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Return of Private Foundation

or Section 4947(a)(1) Nonexempt Charitable Trust

Treated as a Private Foundation

2010

Department of the Treasury
Internal Revenue Service

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements

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 ANNA MAY FAMILY FOUNDATION		A Employer identification number 93-1269424
Number and street (or P.O. box number if mail is not delivered to street address) 1314-B CENTER DRIVE BOX 264		B Telephone number 541-857-1040
City or town, state, and ZIP code MEDFORD, OR 97501		C If exemption application is pending, check here <input type="checkbox"/>
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
I Fair market value of all assets at end of year (from Part II, col (c), line 16) \$ 3,199,477.	J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____	E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>
(Part I, column (d) must be on cash basis.)		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
1	Contributions, gifts, grants, etc., received	200.		N/A	
2	Check <input checked="" type="checkbox"/> if the foundation is not required to attach Sch B				
3	Interest on savings and temporary cash investments	24,201.	24,201.		STATEMENT 1
4	Dividends and interest from securities	52,583.	52,583.		STATEMENT 2
5a	Gross rents				
b	Net rental income or (loss)				
6a	Net gain or (loss) from sale of assets not on line 10	5,077.			
b	Gross sales price for all assets on line 6a	580,936.			
7	Capital gain net income (from Part IV, line 2)		5,077.		
8	Net short-term capital gain				
9	Income modifications				
10a	Gross sales less returns and allowances				
b	Less: Cost of goods sold				
c	Gross profit or (loss)				
11	Other income	<7,169.>	<3,567.>		STATEMENT 3
12	Total. Add lines 1 through 11	74,892.	78,294.		
13	Compensation of officers, directors, trustees, etc.	25,000.	12,500.		12,500.
14	Other employee salaries and wages				
15	Pension plans, employee benefits	3,600.	1,800.		1,800.
16a	Legal fees				
b	Accounting fees STMT 4	11,997.	5,998.		5,999.
c	Other professional fees STMT 5	17,582.	17,582.		0.
17	Interest				
18	Taxes STMT 6	4,173.	2,484.		1,689.
19	Depreciation and depletion				
20	Occupancy				
21	Travel, conferences, and meetings	1,318.	659.		659.
22	Printing and publications				
23	Other expenses STMT 7	3,165.	1,533.		1,532.
24	Total operating and administrative expenses. Add lines 13 through 23	66,835.	42,556.		24,179.
25	Contributions, gifts, grants paid	96,937.			96,937.
26	Total expenses and disbursements. Add lines 24 and 25	163,772.	42,556.		121,116.
27	Subtract line 26 from line 12	<88,880.>			
a	Excess of revenue over expenses and disbursements		35,738.		
b	Net investment income (if negative, enter -0-)				
c	Adjusted net income (if negative, enter -0-)			N/A	

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Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only		Beginning of year	End of year	
				(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1	Cash - non-interest-bearing				
	2	Savings and temporary cash investments		202,978.	142,038.	142,038.
	3	Accounts receivable				
		Less: allowance for doubtful accounts				
	4	Pledges receivable				
		Less: allowance for doubtful accounts				
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other disqualified persons				
	7	Other notes and loans receivable				
		Less: allowance for doubtful accounts				
	8	Inventories for sale or use				
	9	Prepaid expenses and deferred charges				
	10a	Investments - U S and state government obligations	STMT 8	149,206.	316,900.	314,559.
	b	Investments - corporate stock	STMT 9	2,293,392.	2,228,488.	2,401,080.
	c	Investments - corporate bonds				
Liabilities	11	Investments - land, buildings, and equipment basis				
		Less: accumulated depreciation				
	12	Investments - mortgage loans				
	13	Investments - other	STMT 10	380,063.	262,965.	336,668.
	14	Land, buildings, and equipment basis				
		Less: accumulated depreciation				
	15	Other assets (describe)	STATEMENT 11)	18,764.	5,132.	5,132.
	16	Total assets (to be completed by all filers)		3,044,403.	2,955,523.	3,199,477.
	17	Accounts payable and accrued expenses				
	18	Grants payable				
Net Assets or Fund Balances	19	Deferred revenue				
	20	Loans from officers, directors, trustees, and other disqualified persons				
	21	Mortgages and other notes payable				
	22	Other liabilities (describe)				
23	Total liabilities (add lines 17 through 22)		0.	0.		
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here <input type="checkbox"/>					
	and complete lines 24 through 26 and lines 30 and 31					
	24	Unrestricted				
	25	Temporarily restricted				
	26	Permanently restricted				
	Foundations that do not follow SFAS 117, check here <input checked="" type="checkbox"/>					
	and complete lines 27 through 31.					
	27	Capital stock, trust principal, or current funds		0.	0.	
28	Paid-in or capital surplus, or land, bldg, and equipment fund		0.	0.		
29	Retained earnings, accumulated income, endowment, or other funds		3,044,403.	2,955,523.		
30	Total net assets or fund balances		3,044,403.	2,955,523.		
31	Total liabilities and net assets/fund balances		3,044,403.	2,955,523.		

Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	3,044,403.
2	Enter amount from Part I, line 27a	2	<88,880.>
3	Other increases not included in line 2 (itemize)	3	0.
4	Add lines 1, 2, and 3	4	2,955,523.
5	Decreases not included in line 2 (itemize)	5	0.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	2,955,523.

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co.)	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a UBS - SEE ATTACHED DETAIL	P	VARIOUS	VARIOUS
b UBS - SEE ATTACHED DETAIL	P	VARIOUS	VARIOUS
c CAPITAL GAINS DIVIDENDS			
d			
e			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a 123,679.		113,828.	9,851.
b 448,686.		462,031.	<13,345.>
c 8,571.			8,571.
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
a			9,851.
b			<13,345.>
c			8,571.
d			
e			

2 Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7	2	5,077.
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6). If gain, also enter in Part I, line 8, column (c). If (loss), enter -0- in Part I, line 8.		3	N/A

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

☐ Yes ☒ No

If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year, see instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2009	119,500.	2,602,946.	.045910
2008	145,727.	3,131,608.	.046534
2007	173,092.	3,441,602.	.050294
2006	155,642.	3,233,786.	.048130
2005	159,554.	3,184,799.	.050099

2 Total of line 1, column (d)	2	.240967
3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	.048193
4 Enter the net value of noncharitable-use assets for 2010 from Part X, line 5	4	2,964,631.
5 Multiply line 4 by line 3	5	142,874.
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	357.
7 Add lines 5 and 6	7	143,231.
8 Enter qualifying distributions from Part XII, line 4 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions	8	121,116.

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions)

1a	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary-see instructions)	1	715.
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> 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-)	2	0.
3	Add lines 1 and 2	3	715.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	715.
6	Credits/Payments		
a	2010 estimated tax payments and 2009 overpayment credited to 2010	6a	4,422.
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	7	4,422.
8	Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	8	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	3,707.
11	Enter the amount of line 10 to be Credited to 2011 estimated tax <input type="checkbox"/> Refunded <input type="checkbox"/>	11	0.

Part VII-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		X
1b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)? 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		X
1c Did the foundation file Form 1120-POL for this year?		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year. (1) On the foundation <input type="checkbox"/> \$ 0. (2) On foundation managers <input type="checkbox"/> \$ 0.		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers <input type="checkbox"/> \$ 0.		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities.		X
3 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		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
b If "Yes," has it filed a tax return on Form 990-T for this year?		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T.		X
6 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?	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 XIV.	X	
8a Enter the states to which the foundation reports or with which it is registered (see instructions) <input type="checkbox"/> OR		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If "Yes," complete Part XIV		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		X

N/A

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Part 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 instructions)	11		X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ▶ N/A	13	X	
14	The books are in care of ▶ AMY BELKIN, EXECUTIVE DIRECTOR Telephone no ▶ 541-857-1040 Located at ▶ 1314-B CENTER DRIVE BOX 264, MEDFORD, OR ZIP+4 ▶ 97501			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the year ▶ 15 N/A			
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? 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 ▶	16	Yes	No X

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

	Yes	No
1a During the year did the foundation (either directly or indirectly):		
(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> 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)?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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 termination of government service, if terminating within 90 days)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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 22 of the instructions)? Organizations relying on a current notice regarding disaster assistance check here ▶ <input type="checkbox"/>	1b	X
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2010?	1c	X
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))		
a At the end of tax year 2010, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2010? If "Yes," list the years ▶	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
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 instructions)	N/A	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 ▶		
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		X
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?		X

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Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)

5a During the year did the foundation pay or incur any amount to

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?

☐ Yes ☒ No

(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?

☐ Yes ☒ No

(3) Provide a grant to an individual for travel, study, or other similar purposes?

☐ Yes ☒ No

(4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)?

☐ Yes ☒ No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?

☐ Yes ☒ No

b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?

