

# See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



# 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

Department of the Treasury Internal Revenue Service

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

|             | For ca      | lenda                       | r year 2010, or t                                  | ax year beginnir                     | ng               |  | , 2010                | , and ending                          | 3            |   | ,  |  |  |  |
|-------------|-------------|-----------------------------|--|--------------------------------------|------------------|--|-----------------------|---------------------------------------|--------------|---|--|--|--|--|
|             | G Ct        | eck a                       | II that apply:                                     | Initial return                       | Init             | ial Return d                                     | of a former p         | ublic charity                         | ,            |   | Fir  | nal return                               |  |  |
|             |             |                             |  | Amended retu                         | ırn              |  | Address               | change                                | Name         | e char                                    | nge  |  |  |  |
|             |             |                             |  |                                      |                  |  |                       |                                       | <del></del>  |   | mployer identification n                             | ımber                                    |  |  |
|             | URBA        | URBANEK-LEVY EDUCATION FUND |  |                                      |                  |  |                       |                                       |              | 94-3372793                                |  |  |  |  |
|             |             |                             | ERSITY AVE   |                                      |                  |  |                       |                                       | E            | B Telephone number (see the instructions) |  |  |  |  |
|             | LOS         | LOS GATOS, CA 95030         |  |                                      |                  |  |                       |                                       |              |   | 408-399-8081   |  |  |  |
|             |             |                             |  |                                      |                  |  |                       |                                       | 7            |   | exemption application i                              |  |  |  |
|             |             |                             |  |                                      |                  |  |                       |                                       |              |   | oreign organizations, chi                            |  |  |  |
|             | н (         | Check                       | type of organiza                                   | ation X Sec                          | tion 50          | 1(c)(3) exer                                     | npt private t         | foundation                            |              |   |  | eting the 85% test, check                |  |  |
|             | ••          |                             | ection 4947(a)(1)                                  |                                      |                  |  |                       | private found                         | dation       | - h                                       | ere and attach computat                              | ion ►                                    |  |  |
|             | 1           |                             | rket value of all asse                             |                                      |                  |  | ethod: X C            |                                       | crual        |   | private foundation statu                             |  |  |  |
|             |             |                             | art II, column (c), line                           |                                      |                  | Other (specify                                   | _                     |                                       |              |   | nder section 507(b)(1)(A<br>the foundation is in a 6 |  |  |  |
|             | •           | ŝ                           | 674  | ,585.                                | (Part I.         |  |                       | n cash basis                          |              |   | nder section 507(b)(1)(E                             |  |  |  |
|             | Part        | ĪĀ                          | nalysis of Re                                      |                                      | <u>,, =,, ,,</u> |  |                       | i                                     |              |   |  | 1  |  |  |
| -           | 7 341.5     | E                           | xpenses (The                                       | total of amounts                     | s <i>in</i>      | (a) Rev  | enue and<br>per books | (b) Net in                            |              | ١   | (c) Adjusted net income                              | (d) Disbursements for charitable         |  |  |
| 3           |             | C                           | olumns (b), (c), a                                 | and (d) may not                      | neces-           | СХРОПОСС   | por books             |                                       | ,,,,,        |   |  | purposes                                 |  |  |
| ~           |             |                             | arily equal the ai<br>see the instructio           |                                      | n (a)            |  |                       |                                       |              |   |  | (cash basis only)                        |  |  |
| C)          |             | 1 1                         |  | grants, etc, received                | (att sch)        |  | -                     | · · · · · · · · · · · · · · · · · · · | <del>,</del> |   | >  | 5- , 1-3                                 |  |  |
| <b>3</b> 3  |             | 2                           |  | oundn is not req to at               |                  |  |                       | •                                     |              |   | · À,   | . * '                                    |  |  |
| AON GURRANO |             | 3                           | Interest on sav                                    | ings and tempor                      |                  |  |                       |                                       |              |   |  | 4.1742 & 614 61A                         |  |  |
| Ź           |             |                             | cash investme                                      |                                      | -                |  | 784.                  |                                       | 784          |   | N/A  |  |  |  |
| 7           |             | 4                           | _  | rest from securities .               |                  |  | 2,479.                |                                       | 2,479        | 9.  |  | 1 19 \$ \$ 2 , 12 7 \$ 1                 |  |  |
| Ų.          |             |                             | <b>a</b> Gross rents<br><b>b</b> Net rental income |                                      |                  |  | 7                     |                                       |              | -   | <del></del>  | *  |  |  |
| 5           | _           |                             | or (loss)  |                                      |                  |  | - <del>€</del> €      | (                                     |              |   |  |  |  |  |
| 7           | R<br>E      |                             | a Net gain/(loss) from<br>b Gross sales price for  |                                      |                  |  | 15,026.               | (* * ` ` ` ` ` .   .                  | . 기위         |   |  |  |  |  |
| 3           | V           | _                           | assets on line 6a                                  |                                      | 202.             |  | 7. 4.4.               |                                       | 15,026       | -   | - 3  | A /                                      |  |  |
| 9           | Ę           | '                           |  | ome (from Part IV, lin               | e 2).            |  | <u></u>               | 4,                                    | 15,026       | <u> </u>                                  | <b>b</b> v   |  |  |  |
|             | N<br>U      | 8 9                         | Net short-term<br>Income modific                   |                                      |                  |  |                       | 1 189                                 |              |   |  |  |  |  |
|             | Ĕ           |                             | a Gross sales less                                 |                                      |                  | - 3  |                       |                                       |              | =   | we that were are with re                             | in · · · · · · · · · · · · · · · · · · · |  |  |
|             | 250         | +:                          | returns and returns and returns and                |                                      |                  | 1  | , 3 %                 |                                       |              |   | · · · · · · · · · · · · · · · · · · ·                |  |  |  |
| ŀ           | <b>イ</b> Eし | FIV                         | Pallowances Less Cost of goods sold                |                                      |                  |  |                       | 3                                     |              |   |  |  |  |  |
|             |             | T                           | c Gross profit (10ss)                              | (att sch)                            |                  |  |                       | ,,, ( ), ( ), ( )                     |              |   |  | · (c)                                    |  |  |
|             | NOV         | 2 11                        | 20ther income                                      | (attach schedule)                    | )                |  |                       |                                       | ······       |   |  | V , 3 , 10 , 10 , 10 , 10 , 10 , 10 , 10 |  |  |
|             | 110 •       | 70                          |  | SEE STATEME                          | NT 1             |  | 225.                  |                                       |              |   |  | 💸 🕹 🤻                                    |  |  |
|             |             |                             | Total: Add ine                                     |                                      |                  |  | 18,514.               |                                       | 18,289       | ).  |  | ` *                                      |  |  |
| (           | JGL         |                             | , Compensation of of                               |                                      | es, etc          |  | 0.                    |                                       |              |   |  |  |  |  |
|             |             | 14                          | Other employee sa                                  | laries and wages                     |                  |  |                       |                                       |              |   |  |  |  |  |
|             |             |                             | Pension plans,                                     |                                      |                  |  |                       | <u> </u>                              |              |   |  |  |  |  |
|             | A           |                             | a Legal fees (attach                               |                                      |                  |  | 757.                  |                                       | 1            |   |  | 757.                                     |  |  |
|             | M           |                             | <b>b</b> Accounting fees (a                        |                                      | ST 3             |  | 3,513.                | ļ                                     | 1,757        | <u>' -   _</u>                            |  | 1,756.                                   |  |  |
|             | 1<br>N      | 1 '                         | c Other prof fees (at                              | tach sch)                            |                  |  |                       |                                       |              |   |  |  |  |  |
|             | O P E R A T | 17                          |  |                                      | m                | <u> </u>   | 85.                   | ļ <u></u> -                           | 85           |   |  | 10                                       |  |  |
|             | ET          |                             | •            |                                      | 1M 4             |  | 46.                   |                                       | 17           | <u>' -   -</u>                            |  | 10.                                      |  |  |
|             | A A         | 19                          | Depreciation (a sch) and deple                     | attach                               |                  |  |                       | 1                                     |              |   |  |  |  |  |
|             | l j         | 20                          | _  |                                      |                  |  |                       |                                       |              |   |  | <u> </u>                                 |  |  |
|             | N V<br>G E  |                             |  | ences, and meeti                     | ngs              |  |                       |                                       | ,            |   |  |  |  |  |
|             | A E         | 22                          | Printing and pi                                    | ublications                          | _                |  |                       |                                       |              |   |  |  |  |  |
|             | A E         | 23                          | Other expense                                      | s (attach schedu                     | ıle)             |  |                       |                                       |              |   |  |  |  |  |
|             | Ē           |                             |  | SEE STATEME                          | NT 5             |  | 9,766.                |                                       | 7,964        | ٠   |  | 1,298.                                   |  |  |
|             | S           | 24                          | Total operating                                    | g and administra                     | ative            |  | 14 167                |                                       | 0 000        | ,   |  | 2 021                                    |  |  |
|             | S           | 25                          | Contributions of                                   | I lines 13 through, grants paid PART | ת 25 ח<br>דע יז  | <u> </u>   | 14,167.<br>201,800.   |                                       | 9,823        | <del>'·</del>                             |  | 3,821.                                   |  |  |
|             |             | 25                          |  |                                      |                  | <del>                                     </del> | .01,800.              |                                       |              | -   |  | 201,800.                                 |  |  |
|             |             | 26                          | Total expense:<br>Add lines 24 a                   |                                      | ients.           | ) 2  | 215,967.              |                                       | 9,823        | 3.  |  | 205,621.                                 |  |  |
|             |             | 27                          |  |                                      |                  |  | *                     | 2.                                    |              | 1   | . 15   |  |  |  |
|             |             | 1                           | a Excess of reve                                   | enue over expen                      | ses              | _  |                       | ;: <sup>3</sup> ,                     | 27.64        |   | . 2  | 1  |  |  |
|             |             |                             | and disbursen                                      | nents                                |                  | <u> </u>   | 97,453.               |                                       |              |   |  |  |  |  |
|             |             | 1                           | <b>b</b> Net investment inc                        |                                      |                  |  |                       |                                       | 8,466        | ·   _                                     |  |  |  |  |
|             |             |                             | C Adjusted net incom                               | ne (if negative, enter -             | 0-)              |  |                       | L                                     |              |   |  | ,  |  |  |

BAA For Paperwork Reduction Act Notice, see the instructions.

TEEA0504L 07/23/10

Form **990-PF** (2010)



Page 2

| Dar                   | - 11          | Balance Sheets  Attached schedules and amounts in the description column should be for end-of-year amounts only     | Beginning of year                     | E              | ind (        | of year  |
|-----------------------|---------------|---|---------------------------------------|----------------|--------------|--|
| Par                   | LII           | Balance Sheets column should be for end-of-year amounts only (See instructions )                                    | (a) Book Value                        | (b) Book Value | <del></del>  | (c) Fair Market Value  |
| •                     | 1             | Cash - non-interest-bearing .   | 6,238.                                | 6,2            | 44.          | 6,244.   |
|                       | 2             | Savings and temporary cash investments  | 202,637.                              | 24,7           |              | 24,721.  |
|                       | 3             | Accounts receivable   | 7                                     |                |              | ,  |
|                       |               | Less: allowance for doubtful accounts   |                                       |                |              | 4  |
|                       | 4             | Pledges receivable .  |                                       |                |              | ,  |
|                       |               | Less: allowance for doubtful accounts   |                                       |                |              |  |
|                       | 5             | Grants receivable   |                                       |                |              |  |
|                       | 6             | Receivables due from officers, directors, trustees, and other   |                                       |                |              |  |
| <b>A</b>              | "             | disqualified persons (attach schedule) (see the instructions)   |                                       |                |              |  |
|                       | 7             | Other notes and loans receivable (attach sch)   |                                       | 3              |              | ·  |
| A<br>S                |               | Less. allowance for doubtful accounts ▶   |                                       |                |              |  |
| Š                     | 8             | Inventories for sale or use   |                                       |                |              |  |
| A<br>S<br>S<br>E<br>T | 9             | Prepaid expenses and deferred charges   |                                       |                |              |  |
| S                     | 10 a          | a Investments – U.S. and state government obligations (attach schedule)   |                                       |                |              |  |
|                       | l t           | nvestments — corporate stock (attach schedule)  |                                       |                |              |  |
|                       | (             | : 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) . STATEMENT 6   | 395,689.                              | 420,80         | 08.          | 643,620.   |
|                       | 14            | Land, buildings, and equipment, basis.  |                                       |                | <b>K</b> :   |  |
|                       |               | Less: accumulated depreciation (attach schedule)  |                                       |                |              |  |
|                       | 15            | Other assets (describe ►  | 30,334.                               |                |              |  |
|                       | 16            | Total assets (to be completed by all filers — see instructions. Also, see page 1, item I)                           | 634,898.                              | 451,7°         | 73.          | 674,585.   |
| Ļ                     | 17            | Accounts payable and accrued expenses   |                                       |                |              |  |
| Å                     | 18            | Grants payable .  |                                       |                |              |  |
| В                     | 19            | Deferred revenue  |                                       |                |              |  |
| l<br>L                | 20            | Loans from officers, directors, trustees, & other disqualified persons.   |                                       |                |              |  |
| Ī                     | 21            | Mortgages and other notes payable (attach schedule)   |                                       |                |              |  |
| Ţ                     | 22            | Other liabilities (describe  )  |                                       |                |              |  |
| Ė                     | 22            | Total liabilities (add lines 17 through 22)   | 0.                                    |                | 0.           |  |
| 3_                    | 23            | Total liabilities (add lines 17 through 22)  Foundations that follow SFAS 117, check here . ▶                       | 0.                                    | <del></del>    | <del>.</del> | The same of the contract of  |
|                       |               | and complete lines 24 through 26 and lines 30 and 31.   |                                       |                |              |  |
| N F<br>E U<br>T N     | 24            | Unrestricted  |                                       |                |              |  |
| ΤŇ                    | 25            | Temporarily restricted  |                                       |                |              | The state of the s |
| A D                   | 26            | Permanently restricted .  |                                       |                |              |  |
| A B A L A N           |               | Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.                               |                                       |                |              |  |
| E L<br>T A            | 27            | Capital stock, trust principal, or current funds  |                                       |                |              |  |
| ŚŅ                    | 28            | Paid-in or capital surplus, or land, building, and equipment fund   |                                       |                |              |  |
| O E                   | 29            | Retained earnings, accumulated income, endowment, or other funds .  | 634,898.                              | 451,77         | <i>1</i> 3.  |  |
| ŘŜ                    | 30            | Total net assets or fund balances (see the instructions)  | 634,898.                              | 451,77         | <i>1</i> 3.  | ٠., 'ا   |
|                       | 31            | Total liabilities and net assets/fund balances (see the instructions)   | 634,898.                              | 451,77         | 73.          |  |
| Par                   | : 111         | Analysis of Changes in Net Assets or Fund Balance   | es                                    |                |              |  |
| 1                     | Total<br>end- | net assets or fund balances at beginning of year — Part II, colu<br>of-year figure reported on prior year's return) | mn (a), line 30 (must aç              | ree with       | 1            | 634,898.   |
|                       |               | r amount from Part I, line 27a  |                                       |                | 2            | -197,453.  |
|                       |               | increases not included in line 2 (itemize)  SEE STATEMENT   | 7                                     | F              | 3            | 14,328.  |
| 4                     | Add           | lines 1, 2, and 3   |                                       | <del> </del>   | 4            | 451,773.   |
| 5                     | Decrea        | ases not included in line 2 (itemize) .   |                                       |                | 5            |  |
|                       |               | net assets or fund balances at end of year (line 4 minus line 5)  | - Part II. column (b), ii             | ne 30          | 6            | 451,773.   |

