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Form **990-PF**

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

OMB No 1545-0052

2010

Departi Interna	ment of the Treasury I Revenue Service Note. The for	undation may	be able to use a copy of this	s return to satisfy	state repo	rting requirements	
For c	alendar year 2010, or tax year beginnir			and ending		,	A
G C	heck all that apply Initial return	Initial	Return of a former pu	ublic charity			Final return
	Amended ret	turn	Address of	hange	Name	change	
חיים	DICAY CICLED CANTLY COLD	ID 3 MT OM			A		n number
	RISAY SIGLER FAMILY FOUN HIGHLAND AVENUE	DATION			В	94-3347046	- H
SAN	CARLOS, CA 94070					Telephone number (se 650-281-83	·
	,				c		on is pending, check here
					D		· · · · · · - · · · · · · · · · · - ·
Н	Check type of organization. X Se	ction 501(c)(3) exempt private fo	oundation		2 Foreign organizations	meeting the 85% test, check
	Section 4947(a)(1) nonexempt cha				F	here and attach compl If private foundation s	L
ı	Fair market value of all assets at end of year (from Part II, column (c), line 16)		unting method: XC	ash [] Acc	crual -	under section 507(b)(
>			her (specify) olumn (d) must be on	cash hasis	· F	If the foundation is in under section 507(b)(a 60-month termination
	Analysis of Revenue and	1 (1 411 1, 0				1	^ 1
***************************************	Expenses (The total of amount		(a) Revenue and expenses per books	(b) Net inv incor		(c) Adjusted ne income	t (d) Disbursements for charitable
	columns (b), (c), and (d) may not sarily equal the amounts in colum	neces- n (a)					purposes (cash basis only)
	(see the instructions))	`´	70.066	×			(casil basis offiy)
	1 Contributions, gifts, grants, etc, received 2 Ck If the foundn is not req to a	100	72,066.				
	3 Interest on savings and tempo	presen			<u> </u>		
	cash investments	, L.,	1.		1		1.
	4 Dividends and interest from securities 5a Gross rents			.			
	b Net rental income or (loss)						
R	6 a Net gain/(loss) from sale of assets not o	in line 10	2,115.				
E V	b Gross sales price for all assets on line 6a	,115.					
E N	7 Capital gain net income (from Part IV, li	ne 2)			2,115		F
Ų	8 Net short-term capital gain 9 Income modifications					2,11	5.
Ε	10 a Gross sales less returns and						
	allowances h Less Cost of	 					
	goods sold,'						
	c Gross profit/(loss) (att sch) 11 Other income (attach schedule	,					
	The other most the (attack) somedate	'					
	12 Total. Add lines 1 through 11		74,182.		2,116	. 2,11	6.
	13 Compensation of officers, directors, trus	tees, etc	0.			-	
	14 Other employee salaries and wages15 Pension plans, employee bene	fite	DECENT				
	146 1 14 (1) 1 1 1 1 1	····	- KEUEIVI	70			
	b Accounting fees (attach sch)		8				
1 N	c Other prof fees (attach ech)		없 시 NOV 1 5 건				
9 1	17 Interest		<u> </u>				
O P E R A A	18 Taxes (attach schedule)(see instr.) SEE \$	STM 1	OGÜEN.				
	John and depletion	1					
N V G E	20 Occupancy	L					
_	21 Haver, Contenences, and meet	ings -		·			
A E	23 Other expenses (attach schedu						
A E	SEE STATEM		134.	· 			
S E S	24 Total operating and administra expenses. Add lines 13 through	ntive	2,471.				
3	25 Contributions, gifts, grants paid STM		10,474.				10,474.
	26 Total expenses and disbursem	ents.					
	Add lines 24 and 25 27 Subtract line 26 from line 12:		12,945.		0		0. 10,474.
	a Excess of revenue over expens	ses					
	and disbursements		61,237.				
	b Net investment income (if negative, enter calculated net income (if negative, enter calculated net income)				2,116	2,11	6.
	Aujusteu net income (it negative, enter -	ບ) 2600	aaagga ga ga ga G., Cal	y agai yagaiyiiyiiyii	, 994, 944, 946	889 ∠,⊥⊥	\mathbf{v} . From program \mathbf{v} is $y(y)(y)(y)(y)(y)(y)$, \mathbf{v}



Form	990-	PF (2010) DEBRISAY SIGLER FAMILY FOUNDATION		94-334	17046 Page 2
Da		Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End o	f year
2.50	5.#£.1	(See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash non-interest-bearing			
	2	Savings and temporary cash investments	8,283.	6,929.	6,929.
	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 (attach schedule) (see the instructions)			
	7	Other notes and loans receivable (attach sch).			
A		Less: allowance for doubtful accounts			
A S E T	8	Inventories for sale or use			
Ē	9	Prepaid expenses and deferred charges			
s	10 a	Investments – U.S. and state government		, ,	
		obligations (attach schedule)		····	
		nvestments — corporate stock (attach schedule) STATEMENT 4	298,013.	265,094.	265,094.
	C	: Investments — corporate bonds (attach schedule)			
	11	Investments – land, buildings, and equipment basis			
		Less. accumulated depreciation (attach schedule)			
	12	Investments – mortgage loans			
	13	Investments - other (attach schedule)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	*****************	
	14	Land, buildings, and equipment basis ▶	Taridi. Lida ka		
		Less accumulated depreciation (attach schedule)			
	15				
	16	Total assets (to be completed by all filers – see instructions. Also, see page 1, item l)	306,296.	272,023.	272,023.
L	17	Accounts payable and accrued expenses	5,837.		2.2/0200
A	18	Grants payable			
В	19	Deferred revenue			
Ľ	20	Loans from officers, directors, trustees, & other disqualified persons			
Ţ	21	Mortgages and other notes payable (attach schedule)			
ì	22	Other liabilities (describe		·-···	
E S	23	Total liabilities (add lines 17 through 22)	5,837.	0.	
		Foundations that follow SFAS 117, check here			
	1	and complete lines 24 through 26 and lines 30 and 31.			
N F E U T N	24	Unrestricted			
ŤŇ	25	Temporarily restricted			
A D	26	Permanently restricted		-	
A S S A E L T A		Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.			
TA	27	Capital stock, trust principal, or current funds			
SN	28	Paid-in or capital surplus, or land, building, and equipment fund			
O E R S	29	Retained earnings, accumulated income, endowment, or other funds.	300,459.	272,023.	
RS	30	Total net assets or fund balances (see the instructions)	300,459.	272,023.	
	31	Total liabilities and net assets/fund balances (see the instructions)	306,296.	272,023.	
Par.	III /	Analysis of Changes in Net Assets or Fund Balanc			
1	Total end-c	net assets or fund balances at beginning of year — Part II, colum	nn (a), line 30 (must agr	ee with	300,459.
2		amount from Part I, line 27a		2	61,237.
		ncreases not included in line 2 (itemize) SEE STATEMENT	5	3	5,837.
		ines 1, 2, and 3		4	367,533.
		ses not included in line 2 (itemize)	6	5	95,510.
6	Total	net assets or fund balances at end of year (line 4 minus line 5) -	- Part II, column (b), lın	e 30 6	272,023.

