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

**2011**

Department of the Treasury  
Internal Revenue Service

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

**For calendar year 2011, or tax year beginning** \_\_\_\_\_, **2011, and ending** \_\_\_\_\_

**SAYA FOUNDATION**  
515 S. FIGUEROA STREET #1600  
LOS ANGELES, CA 90071

**A** Employer identification number  
20-3343622

**B** Telephone number (see the instructions)  
213-362-9300

**C** If exemption application is pending, check here

**D 1** Foreign organizations, check here

**2** Foreign organizations meeting the 85% test, check here and attach computation

**E** If private foundation status was terminated under section 507(b)(1)(A), check here

**F** If the foundation is in a 60-month termination under section 507(b)(1)(B), check here

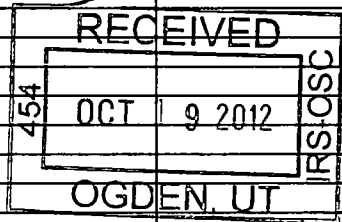
**G** Check all that apply  Initial return  Initial Return of a former public charity  
 Final return  Amended return  
 Address change  Name change

**H** Check type of organization  Section 501(c)(3) exempt private foundation  
 Section 4947(a)(1) nonexempt charitable trust  Other taxable private foundation

**I** Fair market value of all assets at end of year (from Part II, column (c), line 16)  
▶ \$ 2,241,755.

**J** Accounting method  Cash  Accrual  
 Other (specify) \_\_\_\_\_  
(Part I, column (d) must be on cash basis)

<b>Part I Analysis of Revenue and Expenses</b> (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
<b>REVENUE</b>	<b>1</b> Contributions, gifts, grants, etc. received (att sch)	664,415.			
	<b>2</b> Ck <input type="checkbox"/> if the foundn is not req to att Sch B				
	<b>3</b> Interest on savings and temporary cash investments	25,605.	25,605.	25,605.	
	<b>4</b> Dividends and interest from securities	8,162.	8,162.	8,162.	
	<b>5a</b> Gross rents				
	<b>b</b> Net rental income or (loss)				
	<b>6a</b> Net gain/(loss) from sale of assets not on line 10	-1,717.			
	<b>b</b> Gross sales price for all assets on line 6a	117,316.			
	<b>7</b> Capital gain net income (from Part IV, line 2)		0.		
	<b>8</b> Net short-term capital gain			0.	
	<b>9</b> Income modifications				
	<b>10a</b> Gross sales less returns and allowances				
<b>b</b> Less Cost of goods sold					
<b>c</b> Gross profit/(loss) (att sch)					
<b>11</b> Other income (attach schedule) SEE STATEMENT 1	-92,628.				
<b>12 Total.</b> Add lines 1 through 11	603,837.	33,767.	33,767.		
<b>ADMINISTRATIVE EXPENSES</b>	<b>13</b> Compensation of officers, directors, trustees, etc	0.			
	<b>14</b> Other employee salaries and wages				
	<b>15</b> Pension plans, employee benefits				
	<b>16a</b> Legal fees (attach schedule) SEE ST 2	702.			
	<b>b</b> Accounting fees (attach sch) SEE ST 3	6,300.			
	<b>c</b> Other prof fees (attach sch)				
	<b>17</b> Interest				
	<b>18</b> Taxes (attach schedule)(see instrs) SEE STM 4	1,200.			
	<b>19</b> Depreciation (attach sch) and depletion				
	<b>20</b> Occupancy				
<b>21</b> Travel, conferences, and meetings					
<b>22</b> Printing and publications					
<b>23</b> Other expenses (attach schedule) SEE STATEMENT 5	3,149.				
<b>24 Total operating and administrative expenses.</b> Add lines 13 through 23	11,351.				
<b>25</b> Contributions, gifts, grants paid STMT 6	428,365.			428,365.	
<b>26 Total expenses and disbursements.</b> Add lines 24 and 25	439,716.			428,365.	
<b>27 Subtract line 26 from line 12:</b>					
<b>a Excess of revenue over expenses and disbursements</b>	164,121.				
<b>b Net investment income</b> (if negative, enter -0-)		33,767.			
<b>c Adjusted net income</b> (if negative, enter -0-)			33,767.		



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Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value		
ASSETS	1	Cash – non-interest-bearing		13,452.	285,835.	285,835.
	2	Savings and temporary cash investments		1,570,624.	1,262,656.	1,262,656.
	3	Accounts receivable				
		Less: allowance for doubtful accounts				
	4	Pledges receivable				
		Less: allowance for doubtful accounts				
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)				
	7	Other notes and loans receivable (attach sch)				
		Less: allowance for doubtful accounts				
	8	Inventories for sale or use				
	9	Prepaid expenses and deferred charges				
	10a	Investments – U S and state government obligations (attach schedule)				
	b	Investments – corporate stock (attach schedule)		74,598.	288,342.	288,342.
	c	Investments – corporate bonds (attach schedule)				
	11	Investments – land, buildings, and equipment, basis				
	Less: accumulated depreciation (attach schedule)					
12	Investments – mortgage loans					
13	Investments – other (attach schedule)					
14	Land, buildings, and equipment basis					
	Less: accumulated depreciation (attach schedule)					
15	Other assets (describe SEE STATEMENT 7)		443,561.	404,922.	404,922.	
16	<b>Total assets</b> (to be completed by all filers – see the instructions. Also, see page 1, item I).		2,102,235.	2,241,755.	2,241,755.	
LIABILITIES	17	Accounts payable and accrued expenses				
	18	Grants payable				
	19	Deferred revenue				
	20	Loans from officers, directors, trustees, & other disqualified persons				
	21	Mortgages and other notes payable (attach schedule)				
	22	Other liabilities (describe)				
	23	<b>Total liabilities</b> (add lines 17 through 22)		0.	0.	
FUNDS ASSETS	Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. <input type="checkbox"/>					
	24	Unrestricted				
	25	Temporarily restricted				
	26	Permanently restricted				
	Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. <input checked="" type="checkbox"/>					
	27	Capital stock, trust principal, or current funds				
	28	Paid-in or capital surplus, or land, building, and equipment fund				
	29	Retained earnings, accumulated income, endowment, or other funds		2,102,235.	2,241,755.	
	30	<b>Total net assets or fund balances</b> (see instructions)		2,102,235.	2,241,755.	
	31	<b>Total liabilities and net assets/fund balances</b> (see instructions)		2,102,235.	2,241,755.	

Part III Analysis of Changes in Net Assets or Fund Balances			
1	Total net assets or fund balances at beginning of year – Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	2,102,235.
2	Enter amount from Part I, line 27a	2	164,121.
3	Other increases not included in line 2 (itemize)	3	
4	Add lines 1, 2, and 3	4	2,266,356.
5	Decreases not included in line 2 (itemize) SEE STATEMENT 8	5	24,601.
6	<b>Total net assets or fund balances at end of year</b> (line 4 minus line 5) – Part II, column (b), line 30	6	2,241,755.

**Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shares MLC Company)	(b) How acquired P - Purchase D - Donation	(c) Date acquired (month, day, year)	(d) Date sold (month, day, year)
1 a SEE STATEMENT 9			
b			
c			
d			
e			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a			
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Column (h) gain minus column (k), but not less than -0-) or Losses (from column (h))
(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column (i) over column (j), if any	
a			
b			
c			
d			
e			

2 Capital gain net income or (net capital loss)	[ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 ]	2	-1,717.
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6)		3	-2,493.
If gain, also enter in Part I, line 8, column (c) (see instructions). If (loss), enter -0- in Part I, line 8			

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

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

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

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?  Yes  No

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

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

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (column (b) divided by column (c))
2010			
2009			
2008			
2007			
2006			

2 Total of line 1, column (d)	2	
3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	
4 Enter the net value of noncharitable-use assets for 2011 from Part X, line 5	4	
5 Multiply line 4 by line 3	5	
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	
7 Add lines 5 and 6	7	
8 Enter qualifying distributions from Part XII, line 4	8	

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See the Part VI instructions.

