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Return of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation Note The foundation may be able to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0052

		nt of the Treasury	N	ote The foundation	n may t	reated as a Privat	t e Founda <u>return t</u> o sati	ation sfy state repo	rting requirements	<u> 2011</u>
		ndar year 2011 (, and e			
Na	me o	f foundation							A Employer identification	n number
R	OB	ERT & M	ARY S	TRANAHAN						
_F	AM	ILY FOU	NDATI	ON					48-6393036	5
Nu	nber	and street (or PO b	ox number if	mail is not delivered	to street	address)		Room/suite	B Telephone number	
7	50	4 VIA D	EL MA	R STREET		·-··			(702) 655-	-0830
		own, state, and 2							C If exemption application is a	pending, check here
_ <u>I</u>	AS	VEGAS,	NV	89131		·				
G (Chec	k all that apply		Initial return		Initial return of a fe	ormer public o	charity	D 1. Foreign organization	s, check here 🕨 🗀
				Final return		Amended return			Forman organizations m	setups the 85% test
				Address change		Name change			Foreign organizations m 2. check here and attach c	omputation Lest,
H_C	_	k type of organiz				empt private foundation			E If private foundation sta	
<u></u>				pt charitable trust		Other taxable private found		<u> </u>	under section 507(b)(1)(A), check here
		arket value of all		nd of year J A		ng method X Cash	Accr	ual	F If the foundation is in a	
		Part II, col (c),		255 0		her (specify)			under section 507(b)(1)(B), check here
 _	\$	Analysis of D				mn (d) must be on cash	basis.)			(4)
P	art	(The total of amo	unts in colur	d Expenses mns (b), (c), and (d) ma	y not	(a) Revenue and expenses per books		vestment ome	(c) Adjusted net	(d) Disbursements for charitable purposes
	Γ.	necessanly equa			_	· · · · · -				(cash basis only)
	1			s, etc , received		25,000.			N/A	ļ
Revenue	2	Interest on saving cash investments		n is not required to attach So	ch B				<u> </u>	·• · · · · · · · · · · · · · · · · · ·
	3					41.		41.		STATEMENT 1
	4	Dividends and	merest iro	m secunites		41.		41.		OTTALIBITION T
	l .	Gross rents Net rental income	())							-
	١.		` ' -					·#•·*	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	! • · · · · · · · · · · · · · · · · · ·
	l t	Green ealer proce	rom sale of a for all	assets not on line 10						-
	7			Part IV line 2)		·		0.	,'1' ',('11' (n111111'+1-11'), -/-	
æ	8	Net short-term		· · · · ·				<u></u>		<u> </u>
	9	Income modific	. •	•		1. ''!{ '!'	**********	-Hliste on misse		
	10a	Grace cales less i						·····		
		Less Cost of goo	ds sold				************************	***************************************	••••••••••••••••••••••••••••••••••••••	**************************************
	1	Gross profit or	-					***************************************		
	11	Other income	• •							
	12	Total. Add line	s 1 througi	h 11		25,041.		41.	,	
	13	Compensation of	officers, dire	ctors, trustees, etc		0.		0.		0
	14	Other employed	salaries a	nd wages						
"	15	Pension plans,	employee	benefits					, as a second	
Ses	16a	Legal fees						CEN	ED	
ber	b	Accounting fee	\$	STMT	2	1,024.	111	-O-D.		0
Ĕ	0	Other profession	nal fees			_			2012	
trative	17	Interest			_		E D	EC 0 3	2012	ļ
tra	18	Taxes		STMT	3	8.		0.		0
inis	19	Depreciation ar	d depletio	n			1	GDEN	LUT	
Administrative Expenses	20	Occupancy								
_	21	Travel, confere		meetings						
æ	22	Printing and pu								
Ē	23	Other expenses								
perating and	24	Total operating				1 022		^		0
Operating and	1	expenses. Add		-		1,032. 25,000.		0.		25,000
) _	25		-			25,000.				23,000
	26	•		ursements.		26,032.		0.		25,000
_	27	Add lines 24 ar Subtract line 26		12		20,032.			1	23,000
						<991.	>			
	1		•	ses and disbursement f negative, enter -0-)	S		<u> </u>	41.	· ··· · · · · · · · · · · · · · · · ·	
	1	Net investmen Adjusted net ir						41.	N/A	
1235	01 2-11			eduction Act Notice	0 500	instructions	L		1 14/11	Form 990-PF (2011

