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Form **990-PF**

Department of the Treasury

Return of Private Foundation

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

OMB No 1545-0052

(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) 1 Contributions, gifts, grants, etc., received 2 Check ▶ ☐ if the foundation is not required to attach Sch B 3 Interest on savings and temporary cash investments 4 Dividends and interest from securities 5a Gross rents (a) Net investment income income for charital for charita	onth termination check here (ash basis only)
Name of foundation LAMOND FAMILY FOUNDATION 94-3204401	onth termination check here (ash basis only)
Name of foundation LAMOND FAMILY FOUNDATION 94-3204401	onth termination check here (ash basis only)
LAMOND FAMILY FOUNDATION Number and street (or P O box number if mail is not delivered to street address) 167 ISABELLA AVENUE City or town, state, and ZIP code ATHERTON, CA 94027 H Check type of organization: X Section 501(c)(3) exempt private foundation Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation I Fair market value of all assets at end of year (from Part II, col (c), line 16) S 738, 234. (Part I, column (d) must be on cash basis) Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in columns (b), (c), and (d) may not necessarily equal the amounts in columns (b), (c), and (d) may not necessarily equal the amounts in columns (a) Revenue and expenses per books 1 Contributions, gifts, grants, etc., received 2 Check cash interest on savings and temporary asia investments b Net rental income or (loss) 1 Net rental income or (loss)	onth termination check here (ash basis only)
LAMOND FAMILY FOUNDATION Number and street (or P O box number if mail is not delivered to street address) 167 ISABELLA AVENUE City or town, state, and ZIP code ATHERTON, CA 94027 H Check type of organization: X Section 501(c)(3) exempt private foundation Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation I Fair market value of all assets at end of year (from Part II, col (c), line 16) S 738, 234. (Part I, column (d) must be on cash basis) Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in columns (b), (c), and (d) may not necessarily equal the amounts in columns (b), (c), and (d) may not necessarily equal the amounts in columns (a) Revenue and expenses per books 1 Contributions, gifts, grants, etc., received 2 Check cash interest on savings and temporary asia investments b Net rental income or (loss) 1 Net rental income or (loss)	onth termination check here (ash basis only)
Number and street (or P O box number if mail is not delivered to street address) 167 ISABELLA AVENUE City or town, state, and ZIP code ATHERTON, CA 94027 H Check type of organization:	as terminated theck here onth termination chartable purposes (cash basis only)
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ATHERTON, CA 94027 H Check type of organization: X Section 501(c)(3) exempt private foundation Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation I Fair market value of all assets at end of year (from Part II, col (c), line 16) Tax 738, 234. (Part I, column (d) must be on cash basis) Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in columns (a)) 1 Contributions, gifts, grants, etc., received 2 Check of if the foundation is not required to attach Sch B 3 Interest on savings and temporary cash investments 4 Dividends and interest from securities 5 a Gross rents D 1. Foreign organizations, check here 2. Foreign organizations, check here 2. Foreign organizations meeting the 85% of check here and attach computation Check here and attach computation E If private foundation status was term under section 507(b)(1)(A), check here and expenses per books F if the foundation is in a 60-month ter under section 507(b)(1)(B), check here and expenses per books (a) Revenue and expenses per books 1 Contributions, gifts, grants, etc., received 2 450,000. A Dividends and interest from securities T 101. Contributions (a) Part II (c) Adjusted net income (c) Adjusted net income (c) Adjusted net income (cash by cash investments (cash by cash investments) A Dividends and interest from securities D Net rental income or (loss)	ck here the 85% test, tition as terminated theck here onth termination theck here (d) Disbursements or charitable purposes (cash basis only)
H Check type of organization: Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation I Fair market value of all assets at end of year (from Part II, col (c), line 16) Tax nonexempt charitable trust Other (specify) Tax nonexempt li, col (c), line 16) Tax nonexempt line foundation status was term under section 507(b)(1)(A), check here and attach computation status was term under section 507(b)(1)(A), check here and attach computation status was term under section 507(b)(1)(A), check here and attach computation status was term under section 507(b)(1)(A), check here and attach computation status was term under section 507(b)(1)(A), check here and attach computation status was term under section 507(b)(1)(A), check here and attach computation status was term under section 507(b)(1)(A), check here and attach computation status was term under section 507(b)(1)(A), check here and attach computation status was term under section 507(b)(1)(A), check here under section 507(b)(1)(A), check here and attach computation status was term under section 507(b)(1)(A), check here under section 507(b)(1)(B), c	as terminated check here onth termination check here (d) Disbursements or charitable purposes (cash basis only)
Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation I Fair market value of all assets at end of year (from Part II, col (c), line 16) \$\infty\$ 738, 234. (Part I, column (d) must be on cash basis) Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in columns (a) (expenses per books 1 Contributions, gifts, grants, etc., received 2 Check \(\bigcup_{\text{order}} \) if the foundation is not required to attach Sch B 3 Interest on savings and temporary cash investments 4 Dividends and interest from securities 5 a Gross rents b Net rental income or (loss) Contributions of the foundation status was term under section 507(b)(1)(A), check here under section 507(b)(1)(A), check here under section 507(b)(1)(B), check here	as terminated check here onth termination check here (d) Disbursements or charitable purposes (cash basis only)
Fair market value of all assets at end of year (from Part II, col (c), line 16)	check here onth termination check here (d) Disbursements or charitable purposes (cash basis only)
(from Part II, col (c), line 16) \$\infty\$ \\$ 738, 234. (Part I, column (d) must be on cash basis) 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)) 1 Contributions, gifts, grants, etc., received 2 Check \[\bigcup_{\text{off}} \] if the foundation is not required to attach Sch B 3 Interest on savings and temporary cash investments 4 Dividends and interest from securities 5a Gross rents b Net rental income or (loss) Contributions (c), line 16) (a) Revenue and (b) Net investment income for charital	onth termination check here (d) Disbursements or charitable purposes (cash basis only)
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)) 1 Contributions, gifts, grants, etc., received 2 Check	check here (d) Disbursements or charitable purposes (cash basis only)
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)) 1 Contributions, gifts, grants, etc., received 2 Check	(d) Disbursements or charitable purposes (cash basis only) ATEMENT 2
1 Contributions, gifts, grants, etc., received 2 Check ☐ if the foundation is not required to attach Sch B 3 Interest on savings and temporary cash investments 4 Dividends and interest from securities 5a Gross rents b Net rental income or (loss) Contributions, gifts, grants, etc., received 450,000. N/A 101. STATEN PAY 16 STATEN	ATEMENT 2
1 Contributions, gifts, grants, etc., received 2 Check ☐ if the foundation is not required to attach Sch B 3 Interest on savings and temporary cash investments 4 Dividends and interest from securities 5a Gross rents b Net rental income or (loss) 1 Contributions, gifts, grants, etc., received 4 50,000. N/A 101. STATEN PAY 16 CTATEN	ATEMENT 2
2 Check fithe foundation is not required to attach Sch B 3 Interest on savings and temporary cash investments 4 Dividends and interest from securities 5a Gross rents b Net rental income or (loss)	
3 Interest on savings and temporary cash investments 4 Dividends and interest from securities 5a Gross rents b Net rental income or (loss) 101. 101. STATENT RECEIVED RECEIVED	
S cash investments 4 Dividends and interest from securities 5a Gross rents b Net rental income or (loss) D Net rental income or (loss)	
5a Gross rents b Net rental income or (loss) D NAY 16 CTATION	1 0
b Net rental income or (loss)	1 0
b Net rental income or (loss) 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain 9 Income modifications	
6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 449, 182. 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain 9 Income modifications	
b assets on line 6a 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain 9 Income modifications	ATEMENT 1
7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain 9 Income modifications	T
8 Net short-term capital gain 9 Income modifications	
9 Income modifications	
10a Gross sales less returns and allowances	
b Less Cost of goods sold	
c Gross profit or (loss)	
	ATEMENT 3
12 Total. Add lines 1 through 11 449, 400. 424, 210.	
13 Compensation of officers, directors, trustees, etc 0 • 0 •	0.
14 Other employee salaries and wages	
15 Pension plans, employee benefits	
16a Legal fees	
16a Legal fees	
c Other professional fees STMT 5 180. 180.	0.
9 17 Interest	0.
# + Cm/m C 4 00C 0	0.
E 18 Taxes STMT 6 4,986. 0.	
18 laxes STMT 6 4,986. U.	0.
18 Taxes STMT 6 4,986. U. 19 Depreciation and depletion 20 Occupancy	0.
18 Taxes STMT 6 4,986. U. 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings	0.
18 Taxes STMT 6 4,986. U. 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications	0.
18 Taxes STMT 6 4,986. U. 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses	0.
18 laxes STMT 6 4,986. U. 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses 24 Total operating and administrative	0.
18 laxes STMT 6 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses 24 Total operating and administrative expenses. Add lines 13 through 23 9,711. 180.	0.
19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses 24 Total operating and administrative expenses. Add lines 13 through 23 9,711. 180.	0.
25 Contributions, griss, grants paid 180,000.	0.
26 Total expenses and disbursements.	0.
26 Total expenses and disbursements.	0.
26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12:	0.
26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements 259,689.	0.
26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12:	0.