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

<b>1 a</b> Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter 'N/A' on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary – see instrs)	1	675.
<b>b</b> Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b		
<b>c</b> All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, column (b)		
<b>2</b> Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	2	0.
<b>3</b> Add lines 1 and 2	3	675.
<b>4</b> Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	4	0.
<b>5 Tax based on investment income.</b> Subtract line 4 from line 3 If zero or less, enter -0-	5	675.
<b>6 Credits/Payments</b>		
<b>a</b> 2011 estimated tax pmts and 2010 overpayment credited to 2011	6 a	1,904.
<b>b</b> Exempt foreign organizations – tax withheld at source	6 b	
<b>c</b> Tax paid with application for extension of time to file (Form 8868)	6 c	
<b>d</b> Backup withholding erroneously withheld	6 d	
<b>7</b> Total credits and payments Add lines 6a through 6d	7	1,904.
<b>8</b> Enter any <b>penalty</b> for underpayment of estimated tax Check here <input type="checkbox"/> if Form 2220 is attached	8	
<b>9 Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter amount owed	9	0.
<b>10 Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	1,229.
<b>11</b> Enter the amount of line 10 to be: Credited to 2012 estimated tax <b>1,229.</b> Refunded	11	0.

**Part VII-A Statements Regarding Activities**

	Yes	No
<b>1 a</b> During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		X
<b>b</b> Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)? <i>If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities</i>		X
<b>c</b> Did the foundation file <b>Form 1120-POL</b> for this year?		X
<b>d</b> Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation ▶ \$ 0. (2) On foundation managers ▶ \$ 0.		
<b>e</b> Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ▶ \$ 0.		
<b>2</b> Has the foundation engaged in any activities that have not previously been reported to the IRS? <i>If 'Yes,' attach a detailed description of the activities</i>		X
<b>3</b> Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? <i>If 'Yes,' attach a conformed copy of the changes</i>		X
<b>4 a</b> Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
<b>b</b> If 'Yes,' has it filed a tax return on <b>Form 990-T</b> for this year?		N/A
<b>5</b> Was there a liquidation, termination, dissolution, or substantial contraction during the year? <i>If 'Yes,' attach the statement required by General Instruction T</i>		X
<b>6</b> Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?		X
<b>7</b> Did the foundation have at least \$5,000 in assets at any time during the year? <i>If 'Yes,' complete Part II, column (c), and Part XV</i>	X	
<b>8 a</b> Enter the states to which the foundation reports or with which it is registered (see instructions) ▶ N/A		
<b>b</b> If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by <i>General Instruction G</i> ? <i>If 'No,' attach explanation</i>	X	
<b>9</b> Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? <i>If 'Yes,' complete Part XIV</i>		X
<b>10</b> Did any persons become substantial contributors during the tax year? <i>If 'Yes,' attach a schedule listing their names and addresses</i>		X

**Part VII-A Statements Regarding Activities (continued)**

<p><b>11</b> 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)</p>	11		X
<p><b>12</b> Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If 'Yes,' attach statement (see instructions)</p>	12		X
<p><b>13</b> Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address <span style="float:right">▶ N/A</span></p>	13	X	
<p><b>14</b> The books are in care of ▶ <u>SATTAR &amp; ASSOCIATES, CPA'S</u> Telephone no ▶ <u>213-623-0444</u> Located at ▶ <u>515 S. FIGUEROA ST., # 1600 LOS ANGELES CA</u> ZIP + 4 ▶ <u>90071</u></p>			
<p><b>15</b> Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 – Check here and enter the amount of tax-exempt interest received or accrued during the year <span style="float:right">▶ 15</span> N/A ▶ <input type="checkbox"/> N/A</p>			
<p><b>16</b> At any time during calendar year 2011, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for Form TD F 90-22.1 If 'Yes,' enter the name of the foreign country ▶</p>	16	Yes	No
			X

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

File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.			Yes	No
<b>1 a</b>	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? <span style="float:right"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span>			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <span style="float:right"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span>			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <span style="float:right"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span>			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <span style="float:right"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span>			
	(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)? <span style="float:right"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span>			
	(6) Agree to pay money or property to a government official? ( <b>Exception.</b> Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days) <span style="float:right"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span>			
<b>b</b>	If any answer is 'Yes' to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here <span style="float:right">▶ <input type="checkbox"/></span>	<b>1 b</b>	N/A	
<b>c</b>	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 2011?	<b>1 c</b>		X
<b>2</b>	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)).			
<b>a</b>	At the end of tax year 2011, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2011? If 'Yes,' list the years ▶ 20__ , 20__ , 20__ , 20__ <span style="float:right"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span>			
<b>b</b>	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer 'No' and attach statement – see instructions)	<b>2 b</b>	N/A	
<b>c</b>	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ▶ 20__ , 20__ , 20__ , 20__			
<b>3 a</b>	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <span style="float:right"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span>			
<b>b</b>	If 'Yes,' did it have excess business holdings in 2011 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2011)	<b>3 b</b>	N/A	
<b>4 a</b>	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	<b>4 a</b>		X
<b>b</b>	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2011?	<b>4 b</b>		X

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

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

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?  Yes  No

(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?  Yes  No

(3) Provide a grant to an individual for travel, study, or other similar purposes?  Yes  No

(4) Provide a grant to an organization other than a charitable, etc, organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see instructions)  Yes  No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?  Yes  No

**b** If any answer is 'Yes' to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?  Yes  No

Organizations relying on a current notice regarding disaster assistance check here

**c** If the answer is 'Yes' to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?  Yes  No

If 'Yes,' attach the statement required by Regulations section 53.4945-5(d) N/A

**6a** Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  Yes  No

**b** Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  Yes  No

If 'Yes' to 6b, file Form 8870

**7a** At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  Yes  No

**b** If 'Yes,' did the foundation receive any proceeds or have any net income attributable to the transaction?  Yes  No

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

**1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).**

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (if not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
SALIM ADAYA 515 S. FIGUEROA ST., #1600 LOS ANGELES, CA 90071	PRESIDENT & 1.00	0.	0.	0.
YASMIN ADAYA 515 S. FIGUEROA ST., # 1600 LOS ANGELES, CA 90071	VICE PRESIDE 0	0.	0.	0.
HALIMA MOHAMMED 515 S. FIGUEROA ST., #1600 LOS ANGELES, CA 90071	VICE PRESIDE 0	0.	0.	0.
MUHAMMAD ADAYA 515 S. FIGUEROA ST., # 1600 LOS ANGELES, CA 90071	SECRETARY 1.00	0.	0.	0.

**2 Compensation of five highest-paid employees (other than those included on line 1— see instructions). If none, enter 'NONE.'**

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

Total number of other employees paid over \$50,000 0

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

**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		
-----		
-----		
-----		
-----		
-----		
-----		
-----		
<b>Total</b> number of others receiving over \$50,000 for professional services		0

**Part IX-A Summary of Direct Charitable Activities**

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

	Expenses
1 N/A	
-----	
-----	
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	
-----	
-----	
<b>Total.</b> Add lines 1 through 3	0.