*	(a) List and describe	e the kind(s) of property sold (e.g., rese, or common stock, 200 shares MLC	al estate,	(b) How acqu P — Purcha D — Donati	ise	(c) Date acquired (month, day, year)	(d) Date sold (month, day, year)
1:	100 SH CALL CISCO		-	D		10/05/10	11/20/10
ŀ)					_	
						_	
	<u> </u>						
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other bas plus expense of sale			(h) Gain or (e) plus (f) m	
	2,115.						2,115.
k							
	·		 				<u>.</u> _
	1						<u>.</u>
		g gain in column (h) and owned by th	·			(I) Gains (Colu	
	(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column over column (j), if ar	(i) iy		gain minus column (k an -0-) or Losses (fr	om column (h))
	3						2,115.
k)						
	:						
	1		·				·
							
2	Capital gain net income or (net on Net short-term capital gain or (lo	capital loss). If gain, also enterprise (loss), enterprise (loss), enterprise (loss) as defined in sections 1222(5) and	enter in Part I, line 7 er -0- in Part I, line 7 d (6).	-	2		2,115.
	, , ,	8, column (c) (see the instructions) If	·· ¬		3		2,115.
Pai	Qualification Under	Section 4940(e) for Reduced	Tax on Net Investme	nt Incon	ne		
	es,' the foundation does not qualif	on 4942 tax on the distributable amou y under section 4940(e). Do not comp	lete this part.			Yes	X No
		each column for each year; see the ii		ny entries.			
	(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use ass	ets	(col	(d) Distribution umn (b) divided	
	2009	4,212.	206	5,844.			0.020363
	2008	13,813.		2,084.			0.057059
	2007	4,415.	308	3,398.			0.014316
	2006	1,000.	146	5,663.			0.006818
	2005	6,577.	112	2,689.			0.058364
2	Total of line 1, column (d)				2		0.156920
3	Average distribution ratio for the number of years the foundation I	5-year base period — divide the total has been in existence if less than 5 years.	on line 2 by 5, or by the ears		3		0.031384
4	Enter the net value of noncharita	able-use assets for 2010 from Part X,	line 5		4		235,142.
5	Multiply line 4 by line 3				5		7,380.
6	Enter 1% of net investment inco	me (1% of Part I, line 27b)			6		21.
7	Add lines 5 and 6				7		7,401.
8	Enter qualifying distributions from	n Part XII, line 4			8		10,474.
	If line 8 is equal to or greater that Part VI instructions	in line 7, check the box in Part VI, lin	e 1b, and complete that par	t using a 1	% ta		
BAA						Forr	n 990-PF (2010)

	1990-PF (2010) DEBRISAY SIGLER FAMILY FOUNDATION 94-334/0			Page 4
Pat	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see the Insti	ructions)) 	varono conceiro
1 a	Exempt operating foundations described in section 4940(d)(2), check here			
	Date of ruling or determination letter (attach copy of letter if necessary – see instr.)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V,		**********	21.
	check here ► X and enter 1% of Part I, line 27b			
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, column (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable			
_	foundations only Other's enter -0-)			$\frac{0.}{21}$
3	Add lines 1 and 2			21.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			0. 21.
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-			<u> </u>
6	Credits/Payments: 2010 estimated tax pmts and 2009 overpayment credited to 2010 6a			
	[
	Tax paid with application for extension of time to file (Form 8868) Backup withholding erroneously withheld 6d			
	_ [**	2.286388		 0.
7	Enter any penalty for underpayment of estimated tax. Check here If Form 2220 is attached 8			<u> </u>
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			21.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			21.
11	Enter the amount of line 10 to be Credited to 2011 estimated tax			
	WILA Statements Regarding Activities			
			Yes	No
la	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?	1:	~~	X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?	11	b	X
	If the answer is 'Yes' to 1a or 1b , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities			
	Did the foundation file Form 1120-POL for this year?	1.0	c	X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year.			
	(1) On the foundation \(\bigs\) \(\sigma\) paid by the foundation during the year for political expenditure tax imposed on	0.		
	foundation managers \Rightarrow \$ 0.			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2	1	X
	If 'Yes,' attach a detailed description of the activities			
2	Has the foundation made any changes, not provide the reported to the IDS, in its governing instrument, articles			
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	3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4.	а	X
b	If 'Yes,' has it filed a tax return on Form 990-T for this year?	4	d N	I/A
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
	If 'Yes,' attach the statement required by General Instruction T			
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?	6		X
7	Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV	7	Х	
	Enter the states to which the foundation reports or with which it is registered (see the instructions)			
	CA	-		
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 <i>General Instruction G? If 'No,' attach explanation</i>	8	ь Х	
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) V <u>9</u>		X
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses SEE STATEMENT 7	10	X	
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b If 'Yes,' did it have excess business holdings in 2010 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2010).