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Doet	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End o	f year
Pari	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash - non-interest-bearing			
2	Savings and temporary cash investments	283,346.	282,355.	282,355.
3	Accounts receivable			
	Less allowance for doubtful accounts			
4	Pledges receivable ►			
-	Less allowance for doubtful accounts			
5	Grants receivable			
6	Receivables due from officers, directors, trustees, and other			
	disqualified persons			
7	Other notes and loans receivable			
	Less allowance for doubtful accounts		·	
<u>ه</u> ا				
Assets & a	Prepaid expenses and deferred charges			
¥ 10a	Investments - U S and state government obligations			-
1	Investments - corporate stock			
1	Investments - corporate bonds			
111	_			
	Less accumulated depreciation	ĺ	j	
12	Investments - mortgage loans			
13	Investments - other			
14	Land, buildings, and equipment basis ► 7,092.			
	Land, buildings, and equipment basis ► 7,092. Less accumulated depreciation STMT 4 ► 7,092.			
15	Other assets (describe			
16	Total assets (to be completed by all filers)	283,346.	282,355.	282,355.
17		,		
18	Grants payable			
مدان	Deferred revenue			
Liabilities 51	Loans from officers, directors, trustees, and other disqualified persons			
·중 21	Mortgages and other notes payable			
⊐ ₂₂	Other liabilities (describe)			
	,			
23	Total llabilities (add lines 17 through 22)	0.	0.	
	Foundations that follow SFAS 117, check here			
	and complete lines 24 through 26 and lines 30 and 31.			
8 24	Unrestricted			
<u> </u>	Temporarily restricted			
6 26	Permanently restricted			
Net Assets or Fund Balances 0.00	Foundations that do not follow SFAS 117, check here			
Ē.	and complete lines 27 through 31.			
တ္က 27	Capital stock, trust principal, or current funds	0.	0.	
මූ 28	Paid-in or capital surplus, or land, bldg, and equipment fund	0.	0.	
2 29	Retained earnings, accumulated income, endowment, or other funds	283,346.	282,355.	
§ 30	Total net assets or fund balances	283,346.	282,355.	
31	Total liabilities and net assets/fund balances	283,346.	282,355.	
Part	Analysis of Changes in Net Assets or Fund B	alances		
	I net assets or fund balances at beginning of year - Part II, column (a), line	30		202 246
	st agree with end-of-year figure reported on prior year's return)		1	283,346.
	r amount from Part I, line 27a		2	<991.>
	r increases not included in line 2 (itemize)	-	3	0.
	lines 1, 2, and 3		4	282,355.
	reases not included in line 2 (itemize)		5	0.
6 Tota	I net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30	6	282,355.