BAA

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

<b>1</b> Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
<b>a</b> Average monthly fair market value of securities	<b>1a</b>	638,361.
<b>b</b> Average of monthly cash balances	<b>1b</b>	1,321,606.
<b>c</b> Fair market value of all other assets (see instructions)	<b>1c</b>	
<b>d Total</b> (add lines 1a, b, and c)	<b>1d</b>	1,959,967.
<b>e</b> Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	<b>1e</b>	0.
<b>2</b> Acquisition indebtedness applicable to line 1 assets	<b>2</b>	0.
<b>3</b> Subtract line 2 from line 1d	<b>3</b>	1,959,967.
<b>4</b> Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions)	<b>4</b>	29,400.
<b>5 Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4	<b>5</b>	1,930,567.
<b>6 Minimum investment return.</b> Enter 5% of line 5	<b>6</b>	96,528.

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

<b>1</b> Minimum investment return from Part X, line 6		<b>1</b>	96,528.
<b>2a</b> Tax on investment income for 2011 from Part VI, line 5	<b>2a</b>	675.	
<b>b</b> Income tax for 2011 (This does not include the tax from Part VI)	<b>2b</b>		
<b>c</b> Add lines 2a and 2b	<b>2c</b>		675.
<b>3</b> Distributable amount before adjustments Subtract line 2c from line 1	<b>3</b>		95,853.
<b>4</b> Recoveries of amounts treated as qualifying distributions	<b>4</b>		
<b>5</b> Add lines 3 and 4	<b>5</b>		95,853.
<b>6</b> Deduction from distributable amount (see instructions)	<b>6</b>		
<b>7 Distributable amount</b> as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	<b>7</b>		95,853.

**Part XII** Qualifying Distributions (see instructions)

<b>1</b> Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
<b>a</b> Expenses, contributions, gifts, etc — total from Part I, column (d), line 26	<b>1a</b>	428,365.
<b>b</b> Program-related investments — total from Part IX-B	<b>1b</b>	
<b>2</b> Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	<b>2</b>	
<b>3</b> Amounts set aside for specific charitable projects that satisfy the		
<b>a</b> Suitability test (prior IRS approval required)	<b>3a</b>	
<b>b</b> Cash distribution test (attach the required schedule)	<b>3b</b>	
<b>4 Qualifying distributions.</b> Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	<b>4</b>	428,365.
<b>5</b> 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)	<b>5</b>	
<b>6 Adjusted qualifying distributions.</b> Subtract line 5 from line 4	<b>6</b>	428,365.

**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

**Part XIII Undistributed Income** (see instructions)

	(a) Corpus	(b) Years prior to 2010	(c) 2010	(d) 2011
1 Distributable amount for 2011 from Part XI, line 7				95,853.
2 Undistributed income, if any, as of the end of 2011:				
a Enter amount for 2010 only			0.	
b Total for prior years. 20____, 20____, 20____		0.		
3 Excess distributions carryover, if any, to 2011:				
a From 2006	183,482.			
b From 2007	91,113.			
c From 2008	269,745.			
d From 2009	275,188.			
e From 2010	218,530.			
f Total of lines 3a through e	1,038,058.			
4 Qualifying distributions for 2011 from Part XII, line 4. ▶ \$ 428,365.				
a Applied to 2010, but not more than line 2a			0.	
b Applied to undistributed income of prior years (Election required – see instructions)		0.		
c Treated as distributions out of corpus (Election required – see instructions)	0.			
d Applied to 2011 distributable amount				95,853.
e Remaining amount distributed out of corpus	332,512.			
5 Excess distributions carryover applied to 2011 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	1,370,570.			
b Prior years' undistributed income Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b Taxable amount – see instructions		0.		
e Undistributed income for 2010. Subtract line 4a from line 2a Taxable amount – see instructions			0.	
f Undistributed income for 2011 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2012				0.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions)	0.			
8 Excess distributions carryover from 2006 not applied on line 5 or line 7 (see instructions)	183,482.			
9 Excess distributions carryover to 2012. Subtract lines 7 and 8 from line 6a	1,187,088.			
10 Analysis of line 9				
a Excess from 2007	91,113.			
b Excess from 2008	269,745.			
c Excess from 2009	275,188.			
d Excess from 2010	218,530.			
e Excess from 2011	332,512.			

**Part XIV Private Operating Foundations** (see instructions and Part VII-A, question 9) N/A

**1 a** If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2011, enter the date of the ruling ▶

**b** Check box to indicate whether the foundation is a private operating foundation described in section  4942(j)(3) or  4942(j)(5)

	Tax year				(e) Total
	(a) 2011	(b) 2010	(c) 2009	(d) 2008	
<b>2 a</b> Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed					
<b>b</b> 85% of line 2a					
<b>c</b> Qualifying distributions from Part XII, line 4 for each year listed					
<b>d</b> Amounts included in line 2c not used directly for active conduct of exempt activities					
<b>e</b> Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
<b>3</b> Complete 3a, b, or c for the alternative test relied upon					
<b>a</b> 'Assets' alternative test – enter					
<b>(1)</b> Value of all assets					
<b>(2)</b> Value of assets qualifying under section 4942(j)(3)(B)(i)					
<b>b</b> 'Endowment' alternative test – enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
<b>c</b> 'Support' alternative test – enter					
<b>(1)</b> Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
<b>(2)</b> Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
<b>(3)</b> Largest amount of support from an exempt organization					
<b>(4)</b> Gross investment income					

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

**1 Information Regarding Foundation Managers:**  
**a** List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2) )  
 SEE STATEMENT 10

**b** List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.  
 NONE

**2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc, Programs:**  
 Check here  if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

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

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- b** The form in which applications should be submitted and information and materials they should include

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- c** Any submission deadlines

**d** Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

**Part XV** Supplementary Information (continued)

**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

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





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

Department of the Treasury  
Internal Revenue Service

**Schedule of Contributors**

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

OMB No 1545-0047

**2011**

Name of the organization

SAYA FOUNDATION

Employer identification number

20-3343622

Organization type (check one)

Filers of:

Form 990 or 990-EZ

Section:

- 501(c)(\_\_\_\_) (enter number) organization  
 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation  
 527 political organization

Form 990-PF

- 501(c)(3) exempt private foundation  
 4947(a)(1) nonexempt charitable trust treated as a private foundation  
 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**

**Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

**General Rule**

- For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. (Complete Parts I and II.)

**Special Rules**

- For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33-1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc. purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc. purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc. contributions of \$5,000 or more during the year. ▶ \$ \_\_\_\_\_

**Caution:** An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF) but it **must** answer 'No' on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on Part I, line 2, of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

**BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF.**

Schedule B (Form 990, 990-EZ, or 990-PF) (2011)

Name of organization

Employer identification number

SAYA FOUNDATION

20-3343622

**Part I Contributors** (see instructions) Use duplicate copies of Part I if additional space is needed

(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	SAYA TRUST 515 S. FIGUEROA ST., # 1600 LOS ANGELES, CA 90071	\$ 525,290.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
2	M3K FOUNDATION 515 S. FIGUEROA ST., # 1600 LOS ANGELES, CA 90071	\$ 139,125.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
---	----- ----- -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
---	----- ----- -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
---	----- ----- -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
---	----- ----- -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)

Name of organization

Employer identification number

SAYA FOUNDATION

20-3343622

**Part II** **Noncash Property** (see instructions) Use duplicate copies of Part II if additional space is needed

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

Name of organization <b>SAYA FOUNDATION</b>	Employer identification number <b>20-3343622</b>
--	---

**Part III Exclusively religious, charitable, etc, individual contributions to section 501(c)(7), (8), or (10) organizations that total more than \$1,000 for the year.** Complete cols (a) through (e) and the following line entry

For organizations completing Part III, enter total of *exclusively* religious, charitable, etc, contributions of **\$1,000 or less** for the year (Enter this information once See instructions ) ▶ \$ \_\_\_\_\_ N/A  
 Use duplicate copies of Part III if additional space is needed

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	N/A		

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

# **SATTAR & ASSOCIATES**

**CERTIFIED PUBLIC ACCOUNTANTS**

October 11, 2012

Department of the Treasury  
Internal Revenue Service  
Ogden, UT 84201

**Re: Request for waiving the late filing penalty for Saya Foundation (20-3343622)**

Dear Sir/Madam:

We have filed form 8868 page 2 for the non-profit organization addressed to Internal Revenue Service, Ogden, UT 84201 on August 9, 2012.