|          | (a) List and describe 2-story brick warehouse                     | e the kınd(s) of property sold (e g., se, or common stock, 200 shares Mi               |   | ( <b>b)</b> How ac<br>P — Purd<br>D — Dona | hase     | (C) Date acquired (month, day, year)                | (d) Date sold<br>(month, day, year) |
|----------|---|--|---|--|----------|---|-------------------------------------|
| 1:       | SHORT-TERM CAPITAL  | GATN FROM K-1  |   | P Dona                                     | ation    | VARIOUS   | VARIOUS                             |
|          | LONG-TERM CAPITAL G   |  |   | P  |          | VARIOUS   | VARIOUS                             |
|          |   |  |   |  |          |   |                                     |
|          | 1   |  |   |  |          |   |                                     |
| -        |   |  |   |  |          |   |                                     |
|          | (e) Gross sales price   | (f) Depreciation allowed (or allowable)  | (g) Cost or other bas<br>plus expense of sale       |  |          | (h) Gain or<br>(e) plus (f) m                       | (loss)<br>ınus (g)                  |
|          | 1   |  | 1   | ,176.                                      |          |   | -1,176.                             |
|          | 16,202.   |  |   | ,  |          |   | 16,202.                             |
|          |   |  |   |  |          |   |                                     |
| (        |   |  |   |  |          |   |                                     |
| •        | <u> </u>  |  |   |  |          |   |                                     |
|          | Complete only for assets show                                     | ring gain in column (h) and owned b  | by the foundation on 12/31/6                        | 9  |          | (I) Gains (Colu                                     | ımn (h)                             |
|          | (i) Fair Market Value<br>as of 12/31/69                           | (j) Adjusted basis<br>as of 12/31/69   | (k) Excess of column over column (j), if an         | (1)  | g<br>tha | ain minus column (k<br>an -0-) <b>or</b> Losses (fr | ), but not less                     |
|          | 1   |  |   |  |          |   | -1,176.                             |
| t        | )   |  |   |  |          |   | 16,202.                             |
|          | :   |  |   |  | •        | -   | ,                                   |
|          | 1   |  |   |  |          | <u>-</u>  |                                     |
|          | •   |  |   |  |          |   |                                     |
|          | Capital gain net income or (ne Net short-term capital gain or     | t capital loss).    If gain, also If (loss), ent (loss) as defined in sections 1222(5) | enter in Part I, line 7<br>er -0- in Part I, line 7 |  | 2        |   | 15,026.                             |
|          |   | e 8, column (c) (see the instructions  | _   |  | 3        |   | -1,176.                             |
| Pâr      | twell Qualification Under   | Section 4940(e) for Reduced  | Tax on Net Investmen                                | nt Inco                                    | me       |   |                                     |
| lf 'Y€   | es,' the foundation does not qua                                  | ction 4942 tax on the distributable at   | omplete this part                                   |  |          | Yes   | X No                                |
| <u> </u> |   | in each column for each year; see the  |   | ig any er<br>T                             | itries   | (4)   |                                     |
|          | (a) Base period years Calendar year (or tax year beginning in)    | Adjusted qualifying distributions  | (c)<br>Net value of<br>noncharitable-use asse       | ets  | (colu    | <b>(d)</b><br>Distribution<br>imn (b) divided       |                                     |
|          | 2009  | 201,775.   | 687   | ,166.                                      |          |   | 0.293634                            |
|          | 2008  | 223,121.   | 703   | ,600.                                      |          |   | 0.317113                            |
|          | 2007  | 207,560.   | 1,384   | ,107.                                      |          |   | 0.149960                            |
|          | 2006  | 202,946.   | 1,425   | ,457.                                      |          |   | 0.142373                            |
|          | 2005  | 202,348.   | 1,499   |  |          |   | 0.134956                            |
|          |   |  |   |  |          |   |                                     |
| 2        | Total of line 1, column (d)                                       |  |   |  | 2        |   | 1.038036                            |
| 3        | Average distribution ratio for the number of years the foundation | ne 5-year base period —divide the to<br>n has been in existence if less than           | tal on line 2 by 5, or by the 5 years               |  | 3        |   | 0.207607                            |
| 4        | Enter the net value of nonchar                                    | itable-use assets for 2010 from Part   | X, line 5   |  | 4        |   | 822,373.                            |
| 5        | Multiply line 4 by line 3   |  |   | .  | 5        |   | 170,730.                            |
| 6        | Enter 1% of net investment inc                                    | come (1% of Part I, line 27b)  |   | .  | 6        |   | 85.                                 |
| 7        | Add lines 5 and 6   |  |   | .  | 7        |   | 170,815.                            |
| 8        | Enter qualifying distributions fr                                 | om Part XII, line 4 .  |   |  | 8        |   | 205,621.                            |
|          | If line 8 is equal to or greater the Part VI instructions.        | han line 7, check the box in Part VI   | , line 1b, and complete that                        | part usır                                  | ng a 1   | 1% tax rate See                                     | the                                 |

|          |   | <u>3372</u> |              |                |          | Page 4   |
|----------|---|-------------|--------------|----------------|----------|--|
| Pa       | rt VI. Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see  | the in      | struc        | tions)         | )        |  |
| 1        | a Exempt operating foundations described in section 4940(d)(2), check here   ▶ ☐ and enter 'N/A' on line 1.   |             |              |                | , , ,    |  |
| •        | Date of ruling or determination letter: (attach copy of letter if necessary — see instr.)   |             | 1            |                |          |  |
|          | b Domestic foundations that meet the section 4940(e) requirements in Part V,  | 1           |              |                |          | 85.  |
|          | check here ► X and enter 1% of Part I, line 27b   |             | r            |                | ,        | -  |
|          | c All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, column (b)  |             | i            |                | ~        |  |
| 2        | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable   |             |              |                |          | ·  |
| _        | foundations only Others enter -0-)  | _2          |              |                |          | 0.   |
| 3        | Add lines 1 and 2   | 3           |              |                |          | 85.  |
| 4        | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)   | 4           |              |                |          | 0.   |
| 5        | Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0  | 5           |              |                |          | 85.  |
| 6        | Credits/Payments:   |             | ,            |                |          |  |
| ;        | a 2010 estimated tax pmts and 2009 overpayment credited to 2010 . 6a  |             |              | ٠,             | ,        | , ,  |
| 1        | b Exempt foreign organizations — tax withheld at source   |             | _            | . 1            | ۷.       | . , ,  |
|          | c Tax paid with application for extension of time to file (Form 8868) 6c 200.   | 1           | ,            |                |          | 7×.  |
|          | d Backup withholding erroneously withheld   | 1           |              |                |          |  |
|          | Total credits and payments. Add lines 6a through 6d   | 7           |              |                |          | 200.   |
| 8        | Enter any <b>penalty</b> for underpayment of estimated tax. Check here $X$ if Form 2220 is attached   | 8           |              |                |          |  |
| 9        | Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed   | 9           |              |                |          | 0.   |
| 10       | Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid   | 10          |              |                |          | 115.   |
| 11       | Enter the amount of line 10 to be: Credited to 2011 estimated tax.  | 11          |              |                |          | 0.   |
|          | rt VII-A   Statements Regarding Activities  |             |              |                |          |  |
|          |   |             |              |                | Yes      | No   |
| 18       | a 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?                  |             |              | 1a             |          | X  |
|          |   |             | ŀ            |                |          | <del>                                     </del> |
|          | b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?  |             |              | 1 b            |          | Х  |
|          | ·   |             | ا ر          |                |          |  |
|          | If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any materials pure or distributed by the foundation in connection with the activities | DIISNE      | <sup>3</sup> |                |          | -,   |
|          | Did the foundation file Form 1120-POL for this year?  |             | i            | 1 c            |          | X  |
|          | Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:  |             | 1            |                | Í.       | L  |
|          | (1) On the foundation ►\$ 0. (2) On foundation managers ►\$   |             | 0.           |                | š        | 30   |
| •        | Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed   | on          | į            |                | 1.00     |  |
| _        | foundation managers \$ 0.   |             | ł            |                |          | <u>-</u>   |
| 2        |   |             | - 1          | 2              |          | X  |
|          | If 'Yes,' attach a detailed description of the activities.  |             |              |                |          |  |
| 3        | Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, article   | s           |              |                |          |  |
|          | of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes.  |             | .            | 3              |          | X  |
|          | a Did the foundation have unrelated business gross income of \$1,000 or more during the year?   |             | .            | 4a             | 37       | X  |
| _        | o If 'Yes,' has it filed a tax return on Form 990-T for this year?  |             |              | 4b             | N        | /A   |
| 5        | Was there a liquidation, termination, dissolution, or substantial contraction during the year?  | ٠           |              | 5              |          | X  |
| _        | If 'Yes,' attach the statement required by General Instruction T.   |             |              | .              |          | İ  |
| 6        | 3 ,   |             | İ            |                |          | ٠,   |
|          | By language in the governing instrument, or   |             | 1            | , i            |          |  |
|          | • By state legislation that effectively amends the governing instrument so that no mandatory directions that c  | onflict     | ŀ            |                | <u> </u> |  |
|          | with the state law remain in the governing instrument?  |             |              | 6              | X        |  |
| 7        |   |             | .            | 7              | X        |  |
| 88       | Enter the states to which the foundation reports or with which it is registered (see the instructions)  |             | -            | ł              |          |  |
|          | CA  |             | _            |                |          |  |
| ı        | o If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General  |             | }            |                | 37       | <b></b> -J                                       |
|          | (or designate) of each state as required by General Instruction G? If 'No,' attach explanation  |             | }            | 8ь             | X        |  |
| 9        | Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or   | 4942(       | J)(5)        |                | _6%;     |  |
|          | for calendar year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If 'Yes,' complet   | e Part      | XIV          | 9              |          | <u>X</u>   |
| 10       | Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their i  | ames        |              | .              |          | .,   |
| <u> </u> | and addresses.  |             |              | 10             | 0.55     | X (2010)   |
| BAA      |   |             | ⊢or          | rm <b>99</b> 1 | U-PF (   | ZU I U)  |

| Forn | 990-PF (2010) URBANEK-LEVY EDUCATION FUND   | 94-337279                    | 3                                       | F                | age !                                    |
|------|---|------------------------------|---|------------------|--|
| Par  | t VII-A   Statements Regarding Activities (Continued)   |                              |   |                  | ,  |
| 11   | At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes', attach schedule (see instructions)   |                              | 11                                      |                  | X_                                       |
| 12   | Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?   |                              | 12                                      |                  | X  |
| 13   | Did the foundation comply with the public inspection requirements for its annual returns and exemption  | application?                 | 13                                      | Х                |  |
| 14   | Website address ► N/A  The books are in care of ► KENNETH LEVY  Located at ► 51 UNIVERSITY AVENUE, SUITE G LOS GATOS CA ZIP + 4 ►   | no. ► <u>408-39</u><br>95030 | 9-8                                     | 081              | - <del>-</del> -                         |
| 15   | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here   | , . , .                      | N/A                                     |                  |  |
| 16   | and enter the amount of tax-exempt interest received or accrued during the year   | thority over a               | •                                       | Yes              | N/A                                      |
| 10   | bank, securities, or other financial account in a foreign country?  |                              | 16                                      |                  | X  |
|      | See the instructions for exceptions and filing requirements for Form TD F 90-22.1 If 'Yes,' enter the nai foreign country ▶   | ne of the                    |   | *,               | 150 2                                    |
| Par  | t VII-B Statements Regarding Activities for Which Form 4720 May Be Required   |                              |   |                  |  |
|      | File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.   |                              | \$ 7.5                                  | Yes              | No                                       |
| 1 a  | During the year did the foundation (either directly or indirectly):   |                              | *, * *                                  | چ∜د وي           | Q 86                                     |
|      | (1) Engage in the sale or exchange, or leasing of property with a disqualified person?  | Yes X No                     | مهر اجمعي ا                             | enegyging<br>and | ABOLD S                                  |
|      | (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?  | Yes X No                     | 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 |                  | 75                                       |
|      | <ul><li>(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?</li><li>(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?</li></ul>   | Yes X No                     |   |                  | ** ;                                     |
|      | (5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?   | Yes X No                     |   |                  |  |
|      | (6) Agree to pay money or property to a government official? (Exception, Check 'No' if the  | 195                          |   |                  |  |
|      | foundation agreed to make a grant to or to employ the official for a period after termination   | Yes X No                     |   |                  | ANGERON:<br>The second                   |
| b    | If any answer is 'Yes' to 1a(1)-(6), did <b>any</b> of the acts fail to qualify under the exceptions described in<br>Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see the instruction   | ns) <sup>?</sup>             | 1 b                                     | N,               | /A                                       |
|      | Organizations relying on a current notice regarding disaster assistance check here  | . •                          | \$,, *<br>'                             |                  | , **<br>                                 |
| c    | Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2010?   |                              | 1 c                                     |                  | X  |
| 2    | Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))   |                              |   | 2.               |  |
| а    | and the end of tax year 2010, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2010?  | Yes X No                     |   |                  |  |
|      | If 'Yes,' list the years ► 20 , 20 , 20   |                              | Ŷ                                       |                  |  |
| t    | Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a) all years listed, answer 'No' and attach statement — see the instructions).   | i)(2)<br>)(2) to             | <br>2b                                  | N                | /A                                       |
| c    | If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years he   | ere.                         |   | • ;              |  |
| 3 a  | ► 20, 20, 20<br>Did the foundation hold more than a 2% direct or indirect interest in any business  |                              | -                                       | ,                | 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1 |
|      | enterprise at any time during the year?   | Yes X No                     | ,                                       |                  | *  |
| b    | olf '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 |                              |   | `<br>            | /3                                       |
| 4 a  | determine if the foundation had excess business holdings in 2010.)  Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?   |                              | 3b<br>4a                                | N,               | /A<br>X                                  |
| L    | Did the foundation make any investment in a prior year (but after December 31, 1969) that could   |                              | <u></u> → a                             |                  | Λ  |
|      | jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2010?   |                              | 4b                                      |                  | X  |
| RΔΔ  |   | For                          | m <b>99</b>                             | 0-PF             | 2010                                     |

| Part VII-B   Statements Regarding Activit  | <u>ies for Which Forn</u>                                      | 1 4720 May Be Req           | uired (continued)  |                                       |
|--|--|-----------------------------|--|---------------------------------------|
| 5a During the year did the foundation pay or incu  | •  |                             |  |                                       |
| (1) Carry on propaganda, or otherwise attempt  | ot to influence legislation                                    | on (section 4945(e))?       | Yes X  | No                                    |
| (2) Influence the outcome of any specific pub on, directly or indirectly, any voter registra   |  |                             |  | No                                    |
| (3) Provide a grant to an individual for travel,   | study, or other similar  | purposes?                   | Yes X  | No                                    |
| (4) Provide a grant to an organization other to<br>in section 509(a)(1), (2), or (3), or section   |  |                             | . Yes X  | No                                    |
| (5) Provide for any purpose other than religio<br>educational purposes, or for the prevention  | us, charitable, scientific<br>in of cruelty to children        | c, literary, or or animals? | . Yes X  | No                                    |
| b If any answer is 'Yes' to 5a(1)-(5), did any of<br>described in Regulations section 53.4945 or in<br>(see instructions)?                   | the transactions fail to<br>a current notice regard            |                             | tions  | . 5b N/A                              |
| Organizations relying on a current notice rega   | rding disaster assistan  | ce check here               | ▶ 🗀  |                                       |
| c If the answer is 'Yes' to question 5a(4), does tax because it maintained expenditure respon If 'Yes,' attach the statement required by Reg | sibility for the grant?  |                             | N/A Yes  | No                                    |
| 6a Did the foundation, during the year, receive an on a personal benefit contract?   |  |                             |  | No                                    |
| <b>b</b> Did the foundation, during the year, pay prem   | iums, directly or indirec                                      | tly, on a personal bene     | fit contract? .  | . 6b X                                |
| If 'Yes' to 6b, file Form 8870.  |  |                             |  | 1                                     |
| 7a At any time during the tax year, was the found  | • •  |                             |  | No J                                  |
| b If yes, did the foundation receive any proceed Part VIII. Information About Officers, D  |  |                             |  | N/A 7b                                |
| and Contractors  | irectors, Trustees,  | roundation manag            | jers, nigiliy raiu i   | imployees,                            |
| 1 List all officers, directors, trustees, foundation   | n managers and their   | compensation (see inst      | ructions).   |                                       |
| 1 Elst all officers, affectors, trastees, foundation   | (b) Title and average  | (c) Compensation            | (d) Contributions to   | (e) Expense account,                  |
| (a) Name and address   | hours per week devoted to position                             | (If not paid, enter -0-)    | employee benefit<br>plans and deferred<br>compensation                         | other allowances                      |
| MR. KENNETH LEVY<br>19800 GLEN UNA DRIVE<br>SARATOGA, CA 95070   | TREASURER<br>0   | 0.                          | 0.   | 0                                     |
| LIDA URBANEK   | CHAIRMAN   | 0.                          | 0.   | 0.                                    |
| 75 TUSCALOOSA AVE.   | 0  |                             | • •  |                                       |
| ATHERTON, CA 94027   |  |                             |  |                                       |
| GLORIA LEVY  | CEO  | 0.                          | 0.   | 0.                                    |
| 19800 GLEN UNA DRIVE<br>SARATOGA, CA 95070   | 0  |                             |  |                                       |
| KARL-HEINZ LACHNIT   | SECRETARY  | 0.                          | 0.   | 0.                                    |
| 25 METRO DRIVE, SUITE 600  | 0  |                             |  |                                       |
| SAN JOSE, CA 95110   |  |                             |  |                                       |
| 2 Compensation of five highest-paid employee   | s (other than those inc  | luded on line 1– see in     | structions). If none, e  | nter 'NONE.'                          |
| (a) Name and address of each employee paid more than \$50,000  | (b) Title and average<br>hours per week<br>devoted to position | (c) Compensation            | (d) Contributions to<br>employee benefit<br>plans and deferred<br>compensation | (e) Expense account, other allowances |
| NONE   |  |                             |  |                                       |
|  |  |                             |  |                                       |
|  |  |                             |  | •                                     |
|  |  | -                           | <u></u>  |                                       |
|  |  |                             |  |                                       |
|  |  |                             |  |                                       |
|  |  |                             |  |                                       |
| Total number of other employees paid over \$50,000   | <u> </u>   | l                           | <b>&gt;</b>  |                                       |
| BAA  | TEEA0306L 0  | 7/23/10                     | <del></del>  | Form <b>990-PF</b> (2010)             |