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

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

4b X Form **990-PF** (2010)

3b

N/A

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Part VII B Statements Regarding Activity		n 4720 May Be Rec	uired (continued)	<u>) </u>	Sametra and and and a
5a During the year did the foundation pay or incu	•	(cootion 4045(a))?	□v _{ac} [ÿ	No	
(1) Carry on propaganda, or otherwise attempt(2) Influence the outcome of any specific pub	-		∐ Yes ⊠	JNO E	
on, directly or indirectly, any voter registra	ation drive?			No	
(3) Provide a grant to an individual for travel,	study, or other similar p	ourposes?	∐ Yes ∑	No	
(4) Provide a grant to an organization other the in section 509(a)(1), (2), or (3), or section	4940(d)(2)? (see instruc	ctions)	Yes	No	
(5) Provide for any purpose other than religio educational purposes, or for the prevention	n of cruelty to children o	or animals?		No	
b If any answer is 'Yes' to 5a(1)-(5), did any of the described in Regulations section 53 4945 or in (see instructions)?	he transactions fail to qualified a current notice regard	ualify under the exception ing disaster assistance	ons	_	5b N/A
Organizations relying on a current notice rega	rding disaster assistance	e check here	▶ [] [
c If the answer is 'Yes' to question 5a(4), does tax because it maintained expenditure respons	sibility for the grant?		N/A Yes] No	
If 'Yes,' attach the statement required by Reg.		• •			
6a Did the foundation, during the year, receive an on a personal benefit contract?b Did the foundation, during the year, pay prem			∐ Yes ∑	∐No	6ы Х
If 'Yes' to 6b. file Form 8870	urns, directly or mairect	iy, on a personal benen	t contract?		60 X
7a At any time during the tax year, was the found	lation a party to a prohit	bited tax shelter transac	tion? Yes 2	∏No ∦	
b If yes, did the foundation receive any proceed				N/A	7b
Part VIII Information About Officers, E and Contractors	birectors, Trustees,	, Foundation Mana	igers, Highly Paid	i Empi	oyees,
1 List all officers, directors, trustees, foundation	n managers and their co	mpensation (see instru	ctions).		
(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		kpense account, er allowances
GREGORY A. DESBRISAY	PRES/DIR	0.	0.		0 .
253 HIGHLAND AVENUE SAN CARLOS, CA 94070	2.00				
SONYA L. SIGLER	VP/DIR/SCR	0.	0.		0.
253 HIGHLAND AVENUE SAN CARLOS, CA 94070	2.00				
2 Compensation of five highest-paid employees	S (other than those inclu	uded on line 1— see inst	ructions). If none, ent	er 'NONE	<u>.</u> .
(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Ex	pense account, er allowances
NONE			compensation		
	-				
				1	
otal number of other employees paid over \$50,000	1			-	0
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Form 990-PF (2010) DEBRISAY SIGLER FAMILY FOUNDATION 94-3347046

| Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

3 Five highest-paid independent contractors for professional services (see enter 'NONE.'	instructions). If none,	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		(o) companion
MOND	· -	
	. 🗐	
	· -	
Total number of others receiving over \$50,000 for professional services	<u> </u>	0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year include relevant stati organizations and other beneficiaries served, conferences convened, research papers produced, etc	stical information such as the number of	Expenses
1 SUPPORT FOR CHARITABLE ORGANIZATIONS BENEFITI	NG THE COMMUNITY.	
INCLUDING RELATED ADMINISTRATIVE EXPENSES AS		
		10,474.
2		
3		
4		
Part IX-B Summary of Program-Related Investments (see in	structions)	
Describe the two largest program-related investments made by the foundation	during the tax year on lines 1 and 2	Amount
1 N/A	adming the tax year on miles i and z.	7 1110411
2		
All other program-related investments. See instructions		
3		
Total. Add lines 1 through 3	▶	0.
BAA		Form 990-PF (2010)

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

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	230,386.
b Average of monthly cash balances	1b	8,337.
c Fair market value of all other assets (see instructions)	1c	
d Total (add lines 1a, b, and c)	1d	238,723.
e Reduction claimed for blockage or other factors reported on lines 1a and 1c	1 1	
(attach detailed explanation)	0.	
2 Acquisition indebtedness applicable to line 1 assets	2	0.
3 Subtract line 2 from line 1d	3	238,723.
4 Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	3,581.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	235,142.
6 Minimum investment return. Enter 5% of line 5	6	11,757.
Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private (operating fou	ndations
and certain foreign organizations check here ► and do not complete thi	is part.)	
1 Minimum investment return from Part X, line 6	1	11,757.
2a Tax on investment income for 2010 from Part VI, line 5	21.	-
b Income tax for 2010. (This does not include the tax from Part VI)		
c Add lines 2a and 2b	2c	21.
3 Distributable amount before adjustments. Subtract line 2c from line 1	3	11,736.
4 Recoveries of amounts treated as qualifying distributions	4	
5 Add lines 3 and 4	5	11,736.
6 Deduction from distributable amount (see instructions)	6	
7 Distributable amount as adjusted. Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	11,736.
Part XIII Qualifying Distributions (see instructions)		
dualitying 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	10,474.
b Program-related investments — total from Part IX-B	1 b	
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	10,474.
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions)	5	21.
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	10,453.
	L	
Note. The amount on line 6 will be used in Part V. column (b), in subsequent years when calculating whe	ther the foundati	nn.