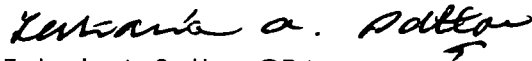
We realized that the form mailed out on August 9, 2012 and received by IRS by August 15, 2012, was not signed, after receiving the letter from IRS stating the reason for denying the second extension.

We inadvertently missed to sign the form for the entity and immediately mailed the signed form 8868 page 2 on September 9, 2012 requesting for the additional 3-Month extension by replacing the signed form with the one filed in August 9, 2012.

We have taken all possible steps to expedite the filing of the tax returns. This non-profit organization has no record of late filing of the tax return in the past. Considering the above facts we request you to please waive the penalty that may arise due to late filing of the tax return from August 15 to date.

Thanking you in advance.

Yours truly,



Zakaria A. Sattar, CPA  
Sattar & Associates CPA's

enclosure;

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

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

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

**Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).**

Enter filer's identifying number, see instructions

Type or print	Name of exempt organization or other filer see instructions	Employer identification number (EIN) or
	MEMON ORGANIZATION OF NORTH AMERICA	<input checked="" type="checkbox"/> 59-3839139
File by the extended due date for filing the return See instructions	Number, street, and room or suite number. If a P.O. box see instructions	Social security number (SSN)
	SATTAR & ASSOCIATES, CPA'S 515 S. FIGUEROA ST SUITE 1600	<input type="checkbox"/>
	City, town or post office, state, and ZIP code. For a foreign address see instructions	
	LOS ANGELES, CA 90071-3334	

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

01

Application Is For	Return Code	Application Is For	Return Code
Form 990	01		
Form 990-BL	02	Form 1041-A	08
Form 990-EZ	01	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	Form 8870	12

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

- The books are in care of Telephone No \_\_\_\_\_ FAX No \_\_\_\_\_
- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) \_\_\_\_\_ If this is for the whole group check this box  If it is for part of the group check this box  and attach a list with the names and EINs of all members the extension is for

- I request an additional 3 month extension of time until 11/15 20 12
- For calendar year 2011, or other tax year beginning \_\_\_\_\_, 20\_\_\_\_, and ending \_\_\_\_\_, 20\_\_\_\_
- If the tax year entered in line 5 is for less than 12 months, check reason  Initial return  Final return  Change in accounting period

7 State in detail why you need the extension THE TAXPAYER REQUIRES ADDITIONAL TIME TO GATHER ALL THE INFORMATION NECESSARY TO FILE A COMPLETE AND ACCURATE INCOME TAX RETURN.

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

**Signature and Verification must be completed for Part II only.**

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

Signature Elexandra Sattar Title CPA

Date 8/19/12

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

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

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

**Part II Additional (Not Automatic) 3-Month Extension of Time.** Only file the original (no copies needed).

Enter filer's identifying number, see instructions

Type or print  File by the extended due date for filing the return. See instructions	Name of exempt organization or other filer. See instructions. <b>GLOBAL JUSTICE ENDOWMENT</b>	Employer identification number (EIN) or <input checked="" type="checkbox"/> 26-2555973
	Number, street, and room or suite number. If a P.O. box, see instructions. <b>SATTAR &amp; ASSOCIATES, CPA'S                  515 S. FIGUEROA ST. SUITE 1600</b>	Social security number (SSN) <input type="checkbox"/>
	City, town, or post office, state, and ZIP code. For a foreign address, see instructions. <b>LOS ANGELES, CA 90071-3334</b>	

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

**01**

Application Is For	Return Code	Application Is For	Return Code
Form 990	01		
Form 990-BL	02	Form 1041-A	08
Form 990-EZ	01	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	Form 8870	12

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

- The books are in care of Telephone No \_\_\_\_\_ FAX No \_\_\_\_\_
- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) \_\_\_\_\_ If this is for the whole group, check this box  If it is for part of the group, check this box  and attach a list with the names and EINs of all members the extension is for

4 I request an additional 3-month extension of time until 11/15, 2012

5 For calendar year 2011, or other tax year beginning \_\_\_\_\_, 20\_\_\_\_, and ending \_\_\_\_\_, 20\_\_\_\_

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

7 State in detail why you need the extension THE TAXPAYER REQUIRES ADDITIONAL TIME TO GATHER ALL THE INFORMATION NECESSARY TO FILE A COMPLETE AND ACCURATE INCOME TAX RETURN.

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

**Signature and Verification must be completed for Part II only.**

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

Signature Lakana A. Sultan Title CPA

Date 8/9/12

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

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

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

**Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).**

Enter filer's identifying number, see instructions

Type or print	Name of exempt organization or other filer see instructions	Employer identification number (EIN) or
	SAYA FOUNDATION	<input checked="" type="checkbox"/> 20-3343622
	Number street and room or suite number. If a P.O. box see instructions	Social security number (SSN)
File by the extended due date for filing the return. See instructions	SATTAR & ASSOCIATES, CPA'S 515 S. FIGUEROA ST SUITE 1600	<input type="checkbox"/>
	City town or post office state and ZIP code. For a foreign address see instructions	
	LOS ANGELES, CA 90071-3334	

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

Application Is For	Return Code	Application Is For	Return Code
Form 990	01		
Form 990-BL	02	Form 1041-A	08
Form 990-EZ	01	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	Form 8870	12

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

- The books are in care of Telephone No \_\_\_\_\_ FAX No \_\_\_\_\_
- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return enter the organization's four digit Group Exemption Number (GEN) \_\_\_\_\_ If this is for the whole group, check this box  If it is for part of the group, check this box  and attach a list with the names and EINs of all members the extension is for

- I request an additional 3 month extension of time until 11/15, 2012
- For calendar year 2011, or other tax year beginning \_\_\_\_\_, 20\_\_\_\_, and ending \_\_\_\_\_, 20\_\_\_\_
- If the tax year entered in line 5 is for less than 12 months, check reason  Initial return  Final return  Change in accounting period

7 State in detail why you need the extension THE TAXPAYER REQUIRES ADDITIONAL TIME TO GATHER ALL THE INFORMATION NECESSARY TO FILE A COMPLETE AND ACCURATE INCOME TAX RETURN.

8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	8a \$	675.
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	8b \$	1,904.
c Balance due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	8c \$	0.