94-3372793

Page 6

Form 990-PF (2010) URBANEK-LEVY EDUCATION FUND

| Form 990-PF (2010) URBANEK-LEVY EDUCATION FUND 94-3.  Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid and Contractors (continued)  | 372793 Page 7<br>Employees,     |
|--|---------------------------------|
| 3 Five highest-paid independent contractors for professional services (see instructions). If none, enter 'NONE.'   |                                 |
| (a) Name and address of each person paid more than \$50,000 (b) Type of service  | (c) Compensation                |
| NONE   |                                 |
|  |                                 |
|  |                                 |
|  |                                 |
|  |                                 |
| Total number of others receiving over \$50,000 for professional services.  | <b>&gt;</b> 0                   |
| Part IX-A Summary of Direct Charitable Activities  |                                 |
| List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. | Expenses                        |
| 1 <u>N/A</u>   |                                 |
| 2  |                                 |
| 3  |                                 |
| 4  |                                 |
| Part IX-B Summary of Program-Related Investments (see instructions)  |                                 |
| Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.  | Amount                          |
| 1 N/A  | -                               |
| 2  | -                               |
| All other program-related investments. See instructions  3   | _                               |
|  | -                               |
| Total. Add lines 1 through 3  BAA  | 0.<br>Form <b>990-PF</b> (2010) |

| see instructions.)   | J     | •           |
|--|-------|-------------|
| 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  | 1 a   |             |
| <b>b</b> Average of monthly cash balances  | 1b    | 190,052.    |
| c Fair market value of all other assets (see instructions)   | 1c    | 644,844.    |
| d Total (add lines 1a, b, and c)   | 1d    | 834,896.    |
| e Reduction claimed for blockage or other factors reported on lines 1a and 1c  |       |             |
| (attach detailed explanation)  |       |             |
| 2 Acquisition indebtedness applicable to line 1 assets   | 2     | 0.          |
| 3 Subtract line 2 from line 1d   | 3     | 834,896.    |
| 4 Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions)   | 4     | 12,523.     |
| 5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4   | 5     | 822,373.    |
| 6 Minimum investment return. Enter 5% of line 5  | 6     | 41,119.     |
| Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private oper and certain foreign organizations check here ► ☐ and do not complete this pa                               |       | foundations |
| 1 Minimum investment return from Part X, line 6  | 1 1   | 41,119.     |
| 2a Tax on investment income for 2010 from Part VI, line 5 2a 85.   | 26000 |             |
| b Income tax for 2010. (This does not include the tax from Part VI.)   |       |             |
| c Add lines 2a and 2b  | 2c    | 85.         |
| 3 Distributable amount before adjustments. Subtract line 2c from line 1  | 3     | 41,034.     |
| 4 Recoveries of amounts treated as qualifying distributions  | 4     | 41,034.     |
| 5 Add lines 3 and 4  | 5     | 41,034.     |
| 6 Deduction from distributable amount (see instructions)   | 6     | 11,054.     |
| 7 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1   | 7     | 41,034.     |
| Part XII Qualifying Distributions (see instructions)   |       | 11,001.     |
|  |       |             |
| <ul> <li>Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes:</li> <li>a Expenses, contributions, gifts, etc — total from Part I, column (d), line 26.</li> </ul> | 1 a   | 205,621.    |
| <b>b</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     |             |
|  |       |             |
| <ul> <li>Amounts set aside for specific charitable projects that satisfy the.</li> <li>a Suitability test (prior IRS approval required)</li> </ul>   | 3a    |             |
| <b>b</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     | 205,621.    |
| 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     | 85.         |
| 6 Adjusted qualifying distributions. Subtract line 5 from line 4   | 6     | 205,536.    |
|  |       |             |

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

BAA

Form 990-PF (2010)

# Part XIII Undistributed Income (see instructions)

| •  |  | <b>(a)</b><br>Corpus   | (b)<br>Years prior to 2009   | <b>(c)</b><br>2009 | <b>(d)</b><br>2010                          |
|----|--|--|--|--------------------|---|
| 1  | Distributable amount for 2010 from Part XI, line 7   |  | ,  | "                  | 41,034.                                     |
| 2  | Undistributed income, if any, as of the end of 2010:   | 1  |  |                    | • 14  |
|    | Enter amount for 2009 only   |  |  | 0.                 |   |
| ı  | Total for prior years: 20 , 20 , 20  | *  | 0.   | , -                | ÷.  |
| 3  | Excess distributions carryover, if any, to 2010:   | \$   | 1 8 8 4 4  |                    |   |
|    | a From 2005 128,774.   |  | , .*.×   |                    |   |
| 1  | From 2006 134, 947.  | - 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1  |  |                    | La Carlo                                    |
|    | From 2007 . 142, 955.  |  |  |                    |   |
|    | From 2008 <u>187, 941.</u>   |  |  |                    |   |
|    | From 2009 167, 455.  | 100000000000000000000000000000000000000  |  |                    |   |
|    | Total of lines 3a through e  | 762,072.   |  |                    | 1 / 1 / 1 / 1 / 1 / 1 / 1 / 1 / 1 / 1 /     |
| 4  | Qualifying distributions for 2010 from Part  |  |  |                    |   |
|    | XII, line 4: ► \$ 205, 621.  |  |  |                    |   |
| •  | Applied to 2009, but not more than line 2a   |  |  | 0.                 | 1/10/20/20/20/20/20/20/20/20/20/20/20/20/20 |
| 1  | Applied to undistributed income of prior years (Election required – see instructions) .      |  | 0.   |                    |   |
| •  | Treated as distributions out of corpus   |  |  |                    |   |
|    | (Election required – see instructions)   | <u>U.</u>  | (m)  |                    | 41 024                                      |
|    | Applied to 2010 distributable amount   | 164,587.   | RESIDENCE AND RESIDENCE AND A CONTRACT AND A CONTRA |                    | 41,034.                                     |
|    | Remaining amount distributed out of corpus  Excess distributions carryover applied to 2010   | 104,367.   |  |                    | 0   |
| J  | (If an amount appears in column (d), the   | Constitution of the consti |  |                    | 0.  |
|    | same amount must be shown in column (a) )  |  |  |                    |   |
|    |  |  |  |                    |   |
| 6  | Enter the net total of each column as indicated below:                                       |  |  |                    |   |
| á  | a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5  | 926,659.   |  |                    |   |
|    | Prior years' undistributed income Subtract   |  |  |                    |   |
| ٠  | line 4b from line 2b   |  | 0.   |                    |   |
| (  | Enter the amount of prior years' undistribut-  |  |  |                    |   |
|    | ed income for which a notice of deficiency has been issued, or on which the section          |  |  |                    |   |
|    | 4942(a) tax has been previously assessed .   |  | 0.   |                    |   |
| (  | Subtract line 6c from line 6b. Taxable   |  | _  |                    |   |
|    | amount - see instructions  |  | 0.   |                    |   |
| •  | 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  |  |  |                    | 0   |
| _  | distributed in 2011 .  |  |  |                    | 0.  |
| ′  | Amounts treated as distributions out of corpus to satisfy requirements imposed               |  |  |                    |   |
|    | by section 170(b)(1)(F) or 4942(g)(3)<br>(see instructions)                                  | 0.   |  |                    |   |
|    | •  | 0.   |  |                    |   |
| 8  | Excess distributions carryover from 2005 not applied on line 5 or line 7 (see instructions). | 128,774.   |  |                    |   |
|    | •  | 120,774.   |  |                    |   |
| 9  | Excess distributions carryover to 2011. Subtract lines 7 and 8 from line 6a                  | 797,885.   |  |                    |   |
| 10 | Analysis of line 9.  |  |  |                    | ¥   |
|    | Excess from 2006 134, 947.   |  |  |                    |   |
| ŀ  | Excess from 2007 142, 955.   |  |  |                    |   |
| (  | Excess from 2008 187, 941.   |  |  |                    | *     |
| (  | Excess from 2009 167, 455.   |  |  |                    |   |
| •  | Excess from 2010 164, 587.   |  | · 4.73/4/27 \$44   |                    |   |
|    |  | ·  |  |                    | E 000 DE (0010)                             |

| Form 990-PF (2010) URBANEK-LEVY EDU   |                                       |   |   | 94-337279:              | 3 Page <b>10</b>  |  |  |
|---|---------------------------------------|---|---|-------------------------|-------------------|--|--|
| Part XIV Private Operating Foundati   | ons (see instruc                      | ctions and Part \                               | VII-A, question 9                             | 3)                      | N/A               |  |  |
| 1 a If the foundation has received a ruling or is effective for 2010, enter the date of the   | eruling                               |   | •   | . <b>^</b>              |                   |  |  |
| <b>b</b> Check box to indicate whether the foundation   |                                       | erating foundation d                            |   | 4942(j)(3) or           | 4942(j)(5)        |  |  |
| 2a Enter the lesser of the adjusted net   | Income from Bort I or the minimum     |   |   |                         |                   |  |  |
| investment return from Part X for each year listed  | (a) 2010                              | <b>(b)</b> 2009                                 | (c) 2008                                      | (d) 2007                | (e) Total         |  |  |
| <b>b</b> 85% of line 2a   |                                       |   |   |                         |                   |  |  |
| c Qualifying distributions from Part XII,<br>line 4 for each year listed .  |                                       |   |   |                         |                   |  |  |
| d Amounts included in line 2c not used directly for active conduct of exempt activities   |                                       |   |   |                         |                   |  |  |
| e Qualifying distributions made directly<br>for active conduct of exempt activities.<br>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:   |                                       |   |   |                         |                   |  |  |
| <ol> <li>Total support other than gross<br/>investment income (interest,<br/>dividends, rents, payments<br/>on securities loans (section<br/>512(a)(5)), or royalties)</li> </ol> |                                       |   |   |                         |                   |  |  |
| (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<br>an exempt organization  |                                       |   |   |                         |                   |  |  |
| (4) Gross investment income   | 10 11:                                | 1 1 16 11                                       | <u> </u>                                      | 145.000                 |                   |  |  |
| Part XV Supplementary Information assets at any time during t   | i (Complete this<br>ne year — see in  | structions.)                                    | organization ha                               | id \$5,000 or mor       | e in              |  |  |
| Information Regarding Foundation Mana<br>a List any managers of the foundation who<br>close of any tax year (but only if they have<br>SEE STATEMENT 8                             | have contributed m                    | ore than 2% of the than \$5,000) (See           | total contributions re<br>section 507(d)(2).) | eceived by the found    | dation before the |  |  |
| <b>b</b> List any managers of the foundation who<br>a partnership or other entity) of which the<br>NONE   | own 10% or more of foundation has a 1 | of the stock of a corp<br>0% or greater interes | poration (or an equa<br>est                   | ally large portion of t | the ownership of  |  |  |
| 2 Information Regarding Contribution, Gra Check here X if the foundation only   | makes contributions                   | to preselected cha                              | ritable organizations                         | s and does not acce     | pt unsolicited    |  |  |
| requests for funds If the foundation make<br>complete items 2a, b, c, and d   |                                       | <del> </del>                                    |   |                         | er conditions,    |  |  |
| a The name, address, and telephone numb   | er of the person to                   | whom applications s                             | should be addressed                           | j·                      |                   |  |  |
|   |                                       |   |   |                         |                   |  |  |
| <b>b</b> The form in which applications should be   | submitted and infor                   | mation and materia                              | ls they should inclu                          | de:                     |                   |  |  |
| c Any submission deadlines  |                                       |   |   |                         |                   |  |  |
| d Any restrictions or limitations on awards,  | such as by geograp                    | hical areas, charital                           | ble fields, kinds of i                        | nstitutions, or other   | factors:          |  |  |
|   |                                       |   |   |                         |                   |  |  |

Part:XV Supplementary Information (continued)

| 3 Grants and Contributions Paid During the Year or Approved for Future Payment |  |                      |                                  |          |  |  |  |  |
|--|--|----------------------|----------------------------------|----------|--|--|--|--|
| Recipient  | If recipient is an individual,<br>show any relationship to<br>any foundation manager or<br>substantial contributor | Foundation status of | Purpose of grant or contribution | Amount   |  |  |  |  |
| Name and address (home or business)  | substantial contributor  | recipient            |                                  |          |  |  |  |  |
| a Paid during the year SEE ATTACHED  | NONE   | N/A                  | EDUCATION                        | 201,500. |  |  |  |  |
| ,  |  |                      |                                  |          |  |  |  |  |
| BRING ME A BOOK<br>1045 TERRA BELLA AVE<br>MOUNTAIN VIEW, CA 94043             | NONE   | 501C3                | CHARITABLE                       | 300.     |  |  |  |  |
|  |  |                      |                                  |          |  |  |  |  |
|  |  |                      |                                  |          |  |  |  |  |
|  |  |                      |                                  |          |  |  |  |  |
|  |  |                      |                                  |          |  |  |  |  |
|  |  |                      |                                  |          |  |  |  |  |
|  |  |                      |                                  |          |  |  |  |  |
|  |  |                      |                                  |          |  |  |  |  |
|  |  |                      |                                  |          |  |  |  |  |
|  |  |                      |                                  |          |  |  |  |  |
|  |  |                      |                                  |          |  |  |  |  |
|  |  |                      |                                  |          |  |  |  |  |
|  |  |                      |                                  |          |  |  |  |  |
|  |  |                      |                                  |          |  |  |  |  |
|  |  |                      |                                  |          |  |  |  |  |
|  |  |                      |                                  |          |  |  |  |  |
|  |  |                      |                                  |          |  |  |  |  |
|  |  | 1                    |                                  |          |  |  |  |  |
|  |  | !                    |                                  |          |  |  |  |  |
|  |  |                      |                                  |          |  |  |  |  |
|  |  | I                    |                                  |          |  |  |  |  |
|  |  |                      |                                  |          |  |  |  |  |
|  |  |                      |                                  |          |  |  |  |  |
|  |  |                      |                                  |          |  |  |  |  |
| Total  |  |                      | <u>► 3a</u>                      | 201,800. |  |  |  |  |
| <b>b</b> Approved for future payment   |  |                      |                                  |          |  |  |  |  |
|  |  |                      |                                  |          |  |  |  |  |
|  |  |                      |                                  |          |  |  |  |  |
|  |  |                      |                                  |          |  |  |  |  |
|  |  |                      |                                  |          |  |  |  |  |
|  |  | :                    |                                  |          |  |  |  |  |
|  |  |                      |                                  |          |  |  |  |  |
|  |  |                      |                                  |          |  |  |  |  |
|  |  |                      |                                  |          |  |  |  |  |
|  |  |                      |                                  |          |  |  |  |  |
|  |  |                      |                                  |          |  |  |  |  |
|  |  |                      |                                  |          |  |  |  |  |
|  |  |                      |                                  |          |  |  |  |  |
|  |  |                      |                                  |          |  |  |  |  |
|  |  |                      |                                  |          |  |  |  |  |
| Total  |  |                      | . ► 3b                           |          |  |  |  |  |

#### Part XVI-A Analysis of Income-Producing Activities

| Enter gross amounts unless otherwise indicated.            | Unrelat                 | ed business income   | Exclude                       | d by section 512, 513, or 514 | (e)  |
|--|-------------------------|----------------------|-------------------------------|-------------------------------|--|
| Program service revenue                                    | (a)<br>Business<br>code | <b>(b)</b><br>Amount | (c)<br>Exclu-<br>sion<br>code | <b>(d)</b><br>Amount          | Related or exempt function income (see the instructions) |
| a  |                         |                      |                               |                               |  |
| b  |                         |                      |                               |                               |  |
| С  |                         |                      |                               |                               |  |
| d  |                         |                      |                               |                               |  |
| е  |                         |                      |                               | , ,                           |  |
| f  |                         |                      |                               |                               |  |
| g Fees and contracts from government agencies              |                         |                      |                               |                               |  |
| 2 Membership dues and assessments                          |                         |                      |                               |                               |  |
| 3 Interest on savings and temporary cash investments .     |                         |                      | 14                            |                               |  |
| 4 Dividends and interest from securities                   |                         |                      | 14                            | 2,479.                        |  |
| 5 Net rental income or (loss) from real estate:            | 8, 1/1                  | St. 1 & Shirt        | 1 3 mg                        | 为行为: 1/4/4/4高度1/6/40          | 17. 李巍。 - 李 沙雪   |
| a Debt-financed property                                   |                         |                      |                               |                               |  |
| <b>b</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 |                         |                      | 18                            | 15,026.                       |  |
| <b>9</b> Net income or (loss) from special events          |                         |                      |                               |                               |  |
| <b>10</b> Gross profit or (loss) from sales of inventory.  |                         |                      |                               |                               |  |
| 11 Other revenue   | `, > "                  |                      |                               |                               |  |
| a MISCELLANEOUS K-1 INCOME                                 |                         |                      | 14                            | 225.                          |  |
| b  |                         | <u> </u>             |                               |                               |  |
| c  |                         |                      |                               |                               |  |
| d  |                         |                      |                               |                               |  |
| e  |                         |                      | ,                             | 10 514                        |  |
| 12 Subtotal. Add columns (b), (d), and (e)                 | <i>پ</i> ر              |                      |                               | 18,514.                       | 10 514   |
| 13 Total. Add line 12, columns (b), (d), and (e)           |                         |                      |                               | 13 _                          | 18,514.  |
| See worksheet in line 13 instructions to verify calculate  | ons )                   |                      |                               |                               |  |
| Part XVI-B Relationship of Activities to the               | Accompli                | shment of Exempt     | Purpo                         | ses                           |  |

| Line No.<br>▼ | 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 ) |
|---------------|---|
| N/A           |   |
|               |   |
|               |   |
|               |   |
|               |   |
|               |   |
|               |   |
|               |   |
|               |   |
|               |   |
|               |   |
|               |   |
|               |   |
|               |   |
|               |   |
|               |   |
|               |   |
|               |   |
|               |   |
|               |   |
| <del></del>   |   |
|               |   |