For	m 99	00-PF (2010) LAMOND FAMILY FOUNDATION			3204401 Page 2
P	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of	
_	,		(a) Book Value	(b) Book Value	(c) Fair Market Value
	[Cash - non-interest-bearing	450 545		
		Savings and temporary cash investments	478,545.	738,234.	738,234.
	3	Accounts receivable -			
		Less: allowance for doubtful accounts ▶			
	4	Pledges receivable			-
		Less: allowance for doubtful accounts ▶			
	5	Grants receivable		<u>-</u> .	
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable			
		Less: allowance for doubtful accounts			
ets	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges		· · · · · · · · · · · · · · · · · · ·	
•	1	Investments - U.S. and state government obligations			
	b	Investments - corporate stock			
	C	Investments - corporate bonds			
	11	Investments - land, buildings, and equipment basis		•	
		Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other			
	14	Land, buildings, and equipment: basis			
		Less accumulated depreciation			
	15	Other assets (describe ►)			
			450 545	500 004	E20 024
_	1	Total assets (to be completed by all filers)	478,545.	738,234.	738,234.
	1	Accounts payable and accrued expenses			
	18	Grants payable			
ies	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
iat	21	Mortgages and other notes payable			
_	22	Other liabilities (describe			
				0	
	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here			
Ś	l <u>.</u> .	and complete lines 24 through 26 and lines 30 and 31.			
nce	24	Unrestricted			
ala	25	Temporarily restricted			
d B	26	Permanently restricted			
Ë	1	Foundations that do not follow SFAS 117, check here			
or F		and complete lines 27 through 31.	165 040	165 040	
şts	27	Capital stock, trust principal, or current funds	165,849.	165,849.	
SSE	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
Net Assets or Fund Balances	29	Retained earnings, accumulated income, endowment, or other funds	312,696.	572,385.	
ž	30	Total net assets or fund balances	478,545.	738,234.	•
		T . 18 188	470 545	720 224	
_	31	Total liabilities and net assets/fund balances	478,545.	738,234.	
P	art	III Analysis of Changes in Net Assets or Fund Ba	alances		
1	Total	I net assets or fund balances at beginning of year - Part II, column (a), line 3	30		_
•		st agree with end-of-year figure reported on prior year's return)		1	478,545.
2		r amount from Part I, line 27a		2	259,689.
		r increases not included in line 2 (itemize)		3	0.
		lines 1, 2, and 3		4	738,234.
		eases not included in line 2 (itemize)		5_	0.
		net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	lumn (b), line 30	6	738,234.
					Form 990-PF (2010)