**Signature and Verification must be completed for Part II only.**

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

Signature Kawiana A. Satta Title CPA Date 8/9/12

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

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

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

**Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).**

Enter filer's identifying number, see instructions

Type or print	Name of exempt organization or other filer see instructions	Employer identification number (EIN) or
	MUSLIM PUBLIC AFFAIRS COUNCIL FOUNDATION	<input checked="" type="checkbox"/> 95-4675391
File by the extended due date for filing the return See instructions	Number street, and room or suite number If a P O box see instructions	Social security number (SSN)
	SATTAR & ASSOCIATES, CPA'S 515 S. FIGUEROA ST SUITE 1600	<input type="checkbox"/>
	City town or post office state and ZIP code For a foreign address see instructions	
	LOS ANGELES, CA 90071-3334	

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

01

Application Is For	Return Code	Application Is For	Return Code
Form 990	01		
Form 990-BL	02	Form 1041 A	08
Form 990-EZ	01	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	Form 8870	12

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

- The books are in care of Telephone No \_\_\_\_\_ FAX No \_\_\_\_\_
- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) \_\_\_\_\_ If this is for the whole group check this box  If it is for part of the group, check this box  and attach a list with the names and EINs of all members the extension is for

- I request an additional 3-month extension of time until 11/15 2012
- For calendar year 2011 or other tax year beginning 20   and ending    20
- If the tax year entered in line 5 is for less than 12 months check reason  Initial return  Final return  Change in accounting period

7 State in detail why you need the extension THE TAXPAYER REQUIRES ADDITIONAL TIME TO GATHER ALL THE INFORMATION NECESSARY TO FILE A COMPLETE AND ACCURATE INCOME TAX RETURN.

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

**Signature and Verification must be completed for Part II only.**

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

Signature Takwira A. Sultan Title CPA

Date 8/19/12

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

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

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

**Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).**

Enter filer's identifying number, see instructions

Type or print	Name of exempt organization or other filer see instructions	Employer identification number (EIN) or
	MUSLIM PUBLIC AFFAIRS COUNCIL	<input checked="" type="checkbox"/> 95-4185142
File by the extended due date for filing the return See instructions	Number street and room or suite number If a P.O. box see instructions	Social security number (SSN)
	SATTAR & ASSOCIATES, CPA'S 515 S. FIGUEROA ST. SUITE 1600	<input type="checkbox"/>
	City town or post office state and ZIP code For a foreign address see instructions	
	LOS ANGELES, CA 90071-3334	

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

Application Is For	Return Code	Application Is For	Return Code
Form 990	01		
Form 990-BL	02	Form 1041-A	08
Form 990-EZ	01	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	Form 8870	12

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

Signature and Verification must be completed for Part II only.

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

Signature Kuliana A. Sattar Title CPA

Date 8/9/12

BAA

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**Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).**

Enter filer's identifying number, see instructions

Type or print  File by the extended due date for filing the return. See instructions	Name of exempt organization or other filer. See instructions <b>M3K FOUNDATION</b>	Employer identification number (EIN) or <input checked="" type="checkbox"/> <b>20-5998535</b>
	Number, street, and room or suite number. If a P.O. box, see instructions <b>SATTAR &amp; ASSOCIATES, CPA'S 515 S. FIGUEROA ST. SUITE 1600</b>	Social security number (SSN) <input type="checkbox"/>
	City, town, or post office, state, and ZIP code. For a foreign address, see instructions <b>LOS ANGELES, CA 90071-3334</b>	

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

Application Is For	Return Code	Application Is For	Return Code
Form 990	01		
Form 990-BL	02	Form 1041-A	08
Form 990-EZ	01	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	Form 8870	12

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- I request an additional 3 month extension of time until 11/15 20 12
- For calendar year 2011 or other tax year beginning \_\_\_\_\_ 20 \_\_\_\_\_ and ending \_\_\_\_\_ 20 \_\_\_\_\_
- If the tax year entered in line 5 is for less than 12 months, check reason  Initial return  Final return  Change in accounting period

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8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	8a	\$	335.
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	8b	\$	734.
c Balance due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	8c	\$	0.

**Signature and Verification must be completed for Part II only.**

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

Signature Ladonia A. Satta Title CPA

Date 8/9/12

BAA

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

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

**Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).**

Enter filer's identifying number, see instructions

Type or print  File by the extended due date for filing the return. See instructions	Name of exempt organization or other filer. See instructions	Employer identification number (EIN) or
	DIN FAMILY FOUNDATION	<input checked="" type="checkbox"/> 95-4821888
	Number, street and room or suite number, if a P.O. box, see instructions	Social security number (SSN)
	SATTAR & ASSOCIATES, CPA'S 515 S. FIGUEROA ST. SUITE 1600	<input type="checkbox"/>
	City, town or post office, state and ZIP code. For a foreign address, see instructions	
	LOS ANGELES, CA 90071-3334	

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

04

Application Is For	Return Code	Application Is For	Return Code
Form 990	01		
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b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868	8b	\$	0.
c Balance due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions	8c	\$	0.

Signature and Verification must be completed for Part II only.

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

Signature Larkana A. Paltas Title CPA

Date 8/9/12

## SAYA FOUNDATION

20-3343622

**STATEMENT 1**  
**FORM 990-PF, PART I, LINE 11**  
**OTHER INCOME**

	(A) REVENUE PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME
OTHER INVESTMENT INCOME	\$ 1,894.		
PARTNERSHIP INCOME/ (LOSS)	-94,522.		
<b>TOTAL</b>	<b>\$ -92,628.</b>	<b>\$ 0.</b>	<b>\$ 0.</b>

**STATEMENT 2**  
**FORM 990-PF, PART I, LINE 16A**  
**LEGAL FEES**

	(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
LEGAL FEES	\$ 702.			
<b>TOTAL</b>	<b>\$ 702.</b>	<b>\$ 0.</b>	<b>\$ 0.</b>	<b>\$ 0.</b>

**STATEMENT 3**  
**FORM 990-PF, PART I, LINE 16B**  
**ACCOUNTING FEES**

	(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING & TAX RETURN PREPARATION	\$ 6,300.			
<b>TOTAL</b>	<b>\$ 6,300.</b>	<b>\$ 0.</b>	<b>\$ 0.</b>	<b>\$ 0.</b>

**STATEMENT 4**  
**FORM 990-PF, PART I, LINE 18**  
**TAXES**

	(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
FEDERAL EXCISE TAXES	\$ 1,200.			
<b>TOTAL</b>	<b>\$ 1,200.</b>	<b>\$ 0.</b>	<b>\$ 0.</b>	<b>\$ 0.</b>

## SAYA FOUNDATION

20-3343622

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

	(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
BANK CHARGES	\$ 310.			
INVESTMENT ADVISOR FEE	2,733.			
LICENSE, PERMIT & FEES	80.			
MISCELLANEOUS	26.			
<b>TOTAL</b>	<b>\$ 3,149.</b>	<b>\$ 0.</b>	<b>\$ 0.</b>	<b>\$ 0.</b>

**STATEMENT 6**  
**FORM 990-PF, PART I, LINE 25**  
**CONTRIBUTIONS, GIFTS, AND GRANTS**

CASH GRANTS AND ALLOCATIONS

CLASS OF ACTIVITY: WELFARE  
 DONEE'S NAME: CITIZENS FOUNDATION  
 DONEE'S ADDRESS: NIC BLDG., ABBASI SHAHED  
 KARACHI, PAKISTAN  
 RELATIONSHIP OF DONEE: NONE  
 ORGANIZATIONAL STATUS OF DONEE: EXEMPT ORGANIZATION  
 AMOUNT GIVEN: \$ 87,700.

CLASS OF ACTIVITY: CHARITABLE  
 DONEE'S NAME: MPAC FOUNDATION  
 DONEE'S ADDRESS: 3010 WILSHIRE BLVD.# 217  
 LOS ANGELES, CA 90010  
 RELATIONSHIP OF DONEE: NONE  
 ORGANIZATIONAL STATUS OF DONEE: EXEMPT ORGANIZATION  
 AMOUNT GIVEN: 11,000.

CLASS OF ACTIVITY: EDUCATIONAL  
 DONEE'S NAME: NEW HORIZON SCHOOL WESTSIDE  
 DONEE'S ADDRESS: 1819 SAWTELLE BLVD  
 LOS ANGELES, CA 90025  
 RELATIONSHIP OF DONEE: NONE  
 ORGANIZATIONAL STATUS OF DONEE: EXEMPT ORGANIZATION  
 AMOUNT GIVEN: 82,444.