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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Form **990-PF** (2010)

Pan Viii 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				11 726
2 Undistributed income, if any, as of the end of 2010				11,736.
a Enter amount for 2009 only			10,342.	
b Total for prior years 20, 20, 20		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 e4 Qualifying distributions for 2010 from Part	0.			
XII, line 4 ► \$ 10,474.				
a Applied to 2009, but not more than line 2a			10,342.	
			10,342.	
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				132.
e Remaining amount distributed out of corpus	0.			
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))	7.6			
(-,,				
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' undistribut-		0.		
ed 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 instructions			0.	
f Undistributed income for 2010 Subtract lines				
4d and 5 from line 1. This amount must be				
distributed in 2011				11,604.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed				
by section 170(b)(1)(F) or 4942(g)(3)	0			
(see instructions)	0.			
8 Excess distributions carryover from 2005 not applied on line 5 or line 7 (see instructions)	0.			
,	0.			
9 Excess distributions carryover to 2011. Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9.	Ů.			
a Excess from 2006				
b Excess from 2007				
c Excess from 2008				
d Excess from 2009				
e Excess from 2010				

Form 990-PF (2010) DEBRISAY SIGLER	94-3347046	6 Page 10 N/A							
Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9) 1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling									
1 a If the foundation has received a ruling or is effective for 2010, enter the date of the	determination letter ruling	that it is a private o	perating foundation,	and the ruling					
b Check box to indicate whether the foundar	-	rating foundation de	escribed in section	4942(j)(3) or	4942(j)(5)				
2a Enter the lesser of the adjusted net	Tax year		Prior 3 years						
income from Part I or the minimum investment return from Part X for each year listed. (a) 2010 (b) 2009 (c) 2008 (d) 2007									
b 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									
 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(j)(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.									
 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 assets at any time during t	(Complete this he vear — see ir	s part only if the estructions.)	e organization h	ad \$5,000 or mo	ore in				
Information Regarding Foundation Manage List any managers of the foundation who is close of any tax year (but only if they have SEE STATEMENT 8	ers:	<u> </u>	otal contributions rec section 507(d)(2))	ceived by the founda	tion before the				
b List any managers of the foundation who a partnership or other entity) of which the NONE	own 10% or more of foundation has a 10	the stock of a corp 1% or greater intere	oration (or an equall st	y large portion of the	e ownership of				
2 Information Regarding Contribution, Gran Check here ► X if the foundation only requests for funds. If the foundation make complete items 2a, b, c, and d.	nakes contributions	to preselected char	itable organizations	and does not accept	t unsolicited conditions,				
a The name, address, and telephone number	er of the person to v	hom applications s	hould be addressed.						
b The form in which applications should be s	submitted and inform	nation and materials	s they should include	e					
c Any submission deadlines:									
d Any restrictions or limitations on awards, s	such as by geograph	nical areas, charitab	ole fields, kinds of in	stitutions, or other fa	actors:				
 									

3 Grants and Contributions Paid During the Year or Approved for Future Payment									
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount					
Name and address (home or business)	substantial contributor	recipient	Contribution						
Name and address (home or business) a Paid during the year	substantial contributor	recipient							
	<u> </u>								
Total	1		► 3a						
b Approved for future payment			▶ 3b						
Total			► 3b						

Business and contracts from government agencies Membership dues and assessments Interest on savings and temporary cash investments Divident income or (loss) from securities Net rental income or (loss) from real estate Debt-financed property Not debt-financed property Not rental income or (loss) from securities Offer investment income Gan or (loss) from special events Gross profit or (loss) from sales of inventory Other revenue: Carbon Special events Carbon	Enter gross amounts unless otherwise indicated.		ed business income	Exclude	d by section 512, 513, or 514	(e)
g Fees and contracts from government agencies 2 Membership dues and assessments 3 Interest on savings and temporary cash investments 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 7 Other investment income 8 Gain or (loss) from sales of assets other than inventory 9 Net income or (loss) from special events 0 Gross profit or (loss) from sales of inventory 1 (the revenue: 2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) 2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12 instructions to verify calculations) Relationship of Activities to the Accomplishment of Exempt Purposes 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) (See the instructions.)		Business		Exclu- sion		Related or exemp function income (see the instruction
g Fees and contracts from government agencies Membership dues and assessments Interest on savings and temporary cash investments Dividends and interest from securities Net rental income or (loss) from real estate a Debt-financed property Net rental income or (loss) from personal property Other investment income Gain or (loss) from sales of assets other than inventory Ret rental income or (loss) from special events Gross profit or (loss) from sales of inventory Other revenue: a b C C d Relationship of Activities to the Accomplishment of Exempt Purposes 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) (See the instructions.)				code		
Fees and contracts from government agencies Membership dues and assessments Interest on savings and temporary cash investments Dividends and interest from securities Net rental income or (loss) from real estate Debt-financed property Net rental income or (loss) from personal property Other investment income Gain or (loss) from sales of assets other than inventory Net income or (loss) from sales of inventory Other revenue: Total. Add line 12, columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) Total. Add line 13 instructions to verify calculations Relationship of Activities to the Accomplishment of Exempt Purposes To Park XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See the instructions)						
Membership dues and assessments Interest on savings and temporary cash investments Dividends and interest from securities Net rental income or (loss) from real estate a Debt-financed property by Not debt-financed property Net rental income or (loss) from personal property Other investment income Gain or (loss) from special events Gross profit or (loss) from sales of inventory Other revenue: Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations) 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) (See the instructions.)						
Interest on savings and temporary cash investments Dividends and interest from securities Net rental income or (loss) from real estate a bebt-financed property by Not debt-financed property Net rental income or (loss) from personal property Other investment income Gain or (loss) from sales of assets other than inventory Net income or (loss) from special events Gross profit or (loss) from sales of inventory Other revenue: Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations) 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) (See the instructions.)	· -					
Net rental income or (loss) from real estate a Debt-financed property b Not debt-financed property Net rental income or (loss) from personal property Other investment income Gain or (loss) from sales of assets other than inventory Net income or (loss) from special events Gross profit or (loss) from sales of inventory Other revenue: Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) a worksheet in line 13 instructions to verify calculations) Relationship of Activities to the Accomplishment of Exempt Purposes Texts. 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) (See the instructions.)	and temporary cash investments			14	1.	
Net rental income or (loss) from personal property Other investment income Gain or (loss) from sales of assets other than inventory Net income or (loss) from special events Gross profit or (loss) from sales of inventory Other revenue: A B Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) Worksheet in line 13 instructions to verify calculations) Relationship of Activities to the Accomplishment of Exempt Purposes The 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) (See the instructions.)	me or (loss) from real estate property					
Gain or (loss) from sales of assets other than inventory Net income or (loss) from special events Gross profit or (loss) from sales of inventory Other revenue: Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations) Relationship of Activities to the Accomplishment of Exempt Purposes The 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) (See the instructions.)	r (loss) from personal property					
Other revenue: Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations) Relationship of Activities to the Accomplishment of Exempt Purposes 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) (See the instructions.)	sales of assets other than inventory			18	2,115.	
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations) Relationship of Activities to the Accomplishment of Exempt Purposes Total. 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) (See the instructions.)						
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations) Relationship of Activities to the Accomplishment of Exempt Purposes The 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) (See the instructions.)	1					
Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations) Relationship of Activities to the Accomplishment of Exempt Purposes The 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) (See the instructions.)						
Relationship of Activities to the Accomplishment of Exempt Purposes 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) (See the instructions.)						2,11
ne 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) (See the instructions.)						2,11
accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See the instructions.)	ationship of Activities to the A	ccompli	shment of Exemp	t Purpo	oses	
	pelow how each activity for which incom- ishment of the foundation's exempt purp	e is report poses (othe	ed in column (e) of Par er than by providing fun	t XVI-A o	contributed importantly tuch purposes) (See the	o the instructions.)
						·
· , , , , , , , , , , , , , , , , , , ,						