	D FAMILY FOUND						9.	<u>4-320</u>	4401	Page 3
	d Losses for Tax on In		Income	/ 5 \ L	Jour son	nured 1				
	the kind(s) of property sold (e.g. buse; or common stock, 200 shs			D (a)	low acc - Purch - Dona	nase tion	(c) Date a (mo., da		(d) Dat (mo., d	
1a 20,000 SHARES OF	ARUBA NETWORK	S INC_				P (09/0	1/06	12/2	3/10
<u>b</u>										
<u>c</u>										
d e										
(e) Gross sales price	(f) Depreciation allowed (or allowable)	107	it or other basis xpense of sale			.1_		ain or (loss (f) minus		
a 449,182.		-	25,19	0.					423	,992.
b _										
С										
d										
e			10/04/00							
Complete only for assets showing ga	· · · · · · · · · · · · · · · · · · ·					(I)	Gains (C (k) but n	ol. (h) gain iot less tha	minus n -0-) or	
(i) F.M.V. as of 12/31/69	s of 12/31/69 (i) Adjusted basis (k) Excess of col. (i) col. (k), but not less than -(Losses (from col. (h))						h))			
a				_			423,99			<u>,992.</u>
<u>b</u>				\dashv						
<u>C</u>				\dashv						
d e										
	∫ If gain, also enter	un Dort I. lung		7						
2 Capital gain net income or (net capital)	2				423	<u>,992.</u>
Net short-term capital gain or (loss) a		d (6):		٦						
If gain, also enter in Part I, line 8, colu If (loss), enter -0- in Part I, line 8	ımn (c).			1	3			N/A		
	er Section 4940(e) for	Reduced	Tax on Net	Inv	estm	ent Inc	ome	,,		
For optional use by domestic private fou	indations subject to the section 4	1940(a) tax on	net investment in	come	9.)					
if posture 4040/dV(2) applies logge this	and blook									
If section 4940(d)(2) applies, leave this p	iari diarik.									
Was the foundation liable for the section			•	lod?					Yes	X No
If "Yes," the foundation does not qualify u										
1 Enter the appropriate amount in each	T	ictions before	making any entrie				1		(4)	
(a) Base period years Colondar year (or tay year beginning in	(b) Adjusted qualifying dist	tributions	Net value of no	(c) nchar	rıtable-ı	use assets		Distrit	(d) oution ratio rided by col.	(c))
Calendar year (or tax year beginning in 2009	·/	7,000.				4,042		(coi. (b) di		77593
2008		5,000.				0,120				16420
2007		0,105.				2,539				75770
2006		5,294.				5,856		-		55450
2005		5,606.				0,919			1.6	21716
										45040
2 Total of line 1, column (d)				,			2		6.0	<u>46949</u>
3 Average distribution ratio for the 5-ye	•	on line 2 by 5,	or by the number	of ye	ars				1 2	00200
the foundation has been in existence	ir less than 5 years						3		1.2	<u>09390</u>
4 Enter the net value of noncharitable-u	se assets for 2010 from Part X, I	ine 5					4		389	<u>,693.</u>
5 Multiply line 4 by line 3							5		471	,291.
6 Enter 1% of net investment income (1	1% of Part I, line 27b)						6		4	,240.
7 Add lines 5 and 6							7		475	,531.
B Enter qualifying distributions from Pa	rt XII, line 4						8		180	,000.
If line 8 is equal to or greater than line See the Part VI instructions.	e 7, check the box in Part VI, line	1b, and comp	lete that part usin	g a 1	% tax ra	ate.				