CLASS OF ACTIVITY: CHARITABLE  
 DONEE'S NAME: NISWA ASSOCIATION  
 DONEE'S ADDRESS: P.O. BOX 1403  
 LOMITA, CA 90717  
 RELATIONSHIP OF DONEE: NONE  
 ORGANIZATIONAL STATUS OF DONEE: EXEMPT ORGANIZATION  
 AMOUNT GIVEN: 13,350.

CLASS OF ACTIVITY: CHARITABLE  
 DONEE'S NAME: ANERA  
 DONEE'S ADDRESS: 1522 K STREET NW # 202  
 WASHINGTON, DC 20005  
 RELATIONSHIP OF DONEE: NONE  
 ORGANIZATIONAL STATUS OF DONEE: EXEMPT ORGANIZATION  
 AMOUNT GIVEN: 5,000.

SAYA FOUNDATION

20-3343622

**STATEMENT 6 (CONTINUED)**  
**FORM 990-PF, PART I, LINE 25**  
**CONTRIBUTIONS, GIFTS, AND GRANTS**

CLASS OF ACTIVITY:	HEALTH/WELFARE	
DONEE'S NAME:	UMMA COMMUNITY CLINIC	
DONEE'S ADDRESS:	711 W. FLORENCE AVENUE LOS ANGELES, CA 90044	
RELATIONSHIP OF DONEE:	NONE	
ORGANIZATIONAL STATUS OF DONEE:	EXEMPT ORGANIZATION	
AMOUNT GIVEN:		\$ 15,555.
CLASS OF ACTIVITY:	RELIGIOUS/ EDUCATIONAL	
DONEE'S NAME:	ISLAMIC CENTER OF SOUTHERN CAL	
DONEE'S ADDRESS:	434 SO. VERMONT AVENUE LOS ANGELES, CA 90020	
RELATIONSHIP OF DONEE:	NONE	
ORGANIZATIONAL STATUS OF DONEE:	EXEMPT ORGANIZATION	
AMOUNT GIVEN:		26,400.
CLASS OF ACTIVITY:	EDUCATIONAL	
DONEE'S NAME:	ZINDAGI TRUST, INC.	
DONEE'S ADDRESS:	9406 WICKHAM WAY ORLANDO, PAKISTAN	
RELATIONSHIP OF DONEE:	NONE	
ORGANIZATIONAL STATUS OF DONEE:	A NON-PROFIT ORGANIZATION	
AMOUNT GIVEN:		5,000.
CLASS OF ACTIVITY:	EDUCATIONAL	
DONEE'S NAME:	NEW HORIZON SCHOOL, LA	
DONEE'S ADDRESS:	434 S VERMONT AVE. LOS ANGELES, CA 90020	
RELATIONSHIP OF DONEE:	NONE	
ORGANIZATIONAL STATUS OF DONEE:	EXEMPT ORGANIZATION	
AMOUNT GIVEN:		5,000.
CLASS OF ACTIVITY:	RELIGIOUS/ WELFARE	
DONEE'S NAME:	ISLAMIC RELIEF USA	
DONEE'S ADDRESS:	6131 ORANGETHORPE AVE, STE 450 BUENA PARK, CA 90620	
RELATIONSHIP OF DONEE:	NONE	
ORGANIZATIONAL STATUS OF DONEE:	EXEMPT ORGANIZATION	
AMOUNT GIVEN:		27,430.
CLASS OF ACTIVITY:	CHARITABLE	
DONEE'S NAME:	MEMON ORGANIZATION OF NORTH AMERICA	
DONEE'S ADDRESS:	520 W. FOOTHILL BLVD AZUSA, CA 91702	
RELATIONSHIP OF DONEE:	NONE	
ORGANIZATIONAL STATUS OF DONEE:	EXEMPT ORGANIZATION	
AMOUNT GIVEN:		20,000.
CLASS OF ACTIVITY:	EDUCATIONAL	
DONEE'S NAME:	DEVELOPMENT IN LITERACY	
DONEE'S ADDRESS:	8001 E. ROOPER STREET LONG BEACH, CA 90808	
RELATIONSHIP OF DONEE:	NONE	
ORGANIZATIONAL STATUS OF DONEE:	EXEMPT ORGANIZATION	
AMOUNT GIVEN:		5,250.
CLASS OF ACTIVITY:	EDUCATIONAL	

## SAYA FOUNDATION

20-3343622

**STATEMENT 6 (CONTINUED)**  
**FORM 990-PF, PART I, LINE 25**  
**CONTRIBUTIONS, GIFTS, AND GRANTS**

DONEE'S NAME:	CENTER FOR GLOBAL UNDERSTANDING	
DONEE'S ADDRESS:	640 MAPLE STREET TORRANCE, CA 90503	
RELATIONSHIP OF DONEE:	NONE	
ORGANIZATIONAL STATUS OF DONEE:	EXEMPT ORGANIZATION	
AMOUNT GIVEN:		\$ 10,000.
CLASS OF ACTIVITY:		
DONEE'S NAME:	ACLU FOUNDATION	
DONEE'S ADDRESS:	1313 W. 8TH STREET LOS ANGELES, CA 90017	
RELATIONSHIP OF DONEE:	NONE	
ORGANIZATIONAL STATUS OF DONEE:	A NON-PROFIT ORGANIZATION	
AMOUNT GIVEN:		5,000.
CLASS OF ACTIVITY:	EDUCATIONAL	
DONEE'S NAME:	THE ARCHER SCHOOL FOR GIRLS	
DONEE'S ADDRESS:	11725 W SUNSET BLVD LOS ANGELES, CA 90049	
RELATIONSHIP OF DONEE:	NONE	
ORGANIZATIONAL STATUS OF DONEE:	EXEMPT ORGANIZATION	
AMOUNT GIVEN:		20,000.
CLASS OF ACTIVITY:	RELIGIOUS/ EDUCATIONAL	
DONEE'S NAME:	ISLAMIC CENTER SAN GABRIEL VALLEY	
DONEE'S ADDRESS:	19164 E WALNUT DR. NORTH ROWLAND HEIGHTS, CA 91748	
RELATIONSHIP OF DONEE:	NONE	
ORGANIZATIONAL STATUS OF DONEE:	EXEMPT ORGANIZATION	
AMOUNT GIVEN:		5,000.
CLASS OF ACTIVITY:	PUBLIC AWAERNESS	
DONEE'S NAME:	PAKISTANI AMERICAN LEADERSHIP CENTER	
DONEE'S ADDRESS:	236 MASSACHUSETTS AVE., NE, STE 207 WASHINGTON, DC 20002	
RELATIONSHIP OF DONEE:	NONE	
ORGANIZATIONAL STATUS OF DONEE:	A NON-PROFIT ORGANIZATION	
AMOUNT GIVEN:		12,000.
CLASS OF ACTIVITY:	HEALTH/EDUCATION	
DONEE'S NAME:	SHINE HUMANITY	
DONEE'S ADDRESS:	1131 E MAIN STREET, STE 207A TUSTIN, CA 92780	
RELATIONSHIP OF DONEE:	NONE	
ORGANIZATIONAL STATUS OF DONEE:	A NON-PROFIT ORGANIZATION	
AMOUNT GIVEN:		5,000.
CLASS OF ACTIVITY:		
DONEE'S NAME:	VARIOUS DONATIONS LESS THAN \$5000	
DONEE'S ADDRESS:		
RELATIONSHIP OF DONEE:		
ORGANIZATIONAL STATUS OF DONEE:		
AMOUNT GIVEN:		44,236.
CLASS OF ACTIVITY:	CHARITABLE	
DONEE'S NAME:	ICNA RELIEF USA	