BAA TEEA0502L 02/17/11 Form 990-PF (2010)

Form 990-PF (2010) DEBRISAY SIGLER FAMILY FOUNDATION 94-3347046 Par XVIII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

								res	NO
des	cribed in section 501(c) o	of the Code (oth	gage in any of the following er than section 501(c)(3) of	with any oth ganizations)	ier organization or in section 52	27,			
	ting to political organizat								
	, ,	toundation to a	noncharitable exempt orga	anization of			1 - (1)		######################################
	Cash Other assets						1a (1)		X
	er transactions						1 a (2)		<u> </u>
	Sales of assets to a nor	oharitahla ayam	nt organization				1 b (1)		¥
	Purchases of assets from						1b(1)		X
• • •	Rental of facilities, equip		, ,				1b (3)		X
	Reimbursement arrange	•	255015.				1b (3)		$\frac{\Lambda}{X}$
` '	Loans or loan guarantee						1 b (5)		X
• •	•		or fundraising solicitations	.			1b (6)		X
• •		,	, other assets, or paid em				1c	-	X
		-, .,	, outer adopted or paid oring	5,10 y 0 0 0.					
the	goods, other assets, or	services given b	omplete the following scher by the reporting foundation. by in column (d) the value	If the founda	ition received le	ss than fair market	value in	e of	
(a) Line no	(b) Amount involved	(c) Name of	noncharitable exempt organization) (d)	Description of tran	isfers, transactions, and	sharing arran	gement	is .
N/A									
_									
			··	_					
									
						_			
									
					·				
		 							
		J							
2a is th	ne foundation directly or	indirectly affiliate	ed with, or related to, one ear than section 501(c)(3)) of	or more tax-e	exempt organiza	ations	Πvaa	X	Nio
		•	er man section 501(c)(3)) c	r in section a	027 :		res	Δ	INO
	es, complete the following (a) Name of organization		(b) Type of organiz	otion	10	:) Description of rel	ationship		
N/A	(a) Name of organizati	1011	(b) Type of organiz	auon	,,,	.) Description of rei	attorismp		
11/ 21									
						· · · · · · · · · · · · · · · · · · ·			
	· · · · · · · · · · · · · · · · · · ·								-
			ed this return, including accompan				dge and belief	, it is tru	ue,
	orrect, and complete Declaration	of preparer (other th	nan taxpayer or fiduciary) is based	on all information	of which preparer h	as any knowledge.	· +		
Sign	· (1.74	1/20/	Cant	-1		
Here	X		<u> </u>	10	122/11	SECTE	ing_		
	Signature of officer or trustee		D	Date '	TD-4-	Title	I DTIN		
	Print/Type preparer' na		Preparer's signature	11 0	Date	Check ifif	PTIN		
Paid	DAVID P. HOI		COOCTATIO COSC	TNC	10-20-11	self-employed	JN/A		
Prepare	'' P -		ASSOCIATES CPAS,	INC.		Firm's EIN N/A			
Use On	¥ Firm's address ► —		OGE AVE., #101				N 226	0100	
	<u> </u>	ALO ALTO,	CA 94306			Phone no (650	326-		
BAA							Form 99	U-PF	(2010)

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, 990-EZ, or 990-PF

OMB No 1545-0047

2010

Name of the organization Employer identification number DEBRISAY SIGLER FAMILY FOUNDATION 94-3347046 Organization type (check one): Filers of: Section: Form 990 or 990-EZ 501(c)((enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation 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. [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) but it **must** answer 'No' on Part IV, line 2 of their 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) BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2010)

Marne of org	B (FORM 990, 990-EZ, Or 990-PF) (2010)	Page .	Of L Of Part I Oyer identification number
•	SAY SIGLER FAMILY FOUNDATION	'	-3347046
Parti	Contributors (see instructions.)		
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	GREGORY A. DESBRISAY & SONIA SIGLER 253 HIGHLAND AVENUE SAN CARLOS, CA 94070	\$72,06	Person X Payroll X Noncash X (Complete Part II if there is a noncash contribution)
(a) Number	(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) Number	(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) Number	(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) Number	(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) Number	(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)