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Part IV Capital Gains a	nd Losses for Tax on In	vestmen	t Income				<u>-</u>		
	be the kind(s) of property sold (e g ehouse, or common stock, 200 shs			(b) How a P - Puro D - Don	chase '	c) Date acqu (mo , day,)		(d) Date (mo , da	
1a									
b NON	IE			1	_				
C									
d									
8			-						
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale		······································	(h) Gain ((e) plus (f)		-	
a									
b									
C	•				,,			-	
d									
					···-·-				
Complete only for secret chayge	s coup to column (b) and curred by	the foundation	on 10/21/60		(1)		<u></u>		
Complete only for assets snowing	gain in column (h) and owned by t		- 			Gains (Col. (k), but not k			
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col (i) col (j), if any			Losses (fro			
a									
b									
C						_			
d						·			
е				.					
2 Capital gain net income or (net cap	etal loss) { If gain, also enter If (loss), enter =0.	r in Part I, line - in Part I, line	7 7	} _2					
3 Net short-term capital gain or (loss	`								
If gain, also enter in Part I, line 8, c		10 (0)]					
If (loss), enter -0- in Part I, line 8	(0)			∫ 3					
Part V Qualification Ur	nder Section 4940(e) for	Reduced	Tax on Net	Investr	nent Inco	me			
(For optional use by domestic private	foundations subject to the section 4	4940(a) tax on	net investment in	come)					
are of optional and by commonly private				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
lf section 4940(d)(2) applies, leave thi	s part blank								
Man the foundation liable for the east	on 4040 toy on the distributable om	sount of any w	oor in the been no	riod?			_	7 vac	X No
Was the foundation liable for the section of the se			•	ilou r			L	163	INU
If "Yes," the foundation does not qualif Enter the appropriate amount in ea									
	ach column for each year, see instru	uctions before	making any entir			η	(d)	=-	
(a) Base period years	(b)	t white no	Not value of no	(C)	-uee eeeste	l .	Distributio	n ratio	<i>(</i> -33
Calendar year (or tax year beginnin			Net value of no				(b) divided		<u>, ,, , , , , , , , , , , , , , , , , ,</u>
2010		2,000.			5,305				74499
2009		3,992.	·		5,661.				81147
2008	2	6,000.		31	.5 , 397.	<u> </u>			82436
2007	2	5,000.		28	83,875			.08	88067
2006	2	0,500.		30	1,449.	,		.06	68005
2 Total of line 1, column (d)						2		.39	94154
3 Average distribution ratio for the 5	-vear base period - divide the total (on line 2 by 5	or by the number	of veare		-			
		on line 2 by 5,	or by the number	UI years				. 01	78831
the foundation has been in existen	ce it less than 5 years					3		- • •	10031
						1.1		270	063
4 Enter the net value of noncharitable	e-use assets for 2011 from Part X, I	line 5				4		219	<u>,063.</u>
5 Multiply line 4 by line 3						5		21	<u>,999.</u>
6 Enter 1% of net investment income	e (1% of Part I, line 27b)					6			0.
	•								
7 Add lines 5 and 6						7		21	,999.
B Enter qualifying distributions from	Part XII, line 4					8		25	,000.
If line 8 is equal to or greater than I See the Part VI instructions	line 7, check the box in Part VI, line	1b, and comp	olete that part usin	ıg a 1% tax	rate				

By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law

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)

year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes," complete Part XIV

10 Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses

9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar

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X

X

X

6

7

8b

10

By language in the governing instrument, or

If "Yes," complete Part II, col. (c), and Part XV.

7 Did the foundation have at least \$5,000 in assets at any time during the year?

8a Enter the states to which the foundation reports or with which it is registered (see instructions)

of each state as required by General Instruction G? If "No," attach explanation

remain in the governing instrument?

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X

N/A

N/A

🗌 Yes 💢 No

2b

3b

4a

4h

statement - see instructions)

during the year?

c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here

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

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,

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time

Form 4720, to determine if the foundation had excess business holdings in 2011.)

had not been removed from jeopardy before the first day of the tax year beginning in 2011?

hours per week devoted to position allowances NONE 0

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

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)		
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."		_
(a) Name and address of each person paid more than \$50,000 (b) Type of service	ce (c) Compensati	on
NONE		
		_
Total number of others receiving over \$50,000 for professional services	•	0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses	
1 CONTRIBUTED TO THE NEEDS OF THE HANDICAP BY CONTRIBUTING TO EXEMPT ORGANIZATIONS ESTABLISHED TO MEET THOSE NEEDS.	<u> </u>	
EMERIT CHOINTENTIONS BETTERDIONED TO THEFT THOSE MEDICO.	0) .
2		
3		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount	
1 NO PROGRAM RELATED INVESTMENTS WERE MADE DURING THE YEAR.		
		<u>.</u>
2		
All other program-related investments. See instructions		_
3		
Total. Add lines 1 through 3).
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P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations, se	ee instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
а	Average monthly fair market value of securities	1a	0.
b	Average of monthly cash balances	1b	0. 283,313.
Ç	Fair market value of all other assets	10	
d	Total (add lines 1a, b, and c)	1d	283,313.
8	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0 •		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	283,313.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	4,250.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	279,063.
6	Minimum investment return. Enter 5% of line 5	6	13,953.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part)	nd certain	
1	Minimum investment return from Part X, line 6	1	13,953.
2a	Tax on investment income for 2011 from Part VI, line 5		
b	Income tax for 2011 (This does not include the tax from Part VI)		
ε	Add lines 2a and 2b	20	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	13,953.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	13,953.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	13,953.
P	art XII Qualifying Distributions (see instructions)	· · · · · · · · · · · · · · · · · · ·	•
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	25,000.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	25,000.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		-
	income Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	25,000.
	Note: The amount on line 6 will be used in Part V. column (b) in subsequent years when calculating whether the foundation is	nualifies for th	he section