SAYA FOUNDATION

20-3343622

**STATEMENT 6 (CONTINUED)**  
**FORM 990-PF, PART I, LINE 25**  
**CONTRIBUTIONS, GIFTS, AND GRANTS**

DONEE'S ADDRESS:	87-91 144TH STREET JAMAICA, NY 11435	
RELATIONSHIP OF DONEE:	NONE	
ORGANIZATIONAL STATUS OF DONEE:	A NON-PROFIT ORGANIZATION	
AMOUNT GIVEN:		\$ 5,000.
CLASS OF ACTIVITY:	CHARITABLE	
DONEE'S NAME:	INTERNATIONAL INSTITUTE OF TOLERANCE	
DONEE'S ADDRESS:	305 WEST TORRANCE BLVD, UNIT G CARSON, CA 90745	
RELATIONSHIP OF DONEE:	NONE	
ORGANIZATIONAL STATUS OF DONEE:	A NON-PROFIT ORGANIZATION	
AMOUNT GIVEN:		18,000.
		TOTAL \$ <u>428,365.</u>

**STATEMENT 7**  
**FORM 990-PF, PART II, LINE 15**  
**OTHER ASSETS**

	<u>BOOK VALUE</u>	<u>FAIR MARKET VALUE</u>
INV-WP X ACCESS FUND, LLC	\$ 231,010.	\$ 231,010.
UBS PAULSON ADVANTAGE, LLC	173,912.	173,912.
TOTAL	<u>\$ 404,922.</u>	<u>\$ 404,922.</u>

**STATEMENT 8**  
**FORM 990-PF, PART III, LINE 5**  
**OTHER DECREASES**

UNREALIZED LOSS	\$ 24,601.
TOTAL	<u>\$ 24,601.</u>

**STATEMENT 9**  
**FORM 990-PF, PART IV, LINE 1**  
**CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME**

ITEM	(A) DESCRIPTION	(B) HOW ACQUIRED	(C) DATE ACQUIRED	(D) DATE SOLD
1	159.619 PIMCO LOW DURATION	PURCHASED	VARIOUS	1/06/2011
2	80.773 JANUS FLEXIBLE BOND	PURCHASED	VARIOUS	1/18/2011
3	28.000 ISHARES TR S&P	PURCHASED	VARIOUS	1/26/2011
4	421.440 WASATCH EMERGING	PURCHASED	VARIOUS	1/26/2011
5	81.323 JANUS FLEXIBLE BOND	PURCHASED	VARIOUS	3/10/2011
6	106.848 PIMCO REAL RETURN	PURCHASED	VARIOUS	3/10/2011
7	294.446 TCW EMERGING	PURCHASED	VARIOUS	3/10/2011
8	421.441 WASATCH EMERGING	PURCHASED	VARIOUS	3/10/2011
9	57.000 ISHARES TR RUSSELL	PURCHASED	VARIOUS	3/16/2011

SAYA FOUNDATION

20-3343622

STATEMENT 9 (CONTINUED)  
 FORM 990-PF, PART IV, LINE 1  
 CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

ITEM	(A) DESCRIPTION	(B) HOW ACQUIRED	(C) DATE ACQUIRED	(D) DATE SOLD
10	41.000 ISHARES TR RUSSELL	PURCHASED	VARIOUS	3/16/2011
11	25,000 ISHARES TR S&P 500	PURCHASED	VARIOUS	3/17/2011
12	53.174 PIMCO HIGH YIELD	PURCHASED	VARIOUS	4/04/2011
13	4.300 FAIRHOLME FUND	PURCHASED	VARIOUS	5/04/2011
14	38.000 ISHARES TR S&P 500	PURCHASED	VARIOUS	5/25/2011
15	84.000 ISHARES TR RUSSELL	PURCHASED	VARIOUS	5/26/2011
16	119.878 FIDELITY ADVISOR	PURCHASED	VARIOUS	5/31/2011
17	90.000 ISHARES TR S&P 500	PURCHASED	VARIOUS	6/21/2011
18	208.456 PUTNAM DIVERSIFIED	PURCHASED	VARIOUS	6/29/2011
19	243.658 PIMCO HIGH YIELD	PURCHASED	VARIOUS	7/05/2011
20	227.000 BLACKROCK HIGH	PURCHASED	VARIOUS	7/08/2011
21	208.456 PUTNAM DIVERSIFIED	PURCHASED	VARIOUS	7/20/2011
22	30.000 ISHARES TR S&P	PURCHASED	VARIOUS	7/29/2011
23	130.371 FBR SMALL CAP	PURCHASED	VARIOUS	8/03/2011
24	52.914 OPPENHEIMER DEV	PURCHASED	VARIOUS	8/03/2011
25	0.969 PUTNAM DIVERSIFIED	PURCHASED	VARIOUS	8/04/2011
26	39.000 ISHARES TR S&P 500	PURCHASED	VARIOUS	8/05/2011
27	52.000 ISHARES TR S&P	PURCHASED	VARIOUS	8/05/2011
28	34.000 ISHARES TR RUSSELL	PURCHASED	VARIOUS	8/08/2011
29	685.987 BLACKROCK HIGH	PURCHASED	VARIOUS	8/09/2011
30	466.613 GOLDMAN SACHS HIGH	PURCHASED	VARIOUS	8/09/2011
31	248.082 PIMCO HIGH YIELD	PURCHASED	VARIOUS	8/09/2011
32	407.150 PIONEER GLOBAL HIGH	PURCHASED	VARIOUS	8/09/2011
33	30.485 BLACKROCK	PURCHASED	VARIOUS	9/06/2011
34	39.735 FIDELITY SELECT	PURCHASED	VARIOUS	9/06/2011
35	13.000 SPDR GOLD TR GOLD	PURCHASED	VARIOUS	9/12/2011
36	59.000 FIDELITY SELECT	PURCHASED	VARIOUS	10/04/2011
37	275.244 RYDEX INVERSE S&P	PURCHASED	VARIOUS	10/05/2011
38	0.603 FIDELITY SELECT	PURCHASED	VARIOUS	10/06/2011
39	363.073 ULTRA BEAR PRO FUND	PURCHASED	VARIOUS	10/25/2011
40	30.484 BLACKROCK	PURCHASED	VARIOUS	11/02/2011
41	93.344 FIDELITY REAL ESTATE	PURCHASED	VARIOUS	11/02/2011
42	212.716 GLOBAL RESOURCES	PURCHASED	VARIOUS	11/02/2011
43	31.000 ISHARES TR S&P 500	PURCHASED	VARIOUS	11/04/2011
44	14.000 SPDR GOLD TR GOLD	PURCHASED	VARIOUS	11/04/2011
45	6.993 MATTHEWS ASIAN	PURCHASED	VARIOUS	11/25/2011
46	49.183 IVY SCIENCE & TECHNOLOGY	PURCHASED	VARIOUS	11/28/2011
47	29.657 LAZARD EMERGING MKTS	PURCHASED	VARIOUS	1/31/2011
48	29.382 OPPENHEIMER DEV	PURCHASED	VARIOUS	1/31/2011
49	22.037 OPPENHEIMER DEV	PURCHASED	VARIOUS	2/10/2011
50	96.505 MATTHEWS ASIAN	PURCHASED	VARIOUS	3/17/2011
51	70.364 FAIRHOLME FUND	PURCHASED	VARIOUS	5/04/2011
52	13.196 OPPENHEIMER DEV	PURCHASED	VARIOUS	8/03/2011
53	35.835 YACKTMAN FOCUSED FD	PURCHASED	VARIOUS	8/26/2011
54	90.972 MATTHEWS ASIAN	PURCHASED	VARIOUS	11/25/2011

ITEM	(E) GROSS SALES	(F) DEPREC. ALLOWED	(G) COST BASIS	(H) GAIN (LOSS)	(I) FMV 12/31/69	(J) ADJ. BAS. 12/31/69	(K) EXCESS (I) - (J)	(L) GAIN (LOSS)
1	1,654.		1,685.	-31.				\$ -31.
2	843.		848.	-5.				-5.
3	2,554.		2,406.	148.				148.
4	1,028.		813.	215.				215.
5	850.		855.	-5.				-5.
6	1,228.		1,260.	-32.				-32.