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

of 1

of Part II

flame of organization DEBRISAY SIGLER FAMILY FOUNDATION

Employer identification number

94-3347046

Part II Noncash Property (see instructions)

(a) No. from Part I	(b) Description of noncash property given	FMV (see	(c) (or estimate) instructions)	(d) Date received
1	3094 SHARES OF STOCK IN CISCO SYSTEMS INC.			
		\$	62,592.	12/31/10
(a) No. from Part I	(b) Description of noncash property given	FMV (see	(c) (or estimate) instructions)	(d) Date received
		\$\$		
(a) No. from Part I	(b) Description of noncash property given	FMV (see	(c) (or estimate) instructions)	(d) Date received
		\$		
(a) lo. from Part I	(b) Description of noncash property given	FMV (see	(c) (or estimate) instructions)	(d) Date receive
·		\$		
(a) Io. from Part I	(b) Description of noncash property given	FMV (see	(c) (or estimate) instructions)	(d) Date received
		\$		
(a) ło. from Part I	(b) Description of noncash property given	FMV (see	(c) (or estimate) instructions)	(d) Date received
		\$		

	For organizations completing Part III, enter contributions of \$1,000 or less for the year.	total of <i>exclusively</i> religious, cha (Enter this information once Se	arıtable, etc, e instructions	s) > \$	N/A
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift	
	N/A				
	Transferee's name, addres	(e) Transfer of gift ss, and ZIP +4	Rel	ationship of transferor to trans	feree
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift	is held
	Transferee's name, addres	(e) Transfer of gift ss, and ZIP + 4	Rel	ationship of transferor to trans	feree
(a)	(b)	(c)		(d)	
No. from Part i	Purpose of gift	Use of gift		Description of how gift	is held
	Transferee's name, addres	(e) Transfer of gift s, and ZIP + 4	Rela	ationship of transferor to trans	feree
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift	is held
;	Transferee's name, addres	(e) Transfer of gift s, and ZIP + 4	Rela	ationship of transferor to trans	feree

Form **8868** (Rev January 2011)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

b File an No 1545-1709
s box ► X

File a separate application for each return.

If you	u are filing for a	n Automatic 3-M	onth Extension	i, 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.

Associated '	extension of time to file any of the forms listed in With Certain Personal Benefit Contracts, which m ling of this form, visit <i>www.irs.gov/efile</i> and click	iust be sent	to the IRS in paper format (see instruc	nformation Re tions) For mo	turn for Transfers re details on the
Part I	Automatic 3-Month Extension of Time.	Only subm	nit original (no copies needed).		
	on required to file Form 990-T and requesting an			complete Par	t I only
All other co	rporations (including 1120-C filers), partnerships, returns	REMICS, a	nd trusts must use Form 7004 to reques	st an extensio	n of time to file
	Name of exempt organization			Employer ident	ification number
Type or print					
-	DEBRISAY SIGLER FAMILY FOUNDAY			94-3347	046
File by the due date for filing your	Number, street, and room or suite number. If a P O box, see ii	nstructions			
return See Instructions	253 HIGHLAND AVENUE City, town or post office, state, and ZIP code For a foreign add	tress see instri	inflore		
	SAN CARLOS, CA 94070	,, see 11311 e	Reliance		
	JAN CALLOS, CA 34070				
Enter the Re	eturn code for the return that this application is fo	or (file a sep	parate application for each return)		04
Application s For		Return Code	Application Is For		Return Code
orm 990		01	Form 990-T (corporation)		07
orm 990-B	L	02	Form 1041-A		08
orm 990-E	Z	03	Form 4720		09
Form 990-P		04	Form 5227		10
	(section 401(a) or 408(a) trust)	05	Form 6069	·	11
orm 990-T	(trust other than above)	06	Form 8870		12
Telephon If the org If this is check the exte 1 I requesion until The ex	ses are in the care of SONYA L. SIGLER see No (650) 281-8325 ganization does not have an office or place of but for a Group Return, enter the organization's four his box [In it is for part of the group, checonsion is for. sest an automatic 3-month (6 months for a corporation is for the organization's return for calendar year 20 10 or tax year beginning [10], 20	FAX No siness in th digit Group k this box ation require ganization re	e United States, check this box Exemption Number (GEN) and attach a list with the names and to file Form 990-T) extension of time eturn for the organization named above		
_	ax year entered in line 1 is for less than 12 mont ange in accounting period			nal return	
3a If this nonref	application is for Form 990-BL, 990-PF, 990-T, 47 undable credits. See instructions	720, or 6069	B, enter the tentative tax, less any	3a \$	0.
b If this a payme	application is for Form 990-PF, 990-T, 4720, or 6 nts made Include any prior year overpayment al	069, enter a lowed as a	any refundable credits and estimated tax credit	3ы\$	0.
c Balanc EFTPS	ce due. Subtract line 3b from line 3a Include you (Electronic Federal Tax Payment System) See	r payment v instructions	with this form, if required, by using	3c \$	0.
aution. If v	you are going to make an electronic fund withdray	wal with this	Form 8868, see Form 8453-EO and Fo	rm 8879-FO fo	or

payment instructions

BAA For Paperwork Reduction Act Notice, see Instructions.