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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				13,953.
2 Undistributed income, if any, as of the end of 2011	***************************************			
a Enter amount for 2010 only			0.	
b Total for prior years		0.		
3 Excess distributions carryover, if any, to 2011				!!!!!! '!!!!!!!- ;!!!!!. !!' !!!!!!!
a From 2006 5,428.				
b From 2007 11,806.				
c From 2008 9,230.				
d From 2009 9,225.				
e From 2010 7,235.				
f Total of lines 3a through e	42,924.			
4 Qualifying distributions for 2011 from				
Part XII, line 4 ► \$ 25,000.				
a Applied to 2010, but not more than line 2a		<u></u>	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.		··········	13,953.
d Applied to 2011 distributable amount	11,047.	······		13,933.
e Remaining amount distributed out of corpus	0.	 '- 		0.
5 Excess distributions carryover applied to 2011 (If an amount appears in column (d), the same amount must be shown in column (a))	V •			
6 Enter the net total of each column as indicated below.	***			
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	53,971.			
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		0.		
amount - see instructions		U •		
e Undistributed income for 2010 Subtract line			0.	
4a from line 2a Taxable amount - see instr		······································	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)	0.			
8 Excess distributions carryover from 2006				
not applied on line 5 or line 7	5,428.			
9 Excess distributions carryover to 2012.				
Subtract lines 7 and 8 from line 6a	48,543.			
10 Analysis of line 9				
a Excess from 2007 11,806.				
b Excess from 2008 9, 230.				
c Excess from 2009 9, 225.				
d Excess from 2010 7, 235.				
e Excess from 2011 11,047.				Form 990-PF (2011)
				Earm 44(1_DF /2011)

ROBERT	& MARY STRA	NAHAN			
	FOUNDATION			48-63	93036 Page 10
Part XIV Private Operating	Foundations (see ins	structions and Part V	II-A, question 9)	N/A	
1 a If the foundation has received a ruling		· · · · · · · · · · · · · · · ·			
foundation, and the ruling is effective		-	▶└▃		
b Check box to indicate whether the fou		ig foundation described		4942(j)(3) or 49	42())(5)
2 a Enter the lesser of the adjusted net	Tax year	(h) 0010	Prior 3 years	(4) 0000	(a) Total
income from Part I or the minimum	(a) 2011	(b) 2010	(c) 2009	(d) 2008	(e) Total
investment return from Part X for					
each year listed		· · · · · · · · · · · · · · · · · · ·	 		
b 85% of line 2a	ļ				
c Qualifying distributions from Part XII,					
line 4 for each year listed d Amounts included in line 2c not			 		
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly	-				
for active conduct of exempt activities			1		
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					
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on securities loans (section					
512(a)(5)), or royalties)					·
(2) Support from general public					
and 5 or more exempt organizations as provided in					
section 4942(j)(3)(B)(III)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income					•
			if the foundation	on had \$5,000 or mo	ore in assets
	the year-see instr	ucuons.)			
1 Information Regarding Foundation	-	than 00/ af the tatal are	turbutions resoured but	the foundation before the ele-	o of any tay
a List any managers of the foundation vyear (but only if they have contributed			unuations received by t	the foundation before the Clos	OG OF ALLY LAX
ROBERT STRANAHAN					

Information

ROBERT ST

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

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

Check here X 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

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

c Any submission deadlines

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

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Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the	Year or Approved for Future	Payment		
Recipient	If recipient is an individual,	Foundation	Purnose of grant or	
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	status of recipient	Purpose of grant or contribution	Amount
a Paid during the year				
ASSOCIATION FOR HANDICAPPED RECREATION P.O. BOX 2451	NONE	PUBLIC CHARITY	SPECIALIZED RECREATION FOR THE DISABLED	
COUER DALENE, ID 83814				11,000.
PANHANDLE AUTISM 118 NORTH 7TH STREET, SUITE C-4	NONE	PUBLIC CHARITY	SUPPORT	
COUER DALENE, ID 83814		ļ		14,000.
		-		
		<u> </u>		
				25.000
Total b Approved for future payment			▶ 3a	25,000.
a reproved for fatale payment				
NONE				
NONE		-		
				
				<u> </u>
Total	<u> </u>		▶ 3b	0.