Form **990-PF** (2010)

BAA

Page 13

| Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)d) organizations) or in section 527, relating to political organizations?  a Transfers from the reporting foundation to a noncharitable exempt organization of:  (1) Cash   | Part >     |                    |   | Regarding anizations                             |                 |                       | ransactio       | ns and                   | Relations         | nips With Nonc                          | haritable    |           | ge 13        |
|--|------------|--------------------|---|--|-----------------|-----------------------|-----------------|--------------------------|-------------------|---|--------------|-----------|--------------|
| (2) Other assets (3) Other transactions:  (1) Sales of assets from a noncharitable exempt organization (2) Purchases of assets from a noncharitable exempt organization (3) Rental of facilities, equipment, or other assets (4) Reimbursement arrangements (5) Loans or loan quarantees (1b) (2) X (3) Rental of facilities, equipment, or other assets (1b) (3) X (4) Reimbursement arrangements (1b) (6) X (5) Loans or loan quarantees (6) Performance of services or membership or fundraising solicitations (7) Performance of services or membership or fundraising solicitations (8) Performance of services or membership or fundraising solicitations (9) Performance of services or membership or fundraising solicitations (1b) (1b) X (1c) X  | de<br>re   | escribe<br>elating | organization directed in section 501(cto political organi | etly or indirectly<br>c) of the Code<br>zations? | (other than     | section 501(          | (c)(3) organ    | zations)                 | er organization   | on<br>527,                              |              |           | No           |
| O' Other transactions:  (1) Sales of assets for a noncharitable exempt organization  (2) Purchases of assets from a noncharitable exempt organization  (3) Rental of Eaclities, equipment, or other assets  (4) Reimbursement arrangements  (5) Loans or loan guarantees  (6) Performance of services or membership or fundraising solicitations  (7) Exemplate to any of the above is "Yes, complete the following schedule of the poods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value of the poods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value of the poods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (6) the value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangements where the column of the value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangements.  2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3) or in section 527?  2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3) or in section 527?  2b If Yes, complete the following schedule  (a) Name of organization  (b) Type of organization  (c) Description of relationship  (d) Description of relationship  (e) Description of relationship  (f) Description of relationship  (g) Description of relatio  |            |                    | •   | ng loundation                                    | to a nonch      | aritable exem         | ipt organiza    | tion of.                 |                   |   | 1 - 4        |           |              |
| b Other transactions:  (1) Sales of assets from a noncharitable exempt organization  (2) Purchases of assets from a noncharitable exempt organization  (3) Rental of facilities, equipment, or other assets  (4) Reimbursement arrangements  (5) Loans or loan guarantees  (6) Performance of services or membership or fundrasing solicitations  (6) Performance of services or membership or fundrasing solicitations  (7) Exharing of facilities, equipment, mailing lists, other assets, or paid employees  (8) Performance of services or membership or fundrasing solicitations  (9) Exharing of facilities, equipment, mailing lists, other assets, or paid employees  (1) Loans or loan guarantees  (1) Log (1) X  (1) It is answer to any of the above is "Yes," complete the following schedule: Column (8) should always show the fight market value of the goods, other assets, or services given by the repurring (9) the value of the goods, other assets, or services given by the repurring (9) the value of the goods, other assets, or services given by the repurring (9) the value of the goods, other assets, or services received  (10) Ize in (10) Arount molved  (10) Ize in (10) Arount molved  (2) Name of molcharizable exempt organization  (3) Description of realitionships  (4) Description of relationships  (5) Description of relationships  (6) Description of relationships  (7) Name of organization  (8) Description of relationships  (9) Description of relationships  (1) The code of organization of pulmer (10) the code of organization of pulmer (10) the code of organization of organization of organization of organ | •          | •                  |   | •  |                 |                       | ••              |                          |                   | • |              |           |              |
| (2) Purchases of assets from a noncharitable exempt organization (3) Rental of facilities, equipment, or other assets (4) Reimbursement arrangements (5) Loans of loan guarantees (6) Performance of services or membership or fundraising solicitations (7) Sharing of facilities, equipment, mailing lists, other assets, or paid employes (8) It is a service of particular to any of the above is "Yes," complete the following schedule Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value of any of the above is "Yes," complete the following schedule Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any fransaction or sharing arrangement, show in column (c) the value of the goods, other assets, or services received (a) Line to (b) Amount moved (c) Name of menchantable exempt organization (d) Description of transfers, transactions, and sharing arrangements  2 a is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?  2 a is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?  3 b if "Yes," complete the following schedule  (a) Name of organization (b) Type of organization (c) Description of relationship  WAA  4 c Sharing the above the section 501(c)(3) or in section 527?  5 c More of the code (other than section 501(c)(3)) or in section 527?  5 c More of the code (other than section 501(c)(3)) or in section 527?  5 c More of the code (other than section 501(c)(3)) or in section 527?  5 c More of the code (other than section 501(c)(3)) or in section 527?  5 c More of the code (other t | (2         | 2) Othe            | er assets .   | •  | •               |                       |                 | •                        |                   | •                                       | 1 a (2)      | <u> </u>  | <u>X</u>     |
| (a) Perchases of assets from a noncharitable exempt organization  (b) Rental of facilities, equipment, or other assets  (c) Rental of facilities, equipment, or other assets  (d) Remtal of facilities, equipment, or other assets  (e) Performance of services or membership or fundraising solicitations  (f) Loans or loan guarantees  (g) Performance of services or membership or fundraising solicitations  (g) Performance of services or services present by the facilities, equipment, mailing lists, other assets, or paid employees  (g) Lite answer to any of the above is "Yes," complete the following schedule Column (b) should always show the far market value of the goods, other assets, or services preserved in a service of the goods, other assets, or services received  (a) Une no  (b) Amount involved  (c) Ame of noncharitable exempt organization  (d) Description of transfers, transactions, and sharing arrangements  N/A  2a is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c) of the | <b>b</b> O | ther tra           | ansactions:   |  |                 |                       |                 |                          |                   |   |              | ļ         |              |
| (3) Rental of facilities, equipment, or other assets   | (1         | l) Sale            | s of assets to a n  | ioncharitable e                                  | xempt orga      | anızatıon             |                 |                          | • •               |   | 1b(1)        |           |              |
| (d) Reimbursement arrangements (d) Loans or loan guarantees. (e) Performance of services or membership or fundraising solicitations (e) Performance of services or membership or fundraising solicitations (e) Performance of services or membership or fundraising solicitations (e) Performance of services or membership or fundraising solicitations (e) Performance of services or services are seed to see the specific or services given by the reporting foundation. If the foundation received less than fair market value or the goods, other assets, or services received (a) line no local statement or sharing arrangement, show in column (d) the value of the goods, other assets, or services received (a) line no local services or sharing arrangement (c) line value of the goods, other assets, or services received (a) line no local statement (b) Amount involved (c) Amount involved (c) Amount involved (c) Name of noncharitable exempt organization (d) Discription of transfers, transactions, and sharing arrangements (line properties of the goods, other assets, or services received (line and line arrangements) (line properties of line properties and line line properties of line properties of line properties and line line properties of line properties of line propertie | (2         | 2) Purc            | hases of assets f   | rom a nonchar                                    | itable exen     | npt organizati        | ion             |                          |                   |   | 1 b (2)      |           | _X_          |
| (a) Reimbursement arrangements (b) Loans or loan guarantees (c) Performance of services or membership or fundraising solicitations (c) Performance of services or membership or fundraising solicitations (d) Performance of services or membership or fundraising solicitations (e) Performance of services or membership or fundraising solicitations (e) Performance of services or membership or fundraising solicitations (e) Performance of services or membership or fundraising solicitations (f) Shaning of facilities, equipment, analing lists, other assets, or paid employees (f) Association of sharing arrangement, show in column (d) the value of the goods, other assets, or services exerved less than fair market value or any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services exerved also sharing arrangement or sharing arrangement, show in column (d) the value of the goods, other assets, or services exerved also sharing arrangement or sharing arrangement o | (3         | Rent               | al of facilities, eq                                      | uipment, or ot                                   | her assets      |                       |                 |                          |                   |   | 1 b (3)      |           | X            |
| (6) Performance of services or membership or fundraising solicitations   | -          | -                  |   |  |                 |                       |                 |                          |                   |   | 1 b (4)      |           | X            |
| (6) Performance of services or membership or fundraising solicitations  c Sharing of facilities, equipment, mailing lists, other assets, or paid employees  d if the answer to any of the above is "Yes," complete the following schedule: Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (b) the value of the goods, other assets, or services received  (a) Line no (b) Amount involved (c) Name of nonchantable event organization  (b) Amount involved (c) Name of nonchantable event organization  (c) Description of transfers, transactions, and sharing arrangements  2a is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations, and sharing arrangements described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?  Yes \( \bar{X} \) No bit "Yes," complete the following schedule  (a) Name of organization  (b) Type of organization  (c) Description of relationship  Under peablies of perpay, Idectave that I have exampled the return, including asgeneouslying schedules and statements, and to file best of my knowledge and bettef, it is true, correct, and complete Destantion of generic (their discussion of perpays) of the code (black in the code)  Signature of officer of justice  Prima rame  MOILER, NIXON & WILLIAMS ACCION. CORP.  Firm's Rame  MOILER, NIXON & WILLIAMS ACCION. CORP.  Firm's Einh = 77-0106234   | •          | •                  |   | -  | ,               |                       | •               |                          | ·                 |   |              |           |              |
| c Sharing of facilities, equipment, mailing lists, other assets, or paid employees  d if the answer to any of the above is "Ses," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value of any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.  (a) the no. (b) Amount molived (c) Name of nonchantable exempt organization  (d) Description of transfers, transactions, and sharing arrangements.  2a is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?  (a) Name of organization (b) Type of organization (c) Description of relationship  N/A  Under penalties of paying, I disclass that I have examined for interest, including appropriate statistics, and to the best of my knowledge and bettef, if a true, correct, and complete the following schedule statistics of paying, I disclass that I have examined for interest, recluding appropriate statistics, and to the paying flushes are all information of which prepare the any knowledge and bettef, if a true, correct, and complete the following schedule and all information of which prepare the any knowledge in the propriate paying flushes are all information of which prepare the any knowledge in the propriate paying flushes are propriate paying flushes and distinguished paying flushes and distinguished paying flushes and distinguished paying flushes and distinguished paying flushes and distinguished paying flushes and distinguished paying flushes and distinguished paying flushes and distinguished paying flushes and distinguished paying flushes and distinguished paying flushes and distinguished paying flushes and distinguished paying flushes and distinguished paying flushes and distinguished paying flushes and distinguish | •          | •                  | -   |  | chin or fun     |                       | <br>Itations    | •                        | • •               |   |              | ļ         |              |
| d if the answer to any of the above is Yes, complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangements, show in column (b) the value of the goods, other assets, or services received.  (a) Line no (b) Amount involved (c) Name of nonchantable exempt organization (d) Description of transfers, transactions, and sharing arrangements.  2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?  2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?  Yes X No bif Yes,' complete the following schedule  (a) Name of organization (b) Type of organization (c) Description of relationship  VA  Under penalties of penuty, I declare that I have examined this return, including acognizations of which prepare has any knowledge and belief, it is true, orriced, and complete Declaration of granization (b) Type of organization (c) Description of relationship Proparer  Profit yes granization of other profit yidetee  Signature of other profit yidetee  Profit yes granization of the profit object port processor of indicating is based on all information of which prepare has any knowledge and belief, it is true, orrect, and complete Declaration of granization of profits to the profit of t | •          | •                  |   |  | -               | =                     |                 |                          | •                 |   |              |           |              |
| (d) Description of transfers, transactions, and sharing arrangements  (d) Description of transfers, transactions, and sharing arrangements  (d) Description of transfers, transactions, and sharing arrangements  2a is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?  [Yes X] No bif 'Yes,' complete the following schedule  (a) Name of organization  (b) Type of organization  (c) Description of relationship  [Ves X] No bif 'Yes,' complete the following schedule  (a) Name of organization  (b) Type of organization  (c) Description of relationship  [Ves X] No bif 'Yes,' complete the following schedules  (a) Name of organization  (b) Type of organization  (c) Description of relationship  [Ves X] No bif 'Yes,' complete the following schedules and statements, and to the best of my knowledge and belief, it is true, ordered and in information of which prepared by any inconvedge and belief, it is true, ordered and information of which prepared by any inconvedge and belief, it is true, ordered and information of which prepared by any inconvedge and belief, it is true, ordered by which is the prepared by any inconvention of which prepared by any inconvention of the convention of the convention of which prepared by any inconvention of the convention  c S        | haring             | of facilities, equip                                      | iment, mailing                                   | lists, other    | assets, or pa         | aid employe     | es                       |                   | • •                                     | 10           |           |              |
| 2a is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?    Yes   X  No   b if 'Yes,' complete the following schedule   (a) Name of organization   (b) Type of organization   (c) Description of relationship  | (a) Line   |                    |   |  |                 |                       |                 |                          |                   |   |              |           | s            |
| described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?    Yes   X  No     b   f 'Yes,' complete the following schedule  | N/A        | _                  |   |  |                 |                       |                 |                          |                   |   |              |           |              |
| described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?    Yes   X  No     b   f 'Yes,' complete the following schedule  |            |                    |   |  |                 |                       |                 |                          |                   |   |              |           |              |
| described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?    Yes   X  No     b   f 'Yes,' complete the following schedule  |            |                    |   |  |                 |                       |                 |                          |                   |   |              |           |              |
| described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?    Yes   X  No     b   f 'Yes,' complete the following schedule  |            |                    |   |  |                 |                       |                 |                          |                   |   |              |           |              |
| described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?    Yes   X  No     b   f 'Yes,' complete the following schedule  |            |                    |   |  |                 |                       |                 |                          |                   |   |              |           |              |
| described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?    Yes   X  No     b   f 'Yes,' complete the following schedule  |            |                    |   |  |                 |                       |                 |                          |                   |   |              |           |              |
| described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?    Yes   X  No     b   f 'Yes,' complete the following schedule  |            | -                  |   |  |                 |                       |                 |                          |                   |   |              |           |              |
| described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?    Yes   X  No     b   f 'Yes,' complete the following schedule  |            |                    |   |  |                 |                       |                 | <del></del>              |                   |   |              |           |              |
| described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?    Yes   X  No     b   f 'Yes,' complete the following schedule  |            |                    |   |  |                 |                       |                 |                          |                   |   |              |           |              |
| described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?    Yes   X  No     b   f 'Yes,' complete the following schedule  |            |                    |   |  |                 |                       |                 |                          |                   |   |              |           |              |
| described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?    Yes   X  No     b   f 'Yes,' complete the following schedule  |            | - [                |   |  |                 |                       |                 |                          |                   |   |              |           |              |
| described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?    Yes   X  No     b   f 'Yes,' complete the following schedule  |            |                    |   |  |                 |                       |                 |                          |                   |   |              |           |              |
| described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?    Yes   X  No     b   f 'Yes,' complete the following schedule  |            |                    |   |  |                 |                       |                 |                          |                   |   |              |           |              |
| described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?    Yes   X  No     b   f 'Yes,' complete the following schedule  |            |                    |   | -  |                 |                       |                 |                          |                   |   |              |           |              |
| described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?    Yes   X  No     b   f 'Yes,' complete the following schedule  |            |                    |   |  |                 |                       |                 |                          |                   |   |              |           |              |
| described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?    Yes   X  No     b   f 'Yes,' complete the following schedule  |            |                    |   |  |                 |                       |                 |                          |                   |   |              |           |              |
| described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?    Yes   X  No     b   f 'Yes,' complete the following schedule  |            |                    |   |  |                 |                       | 1               |                          |                   | <del></del>                             |              |           |              |
| Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than topayer or futuciary is based on all information of which preparer has any knowledge  Signature of officer of trustee  Print/Type preparer's name  Preparer  Preparer's sqnature  Preparer  Pre | de         | escribe<br>'Yes,'  | d in section 501(d<br>complete the folio                  | c) of the Code<br>owing schedule                 | (other than     | section 501(          | (c)(3)) or in   | ore tax-ex<br>section 52 | 27?               |   |              | s X       | No           |
| Under penalities of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other transpayer or funciary) is based on all information of which preparer has any knowledge    Signature of officer or trustee  |            | (a)                | Name of organiz   | ation  |                 | <b>(b)</b> Type of or | rganization     |                          | (0                | ) Description of re                     | lationship   |           |              |
| Sign Here    Signature of officer of trustee   Signature of officer of tru | N/A        |                    |   |  |                 |                       |                 |                          |                   |   |              |           |              |
| Sign Here    Signature of officer of trustee   Signature of officer of tru |            |                    |   | <u>.</u>   |                 |                       |                 |                          |                   |   |              |           |              |
| Sign Here    Signature of officer of trustee   Signature of officer of tru |            |                    |   |  |                 |                       |                 |                          |                   |   |              |           |              |
| Sign Here    Signature of officer of trustee   Signature of officer of tru |            |                    |   |  |                 |                       |                 |                          |                   |   |              |           |              |
| Sign Here    Signature of officer of trustee   Signature of officer of tru |            |                    |   |  |                 |                       |                 |                          |                   |   |              |           |              |
| Sign Here    Signature of officer of trustee   Signature of officer of tru |            | Under n            | enalties of periury 1 de                                  | clare that I have ex                             | amined this ret | urn, including acc    | companying sch  | edules and s             | tatements, and to | the best of my knowledge                | e and belief | t is true | ·····        |
| Signature of officer of trustee  Print/Type preparer's name  GREGORY S. FINLEY  Firm's name  MOHLER, NIXON & WILDIAMS ACCIVY. CORP.  G35 CAMPBELL TECHNOLOGY PKWX  Firm's EIN ► 77-0106234   |            | correct,           | and complete Declarat                                     | ion of preparer (oth                             | er than taxoay  | er or futuciary is    | based on all in | formation of             | which preparer h  | s any knowledge                         | - ·          | 2         |              |
| Signature of officer of trustee  Print/Type preparer's name  GREGORY S. FINLEY  Firm's name  MOHLER, NIXON & WILDIAMS ACCIVY. CORP.  G35 CAMPBELL TECHNOLOGY PKWX  Firm's EIN ► 77-0106234   | Sian       |                    |   | ///  |                 |                       |                 | <b>^</b>                 | 1 /               | 11 111                                  |              |           | _            |
| Signature of officer of trustee  Print/Type preparer's name  Preparer  Firm's name  MOHLER, NIXON & WILDIAMS ACCIVY, CORP.  Firm's name  MOHLER, NIXON & WILDIAMS ACCIVY, CORP.  Firm's EIN ► 77-0106234   | -          |                    |   | 4//  | / //            |                       |                 | V                        | T3/12             | <b>M</b> 1/c1                           | ~ \ pl       | An        | СČ           |
| Paid Print/Type p/eparer's name  GREGORY S. FINLEY  Firm's name  MOHLER, NIXON & WILDIAMS ACCTOY. CORP.  Firm's EIN > 77-0106234   |            | Sin                | nature of officer of tract                                | tee (  |                 |                       | /               | Date                     | <del>'''''</del>  | Title                                   | ¥ (          | 12.       |              |
| Paid Preparer Use Only  GREGORY S. FINLEY  MOHLER, NIXON & WILDIAMS ACCTOY. CORP.  Firm's name 635 CAMPBELL TECHNOLOGY PKWX  Firm's EIN ► 77-0106234   |            | 1 -9               |   |  |                 | reformer's admandir   | <u>/</u>        |                          | Date /            |   | PTIN         |           | <del>-</del> |
| Paid GREGORY S. FINLEY / 1   1   1   1   1   1   1   1   1   1   |            |                    | //  |  |                 | TALL                  | • ()            | 1,                       | 10/, , / ,        | <b>\</b>   —                            |              | 7010      |              |
| Preparer   Firm's name   MOHLER, NIXON & WILDIAMS ACCTOY. CORP.   Firm's EIN ► 77-0106234  | Paid       |                    | GREGORY S.  |  |                 | 17                    | بلامرا          |                          | 1211              |   |              | /819      |              |
| Use Only 635 CAMPBELL TECHNOLOGY PKWY \  |            | rer                | Firm's name   | MOHLER,  |                 | <del></del>           |                 | Y. COR                   | P                 | Firm's EIN ► 77-0                       | 106234       |           |              |
|  | •          |                    |   | 635 CAMP   | BELL TE         | CHNOLOGY              | PKWX            | 1                        | _                 | ]                                       |              |           |              |
| I CILLIDADI, CIL SOCCEDO I TOURE III (200) SOS 2300  | J30 U      |                    | rirm's address  | CAMPBELL   |                 |                       |                 |                          |                   | Рнопе по (408                           | 3) 369-      | 2400      |              |