N/A

5b

Organizations relying on a current notice regarding disaster assistance check here

☒

c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?

N/A

☐ Yes ☐ No

If "Yes," attach the statement required by Regulations section 53.4945-5(d).

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?

☐ Yes ☒ No

b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

6b

X

If "Yes" to 6b, file Form 8870.

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?

☐ Yes ☒ No

b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?

N/A

7b

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation.

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
SEE ATTACHED STATEMENT				
	0.00	25,000.	0.	0.

2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

Total number of other employees paid over \$50,000

0

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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**3** Five highest-paid independent contractors for professional services. 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

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 such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

	Expenses
1 NONE	
	0.
2	
3	
4	

Part IX-B Summary of Program-Related Investments

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2

	Amount
1 NONE	
	0.
2	
All other program-related investments. See instructions	
3	
Total. Add lines 1 through 3	0.

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Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
a	Average monthly fair market value of securities	1a	2,779,913.
b	Average of monthly cash balances	1b	181,701.
c	Fair market value of all other assets	1c	48,164.
d	Total (add lines 1a, b, and c)	1d	3,009,778.
e	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	3,009,778.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	45,147.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	2,964,631.
6	Minimum investment return. Enter 5% of line 5	6	148,232.

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part)

1	Minimum investment return from Part X, line 6	1	148,232.
2a	Tax on investment income for 2010 from Part VI, line 5	2a	715.
b	Income tax for 2010 (This does not include the tax from Part VI)	2b	
c	Add lines 2a and 2b	2c	715.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	147,517.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	147,517.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	147,517.

Part XII Qualifying Distributions (see 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	121,116.
b	Program-related investments - total from Part IX-B	1b	0.
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		
a	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	121,116.
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	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	121,116.

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

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Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2009	(c) 2009	(d) 2010
1 Distributable amount for 2010 from Part XI, line 7				147,517.
2 Undistributed income, if any, as of the end of 2010				
a Enter amount for 2009 only			17,066.	
b Total for prior years		0.		
3 Excess distributions carryover, if any, to 2010				
a From 2005				
b From 2006				
c From 2007				
d From 2008				
e From 2009				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2010 from Part XII, line 4 ▶ \$ 121,116.				
a Applied to 2009, but not more than line 2a			17,066.	
b Applied to undistributed income of prior years (Election required - see instructions)		0.		
c Treated as distributions out of corpus (Election required - see instructions)	0.			
d Applied to 2010 distributable amount				104,050.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2010 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b Taxable amount - see instructions		0.		
e Undistributed income for 2009 Subtract line 4a from line 2a Taxable amount - see instr			0.	
f Undistributed income for 2010 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2011				43,467.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2005 not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2011. Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9				
a Excess from 2006				
b Excess from 2007				
c Excess from 2008				
d Excess from 2009				
e Excess from 2010				

N/A

b Check box to indicate whether the foundation is a private operating foundation described in section

☐ 4942(j)(3) or ☐ 4942(j)(5)

h 85% of line 2a

c Qualifying distributions from Part XII,
line 4 for each year listed

d Amounts included in line 2c not used directly for active conduct of exempt activities

e Qualifying distributions made directly for active conduct of exempt activities

Subtract line 2d from line 2c

3 Complete 3a, b, or c for the alternative test relied upon

a "Assets" alternative test - enter
(1) Value of all assets

(2) Value of assets qualifying under section 4942(i)(3)(B)(i)

b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed

c "Support" alternative test - enter

(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)

(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)

(3) Largest amount of support from an exempt organization

(4) Gross investment income

Part XV **Supplementary Information** (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see the instructions.)

1 Information Regarding Foundation Managers:

a 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) (See section 507(d)(2))

NONE

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

NONE

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

Check here ☐ 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 instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

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

SEE STATEMENT 12

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

Part XV Supplementary Information (continued)**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	Amount
a Paid during the year				
SEE STATEMENT 13				
Total			3a	96,937.
b Approved for future payment				
NONE				
Total			3b	0.