11420421 756877 54681

Form 990 Part V	-PF (2010) LAMOND FAMILY FOUNDATION I Excise Tax Based on Investment Income (Section 4940)	(a) 4940(b) 4940(a)	94- or 4948 -	3204401	ection	Page 4
	mpt operating foundations described in section 4940(d)(2), check here and em		01 4540	300 111301		13/
	of ruling or determination letter: (attach copy of letter if nece					
	nestic foundations that meet the section 4940(e) requirements in Part V, check here		1		8,4	81.
	art I, line 27b	und direct 170		-	• , -	<u></u>
	other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4%	of Part I, line 12, col. (b).				
	under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Other		2			0.
	lines 1 and 2	,	3		8,4	81.
	title A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Oti	hers enter -0-)	4		- 1	0.
	based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	······································	5		8,4	81.
	its/Payments:					_
	0 estimated tax payments and 2009 overpayment credited to 2010	6a 1	00.	ļ		
	mpt foreign organizations - tax withheld at source	6b				
	paid with application for extension of time to file (Form 8868)	6c				
	kup withholding erroneously withheld	6d				
	I credits and payments. Add lines 6a through 6d		7		1	00.
	r any penalty for underpayment of estimated tax. Check here X if Form 2220 is attac	hed	8			
	due. If the total of lines 5 and 8 is more than line 7, enter amount owed		9		8,3	81.
	rpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		10			
	r the amount of line 10 to be: Credited to 2011 estimated tax	Refunde	d ▶ 11			
	II-A Statements Regarding Activities					
1a Duri	ng the tax year, did the foundation attempt to influence any national, state, or local legisla	ation or did it participate or int	ervene in		Yes	No
any	political campaign?			1a		X
b Did	it spend more than \$100 during the year (either directly or indirectly) for political purposi	es (see instructions for definiti	on)?	1b		_X_
If th	e answer is "Yes" to 1a or 1b, attach a detailed description of the activities and	copies of any materials pu	blished or			
dıst	nbuted by the foundation in connection with the activities					
c Did	the foundation file Form 1120-POL for this year?			1c		_X
d Ente	r the amount (if any) of tax on political expenditures (section 4955) imposed during the	year:				
(1)	On the foundation. \blacktriangleright \$ 0 . (2) On foundation managers.	> \$	0.			
e Ente	r the reimbursement (if any) paid by the foundation during the year for political expendit	ure tax imposed on foundation	1	ŧ		
man	agers. ▶ \$ 0 .					
2 Has	the foundation engaged in any activities that have not previously been reported to the IR	IS?		2		<u>X</u> _
If "Y	es," attach a detailed description of the activities					
3 Has	the foundation made any changes, not previously reported to the IRS, in its governing in	nstrument, articles of incorpora	ation, or			
byla	ws, or other similar instruments? If "Yes," attach a conformed copy of the change	es		3	<u> </u>	<u>X</u>
4a Did	the foundation have unrelated business gross income of \$1,000 or more during the year	?		4a		X
b If "Y	es," has it filed a tax return on Form 990-T for this year?		N	/A 4b		
5 Was	there a liquidation, termination, dissolution, or substantial contraction during the year?			5_		_X_
If "Y	es," attach the statement required by General Instruction T			İ		
6 Are	the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied eit	her:		Ĭ		
	language in the governing instrument, or					
• By	γ state legislation that effectively amends the governing instrument so that no mandatory	directions that conflict with the	e state law			
	main in the governing instrument?			6	X	
7 Did	the foundation have at least \$5,000 in assets at any time during the year?			7	X	
	es," complete Part II, col. (c), and Part XV.					
	er the states to which the foundation reports or with which it is registered (see instruction	ns) ►				
<u>C</u>						
	e answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the At	torney General (or designate)			<u>-</u>	
	ach state as required by General Instruction G? If "No," attach explanation			<u>8b</u>	X_	
	e foundation claiming status as a private operating foundation within the meaning of sec		or calendar			
-	2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If "Yes," co		~=·-	9		X
10 Did	any persons become substantial contributors during the tax year? if "Yes," attach a schedul	e listing their names and addresses	STMT	7 10	X	

