS HEALTHCARE REIT INC \$ 53,048 \$				
- OTHER	LINE 13	OTHER OTHER INVESTMENTS - REIT COST FAIR MARKET VALUE 1240 SHS HEALTHCARE REIT INC \$ 53,048 \$ 59,074 1631 SHS HCP INC 52,700 60,004 \$105,748 \$119,078				

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TY 2010 Investments Corporate Bonds Schedule

Name: HARVEST FOUNDATION

Name of Bond	End of Year Book Value	End of Year Fair Market Value
SEE STATEMENT	1,198,627	1,223,232

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TY 2010 Investments Corporate Stock Schedule

Name: HARVEST FOUNDATION

Name of Stock	End of Year Book Value	End of Year Fair Market Value
7,950 SHS MICROSOFT CORPORATION	251,131	221,884
SEE STATEMENT	5,934,416	6,908,040

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TY 2010 Investments - Other Schedule

Name: HARVEST FOUNDATION

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
SEE STATEMENT	AT COST	105,748	119,078

TY 2010 Legal Fees Schedule

Name: HARVEST FOUNDATION

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
JEPPESEN GRAY SAKAI P S - GENERAL CORPORATE COUNSELING	125	63		62

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TY 2010 Other Assets Schedule

Name: HARVEST FOUNDATION

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
RECEIVABLE FROM BROKER	21,304	2,338	2,338
ACCRUED INTEREST RECEIVABLE	0	0	15,016

TY 2010 Other Expenses Schedule

Name: HARVEST FOUNDATION

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LICENSES & FEES	35	0		35
OFFICE EXPENSES	363	0		363
MEMBERSHIPS	4,695	0		4,695

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TY 2010 Other Professional Fees Schedule

Name: HARVEST FOUNDATION

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
BANC OF AMERICA - INVESTMENT SERVICES	62,252	62,252		0

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TY 2010 Taxes Schedule

Name: HARVEST FOUNDATION

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FOREIGN TAX WITHHOLDING	2,777	2,777		0