| 010   | FEDERAL STATEMENTS  | PAGE                                      |
|---|---|---|
|   | URBANEK-LEVY EDUCATION FUND   | 94-337279                                 |
| STATEMENT 1<br>FORM 990-PF, PART I, LINE 11<br>OTHER INCOME     |   | (0)                                       |
| MISCELLANEOUS K-1 INCOME  | (A) (B) NET  REVENUE INVESTMENT  PER BOOKS INCOME  \$ 225.  TOTAL \$ 225.\$ 0.\$                                    | (C) ADJUSTED NET INCOME                   |
| STATEMENT 2<br>FORM 990-PF, PART I, LINE 16A<br>LEGAL FEES      |   |   |
| LEGAL FEE   | (A) (B) NET (C) EXPENSES INVESTMENT ADJUSTED PER BOOKS INCOME NET INCOME  \$ 757. TOTAL \$ 757. \$ 0.               | (D) CHARITABLE PURPOSES  \$ 757 \$ 757    |
| STATEMENT 3<br>FORM 990-PF, PART I, LINE 16B<br>ACCOUNTING FEES |   |   |
| ACCOUNTING  | (A) (B) NET (C) EXPENSES INVESTMENT ADJUSTED PER BOOKS INCOME NET INCOME  \$ 3,513. \$ 1,757. \$ 3,513. \$ 1,757.   | (D) CHARITABLE PURPOSES \$ 1,756 \$ 1,756 |
| STATEMENT 4<br>FORM 990-PF, PART I, LINE 18<br>TAXES            |   |   |
| CALIFORNIA TAX<br>FEDERAL TAX<br>FOREIGN TAX                    | (A) (B) NET (C) EXPENSES INVESTMENT ADJUSTED PER BOOKS INCOME NET INCOME  \$ 10. 19. 17. \$ 17. TOTAL \$ 17. \$ 17. | (D) CHARITABLE PURPOSES \$ 10             |

| 2 | n | 1  | • |
|---|---|----|---|
| Z | U | -1 | ι |

# **FEDERAL STATEMENTS**

PAGE 2

**URBANEK-LEVY EDUCATION FUND** 

94-3372793

| STATEMENT 5               |    |
|---------------------------|----|
| FORM 990-PF, PART I, LINE | 23 |
| OTHER EXPENSES            |    |

|   | -          | (A)<br>EXPENSES<br>PER_BOOKS_ | (B) NET<br>INVESTMENT<br>INCOME | (C)<br>ADJUSTED<br>NET INCOME | _  | (D)<br>CHARITABLE<br>PURPOSES |
|---|------------|-------------------------------|---------------------------------|-------------------------------|----|-------------------------------|
| BANK FEES . FEES . MEALS OTHER LOSS FROM K-1. | \$         | 150.<br>20.<br>1,128.<br>504. |                                 |                               | \$ | 150.<br>20.<br>1,128.         |
| PORTFOLIO DEDUCTIONS FROM K-1 TOTAL           | , <u>ş</u> | 7,964.<br>9,766.              | \$ 7,964<br>\$ 7,964            |                               | \$ | 1,298.                        |

#### STATEMENT 6 FORM 990-PF, PART II, LINE 13 INVESTMENTS - OTHER

| OTHER_INVESTMENTS                                      | VALUATION<br>METHOD | . <u></u> | BOOK<br>VALUE       | FA | IR MARKET VALUE     |
|--|---------------------|-----------|---------------------|----|---------------------|
| NEEDHAM CONTRARIAN FUND<br>GALLEON TECH PARTNERS - SPC | COST<br>COST        | \$        | 395,111.<br>25,697. | \$ | 617,923.<br>25,697. |
|  | TOTAL               | \$        | 420,808.            | \$ | 643,620.            |

#### STATEMENT 7 FORM 990-PF, PART III, LINE 3 OTHER INCREASES

UNREALIZED GAIN

TOTAL \$ 14,328. \$ 14,328.

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

MR. KENNETH LEVY LIDA URBANEK GLORIA LEVY

| NAME           | ADDRESS                                     | HOME PHONE     | KLA-TENCOR PARENT  | SUPERVISOR               | SCH00L   | AMNT<br>(pr.<br>year) | PAID<br>FALL<br>2007 | PAID<br>SPRING<br>2008 | PAID<br>FALL<br>2008 | PAID<br>SPRING<br>2009 | PAID<br>FALL<br>2009 | PAID<br>SPRING<br>2010 | PAID<br>FALL<br>2010 | PAID<br>SPRING<br>2011 |
|----------------|---|----------------|--|--------------------------|--|-----------------------|----------------------|------------------------|----------------------|------------------------|----------------------|------------------------|----------------------|------------------------|
| BHASKAR, Meera | 1061 Queensbridge Ct<br>San Jose, CA 95120  | (408) 927-6639 | Kris Bhaskar<br>VP Systems/CTO Office<br>Chetana Bhaskar<br>Principal Engr/MIN | Ardis Liang<br>(Chetana) | University of Michigan Ann Arbor<br>University of Michigan<br>Ann Arbor, MI 48109<br>U of Michigan Cashier's Office<br>Ph (734) 764-1817<br>Fax (734) 763-3126 | 1000                  |                      |                        |                      |                        |                      |                        |                      |                        |
|                | 9988 Longview Lane<br>Pleasanton, CA 94588  | (925) 600-9412 | Bill Bonnar<br>VP Ops, Rapid   | Kent Goheen              | UC Davis   | 1000                  |                      |                        |                      |                        |                      |                        |                      | -                      |
|                | 18 Fairhaven Road<br>Nashua, NH 03060       | (603) 888-2745 | Brian Crawford<br>Dir, Sales GEM   | Steve Schatz             | Manhattan College Manhattan College Parkway Riverdale, NY 10471  Dana Dubiel, Admissions/Financial Aid Ph. (718) 862-7910 Fax. (718) 862-8027                  | 1000                  |                      |                        |                      |                        |                      |                        |                      |                        |
|                | 1205 Valley Quart Cir<br>San Jose, CA 95120 | (408) 323-1135 | Vineet Dharmadhikari<br>GM/OFM   | Joe Laia                 | University of CA, frvine UCI Office of Admissions 204 Administration Irvine, CA 92697-1075   | 1000                  |                      |                        |                      |                        |                      |                        |                      |                        |
|                | 1503 Oburn Court<br>Campbell, CA 95008      | (408) 364-1451 | Ann Drucker<br>IT Sr Manager, Finance<br>Apps                                  | Tim Campos               | Ph (949) 824-6703 Fax (949)-824-2711  UC San Diego University of CA, San Diego 9500 gilman Drive, #0021 La Jolla, CA 92093-0021                                | 1000                  |                      |                        |                      |                        |                      |                        |                      |                        |
|                |   |                |  |                          | Thurgood Marshall<br>Ph (858) 534-4390<br>Fax.   |                       |                      |                        |                      |                        |                      |                        |                      |                        |

|   | NAME   | ADDRESS                                       | HOME PHONE       | KLA-TENCOR PARENT                                  | SUPERVISOR        | SCHOOL  | AMNT<br>(pr<br>year) | PAID<br>FALL<br>2007 | PAID<br>SPRING<br>2008 | PAID<br>FALL<br>2008 | PAID<br>SPRING<br>2009 | PAID<br>FALL<br>2009 | PAID<br>SPRING<br>2010 | PAID<br>FALL<br>2010 | PAID<br>SPRING<br>2011 |
|---|--|---|------------------|--|-------------------|---|----------------------|----------------------|------------------------|----------------------|------------------------|----------------------|------------------------|----------------------|------------------------|
| 6 | SITUATION SITUAT | 8097 Sage Run Lane<br>Middleton, ID 83644     | (972) 880-6595   | Mark Eickhoff<br>Field Apps Engr/TIBU              | Saroja Ramamurthi | Texas A & M University P O Box 30014 College Station, TX 77842 Cheryl Rich Ph (979) 845-1060 Fax (979) 456-1808   | 2000                 |                      |                        |                      |                        |                      |                        |                      |                        |
| 7 | GIUROIU, Serban  | 2255 Fenian Drive<br>Campbell, CA 95008       | (408) 374-7518   | Monica Giuroiu<br>Sr SQC Engineer, CPG<br>Milpitas | Anthony Cheng     | University of CA, Berkeley<br>250 Sprouf Hall, #1960<br>Berkeley, CA 94720-1960<br>Payable to UC Regents<br>Sarah Lopez<br>Ph (510) 642-6442<br>Fax (510) 643-5526  | 1000                 |                      |                        |                      |                        |                      |                        |                      |                        |
|   |  | 11655 Oak Spring Court<br>Cupertino, CA 95014 | (408)873 - 8032  | Zhengyu Guo<br>Software Princ Engr/Rapid           | David Gee         | University of California, Los Angeles<br>405 Hilgard Ave<br>Los Angeles, CA 90095<br>Julie Plotkins Dept Econ/Bus-Econ<br>Ph (310) 825-5112<br>Fax (310) 206 - 1206 | 1000                 |                      |                        |                      |                        |                      |                        |                      |                        |
|   |  | 1345 Holly Avenue<br>Los Altos, CA 94024      | (650) 961 - 1030 | Carl Hess<br>Dir Of Engr, Rapid                    | Yalın Xiong       | University of California, Los Angeles<br>9500 Gilman Drive<br>Le Jolla, CA 92093<br>Payable to Regents of UC<br>Registrar<br>Ph (310) 825 1091<br>Fax               | 1000                 |                      |                        | i                    |                        |                      |                        |                      |                        |

|   | NAME                     | ADDRESS   | HOME PHONE       | KLA-TENCOR PARENT                     | SUPERVISOR        | SCHOOL   | AMNT<br>(pr<br>year) | PAID<br>FALL<br>2007 | PAID<br>SPRING<br>2008 | PAID<br>FALL<br>2008 | PAID<br>SPRING<br>2009 | PAID<br>FALL<br>2009 | PAID<br>SPRING<br>2010 | PAID<br>FALL<br>2010 | PAID<br>SPRING<br>2011 |
|---|--------------------------|---|------------------|---------------------------------------|-------------------|--|----------------------|----------------------|------------------------|----------------------|------------------------|----------------------|------------------------|----------------------|------------------------|
| 0 | KARLINSKAYA, Olga<br>SSN | 21 Belknap Terrace<br>Winchester, MA 01890                        | (781) 729 – 9398 | Roman Karlinsky<br>SW Engr/ ADE       | Ferenc Vajda      | University of Rochester University of Rochester Rochester, NY 14627 Gregg Sperr, Counselor Fin Aid Office Ph (585) 275 - 3228  | 2000                 |                      |                        |                      |                        |                      |                        |                      |                        |
|   |                          | 20740 Fourth St , Apt # 7<br>Saratoga, CA 95070                   | (408) 314 - 4300 | Andrey Khansov<br>Systems Des Engr/MN | Mohammed Abdallah | Ph (585) 756 - 7664  University of South Carolina 902 Sumter Street Access/Lieber College Columbia, SC 29208  Office of Financial Aid Ph (803) 777 - 7000 Fax (803) 777 - 0101 | 4000                 |                      |                        |                      |                        |                      |                        |                      |                        |
|   | 20163                    | 1152 Ravenscroft Lane<br>Ponte Vedra, FL 32081<br>Mom Julie Lefco | (845) 784 - 1618 | Thomas Lefco<br>CSE IBM BU            | Matthew Brown     | Fionda State University Fionda State University Tallahassee, FL 32306 Registrar's Office Ph (850) 644 - 1050 Fax. (850) 644 - 6404   | 3000                 |                      |                        |                      |                        |                      |                        |                      |                        |
|   |                          | 130 Tudor St , Apt C<br>South Boston, MA 02127                    | (617) 464 – 2211 | Phap Lu<br>MFG Technician             | Charlie Hill      | Boston University - College of Arts & Sci<br>725 Commonwealth Ave<br>Boston, MA 02215<br>Office of Financial Assistance<br>Ph (617) 353-2965<br>Fax (617) 358-2792             | 5000                 |                      |                        |                      |                        |                      |                        | !                    |                        |
|   |                          | 743 Los Robles Ave<br>Palo Alto, CA 94306                         | (650) 494-9018   | Malvina Mazin<br>Sr SW Engr/GSS       | Chris Beal        | Columbia University 1130 Amsterdam Ave 100 Hamilton Hall, MC 2802 New York, NY 10027  Jane Zhang Ph (212) 854 - 3711 Fax (212) 854 - 5353                                      | 1000                 |                      |                        |                      |                        |                      |                        |                      |                        |