orm 990-PF (2010) LAMOND FAMILY FOUNDATION	N		<u>94-32044</u>	101	Page 6
Part VII-B Statements Regarding Activities for Which	Form 4720 May Be P	Required (contin	ued)		
5a During the year did the foundation pay or incur any amount to:(1) Carry on propaganda, or otherwise attempt to influence legislation (section)			s X No		
(2) Influence the outcome of any specific public election (see section 4955); any voter registration drive?	or to carry on, directly or indire		s X No		
(3) Provide a grant to an individual for travel, study, or other similar purpose	_S ?	Ye	s X No		
(4) Provide a grant to an organization other than a charitable, etc., organization	on described in section		_		
509(a)(1), (2), or (3), or section 4940(d)(2)?			s 🗶 No 📗		
(5) Provide for any purpose other than religious, charitable, scientific, literary the prevention of cruelty to children or animals?	y, or educational purposes, or f		s X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify u	nder the exceptions described i	n Regulations			
section 53.4945 or in a current notice regarding disaster assistance (see insti			N/A	5b	
Organizations relying on a current notice regarding disaster assistance check	here			ļ	
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption					
expenditure responsibility for the grant?	N	//A	s No		
If "Yes," attach the statement required by Regulations section 53 49					
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	o pay premiums on				
a personal benefit contract?		Ye	s X No		3,
b Did the foundation, during the year, pay premiums, directly or indirectly, on a If "Yes" to 6b, file Form 8870	personal benefit contract?			6b	X
7a At any time during the tax year, was the foundation a party to a prohibited tax	shelter transaction?	Ye	s 🗶 No		
b If "Yes," did the foundation receive any proceeds or have any net income attri			N/A	7b	
Part VIII Information About Officers, Directors, Trus Paid Employees, and Contractors		nagers, Highly	<i>'</i>		
1 List all officers, directors, trustees, foundation managers and their		1	(4)		
(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	' acc) Expense ount, other llowances
PIERRE LAMOND	PRESIDENT				
167 ISABELLA AVENUE, ATHERTON, CA			_		
	1.00	0.	0	<u>. </u>	<u> </u>
CHRISTINE LAMOND	_V.PRES/TREAS.				
167 ISABELLA AVENUE, ATHERTON, CA					•
	1.00	0.	0	•	0.
	-				
				 	
	+				
	aluded on line 4) 16 none	enter INONE II			
2 Compensation of five highest-paid employees (other than those in	(b) Title, and average	enter NONE."	(d) Contributions to employee benefit plans	le	Expense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	employee benefit plans and deferred compensation	acc al	Expense count, other llowances
NONE		1	1		
				 	
				+	
	4				
	_				
				+	
	-				
Total number of other employees paid over \$50,000	<u> </u>				0
CONTRACTOR OF THE UNITED STRUCTURES AND LANCE WITH THE WAR AND THE STRUCTURE AND THE					•

orm 990-PF (2010) LAMOND FAMILY FOUNDATION	94-3	204401 Page 7
Part VIII Information About Officers, Directors, Trustees, Foun Paid Employees, and Contractors (continued)	dation Managers, Highly	
Five highest-paid independent contractors for professional services. If none, er	oter "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
otal 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 st number of organizations and other beneficiaries served, conferences convened, research papers j		Expenses
N/A	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
		<u> </u>
		
		
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
N/A	on mes 1 and 2.	Amount
All other program-related investments. See instructions.		
		_

Total. Add lines 1 through 3

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ındatıons, se	e instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а		1a	0.
b	Average of monthly cash balances	1b	0. 395,627.
C		1c	
d	Total (add lines 1a, b, and c)	1d	395,627.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)	.	
2	Acquisition indebtedness applicable to line 1 assets	7 2	0.
3	Subtract line 2 from line 1d	3	395,627.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	5,934.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	389,693.
6	Minimum investment return Enter 5% of line 5	6	19,485.
P	art XI Distributable Amount (see instructions) (Section 4942(i)(3) and (i)(5) private operating foundations a foreign organizations check here and do not complete this part.)	nd certain	
1	Minimum investment return from Part X, line 6	1	19,485.
2a	Tax on investment income for 2010 from Part VI, line 5	.]	
b	Income tax for 2010. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	8,481.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	11,004.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	11,004.
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	11,004.
P	art XII Qualifying Distributions (see instructions)	·	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		100 000
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	180,000.
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:		
а	2 (b	3a	
b	· · · · · · · · · · · · · · · · · · ·	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	180,000.
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	180,000.
	Note. The amount on line 6 will be used in Part V. column (b), in subsequent years when calculation whether the foundation	qualifies for the	ne section

4940(e) reduction of tax in those years.