Form 8868 (Rev 1-2011)

Page 2

• If you a	are filing for an Additional (Not Automatic) 3-Month	Extension,	complete only Part II and check the	s box	► X
Note. Only	complete Part II if you have already been granted	an automat	ic 3-month extension on a previous!	y filed Form 8868	
	are filing for an Automatic 3-Month Extension, com				
	Additional (Not Automatic) 3-Month Extension	ension o	f Time. Only file the original	(no copies needed)	
	Name of exempt organization			Employer identification number	r
Type or					
print	DEBRISAY SIGLER FAMILY FOUNDATI	ON		94-3347046	
	Number, street, and room or suite number. If a PO box, see inst	tructions	5.2		
File by the extended	HOLLAND & ASSOCIATES CPAS, INC.				
due date for filing the	250 CAMBRIDGE AVE., #101				
return. See instructions. City, town or post office, state, and ZIP code. For a foreign address, see instructions.					
	PALO ALTO, CA 94306			_	
Enter the F	Return code for the return that this application is for	(file a sepa	arate application for each return)		04
					رــــــا
Application	1	Return	Application		Return
is For		Code	Is For		Code
Form 990		01			
Form 990-I	3L	02	Form 1041-A		08
Form 990-E	EZ	03	Form 4720		09
Form 990-F	PF	04	Form 5227		10
Form 990-	(section 401(a) or 408(a) trust)	05	Form 6069		11
Form 990-	(trust other than above)	06	Form 8870		12
STOP! Do	not complete Part II if you were not already granted	an automa	tic 3-month extension on a previous	sly filed Form 8868.	
The bo	oks are in care of ► SONYA L. SIGLER				
Teleph	one No ► (650) 281-8325	FAX No ►			
If the o	rganization does not have an office or place of bus	iness in the	United States, check this box	-	► □
• If this is	s for a Group Return, enter the organization's four o	digit Group	Exemption Number (GEN)	If this	is for the
whole grou	p, check this box Fig. 1 If it is for part of the g	group, chec	k this box > and attach a list with	th the names and EINs o	f all
members t	he extension is for,				
4 I requ	uest an additional 3-month extension of time until	11/15	, 20 11.		
5 For c	uest an additional 3-month extension of time until alendar year <u>2010</u> , or other tax year beginning tax year entered in line 5 is for less than 12 month		, 20 , and ending	. 20	
6 If the	tax year entered in line 5 is for less than 12 month	s, check re	ason Initial return	Final return	
	change in accounting period				
7 State	in detail why you need the extensionTAXPA	AYER RE	SPECTFULLY REQUESTS AD	DITIONAL TIME TO)
GAT	HER INFORMATION NECESSARY TO FI	LE A CO	MPLETE AND ACCURATE TA	X RETURN.	
8a If this	application is for Form 990-BL, 990-PF, 990-T, 472	20. or 6069.	enter the tentative tax, less any		
	fundable credits. See instructions			8a \$	0.
	application is for Form 990-PF, 990-T, 4720, or 606				·
	ents made Include any prior year overpayment allo Form 8868	owed as a d	credit and any amount paid previous	8b \$	0
			th this form if required by the	- 500	0.
EFTP	ice due. Subtract line 8b from line 8a - Include your S (Electronic Federal Tax Payment System) - See ii	payment w. nstructions	in this form. If required, by using	8c \$	0.
	Signa	ture and	d Verification		
Under penaltie	s of perjury, I declare that I have examined this form, including accomp <u>ete, and that I am authorized to prepare this form</u>			knowledge and belief, it is true.	
correct, and co	number and that I am authorized to prepare this form			_	. .
Signature -	Title Title	CPM		Date ► 7.2	11
BAA	. •	FIFZ0502L	11/15/10	Form 8868 (Rev 1-2011)

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20		17

IRS

FEDERAL STATEMENTS

PAGE 1

DEBRISAY SIGLER FAMILY FOUNDATION

94-3347046

STATEMENT 1 FORM 990-PF, PART I, LINE 18 **TAXES**

(A) (B) NET (C) (D) INVÉSTMENT **EXPENSES** ADJUSTED CHARITABLE NET INCOME PER BOOKS INCOME PURPOSES <u>2,</u>337. TOTAL \$ 0. 2,337. \$ 0. \$

STATEMENT 2 FORM 990-PF, PART I, LINE 23 OTHER EXPENSES

(B) NET (A) (C) (D) **EXPENSÉS** INVESTMENT ADJUSTED CHARITABLE PER BOOKS INCOME NET INCOME **PURPOSES** 134. CALIFORNIA FILING FEES 134. TOTAL <u>0.</u> \$ <u>o.</u>

STATEMENT 3 FORM 990-PF, PART I, LINE 25 CONTRIBUTIONS, GIFTS, AND GRANTS

CASH GRANTS AND ALLOCATIONS

CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:

SUPPORT OF ORGANIZATION GOLDEN GATE NATIONAL PARKS CONSERVANCY BUILD. 201 FORT MASON SAN FRANCISCO, CA 94123 NONE

Ś

1,000.

250.

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE: AMOUNT GIVEN:

PUBLIC CHARITY

CLASS OF ACTIVITY: DONEE'S NAME: SUPPORT OF ORGANIZATION SEQUOIA PARKS FOUNDATION DONEE'S ADDRESS: PO BOX 3047 VISALIA, CA 93278 RELATIONSHIP OF DONEE: NONE

ORGANIZATIONAL STATUS OF DONEE: AMOUNT GIVEN:

PUBLIC CHARITY

SUPPORT OF ORGANIZATION

CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS: MOUNT RUSHMORE HISTORY ASSOCIATION

13036 HWY 244 KEYSTONE, SD 57751 RELATIONSHIP OF DONEE: NONE

ORGANIZATIONAL STATUS OF DONEE: PUBLIC CHARITY

AMOUNT GIVEN: 250.