Excluded by section 512, 513, or 514

(e)

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Enter gross amounts unless otherwise indicated

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

Program service revenue a	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
ab	-		 		
C	-				
d		· — · · · · · · · · · · · · · · · · · ·		-	
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments			00		
4 Dividends and interest from securities		····	20	29.	12.
5 Net rental income or (loss) from real estate					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property			\vdash		
7 Other investment income 8 Gain or (loss) from sales of assets other			-		· - ·
than inventory					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory	-			 -	
11 Other revenue					
a					
b					
C					
d					
e					
12 Subtotal Add columns (b), (d), and (e)		0.		29.	12. 41.
13 Total. Add line 12, columns (b), (d), and (e)				13	41.
(See worksheet in line 13 instructions to verify calculations.)					
Part XVI-B Relationship of Activities	to the Accon	nplishment of Ex	empt	Purposes	
Line No Explain below how each activity for which in			contribi	uted importantly to the accomp	olishment of
▼ the foundation's exempt purposes (other that FINANCIAL SUPPORT FOR			0007	NIT CAME ON C. TA	ICT UD TNC
RELATED ADMINISTRATIVE			URG	ANIZATIONS, IN	ICTODING
RELATED ADMINISTRATIVE	EAPENSE) •		·-···	
				· · · · · · · · · · · · · · · · · · ·	
	- · · · ·				
					
					
		· · · · · · · · · · · · · · · · · · ·		-	
123621 12-02-11					Form 990-PF (2011)
Z-VZ-11		12			

Unrelated business income

Form 990-PF (2011) Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

								 -
1		-	ectly engage in any of the following	• •	• •		Yes	No
			(3) organizations) or in section 52		rations?			
а	Transfers	from the reporting founda	ition to a noncharitable exempt or	ganization of			-	
	(1) Cash					1a(1)		<u>X</u>
	(2) Other	r assets				1a(2)		X
b	Other tran	isactions						
	(1) Sales	s of assets to a noncharital	ble exempt organization			1b(1)		<u>X</u>
	(2) Purci	hases of assets from a nor	ncharitable exempt organization			1b(2)		X
	(3) Renta	al of facilities, equipment, (or other assets			1b(3)		X
	(4) Reim	bursement arrangements				1b(4)		X
	(5) Loan:	s or Ioan guarantees				1b(5)		X
	(6) Perfo	ormance of services or me	mbership or fundraising solicitatio	ons		1b(6)		X
C	Sharing o	f facilities, equipment, ma	iling lists, other assets, or paid em	ployees		10		X
d	If the ansv	wer to any of the above is	"Yes," complete the following sche	edule Column (b) should alwa	ays show the fair market value of the goods,	other asse	ts,	
	or service	es given by the reporting fo	oundation. If the foundation receive	ed less than fair market value	in any transaction or sharing arrangement,	show in		
	column (c	d) the value of the goods,	other assets, or services received					
(a)∟	ine no	(b) Amount involved	(c) Name of noncharitable	exempt organization	(d) Description of transfers, transactions, and	shanng arra	ngeme	nts
			N/A					
	_							
				·				
				<u> </u>				
							_	
							_	
2a	Is the four	ndation directly or indirect	ly affiliated with, or related to, one	or more tax-exempt organiza	ations described			
	ın section	501(c) of the Code (other	than section 501(c)(3)) or in sect	tion 527?	[Yes	X] No
b	If "Yes," co	omplete the following sche	edule					
		(a) Name of org	anization	(b) Type of organization	(c) Description of relation	ship		
		N/A						
					tatements, and to the best of my knowledge	ay the IRS di	scuss t	his
Sig	gn and be	elief, it is true, correct, and com	nplete Declaration of preparer (other tha	n taxpayer) is based on all informa	tion of which preparer has any knowledge re	tum with the nown below (s	prepare	er
He		Moltes For	Tremos	15-29-12		X Yes		No
	Sigr	nature of officer or trustee		Date	Title			
		Print/Type preparer's na	me reparer's s	ignature	Date Check If PTIN			
			4.7	wash	self- employed			
Pa	id	STEVEN K.	RIDGEWAY) (人)	I WAR IT		02927		
	eparer		GEWAY & WARNER	7	Firm's EIN ► 77-0			
	e Only			\ \				
		Firm's address P	O. BOX 20310	7 /				
			NTA BARBARA, CA	93120-0310	Phone no (805) 966	5-1	751
-	-					orm 990 -		
					•		(,