|    | NAME                          | ADDRESS  | HOME PHONE       | KLA-TENCOR PARENT                                  | SUPERVISOR      | SCHOOL   | AMNT<br>(pr<br>year) | PAID<br>FALL<br>2007 | PAID<br>SPRING<br>2008 | PAID<br>FALL<br>2008 | PAID<br>SPRING<br>2009 | PAID<br>FALL<br>2009 | PAID<br>SPRING<br>2010 | PAID<br>FALL<br>2010 | PAID<br>SPRING<br>2011 |
|----|-------------------------------|--|------------------|--|-----------------|--|----------------------|----------------------|------------------------|----------------------|------------------------|----------------------|------------------------|----------------------|------------------------|
| 15 | NGUYEN, Chuong SSN Student ID | 3335 Cuesta Drive<br>San Jose, CA 95148        | (408) 270 - 6379 | Loan Nguyen<br>Financial Analyst, San Jose         | Stephanie Leong | San Jose State University One Washington Square San Jose, CA 95192                 | 3000                 |                      |                        |                      |                        | T                    |                        |                      |                        |
|    | Swaent io                     |  |                  |  |                 | Bursar/Student Accts & Collections<br>Ph (408) 924-1601<br>Fax (408) 924-1654      |                      |                      |                        | i                    |                        |                      |                        | ;                    |                        |
| 16 | NGUYEN, Michael               | 385 Saratoga Ave , #2<br>Santa Clara, CA 95050 | (408) 986-1453   | Kım Huynh<br>Acct/Accts Receivable<br>San Jose     | Peter Meyn      | San Jose State University<br>One Washington Square<br>San Jose, CA 95192           | 4000                 |                      |                        |                      |                        |                      |                        |                      |                        |
|    |                               |  |                  |  |                 | Jan Cefalu<br>Phone (408) 924-6063<br>Fax (408) 924-6089                           |                      |                      |                        |                      |                        |                      |                        |                      |                        |
|    |                               | 4505 Stoneyhaven Way<br>San Jose, CA 95111     | (408) 224-8478   | Bhupendra Patel<br>Mfg – Lead                      | Chen-An Chen    | University of California, Davis<br>One Shields Ave<br>Davis, CA 95616-8507         | 4000                 |                      |                        |                      |                        |                      |                        |                      |                        |
|    |                               |  |                  |  |                 | Phone (530) 752-2971<br>Fax (530) 752-1280   |                      |                      |                        |                      |                        |                      |                        |                      |                        |
|    |                               | 727 Alden Lane<br>Livermore, CA 94550          | (925) 294-5294   | Matthew Schaffe<br>Purchasing Mgr/FAST<br>San Jose | Bill Buglewicz  | Las Positas Junior College<br>3033 Collier Canyon Road<br>Livermore, CA 94551-9797 | 2000                 |                      |                        |                      |                        |                      |                        |                      |                        |
|    |                               |  |                  |  |                 | Andı Schriebman<br>Phone (925) 924-1000 (925)424-1580<br>Fax (925) 443-0742        |                      |                      |                        | ;                    |                        |                      |                        |                      |                        |
|    |                               | 824 Hentage Pkwy,<br>South<br>Allen, TX 75002  | (972) 727-8239   | Saroja Ramamurthi<br>Apps Mgr/TIBU, TX             | Jerry Steele    | Austin College<br>900 N Grand Ave<br>Sherman, TX 75090<br>(903) 813-3000           | 4000                 |                      |                        |                      |                        |                      |                        |                      |                        |

|    | NAME               | ADDRESS                                       | HOME PHONE     | KLA-TENCOR PARENT                     | SUPERVISOR       | SCHOOL   | AMNT<br>(pr.<br>year) | PAID<br>FALL<br>2007 | PAID<br>SPRING<br>2008 | PAID<br>FALL<br>2008 | PAID<br>SPRING<br>2009 | PAID<br>FALL<br>2009 | PAID<br>SPRING<br>2010 | PAID<br>FALL<br>2010 | PAID<br>SPRING<br>2011 |
|----|--------------------|---|----------------|---------------------------------------|------------------|--|-----------------------|----------------------|------------------------|----------------------|------------------------|----------------------|------------------------|----------------------|------------------------|
| 20 | RICH, Tiffany Mane | 7341 Joshua Circle<br>Pleasanton, CA 94588    | (925) 484-1279 | Darcy Rich<br>Mfg Tech/VLSI Standards | Tanq Ansari      | Las Postas College 3033 Coller Carryon Road Livermore, CA 94551  Admissions & Records Office Bldg 700  Phone (925) 424-1500 Fax (925) 443-0742           | 2000                  |                      |                        |                      |                        |                      |                        |                      |                        |
|    |                    | 2651 Chocolate Street<br>Pleasanton, CA 94588 | (925) 461-3024 | Toan Vo<br>Engr Da/WIN SQC/SQA        | Chen Ardis Liang | University of the Pacific<br>3601 Pacific Ave<br>Stockton, CA 95297<br>Office of Financial Aid<br>Phone (209) 946-2421<br>Fax (209) 946-2758             | 3000                  |                      |                        |                      |                        |                      |                        |                      |                        |
|    |                    | 1929 Gomes Road<br>Fremont, CA 94539          | (510) 770-8846 | Johnny Zhao<br>Engineer               | Kai Cao          | University of Cafifornia, San Diego<br>9500 Gilman Drive<br>La Jolla, CA 92093<br>Gabriele Wiedhausen, PhD<br>Phone (858) 534-2230<br>Fax (858) 822-5999 | 4000                  |                      |                        |                      |                        |                      |                        |                      |                        |
|    |                    | 3288 Montecto Drive<br>San Jose, CA 95135     | (408) 531-8893 | Xitong Zheng<br>SW Engmeer/EBI        | Arvind Kumar     | UC San Diego   | 4000                  |                      |                        |                      |                        |                      |                        |                      |                        |

| NAME             | ADDRESS  | HOME PHONE       | KLA-TENCOR PARENT                                    | SUPERVISOR        | SCHOOL   | AMNT<br>(pr<br>year) | PAID<br>FALL<br>2008 | PAID<br>SPRING<br>2009 | PAID<br>FALL<br>2009 | PAID<br>SPRING<br>2010 | PAID<br>FALL<br>2010 | PAID<br>SPRING<br>2011 | PAID<br>FALL<br>2011 | PAID<br>SPRING<br>2012 |
|------------------|--|------------------|--|-------------------|--|----------------------|----------------------|------------------------|----------------------|------------------------|----------------------|------------------------|----------------------|------------------------|
| ANDERSON, Joseph | 66 Bacon Court<br>Lafayette, CA 94549              | (925) 296-0448   | Brad Curry<br>Electrical Mfg Manager                 | Robert Howe       | Claremont McKenna College<br>890 Columbia Ave<br>Claremont, CA 91711<br>Jefferson Huang<br>Ph (909) 621-8114<br>Fax (909) 621-8495                               | 4000                 |                      |                        |                      |                        |                      |                        |                      |                        |
|                  | Richterricher Str 22<br>52072 Aachen Germany       | 00491624072095   | Kpatcha Bitadi<br>ANNUAL TUITION MAILED<br>EACH FALL | Werner Froschauer | RWTH – Aachen<br>Germany   | 2000                 |                      |                        |                      |                        |                      |                        |                      |                        |
|                  | 6329 Holly Gillingham<br>Way<br>San Jose, CA 95119 | (408) 225-4913   | Chnstine Kotla<br>Configuration Analyst              | Brandy Fu         | California State University Monterey Bay<br>100 Campus Center<br>Seaside, CA 93955-8001<br>Matthew Daines<br>Ph *831) 582-3000<br>Email matthew_daines@csumb edu | 3000                 |                      |                        |                      |                        |                      |                        |                      |                        |
|                  | 132-5 Whispering Pines<br>Colchester, VT 05446     | (802) 879 - 9169 | Robert Cavazos<br>Customer Service Engineer          | Michael Tobin     | University of Vermont<br>Burlington, VT 05446<br>Student Financial Services<br>Ph (802) 656-5700<br>Fax (656-4076  | 3000                 |                      |                        |                      |                        |                      |                        |                      |                        |
|                  | 19795 Farwell Ave<br>Saratoga, CA 95070            | (408) 872-2020   | Ellis Chang<br>VP, WIN                               | Mike Kirk         | UCLA University of CA, Los Angeles 1147 Murphy Hall, Box 95146 Los Angeles, CA 90095-1436 General Inquines & Advising Ph (310) 825 - 3101 Fax (310) 206 - 1206   | 1000                 |                      |                        |                      |                        |                      |                        |                      |                        |

|   | NAME                     | ADDRESS   | HOME PHONE       | KLA-TENCOR PARENT   | SUPERVISOR       | SCHOOL  | AMNT<br>(pr<br>year) | PAID<br>FALL<br>2008 | PAID<br>SPRING<br>2009 | PAID<br>FALL<br>2009 | PAID<br>SPRING<br>2010 | PAID<br>FALL<br>2010 | PAID<br>SPRING<br>2011 | PAID<br>FALL<br>2011 | PAID<br>SPRING<br>2012 |
|---|--------------------------|---|------------------|---|------------------|---|----------------------|----------------------|------------------------|----------------------|------------------------|----------------------|------------------------|----------------------|------------------------|
| 6 | Cheng, Yu-Hsien (Dernck) | 320 Stanford Ave.<br>Fremont, CA 94539                      | (510) 226-7877   | Rong-Yaw (Jack) Cheng<br>Principal Electric Engr<br>PSG/MEG                     | Liang-Guo Wang   | University of CA, Berkeley<br>110 Sproul Hall, #5800<br>Berkeley, CA 94720-5800<br>Edwina Taylor – Admissions Officer<br>Ph (510) 642-3622                      | 3000                 |                      |                        |                      |                        |                      |                        |                      |                        |
|   |                          | 1904 Emerson Street<br>Palo Alto, CA 94301                  | (650) 321-5827   | Tom Craig<br>Principal SW Engr<br>Corporate Platform Grp                        | Michael Bellon   | Email etaylor@berkeley edu  Princeton University P O Box 430 Princeton, NJ 08542-0430 Ph (609) 258-3060 Fax (609) 258-6743                                      | 1000                 |                      |                        |                      | ,                      |                      |                        |                      |                        |
|   |                          | 1343 Lefont Drive<br>San Jose, CA 95131                     | (408)453 - 6126  | Minh Danh<br>Engineer<br>RAPID  | Mike Wright      | University of CA, San Diego<br>Registrar's office<br>9500 Gilman Drive<br>Mail code 0022<br>La Jolla, CA 92093-0022<br>Ph (858) 534-3150<br>Fax (858) 534-5723  | 4000                 |                      |                        |                      |                        |                      |                        |                      |                        |
|   |                          | Room 601, Bldg 12<br>778 Lane, YiShuan Rd<br>Shanghai China | 8621 56952109    | Lan Sheng Dong<br>ME Engineering<br>China<br>ANNUAL TUITION MAILED<br>EACH FALL | Haying Peng      | Peking University 121 Room Old Chemistry Bldg Peking University Beijing, China 100871 Mingh Liu Ph 8610-62751407 Fax 8610-62554332                              | 1000                 |                      |                        |                      |                        |                      |                        |                      |                        |
|   |                          | 6951 Grandwood Way<br>San Jose, CA 95120                    | (408) 997 - 2813 | ChungSheng (Jay) Huang<br>Principal Optical Engr<br>ADE                         | Vamsı Velidandla | University of Southern CA USC Financial Aid Office Alth. Aid Coordination 700 Childs Way, JHH324 Los Angeles, CA 90089-0914 Ph (213) 740-0111 Ph (213) 740-0680 | 3000                 |                      |                        |                      |                        |                      |                        |                      |                        |

| NAME        | A      | DDRESS   | HOME PHONE       | KLA-TENCOR PARENT                               | SUPERVISOR      | SCHOOL  | AMNT<br>(pr.<br>year) | PAID<br>FALL<br>2008 | PAID<br>SPRING<br>2009 | PAID<br>FALL<br>2009 | PAID<br>SPRING<br>2010 | PAID<br>FALL<br>2010 | PAID<br>SPRING<br>2011 | PAID<br>FALL<br>2011 | PAID<br>SPRING<br>2012 |
|-------------|--------|--|------------------|---|-----------------|---|-----------------------|----------------------|------------------------|----------------------|------------------------|----------------------|------------------------|----------------------|------------------------|
| JIANG, YI-F |        | 136 Rappolla CT<br>leasanton, CA 94588   | (925) 251 - 0835 | Zhimung Jiang<br>FaST                           | Ahmad Khan      | UC Berkeley Financial Aid Office UC Berkeley 201 Sproul Hall, 1960 Berkeley, CA 94720-1960 Michael Matthews Ph (510) 642-6442 Fax (510) 643-5526                  | 2000                  |                      |                        |                      |                        |                      |                        |                      |                        |
|             |        | 950 Oregano Way<br>racy, CA 95376  | (209) 834 - 8977 | Javed Khan<br>Senior Buyer                      | Billy Huang     | University of Davis, California UC Davis Financial Office One Shield Ave Davis, CA 95616  Mark Foncannon/Judith Edwards Ph (530) 752-2804 Fax (530) 754 - 7022    | 4000                  |                      |                        |                      |                        |                      |                        |                      |                        |
|             | 9<br>F | O Box 5145<br>cound Rock, TX 78683<br>41 Hesters Crossing<br>coad, #3022<br>cound Rock, TX 78681 | (512) 924 - 0085 | Rollin Kocher                                   | Richard Elliott | American International College<br>1000 State Street<br>Springfield, MA 01109<br>Enc Urban<br>Ph (800) 242-3142<br>Fax (800) 205-3943                              | 3000                  |                      |                        |                      |                        |                      |                        |                      |                        |
|             |        | 170 Clarendon Street<br>ian Jose, CA 95129   | (308) 252 - 5958 | Zhengcheng Lin<br>Sr Staff SW Engineer<br>RAPID | Mike Wight      | Washington Unw , St Louis<br>One Brookings Dr<br>North Brookings Hall, Room 75<br>St Louis, MO 63130<br>Vicki Sullivan<br>Ph (800) 758-0050<br>Fax (314) 935-9798 | 3000                  |                      |                        |                      |                        |                      |                        |                      |                        |

|    | NAME                  | ADDRESS   | HOME PHONE       | KLA-TENCOR PARENT  | SUPERVISOR    | SCHOOL  | AMNT<br>(pr<br>year) | PAID<br>FALL<br>2008 | PAID<br>SPRING<br>2009 | PAID<br>FALL<br>2009 | PAID<br>SPRING<br>2010 | PAID<br>FALL<br>2010 | PAID<br>SPRING<br>2011 | PAID<br>FALL<br>2011 | PAID<br>SPRING<br>2012 |
|----|-----------------------|---|------------------|--|---------------|---|----------------------|----------------------|------------------------|----------------------|------------------------|----------------------|------------------------|----------------------|------------------------|
| 15 | MONTES DE OCA, Amanda | 47 Dana Road<br>Danbury, CT 06811                       | (203) 746 - 2971 | Mario Montes de Oca<br>CS Engineer<br>CSGP/ WSO No America | Jeff Paquette | University of Connecticut<br>233 Glenbrook Road, Unit 4100<br>Storrs, CT 06269<br>Katy Monty<br>Ph (860) 486-4830                                 | 2000                 |                      |                        |                      |                        |                      |                        |                      |                        |
|    |                       | 36298 Brighton Ct<br>Newark, CA 94560                   | (510) 796 - 8995 | James Pascale<br>Admin Order<br>CSGP/WSO SensArray         | Sandy Burgan  | Fax. (860) 486-5234  California Polytechnic State Univ Cal Poly Financial Aid Office Administration Bldg. Room 212 San Luis Obispo, CA 93407-0201 | 3000                 |                      |                        |                      |                        |                      |                        |                      |                        |
|    |                       | Blk 222 Serangoon Ave<br>4, #09-258<br>Singapore 550222 | (+65) 62856790   | Kns Raghavan<br>Sr Product Mktg Mgr<br>GEM - Candela       | Frank Burkeen | Ph (805) 756-2927 Fax (805) 756-7243 financialard@calpoly edu  The College of William and Mary P O Box 8795 Williamsburg, VA 23187-8795           | 1000                 |                      |                        |                      |                        |                      |                        |                      |                        |
|    |                       | 3704 Ortega Ct<br>Palo Alto, CA 94303                   | (650) 856 - 4297 | Eliezer Rosengaus<br>Sr Principle Engr                     | Kns Bhaskar   | Stephen Sechrist, Asst Director  Phone (757) 221-3437  Fax (757) 221-3597  University of Southern California  USC Cashier's Office  File # 51158  | 1000                 |                      |                        |                      |                        |                      |                        |                      |                        |
|    |                       | 6145 Oak Forest Way                                     | (408) 997 - 6525 | Chuck Springer   | Don Chen      | Los Angeles, CA 90075-1158 Carne Robinson  Ph (213) 821-1602 Fax (213) 821-1733  UC Santa Barbara   | 2000                 |                      |                        |                      |                        |                      |                        |                      |                        |
|    |                       | San Jose, CA 95120                                      | , .,,            | Electrical Engr<br>EBI                                     | 25            | Financial Aid Office<br>2101 SAASB<br>Santa Barbara, CA 93106-3180<br>Ph (805) 893-2432   | 2000                 |                      |                        |                      |                        |                      |                        |                      |                        |