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.	Обіраб	Tours prior to 2000		
line 7				11,004.
2 Undistributed income, if any, as of the end of 2010				
a Enter amount for 2009 only			0.	
b Total for prior years:	- 			
		0.		
3 Excess distributions carryover, if any, to 2010:	· 			
a From 2005 1,041,848.				
b From 2006 1,598,413.				
c From 2007 636, 268.				
d From 2008 176,187.				
eFrom 2009 252,162.				
f Total of lines 3a through e	3,704,878.			
4 Qualifying distributions for 2010 from	377017070			
Part XII, line 4: ▶\$180,000.				
a Applied to 2009, but not more than line 2a			0.	
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				11,004.
e Remaining amount distributed out of corpus	168,996.			11,001.
5 Excess distributions carryover applied to 2010	0.			0.
(If an amount appears in column (d), the same amount must be shown in column (a)				<u>~</u>
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	3,873,874.			
b Prior years' undistributed income. Subtract	<u> </u>			
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2009. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2010. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2011				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.	ĺ		
8 Excess distributions carryover from 2005				
not applied on line 5 or line 7	1,041,848.			
9 Excess distributions carryover to 2011.	<u>, </u>			
Subtract lines 7 and 8 from line 6a	2,832,026.			
10 Analysis of line 9:				
a Excess from 2006 1,598,413.				
b Excess from 2007 636, 268.				
c Excess from 2008 176, 187.				
d Excess from 2009 252, 162.				
e Excess from 2010 168, 996.				
				Form QQO-PF (2010)

	FAMILY FOUN				204401 Page 10
Part XIV Private Operating Fo	oundations (see in	structions and Part V	II-A, question 9)	N/A	
1 a If the foundation has received a ruling or	determination letter tha	t it is a private operating			
foundation, and the ruling is effective for	2010, enter the date of	the ruling	>		
b Check box to indicate whether the found	ation is a private operati	ng foundation described	ın section	4942(j)(3) or4	1942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		_
income from Part I or the minimum	(a) 2010	(b) 2009	(c) 2008	(d) 2007	(e) Total
investment return from Part X for					
each year listed		1			
b 85% of line 2a			<u> </u>		
c Qualifying distributions from Part XII,			T		
line 4 for each year listed					
d Amounts included in line 2c not		-			
used directly for active conduct of					
exempt activities		-	1		
e Qualifying distributions made directly			 		T
for active conduct of exempt activities.				ł	
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			1		
` '		 	 	 	
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)			1	1	
b "Endowment" alternative test - enter		 	 	 	
2/3 of minimum investment return			1		
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)		<u> </u>			
(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	·			<u> </u>	<u> </u>
(4) Gross investment income	·		<u> </u>		
Part XV Supplementary Info			if the foundation	n had \$5,000 or m	nore in assets
at any time during t	he year-see the	instructions.)			
1 Information Regarding Foundation	n Managers:				
a List any managers of the foundation who			tributions received by the	e foundation before the cl	ose of any tax
year (but only if they have contributed m	ore than \$5,000). (See	section 507(d)(2).)			
SEE STATEMENT 8					<u> </u>
b List any managers of the foundation who			(or an equally large port	on of the ownership of a	partnership or
other entity) of which the foundation has	a 10% or greater intere	est.			
NONE					
2 Information Regarding Contribution	on, Grant, Gift, Loan	, Scholarship, etc., P	rograms:		
Check here 🕨 💹 if the foundation of	•	•	•	•	
the foundation makes gifts, grants, etc. (see instructions) to indi	viduals or organizations	under other conditions, c	omplete items 2a, b, c, ai	nd d.
a The name, address, and telephone numb	er of the person to who	m applications should b	e addressed:		
PIERRE AND CHRISTINE	LAMOND, (6	550)845-810	0		
167 ISABELLA AVENUE,	ATHERTON,	CA 94027			
b The form in which applications should be	e submitted and informa	ation and materials they s	should include:		
NO SPECIFIC FORM		_ •			
c Any submission deadlines:					-
NO DEADLINE					=
d Any restrictions or limitations on awards	, such as by geographic	al areas, charitable fields	, kinds of institutions, or	other factors:	
NONE	·				
023601 12-07-10		- -			Form 990-PF (2010)

Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Purpose of grant or show any relationship to Foundation Amount status of contribution any foundation manager Name and address (home or business) or substantial contributor recipient a Paid during the year FINE ARTS MUSEUM OF SAN NONE PUBLIC 10,000. ASSIST W/ INNOVATIVE CHARITY FRANCISCO EXHIBITIONS & ENGAGING 50 HAGIWARA TEA GARDEN PUBLIC PROGRAMS DRIVE SAN FRANCISCO, CA SAN FRANCISCO BALLET NONE PUBLIC 20,000. ASSIST W/ FUNDING OF 455 FRANKLIN STREET CHARITY SAN PERFORMANCE ARTS FRANCISCO, CA 94102 20,000. SAN FRANCISCO MUSEUM OF NONE PUBLIC FURTHER THE ARTS AND MODERN ART CHARITY EDUCATION PROGRAMS AT 151 THIRD STREET SFMOMA FRANCISCO, CA 94103 SAN FRANCISCO SYMPHONY NONE PUBLIC 50,000. SUPPORT OF PERFORMING 201 VAN NESS AVENUE CHARITY ARTS FRANCISCO, CA 94102 TIPPING POINT NONE PUBLIC 50,000. PROMOTION OF POVERTY 703 MARKET STREET CHARITY SAN AWARENESS & ECONOMIC FRANCISCO, CA 94103 SELF-SUFFI UCSF FOUNDATION 30,000. NONE PUBLIC FURTHER THE MEDICAL CHARITY CARDIOLOGY PROGRAM AT UCSF BOX 0248, ATTN: UCSF SAN FRANCISCO, CA 94143 180,000. ➤ 3a Total b Approved for future payment NONE 0. **▶** 3b Total Form **990-PF** (2010)

023611 12-07-10

Part XVI-A	Analysis of Income-Producing	Activities

Enter gross amounts unless otherwise indicated.	Unrelated I	ousiness income		y section 512, 513, or 514	(e)
	(a)	(b)	(c) Exclu-	(d)	Related or exempt
1 Program service revenue;	Business code	Amount	code	Amount	function income
a					
b					
c					
d					
e			- - 		
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash	J				
investments			14	101.	
4 Dividends and interest from securities					
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal		-			
property	L l _		_		
7 Other investment income			01	117.	
8 Gain or (loss) from sales of assets other					- " -
than inventory			18	-818.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a			_		
b					
c					
d					
e					
12 Subtotal. Add columns (b), (d), and (e)			0	-600.	0
13 Total. Add line 12, columns (b), (d), and (e)				13	-600
(See worksheet in line 13 instructions to verify calculations.)					
Part XVI-B Relationship of Activities t	o the Accon	nolishment of	Exempt P	urposes	
Totalonomp of Additions	o alo nocoli	ipiioiiiioiii oi	pc 1	, p	

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).							
N/A	NOT	APPLICABLE						
	<u> </u>							
	L							
	<u> </u>							
	<u> </u>							
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	1 .							

	_	(-, _:	1 (-) 31			<u> </u>
		N/A				
		_				
		r penalties of perjury, I declare that I have exame complete. Declaration of preparer (other than tax				ledge and belief, it is true, correct,
Sign	anu (/// // //	· /	. I I	· · · · · · · · · · · · · · · · · · ·	461
Here		Mu K Lam	\sim \sim \sim	>19/11	Presid	un x
		Signature of officer or trustee	Date		Title	
		Print/Type preparer's name	Preparer's signature	Date	Check	If PTIN
				1 4/22/1	self- employed	
Paid		150° Vullades	Kan Vallad	11001	<u> </u>	
Prepa			MERMAN & CO. LLP		Fırm's EIN ▶	•
Use O	nly	1801 PAGE	E MILL ROAD			
		Firm's address > DATO AT TO	CA 04204		Dhone no	/ CEO \ 0.4E _ 9.100

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

➤ Attach to Form 990, 990-EZ, or 990-PF.

OMB No 1545-0047

2010

Employer identification number Name of the organization 94-3204401 LAMOND FAMILY FOUNDATION Organization type (check one). Filers of: Section: 501(c)(Form 990 or 990-EZ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization X 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions **General Rule** X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor Complete Parts I and II **Special Rules** For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1 Complete Parts I and II. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively ▶ \$ religious, charitable, etc., contributions of \$5,000 or more during the year Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF),

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2010)

but it must answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify

that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization

Employer identification number

LAMOND FAMILY FOUNDATION

94-3204401

Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	PIERRE AND CHRISTINE LAMOND 167 ISABELLA AVE ATHERTON, CA 94027	\$\$	Person Payroll Noncash X (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
			Person 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)