Part XVII

Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

- | | | Yes | No |
|----------|--|-------|----|
| 1 | Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) 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 | 1a(1) | X |
| | (2) Other assets | 1a(2) | X |
| b | Other transactions | | |
| | (1) Sales of assets to a noncharitable exempt organization | 1b(1) | X |
| | (2) Purchases of assets from a noncharitable exempt organization | 1b(2) | X |
| | (3) Rental of facilities, equipment, or other assets | 1b(3) | X |
| | (4) Reimbursement arrangements | 1b(4) | X |
| | (5) Loans or loan guarantees | 1b(5) | X |
| | (6) Performance of services or membership or fundraising solicitations | 1b(6) | X |
| c | Sharing of facilities, equipment, mailing lists, other assets, or paid employees | 1c | X |
| 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. | | |

[illegible]

- 2a** Is 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? ☐ Yes ☒ No
- b** If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship
N/A		

**Sign
Here**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge.

Signature of officer or trustee

Date _____

Title

**Paid
Preparer
Use Only**

Print/Type preparer's name

Preparer's signature

Date

Check ☒ self-employed

PTIN	
------	--

MICHAEL E. LYNCH

Michael Elymel, All-8-11

44-8-11

000958109

Firm's name ► MOSS ADAMS, LLP

Firm's EIN ▶

SEIN
91-010931B

Firm's address ► 221 STEWART AVENUE, SUITE 301
MEDFORD, OR 97501

Phone no

FORM 990-PF INTEREST ON SAVINGS AND TEMPORARY CASH INVESTMENTS STATEMENT 1

<u>SOURCE</u>	<u>AMOUNT</u>
EASTERN AMER NAT GAS	216.
EASTERN AMER NAT GAS OID	984.
ENTERPRISE PRODUCTS PARTNERS LP	11.
TC PIPELINES	2.
UBS	16,177.
UBS - US GOVT INT	6,811.
TOTAL TO FORM 990-PF, PART I, LINE 3, COLUMN A	24,201.

FORM 990-PF DIVIDENDS AND INTEREST FROM SECURITIES STATEMENT 2

<u>SOURCE</u>	<u>GROSS AMOUNT</u>	<u>CAPITAL GAINS DIVIDENDS</u>	<u>COLUMN (A) AMOUNT</u>
UBS	61,154.	8,571.	52,583.
TOTAL TO FM 990-PF, PART I, LN 4	61,154.	8,571.	52,583.

FORM 990-PF OTHER INCOME STATEMENT 3

<u>DESCRIPTION</u>	<u>(A) REVENUE PER BOOKS</u>	<u>(B) NET INVEST- MENT INCOME</u>	<u>(C) ADJUSTED NET INCOME</u>
PASS THRU FROM PARTNERSHIP K-1	<41.>	<41.>	
OTHER INVESTMENT INCOME/LOSS	<3,526.>	<3,526.>	
NON TAXABLE INCOME	42.	0.	
PASS THRU FROM PARTNERSHIP K-1	<3,644.>	0.	
TOTAL TO FORM 990-PF, PART I, LINE 11	<7,169.>	<3,567.>	

FORM 990-PF	ACCOUNTING FEES	STATEMENT	4
-------------	-----------------	-----------	---

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING	11,997.	5,998.		5,999.
TO FORM 990-PF, PG 1, LN 16B	11,997.	5,998.		5,999.

FORM 990-PF	OTHER PROFESSIONAL FEES	STATEMENT	5
-------------	-------------------------	-----------	---

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ADVISORY FEES	17,582.	17,582.		0.
TO FORM 990-PF, PG 1, LN 16C	17,582.	17,582.		0.

FORM 990-PF	TAXES	STATEMENT	6
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DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
OREGON STATE TAX	489.	0.		489.
FOREIGN TAX	1,284.	1,284.		0.
PAYROLL TAXES	2,400.	1,200.		1,200.
TO FORM 990-PF, PG 1, LN 18	4,173.	2,484.		1,689.

FORM 990-PF	OTHER EXPENSES	STATEMENT	7
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DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
DUES & SUBSCRIPTIONS	495.	248.		247.
MISCELLANEOUS	333.	166.		167.
OFFICE EXPENSE	474.	237.		237.
INSURANCE	750.	325.		325.
LICENSE & FEES	50.	25.		25.

MILEAGE	354.	177.	177.
WEBSITE	709.	355.	354.
TO FORM 990-PF, PG 1, LN 23	3,165.	1,533.	1,532.

FORM 990-PF	U.S. AND STATE/CITY GOVERNMENT OBLIGATIONS	STATEMENT	8
-------------	--	-----------	---

DESCRIPTION	U.S. GOV'T	OTHER GOV'T	BOOK VALUE	FAIR MARKET VALUE
SEE ATTACHED STATEMENT	X		316,900.	314,559.
TOTAL U.S. GOVERNMENT OBLIGATIONS			316,900.	314,559.
TOTAL STATE AND MUNICIPAL GOVERNMENT OBLIGATIONS				
TOTAL TO FORM 990-PF, PART II, LINE 10A			316,900.	314,559.