|    | NAME                     | ADDRESS   | HOME PHONE       | KLA-TENCOR PARENT   | SUPERVISOR      | SCHOOL   | AMNT<br>(pr<br>year) | PAID<br>FALL<br>2008 | PAID<br>SPRING<br>2009 | PAID<br>FALL<br>2009 | PAID<br>SPRING<br>2010 | PAID<br>FALL<br>2010 | PAID<br>SPRING<br>2011 | PAID<br>FALL<br>2011 | PAID<br>SPRING<br>2012 |
|----|--------------------------|---|------------------|---|-----------------|--|----------------------|----------------------|------------------------|----------------------|------------------------|----------------------|------------------------|----------------------|------------------------|
| 20 | UEMURA, Asako<br>SSN N/A | 4-7-16, Higashi Kaigan<br>Kita<br>Chigasaki Kanagawa<br>Pref Japan 253-0053 | 81 467 26 3100   | Kayoko Uemura<br>Exect Asst<br>KT Japan<br>ANNUAL TUITION MAILED<br>EACH FALL | Yoshi Suzuki    | Chuo University 742-1 Higashinakano Hachioji-shi Tokyo, Japan 192-0393 Mr Ishigohoka, Policy Studies Office Phone 81-42-674-4111                         | 1000                 |                      |                        |                      |                        |                      |                        |                      |                        |
|    |                          | 605 Dundalk Bay Cove<br>Pflugerville, TX 78660                              | (512) 989 - 0075 | Chandy Verghese<br>CSE  | Joseph Hamilton | Fax 81-42-674-4118 Abilene Christian University 100 Zellner Hall ACU Box 29007 Abilene, TX 79699-9906 Linda Mulling Ph (325) 674-2300 Fax (325) 674-2963 | 2000                 |                      |                        |                      |                        |                      |                        |                      |                        |
|    |                          | 27323 Mangold Ct<br>Hayward, CA 94545                                       | (510) 293 - 0625 | Greg Watt<br>Shipping & Receiving<br>Candela                                  | Kabır Chahal    | California State Univ. East Bay<br>25800 Carlos Bee Blvd<br>Hayward, CA 94542<br>Anta Patino<br>Ph (510) 885-2784<br>Fax (510) 885-2161                  | 3000                 |                      |                        |                      |                        |                      |                        |                      |                        |
|    |                          | 1541 School St<br>San Carlos, CA 94070                                      | (650) 595 - 5257 | Michael Wright<br>Sr Electrical Enging Mgr<br>RAPID                           | Yalın Xıong     | UC Berkeley<br>University of CA, Berkeley<br>120 Sproul Hall, #5404<br>Berkeley, CA 94720-5404<br>Pat Horwath<br>Ph (510) 642-7594<br>Fax (510) 643-8653 | 1000                 |                      |                        |                      |                        |                      |                        |                      |                        |

|   | NAME                | ADDRESS   | HOME PHONE     | KLA-TENCOR PARENT                      | SUPERVISOR      | SCHOOL   | AMNT<br>(pr<br>year) | PAID<br>FALL<br>2009 | PAID<br>SPRING<br>2010 | PAID<br>FALL<br>2010 | PAID<br>SPRING<br>2011 | PAID<br>FALL<br>2011 | PAID<br>SPRING<br>2012 | PAID<br>FALL<br>2012 | PAID<br>SPRING<br>2013 |
|---|---------------------|---|----------------|--|-----------------|--|----------------------|----------------------|------------------------|----------------------|------------------------|----------------------|------------------------|----------------------|------------------------|
| 1 | BUGLEWICZ, Samantha | 3974 El Coral Way<br>San Jose, CA 95118             | (408) 978-5129 | William Buglewicz<br>Dir Ops/Materials | Brian Long      | Creighton University<br>2500 California Plaza<br>Omaha, NE 68178<br>Ph 800-282-5835<br>Fax (402) 280-2895  | 3000                 |                      |                        |                      |                        |                      |                        |                      |                        |
|   |                     | 43503 Ocaso Corte<br>Fremont, CA 94539              | (510) 651-1336 | Kar Cao<br>Sr Electrical Engr Mgr      | Hennk Nielsen   | Harvard University Harvard College Financial Aid Office 86 Brattle Street Cambridge, MA 02138 Ph (617) 495-1581  | 1000                 |                      |                        |                      |                        |                      |                        |                      |                        |
|   |                     | 2522 Wood Hollow Dr<br>Livermore, CA 94550          | (925) 443-0963 | Ward Dixon<br>Mechanical Engineer      | RaulTan         | Fax (617)496-0256  UC San Diego UCSD Studen Business Svc 9500 Gilman Dr Dept 0026 La Jolia, CA 92093  Laura Rivera Ph (858) 534-4480 Fax (858) 534-5459                          | 3000                 |                      |                        |                      |                        |                      |                        |                      |                        |
|   |                     | 4450 Eiffel Drive<br>Stockton, CA 95206             | (209) 234-4847 | Kehinde Esan<br>Test Engineer          | Jorge Pont      | San Joaquin Delta College  | 2000                 |                      |                        |                      |                        |                      |                        |                      |                        |
|   |                     | 1689 Adnan Way<br>San Jose, CA 95122                | (408) 838-3697 | Leny Deon<br>Drv Sales Ops             | Ana Schuman     | San Francisco State University<br>1600 Holloway Ave<br>San Francisco, CA 94132<br>Attn Bursars Office, bldg Admin 155<br>Rose Carmona<br>Ph (415) 338-2588<br>Fax (415) 338-0949 | 2000                 |                      |                        |                      |                        |                      |                        |                      |                        |
|   |                     | 1131 Compass Land,<br>#112<br>Foster City, CA 94404 | (650) 522-8008 | Roman Gendler<br>SW Engineer           | Mir Mustafa Ali | UCLA UCLA Undergraduate Admissions 1147 Murphy Hall PO Box 951436 Los Angeles, CA 90095-1436 Ph (310) 825-3101 Fax (310) 206-1206  | 3000                 |                      |                        |                      |                        |                      |                        |                      |                        |

|   | NAME                           | ADDRESS   | HOME PHONE     | KLA-TENCOR PARENT                           | SUPERVISOR        | SCHOOL  | (pr<br>(pr | PAID<br>FALL<br>2009 | PAID<br>SPRING<br>2010 | PAID<br>FALL<br>2010 | PAID<br>SPRING<br>2011 | PAID<br>FALL<br>2011 | PAID<br>SPRING<br>2012 | PAID<br>FALL<br>2012 | PAID<br>SPRING<br>2013 |
|---|--------------------------------|---|----------------|---|-------------------|---|------------|----------------------|------------------------|----------------------|------------------------|----------------------|------------------------|----------------------|------------------------|
| 7 | JONG, Eric SSN Student ID      | 817 San Lucas Court<br>Mt View, CA 94043                    | (650) 967-8945 | Betty Jong<br>Admin Assistant               | Oreste Donzella   | UCLA<br>Le Conte Ave & Westwood Blvd<br>Westwood, CA 90024<br>Ph (310)825-1091, Opt 6                                       | 3000       |                      |                        |                      |                        |                      |                        |                      |                        |
| 8 | JUSUFAGIC, Alma SSN Student ID | 240 Michelle Drive<br>Campbell, CA 95008                    | (408) 379-5026 | Mırsad Jusufagıc<br>WIN Mig Mgr             | Pat Wilkmson      | UCLA 1125 Murphy Hall 405 Hilgard Ave Los Angeles, CA 90095  Vu Tran (Admissions) Ph (310) 825-3101 Fax (310) 206-1206      | 1000       |                      |                        |                      |                        |                      |                        |                      |                        |
| 9 | KADKLY, Yunus                  | 1553 Vista Club Circle,<br>Apt 301<br>Santa Clara, CA 95054 | (408) 987-9913 | Azmi Kadkiy<br>Principal Research Scientist | Guoheng Zhao      | Univ of Santa Cruz<br>1156 High Street<br>Santa Cruz, CA 95064<br>Ph (831) 459-2131   | 3000       |                      |                        |                      |                        |                      |                        |                      |                        |
|   |                                | 20380 Stevens Creek<br>Blvd, #126<br>Cupertino, CA 95014    | (408) 725-8240 | Haksoo(Rocky) Kim<br>System Engineer        | Paul Wieczovek    | UCLA<br>1147 Murphy Hall, Box 951436<br>Los Angeles, CA 90095-1436<br>Ph (310) 825-3101<br>Fax (310)206-1206                | 3000       |                      |                        |                      |                        |                      |                        |                      |                        |
|   |                                | 1209 Fenway Park<br>Pflugerville, TX 78660                  | (512) 990-2446 | Dale Legband<br>Business Unit Manager       | Edward Charner    | Southern Methodist University Division of Enrollment Svs PO Box 750181  Jeanene Renfro Ph (214) 768-2058 Fax (214) 768-3056 | 3000       |                      |                        |                      |                        |                      |                        |                      |                        |
|   |                                | 206 Camille Court<br>Pflugerville, TX 78660                 | (512) 252-8393 | Curtis Linder<br>Apps Engineer              | Saroja Ramamurthi | UT San Antonio<br>One UTSA Circle<br>San Antonio, TX 78249<br>Shirley Banez<br>Ph (210) 458-7160<br>Fax (210)458-4638       | 3000       |                      |                        |                      |                        |                      |                        |                      |                        |

|    | NAME                | ADDRESS  | HOME PHONE     | KLA-TENCOR PARENT  | SUPERVISOR     | SCHOOL  | AMNT<br>(pr<br>year) | PAID<br>FALL<br>2009 | PAID<br>SPRING<br>2010 | PAID<br>FALL<br>2010 | PAID<br>SPRING<br>2011 | PAID<br>FALL<br>2011 | PAID<br>SPRING<br>2012 | PAID<br>FALL<br>2012 | PAID<br>SPRING<br>2013 |
|----|---------------------|--|----------------|--|----------------|---|----------------------|----------------------|------------------------|----------------------|------------------------|----------------------|------------------------|----------------------|------------------------|
| 13 | MELE, Chlara<br>SSN | Via Figino 11 B<br>Pero Milano Italy 20100     | +39023539248   | Franco Mele<br>Service Manager<br>KT Italy<br>ANNUAL TUITION MAILED<br>EACH FALL | Stephane Sztur | Politecnico di Milano<br>Architettura Via Ampere 2 – Milano<br>Italy 20123  | 2000                 |                      |                        |                      |                        |                      |                        |                      |                        |
|    |                     | 51 Roundtable Dr , Apt#8<br>San Jose, CA 95111 | (408) 629-1787 | Thao Truong<br>Manufacturing   | Daniel Soto    | Emery University 201 Dowman Drive Atlanta, GA 30322 Ph (404) 727-6069 Fax (404) 727-0538                                    | 3000                 |                      |                        |                      |                        |                      |                        |                      |                        |
|    |                     | 3886 Hurstglen Way<br>San Jose, CA 95121       | (408) 981-5072 | Shene Phom<br>Admin Assistant  | Kent Goheen    | UC, Riverside<br>900 University Ave<br>Riverside, CA 92521<br>Ph (951) 827-3878<br>Fax (951) 827-5619                       | 2000                 |                      |                        |                      |                        |                      |                        |                      |                        |
|    |                     | 3132 Browntail Way<br>San Ramon, CA 94582      | (650) 219-1602 | Prabhu Padmanabhan<br>Sr Programmer Analyst                                      | Manoj Koduru   | UC. Berkeley<br>201 Sproul Hall, #1960<br>Berkeley, CA 94720-1960<br>Jan Wilhams<br>Ph. (510) 642-6442<br>Fax (510)643-5526 | 3000                 |                      |                        |                      |                        |                      |                        |                      |                        |
|    |                     | 207 Isabella Street<br>Hayward, CA 94544       | (510)299-7765  | Oscar Salomon  | Gerry Onhuela  | Cal State Univ East Bay 25800 Carlos Bee Blvd Hayward, CA Louise Martinez (510)885-3818 Phone (510) 885-3000                | 2000                 |                      |                        |                      |                        |                      |                        |                      |                        |

|    | NAME         | ADDRESS  | HOME PHONE     | KLA-TENCOR PARENT  | SUPERVISOR       | SCHOOL  | AMNT<br>(pr.<br>year) | PAID<br>FALL<br>2009 | PAID<br>SPRING<br>2010 | PAID<br>FALL<br>2010 | PAID<br>SPRING<br>2011 | PAID<br>FALL<br>2011 | PAID<br>SPRING<br>2012 | PAID<br>FALL<br>2012 | PAID<br>SPRING<br>2013 |
|----|--------------|--|----------------|--|------------------|---|-----------------------|----------------------|------------------------|----------------------|------------------------|----------------------|------------------------|----------------------|------------------------|
| 18 | SOBOL, Doron | Moreshet DN Misgav<br>Misgav Israel 20186  | 972-49999269   | David Sobol<br>KT Israel<br>ANNUAL TUITION MAILED<br>EACH FALL                           | Yaron Ish-shalom | University of Haifa<br>Mount Carmel Haifa<br>Israel 31905<br>Keren Chahanovitz<br>Ph 972-48288446<br>Fax 972-48249331   | 2000                  | ļ                    |                        |                      |                        | i                    |                        |                      |                        |
|    |              | 2301 South Court<br>Palo Alto, CA 94301  | (650) 321-7282 | Sterling Watson<br>VP Strategic Development  | Zam Saidin       | Columbia College 100 Hamilton Hall MC2802 1130 Amsterdam Ave New York, NY 10027 Ugrad_finand@columbia edu  Ph (212) 854-4400 Fax (212) 854-5353   | 1000                  |                      |                        |                      |                        |                      |                        |                      |                        |
|    |              | Bidg 6-3-301,<br>Fangshuiyuan, Meijiang<br>St<br>Hexi District Tianjin<br>China 300221 | 862288381296   | Jichen Yu<br>Customer Support Engineer<br>KT China<br>ANNUAL TUITION MAILED<br>EACH FALL | Kevin Liu        | Peabody Institute of The John<br>Hopkins University<br>Financial Aid Office, 1 East Mount<br>Vermon Place<br>Baltimore, MD 21202<br>Rebecca Poligar<br>Ph (410)234-4900<br>Fax (410)659-8102) | 3000                  |                      |                        |                      |                        |                      |                        |                      |                        |
| 21 |              |  |                |  |                  |   |                       |                      |                        |                      |                        |                      |                        |                      |                        |
| 22 |              |  |                |  |                  |   |                       |                      |                        |                      |                        |                      |                        |                      |                        |

|   | NAME  | ADDRESS                                 | HOME PHONE     | KLA-TENCOR PARENT                   | SUPERVISOR     | SCHOOL   | AMNT<br>(pr<br>year) | PAID<br>FALL<br>2010 | PAID<br>SPRING<br>2011 | PAID<br>FALL<br>2011 | PAID<br>SPRING<br>2012 | PAID<br>FALL<br>2012 | PAID<br>SPRING<br>2013 | PAID<br>FALL<br>2013 | PAID<br>SPRING<br>2014 |
|---|---|---|----------------|-------------------------------------|----------------|--|----------------------|----------------------|------------------------|----------------------|------------------------|----------------------|------------------------|----------------------|------------------------|
| 1 | AZADIAN, Amanda<br>SSN  | 97 Western Ave<br>Essex, MA 01929       | (978)768-3362  | Jeffrey Azadian<br>Business Dev Mgr | Steve Schatz   | TBD  | 2000                 |                      |                        |                      |                        |                      |                        |                      | T                      |
| 2 | Student ID<br>BIAGINI-Lee, Emily  | 91 Lilly Way                            | (831)761-3560  | Karen Biagini                       | Peter Gaudette | TBD  |                      |                      | <u> </u>               |                      |                        |                      |                        |                      |                        |
| - | BINOINT-EGG, EIMIN  | Watsonville, CA 95076                   | (031)/01-3300  | Dir., Corp Quality                  | Peter Gaudette | 100  | 2000                 |                      |                        |                      |                        |                      |                        | ,                    |                        |
|   |   | 2934 E Janelle Way<br>Gilbert, AZ 85298 | (480) 621-6131 | Sınh Bui<br>Sr Field App Engr/WIN   | Nick Miller    | Anzona State University<br>PO Box 870112<br>Tempe, AZ 95287-0112   | 5000                 |                      |                        |                      |                        |                      |                        |                      |                        |
|   |   | 3813 Stone Pointe Way                   |                |                                     |                | Attn ASU Cashiering Svc<br>Ph (480) 965-6341<br>Fax (480) 965-9242   |                      |                      |                        |                      |                        |                      |                        |                      |                        |
|   |   | Pleasanton, CA 94588                    | (925)600-8436  | Weixiong Chen<br>Engr/EBI-EBR       | Don Chen       | TBD  | 3000                 |                      |                        |                      |                        |                      |                        |                      |                        |
|   |   | 18 Fairhaven Road<br>Nashua, NH 03060   | (603)888-2745  | Bnan Crawford<br>Dir of Sales, GEM  | Steve Schatz   | George Washington University 2121 I St, NW Washington, DC 20052 Attn Elizabeth Amundson Ph (202) 994-8977 Fax (202) 994-0325 | 2000                 |                      |                        |                      |                        |                      |                        |                      |                        |
| 6 | SN STATE OF | 355 Lemarc Street<br>Fremont, CA 94539  | (510) 490-1831 | Yanong Han<br>Service Sys Engr/GSS  | lan O'Leary    | TBD  | 4000                 |                      |                        |                      |                        |                      |                        |                      |                        |
| 7 | Student ID KELLY, Sara SSN  | 1402 Lombardy Way<br>Allen, TX 75002    | (972) 747-7371 | Scott Kelly<br>Service Mgr/GSS      | Jay Decker     | TBD  | 3000                 |                      |                        |                      |                        |                      | -                      |                      | -                      |
|   | Student iD 8  |   |                | <u> </u>                            |                |  |                      |                      |                        | }                    |                        |                      |                        |                      |                        |