CLASS OF ACTIVITY: SUPPORT OF ORGANIZATION

DONEE'S NAME: DONEE'S ADDRESS: NATIONAL PARKS CONSERVATION ASSOCIATION 1300 19TH ST. NW, SUITE 300 WASHNGTON, DC 20036

RELATIONSHIP OF DONEE:

NONE ORGANIZATIONAL STATUS OF DONEE: PUBLIC CHARITY

2010 '	FED	ERAL STATEMENTS	PAGE 2
	DEBRISA	SIGLER FAMILY FOUNDATION	94-3347046
STATEMENT 3 (CONTIN FORM 990-PF, PART I, L CONTRIBUTIONS, GIFT	.INE 25		
AMOUNT GIVEN:		\$	1,000.
CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:		SUPPORT OF ORGANIZATION SAN CARLOS CHARTER LEARNING CENTER 750 DARTMOUTH AVENUE SAN CARLOS, CA 94070 NONE	
RELATIONSHIP OF DON ORGANIZATIONAL STAT AMOUNT GIVEN:	US OF DONEE:	PUBLIC CHARITY	2,561.
CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:		SUPPORT OF ORGANIZATION SAN CARLOS EDUCATION FOUNDATION PO BOX 1214 SAN CARLOS, CA 94070	
RELATIONSHIP OF DON ORGANIZATIONAL STAT AMOUNT GIVEN:	EE:	NONE	120.
CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:		SUPPORT OF ORGANIZATION UC REGENTS CAL BAND 72 CESAR CHAVEZ STUDENT CENTER BERKELEY, CA 94720	
RELATIONSHIP OF DON ORGANIZATIONAL STAT AMOUNT GIVEN:	EE: US OF DONEE:	NONE	500.
CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:		SUPPORT OF ORGANIZATION POINT REYES NATIONAL SEASHORE 1 BEAR VALLEY ROAD BLDG. 70 POINT REYES STATION, CA 94956	
RELATIONSHIP OF DON ORGANIZATIONAL STAT AMOUNT GIVEN:	EE: US OF DONEE:	NONE	257.
CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:		SUPPORT OF ORGANIZATION PENINSULA HUMANE SOCIETY 12 AIRPORT BLVD SAN MATEO, CA 94401	
RELATIONSHIP OF DON ORGANIZATIONAL STAT AMOUNT GIVEN:	EE: US OF DONEE:	NONE PUBLIC CHARITY	1,000.
CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:		SUPPORT OF ORGANIZATION BOY SCOUTS OF AMERICA 1150 CHESS DRIVE FOSTER CITY, CA 94404 NONE PUBLIC CHARITY	
RELATIONSHIP OF DON ORGANIZATIONAL STAT AMOUNT GIVEN:	EE: US OF DONEE:	NONE PUBLIC CHARITY	1,000.
CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:		SUPPORT OF ORGANIZATION NATIONAL PARK FOUNDATION 1201 EYE STREET, NW WASHINGTON, DC 20005 NONE PUBLIC CHARITY	
RELATIONSHIP OF DON: ORGANIZATIONAL STAT	EE: US OF DONEE:	NONE PUBLIC CHARITY	

2010 FEDE	ERAL STATEMENTS	PAGE 3
DEBRISAY	SIGLER FAMILY FOUNDATION	94-3347046
STATEMENT 3 (CONTINUED) FORM 990-PF, PART I, LINE 25 CONTRIBUTIONS, GIFTS, AND GRANTS		
AMOUNT GIVEN:	\$	1,000.
CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS: RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DONEE:	SUPPORT OF ORGANIZATION SAN FRANCISCO SYMPHONY 201 VAN NESS AVE SAN FRANCISCO, CA 94102	
ORGANIZATIONAL STATUS OF DONEE: AMOUNT GIVEN:	PUBLIC CHARITY	500.
CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS: RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DONEE:	SUPPORT OF ORGANIZATION EL CAMINO YOUTH SYMPHONY 4055 FABIAN WAY PALO ALTO, CA 94303	
RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DONEE: AMOUNT GIVEN:	NONE PUBLIC CHARITY	262.
CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS: RELATIONSHIP OF DONEE:	SUPPORT OF ORGANIZATION CA YOUTH SYMPHONY ASSOCIATION 441 CALIFORNIA AVE., #5	
RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DONEE: AMOUNT GIVEN:	NONE PUBLIC CHARITY	262.
CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS: RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DONEE:	SUPPORT OF ORGANIZATION NOVA VISTA SYMPHONY ASSOCIATION PO BOX 60312	
RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DONEE: AMOUNT GIVEN:	NONE PUBLIC CHARITY	262.
CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:	SUPPORT OF ORGANIZATION GAMMA DELTA FOUNDATION 3905 VINCENNES ROAD, SUITE 105 INDIANAPOLIS, IN 13035	
RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DONEE: AMOUNT GIVEN:	NONE PUBLIC CHARITY	250.
	TOTAL \$	10,474.
STATEMENT 4 FORM 990-PF, PART II, LINE 10B INVESTMENTS - CORPORATE STOCKS		
CORPORATE STOCKS		R MARKET VALUE
CISCO SYSTEM COMMON STOCK	MKT VAL \$ 265,094. \$ TOTAL \$ 265,094.	265,094. 265,094.

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FEDERAL STATEMENTS

PAGE 4

DEBRISAY SIGLER FAMILY FOUNDATION

94-3347046

STATEMENT 5 FORM 990-PF, PART III, LINE 3 OTHER INCRÉASES

REDUCTION OF PRIOR YEAR LIABILITY

5,837. 5,837. TOTAL \$

STATEMENT 6 FORM 990-PF, PART III, LINE 5 OTHER DECREASES

ADJUST INVESTMENTS TO FMV

95,510. 95,510. TOTAL \$

STATEMENT 7 FORM 990-PF, PART VII-A, LINE 10 SUBSTANTIAL CONTRIBUTORS DURING THE TAX YEAR

NAME OF SUBSTANTIAL CONTRIBUTOR ADDRESS OF SUBSTANTIAL CONTRIBUTOR

GREGORY A. DESBRISAY

253 HIGHLAND AVENUE SAN CARLOS, CA 94070

SONYA L. SIGLER

253 HIGHLAND AVENUE SAN CARLOS, CA 94070

STATEMENT 8 FORM 990-PF, PART XV, LINE 1A FOUNDATION MANAGERS - 2% OR MORE CONTRIBUTORS

GREGORY A. DESBRISAY SONYA L. SIGLER