FORM 990-PF	CORPORATE STOCK	STATEMENT	9
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DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
SEE ATTACHED STATEMENT	2,228,488.	2,401,080.
TOTAL TO FORM 990-PF, PART II, LINE 10B	2,228,488.	2,401,080.

FORM 990-PF	OTHER INVESTMENTS	STATEMENT	10
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DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
EASTERN AMERICAN NATURAL GAS TRUST, LP	COST	6,328.	6,328.
SEE ATTACHED STATEMENT - OTHER ASSETS	COST	33,672.	88,188.
SEE ATTACHED STATEMENT - OTHER ASSETS	COST	217,115.	232,097.
SEE ATTACHED STATEMENT - OTHER ASSETS	COST	5,850.	10,055.
TOTAL TO FORM 990-PF, PART II, LINE 13		262,965.	336,668.

FORM 990-PF

OTHER ASSETS

STATEMENT 11

DESCRIPTION	BEGINNING OF YR BOOK VALUE	END OF YEAR BOOK VALUE	FAIR MARKET VALUE
INTEREST/DIVIDENDS IN TRANSIT	18,764.	5,132.	5,132.
TO FORM 990-PF, PART II, LINE 15	18,764.	5,132.	5,132.

FORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION
PART XV, LINES 2A THROUGH 2D

STATEMENT 12

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

AMY BELKIN
1314-B CENTER DRIVE BOX 264
MEDFORD, OR 97501

TELEPHONE NUMBER

(541) 601-9915

FORM AND CONTENT OF APPLICATIONS

WRITTEN

ANY SUBMISSION DEADLINES

NONE

RESTRICTIONS AND LIMITATIONS ON AWARDS

DISTRIBUTIONS WILL BE MADE WHICH PRIMARILY BENEFIT OR HAVE CHARITABLE, EDUCATIONAL AND SCIENTIFIC PURPOSES WITHIN JACKSON, JOSEPHINE AND KLAMATH COUNTIES OF OREGON. SECONDARY CONSIDERATION WILL BE GIVEN TO THOSE THAT BENEFIT OR HAVE CHARITABLE, EDUCATIONAL & SCIENTIFIC PURPOSES WITHIN CURRY, LAKE, DOUGLAS, DESCHUTES AND COOS COUNTIES OF OREGON.

FORM 990-PF

GRANTS AND CONTRIBUTIONS
PAID DURING THE YEAR

STATEMENT 13

RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT	RECIPIENT STATUS	AMOUNT
CASA 613 MARKET ST., MEDFORD, OR 97504	NONE CAPACITY BUILDING PROJECT	509(A)(1) PUBLIC CHARITY	3,000.
CENTER FOR NONPROFIT LEGAL SERVICES INC PO BOX 1586, MEDFORD, OR 97501	NONE VETERAN LEGAL SERVICES	509(A)(1) PUBLIC CHARITY	1,000.
CENTRAL POINT SCHOOL DISTRICT #6 300 ASH STR. CENTRAL POINT, OR 97502	NONE PROVIDE SUPPORT FOR LOW INCOME FAMILIES.	170(B)(1) SCHOOL	4,000.
CHILDREN'S ADVOCACY CENTER 816 W. 10TH, MEDFORD, OR 97501	NONE ART WORKSHOP FOR TEEN GIRLS	509(A)(1) PUBLIC CHARITY	1,500.
COMMUNITY HEALTH CENTER 19 MYRTLE STREET, MEDFORD, OR 97504	NONE EMERGENCY (OR URGENT) PRESCRIPTION MEDICATION ASSISTANCE	509(A)(1) PUBLIC CHARITY	5,000.
COMMUNITY WORKS 900 E. MAIN ST., MEDFORD, OR 97504	NONE EMERGENCY AND CRISIS SERVICES FOR DISADVANTAGED YOUTH	509(A)(1) PUBLIC CHARITY	5,000.
FAMILY NURTURING CENTER 212 N. OAKDALE MEDFORD, OR 97501	NONE EMERGENCY (OR URGENT) PRESCRIPTION MEDICATION ASSISTANCE	509(A)(1) PUBLIC CHARITY	8,000.
HELP NOW ADVOCACY CENTER 33 N CENTRAL MEDFORD, OR 97501	NONE EMERGENCY AND CRISIS SERVICES FOR DISADVANTAGED YOUTH	509(A)(1) PUBLIC CHARITY	2,500.