|    | NAME             | ADDRESS                                      | HOME PHONE     | KLA-TENCOR PARENT                           | SUPERVISOR       | SCHOOL  | AMNT<br>(pr.<br>year) | PAID<br>FALL<br>2010 | PAID<br>SPRING<br>2011 | PAID<br>FALL<br>2011 | PAID<br>SPRING<br>2012 | PAID<br>FALL<br>2012 | PAID<br>SPRING<br>2013 | PAID<br>FALL<br>2013 | PAID<br>SPRING<br>2014 |
|----|------------------|--|----------------|---|------------------|---|-----------------------|----------------------|------------------------|----------------------|------------------------|----------------------|------------------------|----------------------|------------------------|
| 8  | NGUYEN, Vinh     | 3335 Cuesta Dnve<br>San Jose, CA 95148       | (408)270-6379  | Loan Nguyen<br>Sr Financial Analyst         | Manelle Matthews | New York University<br>25 West Fourth Street<br>New York, NY 10012-1199<br>Attn Randall Deike                       | 3000                  |                      |                        |                      |                        |                      |                        |                      |                        |
|    |                  |  |                |   |                  | Ph (212) 998-4444<br>Fax (212) 995-4661   |                       |                      |                        |                      |                        |                      |                        |                      |                        |
|    |                  | 3222 Glencoe Circle<br>San Ramon, CA 94582   | (925) 828-8290 | Krishna Rao<br>Sr Director/GSS              | Te-Hua Lin       | UC Berkeley (UC Regents)<br>110 Sproul Hall, #5800<br>Berkeley, CA 94720-5800                                       | 3000                  |                      |                        |                      |                        |                      |                        |                      |                        |
|    |                  |  |                |   |                  | Attn Undergrad Adm Officer<br>Ph (510) 642-3175<br>Fax (510) 642-7333   |                       |                      |                        | _                    |                        |                      |                        |                      |                        |
|    |                  | 600 Magdalena Ave<br>Los Altos, CA 94024     | (650) 947-8929 | Mike Sarhadı<br>Quality Mgr, SensArray/VLSI | Phil Arnold      | UC Berkeley (US Regents)<br>110 Sproul Hall<br>Berkeley, CA 94720<br>Attn. Walter Robinson                          | 3000                  |                      |                        |                      |                        |                      |                        |                      |                        |
|    |                  |  |                |   |                  | Ph (510)642-6000<br>Fax (510) 642-6000  |                       |                      |                        |                      |                        |                      |                        |                      |                        |
| 11 | Student ID       | 20306 Clifden Way<br>Cupertino, CA 95014     | (408) 777-0113 | Zhengquan Tan<br>Sr Dir Apps, FAST          | Ahmad Khan       | University of Illinois at Urbana-<br>Champaign<br>901 West Illinois Street<br>Urbana, IL 61801<br>Attn Timmi Turley | 3000                  |                      |                        |                      |                        |                      |                        |                      |                        |
|    |                  |  |                |   |                  | Ph (217) 333-0302<br>Fax (217) 244-4614   |                       |                      |                        |                      |                        |                      |                        |                      |                        |
| 12 | TRAN, Justine    | 802 Cape Kennedy Drive<br>San Jose, CA 95133 | (408) 729-7459 | Trinh Tran<br>Cable Designer/Rapid          | Donald Haislet   | TBD   | 5000                  |                      |                        |                      |                        |                      |                        |                      |                        |
|    | Student ID       |  |                |   |                  |   |                       |                      |                        |                      |                        |                      |                        |                      |                        |
| 13 | WELLS, Elizabeth | 360 Cune Drive<br>San Jose, CA 95119         | (408)226-4407  | Ken Wells<br>Dir, Learning                  | Brent Bloom      | TBO   | 3000                  |                      |                        |                      | -                      |                      |                        |                      |                        |
|    | Student ID       |  |                |   |                  |   |                       | 1                    |                        |                      | ļ                      |                      |                        |                      |                        |

|    | NAME          | ADDRESS                                     | HOME PHONE     | KLA-TENCOR PARENT                     | SUPERVISOR     | SCHOOL  | AMNT<br>(pr<br>year) | PAID<br>FALL<br>2010 | PAID<br>SPRING<br>2011 | PAID<br>FALL<br>2011 | PAID<br>SPRING<br>2012 | PAID<br>FALL<br>2012 | PAID<br>SPRING<br>2013 | PAID<br>FALL<br>2013 | PAID<br>SPRING<br>2014 |
|----|---------------|---|----------------|---------------------------------------|----------------|---|----------------------|----------------------|------------------------|----------------------|------------------------|----------------------|------------------------|----------------------|------------------------|
| 14 | WONG, Michael | 1585 Portola Drive<br>Milpitas, CA 95035    | (408) 942-0644 | Vincent Wong<br>ATE/RAPID             | Aaron Teixeira | University of Pennsylvania<br>005 Franklin Bldg<br>3451 Walnut Street<br>Philadelphia, PA 19104-6270                                    | 4000                 |                      |                        |                      |                        |                      |                        |                      |                        |
|    |               | 43634 Euclid Drive<br>Fremont, CA 94539     | (510) 661-0992 | Alfred Wu<br>Enterprise Architecht/IT | Sleve Ruggiero | UC Berkeley – UC Regents<br>Financial Aid & Scholarship Office<br>201 Sproul Hall, #1960<br>Berkeley, CA 94720-1960<br>Ph (510)642-6442 | 4000                 |                      |                        |                      |                        |                      |                        |                      |                        |
| 16 |               | 40100 San Carlos Place<br>Fremont, CA 94539 | (510) 573-3412 | Michael Yang<br>Engineer SFS/ADE      | Steve Cui      | Fax (510) 643-5526<br>TBD   | 4000                 | -                    |                        |                      |                        |                      |                        |                      | +                      |
|    | SSN           |   |                |                                       |                |   |                      |                      |                        |                      |                        |                      | 1                      |                      |                        |
|    | Student ID    |   |                |                                       |                |   | Ì                    |                      |                        | İ                    | 1                      |                      | 1                      |                      |                        |
| 17 |               |   |                |                                       |                |   |                      |                      |                        |                      |                        |                      |                        |                      | 1                      |
| 18 |               |   |                |                                       |                |   |                      |                      |                        |                      |                        |                      |                        |                      | 1                      |
| 19 |               |   |                |                                       |                |   |                      | 1                    | <del> </del>           |                      |                        |                      |                        |                      | _                      |
| 20 |               |   |                |                                       |                |   |                      |                      |                        |                      | <u> </u>               |                      |                        |                      | 1                      |
| 21 |               |   |                |                                       |                |   |                      |                      |                        |                      |                        |                      |                        |                      |                        |
| 22 |               |   |                |                                       |                |   |                      |                      |                        |                      |                        |                      |                        |                      |                        |
| 22 |               |   |                |                                       |                |   |                      |                      |                        |                      |                        |                      |                        |                      |                        |
|    | <u> </u>      |   | <u> </u>       |                                       |                |   |                      |                      |                        |                      |                        |                      |                        |                      |                        |

Total: 209,000 Less corrected:  $\langle 7,500 \rangle$ 

Net Total

201,500

Page 3

# Form **8868** (Rev January 2011)

Application for Extension of Time To File an Exempt Organization Return

Department of the Treasury Internal Revenue Service

File a separate application for each return.

OMB No 1545-1709

Form 8868 (Rev. 1-2011)

|  | e filing for an Automatic 3-Month Extension, con  |  |  |  | ► 🗓                       |  |  |  |
|--|---|--|--|--|---------------------------|--|--|--|
|  | e filing for an Additional (Not Automatic) 3-Mon  |  | · · · · · · · · · · · · · · · · · · ·  |  |                           |  |  |  |
| •  | <b>plete Part II unless</b> you have already been grante  |  | ,  |  |                           |  |  |  |
| corporation request an e<br>Associated \   | ling (e-file). You can electronically file Form 886 required to file Form 990-T), or an additional (no extension of time to file any of the forms listed in With Certain Personal Benefit Contracts, which ming of this form, visit www irs.gov/efile and click | t automatic<br>Part I or P<br>lust be sent | ) 3-month extension of time. You can ele<br>art II with the exception of Form 8870, Ir<br>to the IRS in paper format (see instruct | ectronically file Form<br>nformation Return fo | n 8868 to<br>or Transfers |  |  |  |
| Part 图 A   | utomatic 3-Month Extension of Time.   | Only subn                                  | nit original (no copies needed).   |  |                           |  |  |  |
|  | n required to file Form 990-T and requesting an   |  |  | complete Part I only                           | . •                       |  |  |  |
| All other cor<br>income tax i  | porations (including 1120-C filers), partnerships,<br>eturns.   | REMICS, a                                  | nd trusts must use Form 7004 to reques   | t an extension of tin                          | ne to file                |  |  |  |
|  | Name of exempt organization   |  |  | Employer identification number                 |                           |  |  |  |
| Type or print  |   |  |  |  |                           |  |  |  |
| print  | URBANEK-LEVY EDUCATION FUND   |  |  | 94-3372793                                     |                           |  |  |  |
| File by the<br>due date for<br>filing your<br>return See   | Number, street, and room or suite number. If a P.O. box, see instructions   |  |  |  |                           |  |  |  |
|  | 51 UNIVERSITY AVENUE G  |  |  |  |                           |  |  |  |
| instructions   | City, town or post office, state, and ZIP code. For a foreign address, see instructions.  |  |  |  |                           |  |  |  |
|  | LOS GATOS, CA 95030   |  |  |  |                           |  |  |  |
| Enter the Return code for the return that this application is for (file a separate application for each return)  |   |  |  |  |                           |  |  |  |
| Application<br>Is For  |   | Return<br>Code                             | Application<br>Is For  |  | Return<br>Code            |  |  |  |
| Form 990   |   | 01   | Form 990-T (corporation)   |  | 07                        |  |  |  |
| Form 990-BL  |   | 02   | Form 1041-A  |  | 08                        |  |  |  |
| Form 990-EZ  |   | 03   | Form 4720  |  | 09                        |  |  |  |
| Form 990-PF  |   | 04   | Form 5227  |  | 10                        |  |  |  |
| Form 990-T (section 401(a) or 408(a) trust)  |   | 05   | Form 6069  |  | 11                        |  |  |  |
| Form 990-T (trust other than above)  |   | 06   | orm 8870   |  | 12                        |  |  |  |
| Telephone No. ► 408-399-8081 FAX No. ►  If the organization does not have an office or place of business in the United States, check this box  |   |  |  |  |                           |  |  |  |
| 3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions                                   |   |  |  |  |                           |  |  |  |
| b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit |   |  |  |  |                           |  |  |  |
| c Balance due. Subtract line 3b from line 3a Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions              |   |  |  |  |                           |  |  |  |
|  | ou are going to make an electronic fund withdraw  |  |  |  |                           |  |  |  |

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-Mon  | th Extensio    | n, complete only Part II and check t                                    | this box .                      | ► X            |  |  |  |
| Note. Only   | complete Part II if you have already been granted   | d an automa    | atic 3-month extension on a previous                                    | sly filed Form 8868.            |                |  |  |  |
| • If you a   | are filing for an Automatic 3-Month Extension, co   | mplete only    | Part I (on page 1).   |                                 |                |  |  |  |
| Part II  | Additional (Not Automatic) 3-Month Ext  | ension o       | f Time. Only file the original  | (no copies needed).             |                |  |  |  |
|  | Name of exempt organization in Employer identification in   |                |   |                                 |                |  |  |  |
| Type or  |   |                |   |                                 |                |  |  |  |
| print  | URBANEK-LEVY EDUCATION FUND   |                |   | 94-3372793                      |                |  |  |  |
| P 1 . 1 4  | Number, street, and room or suite number. If a P.O. box, see inst   | tructions      |   |                                 |                |  |  |  |
| File by the<br>extended  |   |                |   |                                 |                |  |  |  |
| due date for<br>filing the   | 51 UNIVERSITY AVENUE G  |                |   |                                 |                |  |  |  |
| return See<br>instructions   | City, town or post office, state, and ZIP code. For a foreign address, see instructions                                     |                |   |                                 |                |  |  |  |
|  | LOS GATOS, CA 95030   |                |   |                                 |                |  |  |  |
| Enter the F  | Return code for the return that this application is fo  | or (file a sep | parate application for each return)                                     |                                 | 04             |  |  |  |
| Application<br>ls For  |   | Return<br>Code | Application<br>Is For   |                                 | Return<br>Code |  |  |  |
| Form 990   |   | 01             |   |                                 |                |  |  |  |
| Form 990-E   | BL  | 02             | Form 1041-A   |                                 | 08             |  |  |  |
| Form 990-E   | <u> </u>  | 03             | Form 4720   |                                 | 09             |  |  |  |
| Form 990-F   | PF  | 04             | Form 5227   |                                 | 10             |  |  |  |
|  | Γ (section 401(a) or 408(a) trust)  | 05             | Form 6069   |                                 | 11             |  |  |  |
|  | Γ (trust other than above)  | 06             | Form 8870   |                                 | 12             |  |  |  |
| STOP! Do   | not complete Part II if you were not already grante   | ed an auton    | natic 3-month extension on a previo                                     | ously filed Form 8868.          |                |  |  |  |
|  | oks are in care of ► KENNETH LEVY   |                |   |                                 |                |  |  |  |
| Telepho  | one No. ► 408-399-8081  | FAX No. ►      |   |                                 |                |  |  |  |
| If the organization does not have an office or place of business in the United States, check this box                              |   |                |   |                                 |                |  |  |  |
| <ul><li>If this is</li></ul>   | s for a Group Return, enter the organization's four   | digit Group    | Exemption Number (GEN)  | . If this                       | is for the     |  |  |  |
| whole grou   | p, check this box 🕒 🗌 . If it is for part of the  | group, chec    | k this box► and attach a list wit                                       | h the names and EINs of         | all            |  |  |  |
|  | ne extension is for.  |                |   |                                 |                |  |  |  |
| 4 I requ   | uest an additional 3-month extension of time until  | 11/15          | , 20 <u>11</u> .  |                                 |                |  |  |  |
|  | alendar year $\ \underline{2010}$ , or other tax year beginnin  |                |   | , 20                            | _ •            |  |  |  |
| 6 If the   | tax year entered in line 5 is for less than 12 mont   | hs, check re   | eason: Initial return   | Final return                    |                |  |  |  |
| c  | hange in accounting period  |                | <del></del>   |                                 |                |  |  |  |
| 7 State in detail why you need the extension TAXPAYER RESPECTFULLY REQUESTS ADDITIONAL TIME TO                                     |   |                |   |                                 |                |  |  |  |
| GAT  | HER INFORMATION NECESSARY TO FI   | LE A COL       | MPLETE AND ACCURATE TAX   | K RETURN.                       |                |  |  |  |
|  |   |                |   |                                 |                |  |  |  |
| 8a If this application is for Form 990-BL, 990-PF, 990-T, 472 nonrefundable credits. See instructions                              |   |                | , enter the tentative tax, less any                                     | 8a \$                           | 0.             |  |  |  |
| b If this application is for Form 990-PF, 990-T, 4720, or 600 payments made. Include any prior year overpayment allowith Form 8868 |   |                | ny refundable credits and estimated credit and any amount paid previous | t tax                           | 0.             |  |  |  |
| c Balance due. Subtract line 8b from line 8a. Include your p<br>EFTPS (Electronic Federal Tax Payment System). See ins             |   |                |   | 8c \$                           | 0.             |  |  |  |
| Signature and Verification   |   |                |   |                                 |                |  |  |  |
| Under penalties<br>correct, and co   | s of perjury, I declare that I have examined this form, including accomplete, and that I am authorized to prepare this form |                |   | owledge and belief, it is true, |                |  |  |  |
| Signature >  | Title ►   | Date -         |   |                                 |                |  |  |  |
| BAA  |   |                |   |                                 | Rev 1-2011)    |  |  |  |