Employer identification number

LAMOND FAMILY FOUNDATION

94-3204401

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
1	20,000 SHARES OF ARUBA NETWORKS INC	-	
		\$\$	12/20/10
(a) No. rom 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. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		- - - - \$	
(a) No. rom	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		- - - - - - - - - -	

Name of org	anization		Employer identification number			
T AMONT	PAMILY BOINDAMION		94-3204401			
Part III	Exclusively religious, charitable, etc., i more than \$1,000 for the year. Complet Part III, enter the total of exclusively religi \$1,000 or less for the year (Enter this in	te columns (a) through (e) and the lous, charitable, etc , contributions	on 501(c)(7), (8), or (10) organizations aggregating following line entry. For organizations completing of			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
		(e) Transfer of gift	t			
	Transferee's name, address, a	and ZIP + 4	Relationship of transferor to transferee			
(a) No.	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
Part I						
-		(e) Transfer of gift				
	Transferee's name, address, a	.,	Relationship of transferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
		(e) Transfer of gif	t			
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
	(e) Transfer of gift					
-	Transferee's name, address, a	and ZIP + 4	Relationship of transferor to transferee			

FORM 990	-PF	GAIN OR (LOSS)	FROM SALE	OF A	SSETS		STAT	EMENT	1
DESCRIPT	(A) ION OF PROPERT	ΥΥ			ANNER QUIRED			DATE S	OLD
20,000 S	HARES OF ARUBA	A NETWORKS INC		PUR	CHASED	09/01	1/06	12/23	/10
	(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE SALE	OF	(E)			F) OR LOS	S
_	449,182	450,000.		0.		0.		-8	18.
CAPITAL	GAINS DIVIDENI	OS FROM PART IV							0.
5 0537 5 0		DADE T TIME CA				_		-8	18.
TOTAL TO	FORM 990-PF,	PART I, LINE OA							- • •
TOTAL TO	FORM 990-PF,	PART 1, LINE OA				=			
		ON SAVINGS AND		CASH	INVEST	= MENTS	STAT	EMENT	
FORM 990				CASH	INVEST	= MENTS		'EMENT	
FORM 990		ON SAVINGS AND		CASH	INVEST	= MENTS		MOUNT	2
FORM 990 SOURCE MORGAN S	-PF INTEREST	ON SAVINGS AND	TEMPORARY	CASH	INVEST	MENTS		MOUNT 1	201.
FORM 990 SOURCE MORGAN S	-PF INTEREST	ON SAVINGS AND	TEMPORARY	CASH	INVEST	MENTS		MOUNT 1	2
FORM 990 SOURCE MORGAN S' TOTAL TO	-PF INTEREST TANLEY SMITH FORM 990-PF,	ON SAVINGS AND 'BARNEY PART I, LINE 3,	TEMPORARY	CASH	INVEST	MENTS	A	MOUNT 1	201.
FORM 990 SOURCE MORGAN S	-PF INTEREST TANLEY SMITH FORM 990-PF,	ON SAVINGS AND 'BARNEY PART I, LINE 3,	TEMPORARY	JE	NET I	B) NVEST-	STAT	MOUNT 1	201. 001.
FORM 990 SOURCE MORGAN S' TOTAL TO FORM 990	-PF INTEREST TANLEY SMITH FORM 990-PF,	ON SAVINGS AND 'BARNEY PART I, LINE 3,	TEMPORARY COLUMN A R INCOME (A) REVENU	JE	NET I	B) NVEST-	STAT	MOUNT 1 1 CEMENT (C) ADJUSTE	201. 01.

FORM 990-PF	ACCOUNTI	NG FEES	STATEMENT 4		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITAI PURPOSI	
ACCOUNTING FEES	4,545.	0.			0.
TO FORM 990-PF, PG 1, LN 16B	4,545.	0.			0.
FORM 990-PF C	THER PROFES	SIONAL FEES	S'	TATEMENT	5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITAI PURPOSI	
BROKER ACCOUNT FEES	180.	180.			0.
TO FORM 990-PF, PG 1, LN 16C	180.	180.			0.
FORM 990-PF	TAX	ES	S	TATEMENT	6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITAI PURPOSI	
TAXES	4,986.	0.			0.
TO FORM 990-PF, PG 1, LN 18	4,986.	0.			0.

FORM 990-PF

LIST OF SUBSTANTIAL CONTRIBUTORS PART VII-A, LINE 10

STATEMENT

NAME OF CONTRIBUTOR

ADDRESS

PIERRE & CHRISTINE LAMOND

167 ISABELLA AVENUE ATHERTON, CA 94027

FORM 990-PF

PART XV - LINE 1A LIST OF FOUNDATION MANAGERS STATEMENT

NAME OF MANAGER

PIERRE LAMOND CHRISTINE LAMOND