JACKSON COUNTY SEXUAL ASSAULT R.T. 43 MORNINGLIGHT DR. ASHLAND, OR 97520	NONE SEXUAL ASSAULT NURSE EXAMINER TRAINING	509(A)(1) PUBLIC CHARITY	3,000.
JEFFERSON NATURE CENTER PO BOX 1454, MEDFORD, OR 97501	NONE STUDENT ENRICHMENT PROGRAM FOR TITLE 1 SCHOOLS	509(A)(2) PUBLIC CHARITY	2,500.
JOB COUNCIL 673 MARKET ST., MEDFORD, OR 97504	NONE SUPPORT FOR KINDERGARTEN CHILDREN IN NEED	509(A)(1) PUBLIC CHARITY	2,000.
KIDS UNLIMITED 821 N. RIVERSIDE MEDFORD, OR 97501	NONE PROVIDE SCHOLARSHIPS FOR LOW-INCOME YOUTH	509(A)(1) PUBLIC CHARITY	4,500.
KLAMATH BIRD OBSERVATORY PO BOX 758, ASHLAND, OR 97520	NONE HANDS-ON SCIENCE INQUIRY PROGRAM FOR DISADVANTAGED YOUTH	509(A)(1) PUBLIC CHARITY	2,500.
MEDFORD SCHOOL DISTRICT 549C 500 MONROE, MEDFORD, OR 97501	NONE EMERGENCY SERVICES GRANT FOR LOW INCOME CHILDREN	170(B)(1) SCHOOL	10,000.
MEDIATION WORKS 33 N CENTRAL MEDFORD, OR 97501	NONE HANDS-ON SCIENCE INQUIRY PROGRAM FOR DISADVANTAGED YOUTH	509(A)(1) PUBLIC CHARITY	6,000.
OREGON CONSERVATORY OF THE PERFORMING ARTS PO BOX 1359 MEDFORD, OR 97501	NONE PROVIDE HEALTH SERVICES FOR LOW-INCOME CHILDREN	509(A)(1) PUBLIC CHARITY	1,000.
PLANNED PARENTHOOD 125 S. CENTRAL AVE., STE 201, MEDFORD, OR 97501	NONE AT-RISK YOUTH EDUCATION PROGRAM	509(A)(1) PUBLIC CHARITY	4,000.
ROGUE COMMUNITY COLLEGE 3345 REDWOOD HWY, GRANTS PASS, OR 97527	NONE WORKFORCE TRAINING PROGRAM	170(B)(1) SCHOOL	1,500.

ROGUE VALLEY COUNCIL OF GOVERNMENTS 155 N. 1ST STR. CENTRAL POINT, OR 97502	NONE EMERGENCY FUND - VULNERABLE ADULTS	509(A)(1) PUBLIC CHARITY	1,077.
S.O. CHILD & FAMILY COUNCIL PO BOX 3697, CENTRAL POINT, OR 97502	NONE FAMILY LITERACY ACTIVITIES FOR LOW-INCOME LATINOS	509(A)(1) PUBLIC CHARITY	5,000.
SALVATION ARMY P.O. BOX 757, MEDFORD, OR 97501	NONE HOPE HOUSE TRANSITIONAL SHELTER	509(A)(1) PUBLIC CHARITY	5,000.
SCIENCE WORKS HANDS-ON MUSEUM 1500 E MAIN ASHLAND, OR 97520	NONE KIDS SUMMER ART PROGRAM SCHOLARSHIPS FOR DISADVANTAGED FAMILIES.	509(A)(2) PUBLIC CHARITY	1,000.
SO CHILD STUDY & TREATMENT CTR 1836 FREMONT STR. ASHLAND, OR 97520	NONE CHILD ASSISTANCE FOR MENTAL HEALTH	509(A)(1) PUBLIC CHARITY	3,360.
SO EDUCATION EDUCATION SERVICES DIST 101 N. GRAPE MEDFORD, OR 97501	NONE EMERGENCY FUND - VULNERABLE ADULTS	509(A)(1) PUBLIC CHARITY	4,000.
ST VINCENT DE PAUL 2424 NORTH PACIFIC HWY, MEDFORD, OR 97501	NONE RENT EVICTION PREVENTION/EMERGENCY SHELTER	509(A)(1) PUBLIC CHARITY	5,000.
UNITED WAY OF JACKSON COUNTY 711 E MAIN, STE 17, MEDFORD, OR 97504	NONE ASSIST THOSE WITH EMERGENCY FINANCIAL NEEDS	509(A)(1) PUBLIC CHARITY	2,000.
UPPER ROGUE COMMUNITY CENTER P.O. BOX 216, SHADY COVE, OR 97539	NONE EMERGENCY SERVICES	509(A)(1) PUBLIC CHARITY	2,500.
WILDERNESS TRAILS P.O. BOX 4655, MEDFORD, OR 97501	NONE CAMPER SPONSORSHIPS FOR AT-RISK YOUTH	509(A)(1) PUBLIC CHARITY	1,000.