SAYA FOUNDATION

20-3343622

STATEMENT 9 (CONTINUED)  
 FORM 990-PF, PART IV, LINE 1  
 CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

ITEM	(E) GROSS SALES	(F) DEPREC. ALLOWED	(G) COST BASIS	(H) GAIN (LOSS)	(I) FMV 12/31/69	(J) ADJ. BAS. 12/31/69	(K) EXCESS (I) - (J)	(L) GAIN (LOSS)
7	3,277.		3,342.	-65.				\$ -65.
8	1,007.		813.	194.				194.
9	3,374.		3,186.	188.				188.
10	3,285.		3,269.	16.				16.
11	3,256.		3,225.	31.				31.
12	503.		491.	12.				12.
13	145.		128.	17.				17.
14	5,114.		5,014.	100.				100.
15	5,081.		5,041.	40.				40.
16	3,288.		3,346.	-58.				-58.
17	4,090.		4,190.	-100.				-100.
18	1,672.		1,701.	-29.				-29.
19	2,286.		2,249.	37.				37.
20	1,105.		1,051.	54.				54.
21	1,661.		1,700.	-39.				-39.
22	3,234.		3,362.	-128.				-128.
23	2,310.		2,479.	-169.				-169.
24	1,846.		1,633.	213.				213.
25	8.		8.	0.				0.
26	4,944.		4,982.	-38.				-38.
27	4,739.		4,934.	-195.				-195.
28	2,908.		3,100.	-192.				-192.
29	3,224.		3,179.	45.				45.
30	3,238.		3,390.	-152.				-152.
31	2,235.		2,290.	-55.				-55.
32	4,165.		4,318.	-153.				-153.
33	1,068.		1,243.	-175.				-175.
34	2,056.		2,298.	-242.				-242.
35	2,293.		2,232.	61.				61.
36	2,743.		3,413.	-670.				-670.
37	4,707.		4,756.	-49.				-49.
38	29.		35.	-6.				-6.
39	2,066.		2,291.	-225.				-225.
40	1,038.		1,243.	-205.				-205.
41	2,479.		2,548.	-69.				-69.
42	2,142.		2,476.	-334.				-334.
43	3,805.		4,003.	-198.				-198.
44	2,323.		2,260.	63.				63.
45	109.		110.	-1.				-1.
46	1,373.		1,680.	-307.				-307.
47	623.		542.	81.				81.
48	1,012.		907.	105.				105.
49	757.		680.	77.				77.
50	1,652.		1,511.	141.				141.
51	2,380.		2,088.	292.				292.
52	460.		407.	53.				53.
53	636.		594.	42.				42.
54	1,413.		1,428.	-15.				-15.
							TOTAL \$	<u>-1,717.</u>

STATEMENT 10  
FORM 990-PF, PART XV, LINE 1A  
FOUNDATION MANAGERS - 2% OR MORE CONTRIBUTORS

SALIM ADAYA  
YASMIN ADAYA

## 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.**

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

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

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

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

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

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

Enter filer's identifying number, see instructions

<b>Type or print</b>	Name of exempt organization or other filer, see instructions	Employer identification number (EIN) or
	SAYA FOUNDATION	<input checked="" type="checkbox"/> 20-3343622
	Number, street, and room or suite number. If a P O box, see instructions	Social security number (SSN)
	515 S. FIGUEROA STREET #1600	<input type="checkbox"/>
	City, town or post office, state, and ZIP code. For a foreign address, see instructions	
	LOS ANGELES, CA 90071	

Enter the Return code for the return that this application is for (file a separate application for each return) **04**

Application Is For	Return Code	Application Is For	Return Code
Form 990	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 990-EZ	01	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	Form 8870	12

- The books are in the care of ▶ SATTAR & ASSOCIATES, CPA'S -----

Telephone No ▶ 213-623-0444 ----- FAX No ▶ 213-362-0442 -----

- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) \_\_\_\_\_. If this is for the whole group, check this box . If it is for part of the group, check this box  and attach a list with the names and EINs of all members the extension is for

**1** I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until 8/15, 2012, to file the exempt organization return for the organization named above. The extension is for the organization's return for

- ▶  calendar year 2011 or
- ▶ tax year beginning \_\_\_\_\_, 20\_\_\_\_, and ending \_\_\_\_\_, 20\_\_\_\_

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

<b>3a</b> 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>3a</b>	\$	675.
<b>b</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.	<b>3b</b>	\$	1,904.
<b>c Balance due.</b> Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	<b>3c</b>	\$	0.

**Caution.** If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions

- If you are filing for an **Additional (Not Automatic) 3-Month Extension, complete only Part II** and check this box
- Note.** Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868
- If you are filing for an **Automatic 3-Month Extension, complete only Part I** (on page 1)

**Part II Additional (Not Automatic) 3-Month Extension of Time.** Only file the original (no copies needed).

Enter filer's identifying number, see instructions

<p><b>Type or print</b></p> <p>File by the extended due date for filing the return. See instructions</p>	Name of exempt organization or other filer, see instructions	Employer identification number (EIN) or
	SAYA FOUNDATION	<input checked="" type="checkbox"/> 20-3343622
	Number, street, and room or suite number. If a P.O. box, see instructions	Social security number (SSN)
	SATTAR & ASSOCIATES, CPA'S 515 S. FIGUEROA ST. SUITE 1600	<input type="checkbox"/>
	City, town or post office, state, and ZIP code. For a foreign address, see instructions	
	LOS ANGELES, CA 90071-3334	

Enter the Return code for the return that this application is for (file a separate application for each return) 04

Application Is For	Return Code	Application Is For	Return Code
Form 990	01		
Form 990-BL	02	Form 1041-A	08
Form 990-EZ	01	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	Form 8870	12

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

- The books are in care of  SATTAR & ASSOCIATES, CPA'S  
Telephone No.  213-623-0444 FAX No  213-362-0442
- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) \_\_\_\_\_ If this is for the whole group, check this box  If it is for part of the group, check this box  and attach a list with the names and EINs of all members the extension is for

- 4 I request an additional 3-month extension of time until 11/15, 2012
- 5 For calendar year 2011, or other tax year beginning \_\_\_\_\_, 20\_\_\_\_, and ending \_\_\_\_\_, 20\_\_\_\_
- 6 If the tax year entered in line 5 is for less than 12 months, check reason  Initial return  Final return  Change in accounting period

7 State in detail why you need the extension THE TAXPAYER REQUIRES ADDITIONAL TIME TO GATHER ALL THE INFORMATION NECESSARY TO FILE A COMPLETE AND ACCURATE INCOME TAX RETURN.

<b>8a</b> 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>8a</b> \$ 675.
<b>b</b> If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868	<b>8b</b> \$ 1,904.
<b>c Balance due.</b> Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions	<b>8c</b> \$ 0.

**Signature and Verification must be completed for Part II only.**

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

Signature  Title  SECRETARY Date