TOTAL TO FORM 990-PF, PART XV, LINE 3A

96,937.

Anna May Family Foundation
Sales of Securities Analysis - ST & LT
12/31/10
93-1269424

UBS	Short Term			Long Term		
	Sales Price	Cost Basis	Gain (Loss)	Sales Price	Cost Basis	Gain (Loss)
9213	19,629.31	18,277.43	1,351.88	32,774.62	24,730.71	8,043.91
7231	-	-	-	35,000.00	47,811.08	(12,811.08)
7232	26,207.19	26,046.25	160.94	147,304.05	147,816.26	(512.21)
7233	-	-	-	25,297.50	25,049.49	248.01
7236	-	-	-	15,000.00	18,335.79	(3,335.79)
7237	-	-	-	25,075.00	37,275.55	(12,200.55)
7238	44,130.12	40,227.47	3,902.65	33,724.69	23,370.73	10,353.96
7239	33,712.41	29,277.29	4,435.12	134,509.70	137,641.82	(3,132.12)
	123,679.03	113,828.44	9,850.59	448,685.56	462,031.43	(13,345.87)
ST<	Sales Price	Cost Basis	Gain Loss			
	572,364.59	575,859.87	(3,495.28)			

Anna May Family Foundation
Sales of Securities Analysis - Sales
12/31/10

Per Annual Summaries

UBS Acct	Sales Price	Cost Basis	Gain (Loss)
9213	52,403 93	43,008 14	9,395 79
7231	35,000 00	47,811 08	(12,811.08)
7232	173,511.24	173,862.51	(351 27)
7233	25,297 50	25,049.49	248 01
7236	15,000.00	18,335 79	(3,335.79)
7237	25,075.00	37,275 55	(12,200 55)
7238	77,854.81	63,598 20	14,256.61
7239	168,222 11	166,919 11	1,303.00
Total UBS	572,364.59	575,859 87	(3,495 28)

ATTACHMENT TO 990PF - DECEMBER 31, 2010
ANNA MAY FAMILY FOUNDATION
DIRECTORS, OFFICERS AND STAFF

<u>(A)</u>	<u>(B)</u>	<u>Weekly</u> <u>hours</u>	<u>(C)</u>	<u>(D)</u>	<u>(E)</u>
Name-Office-Address	Title				
Jaymey Sweeney 1314-B Center Drive Box 264 Medford, OR 97501 Bus 541-857-1040	President	1/2 hr	\$0	\$0	\$0
Michael Lynch 1314-B Center Drive Box 264 Medford, OR 97501 Bus 541-857-1040	Vice President	1/2 hr	\$0	\$0	\$0
John Dailey 1314-B Center Drive Box 264 Medford, OR 97501 Bus 541-857-1040	Treasurer	1/2 hr	\$0	\$0	\$0
Karen Bartalini 1314-B Center Drive Box 264 Medford, OR 97501 Bus 541-857-1040	Director	1/2 hr	\$0	\$0	\$0
Steve Erb 1314-B Center Drive Box 264 Medford, OR 97501 Bus 541-857-1040	Director	1/2 hr	\$0	\$0	\$0
Sister Mary Pat Naumes 1314-B Center Drive Box 264 Medford, OR 97501 Bus 541-857-1040	Director	1/2 hr	\$0	\$0	\$0
Bob Scheelen 1314-B Center Drive Box 264 Medford, OR 97501 Bus 541-857-1040	Director	1/2 hr	\$0	\$0	\$0
Douglass Schmor 1314-B Center Drive Box 264 Medford, OR 97501 Bus 541-857-1040	Director	1/2 hr	\$0	\$0	\$0
Amy Belkin 1314-B Center Drive Box 264 Medford, OR 97501 Bus 541-857-1040	Secretary & Executive Director	7 hr	\$25,000	\$0	\$0

ATTACHMENT TO 990PF - DECEMBER 31, 2010**ANNA MAY FAMILY FOUNDATION****93-1269424****Page 2, Balance Sheet****Part II**

		Book Value	Fair Market Value
Line 10a		Column (b)	Column (c)
U.S. and state government obligations			
UBS Paine Webber	A/C 07232	316,900	314,559
Line 10b			
Corporate Stock			
UBS Paine Webber	A/C 07231	607,850	566,643
UBS Paine Webber	A/C 07232	349,653	363,852
UBS Paine Webber	A/C 07233	356,676	440,373
UBS Paine Webber	A/C 07236	153,654	164,145
UBS Paine Webber	A/C 07237	187,747	158,003
UBS Paine Webber	A/C 07238	76,446	96,997
UBS Paine Webber	A/C 07239	431,013	506,252
		2,228,486	2,401,080
Line 13			
Other Assets			
UBS Paine Webber	A/C 07232	217,115	232,097
UBS Paine Webber	A/C 07239	5,850	10,055
UBS Paine Webber Limited Partnerships	A/C 07233	33,672	88,188
Eastern American Natural Gas Tr		6,328	6,328
		262,965	336,668
Total		2,808,351	3,052,307

Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

► **File a separate application for each return.**

If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box ☒

If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form)

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868

Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on *e-file for Charities & Nonprofits*

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed)

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete

Part I only ☐

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns

Type or print <small>File by the due date for filing your return. See instructions</small>	Name of exempt organization ANNA MAY FAMILY FOUNDATION	Employer identification number 93-1269424
	Number, street, and room or suite no. If a P O box, see instructions 1314-B CENTER DRIVE BOX 264	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. MEDFORD, OR 97501	

Enter the Return code for the return that this application is for (file a separate application for each return)

04

Application Is For	Return Code	Application Is For	Return Code
Form 990	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 990-EZ	03	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

AMY BELKIN, EXECUTIVE DIRECTOR

• The books are in the care of ► **1314-B CENTER DRIVE BOX 264 - MEDFORD, OR 97501**

Telephone No. ► **541-857-1040**

FAX No. ►

• If the organization does not have an office or place of business in the United States, check this box ☐

• If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this box ► ☐ . If it is for part of the group, check this box ► ☐ and attach a list with the names and EINs of all members the extension is for.

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until

AUGUST 15, 2011

, to file the exempt organization return for the organization named above. The extension

is for the organization's return for:

► ☒ calendar year **2010** or

► ☐ tax year beginning , and ending

2 If the tax year entered in line 1 is for less than 12 months, check reason ☐ Initial return ☐ Final return

☐ Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions	3a	\$	2,200.
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	4,422.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions	3c	\$	0.

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

LHA For Paperwork Reduction Act Notice, see Instructions.

Form 8868 (Rev. 1-2011)

- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** and check this box ☒ **X**

Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** (on page 1)

Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed)		
Type or print File by the extended due date for filing your return. See instructions	Name of exempt organization	Employer identification number
	ANNA MAY FAMILY FOUNDATION	93-1269424
	Number, street, and room or suite no. If a P.O. box, see instructions 1314-B CENTER DRIVE BOX 264	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions MEDFORD, OR 97501	

Enter the Return code for the return that this application is for (file a separate application for each return)

04

Application Is For	Return Code	Application Is For	Return Code
Form 990	01		
Form 990-BL	02	Form 1041-A	08
Form 990-EZ	03	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

AMY BELKIN, EXECUTIVE DIRECTOR

- The books are in the care of ☒ 1314-B CENTER DRIVE BOX 264 - MEDFORD, OR 97501

Telephone No ☒ 541-857-1040

FAX No ☐

- If the organization does not have an office or place of business in the United States, check this box ☐

- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) ☐ If this is for the whole group, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for.

4 I request an additional 3-month extension of time until NOVEMBER 15, 2011

5 For calendar year 2010, or other tax year beginning , and ending

6 If the tax year entered in line 5 is for less than 12 months, check reason: ☐ Initial return ☐ Final return

☐ Change in accounting period

7 State in detail why you need the extension

ADDITIONAL TIME IS REQUIRED TO ACCUMULATE AND COMPILE THE INFORMATION NECESSARY TO FILE A COMPLETE AND ACCURATE RETURN.

8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	8a	\$	2,200.
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	8b	\$	4,422.
c Balance due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	8c	\$	0.

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature ☒ Michael Edgell Title ☒ CA

Date ☒ 8-1-11

Form 8868 (Rev. 1-2011)