116261 05-01-11

FORM 990-PF DIVIDEND	S AND	INTER	EST FROM	SECU	RITIES	STATEMENT	1
SOURCE		GROSS	AMOUNT		ITAL GAINS IVIDENDS	COLUMN (A AMOUNT	.)
CHARELS SCHWAB SCHWAB - NONTAX MUNI			12. 29.		0.		12. 29.
TOTAL TO FM 990-PF, PART I, I	LN 4		41.		0.		41.
FORM 990-PF	AC	COUNTI	NG FEES			STATEMENT	2
DESCRIPTION	EXPE	A) NSES BOOKS	(B) NET INVI MENT IN	EST-	(C) ADJUSTED NET INCOM		
ACCOUNTING		1,024.		0.			0.
TO FORM 990-PF, PG 1, LN 16B		1,024.		0.			0.
FORM 990-PF		TAX	ES			STATEMENT	3
DESCRIPTION	EXPÉ	A) NSES BOOKS	(B) NET INVI MENT INC	EST-	(C) ADJUSTED NET INCOM		
SECRETARY OF STATE US TREASURY		0.		0.			0.
TO FORM 990-PF, PG 1, LN 18 =		8.		0.			0.
FORM 990-PF DEPRECIATION OF	F ASSE	TS NOT	HELD FO	R INVI	ESTMENT	STATEMENT	4
DESCRIPTION			T OR BASIS		JMULATED RECIATION	BOOK VALU	E
ORGANIZATION EXPENSE ORGANIZATION EXPENSE ORGANIZATION EXPENSE			3,892. 2,167. 895.		3,892. 2,167. 895.		0.
ORGANIZATION EXPENSE			138.		138.		٠.

Form **8868**

(Rev. January 2012)

Department of the Treasury Internal Revenue Şervice

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No. 1545-1709

					 	
	re filing for an Automatic 3-Month Extension, complet					► X
If you a	re filing for an Additional (Not Automatic) 3-Month Ext	ension, c	omplete only Part II (on page 2 of t	his form).		
	omplete Part II unless you have already been granted a					
	c filing (e-file). You can electronically file Form 8868 if you					
	o file Form 990-T), or an additional (not automatic) 3-mon					
	file any of the forms listed in Part I or Part II with the exc					
	Benefit Contracts, which must be sent to the IRS in paper		see instructions). For more details o	n the elect	ronic filing o	f this form,
	irs.gov/efile and click on e-file for Charities & Nonprofits.					
Part I	Automatic 3-Month Extension of Time					
A corpora Part I only	tion required to file Form 990-T and requesting an auton	natic 6-mo	nth extension - check this box and c	complete		▶ 🔲
	corporations (including 1120-C filers), partnerships, REMi ome tax returns.	ICs, and tr	usts must use Form 7004 to reques	t an extens	ion of time	
Type or	Name of exempt organization or other filer, see instruc	ctions.		Employer	identification	number (EIN) or
print	ROBERT & MARY STRANAHAN					
-	FAMILY FOUNDATION			X	48-639	3036
File by the due date for filing your	Number, street, and room or suite no. If a P.O. box, so 7504 VIA DEL MAR STREET	ee instruct	tions.	Social sec	urity numbe	r (SSN)
return See instructions	City, town or post office, state, and ZIP code. For a fo	reign add	ress, see instructions.			· · · · · · · · · · · · · · · · · · ·
	LAS VEGAS, NV 89131					
Enter the	Return code for the return that this application is for (file	a separat	te application for each return)	• •		0 4
A 1: A:		Return	Application			Return
Applicati	on	Code	Is For			Code
Is For		01	Form 990-T (corporation)			07
Form 990		02	Form 1041-A			08
Form 990		01	Form 4720		- 	09
Form 990		04	Form 5227	····		10
Form 990		05	Form 6069			11
	-T (sec. 401(a) or 408(a) trust) -T (trust other than above)	06	Form 8870			12
FOITH 350	RIDGEWAY & WAR					
• The by	ooks are in the care of ▶ 525 OLIVE STREI		SANTA BARBARA, CA	93101		
	none No. ► (805) 966-1751		FAX No. ► (805) 965-	2619		
	organization does not have an office or place of business	s in the Ur				. ▶ □
	is for a Group Return, enter the organization's four digit			If this is for	the whole g	roup, check this
box 🕨	. If it is for part of the group, check this box	•				
1 re	quest an automatic 3-month (6 months for a corporation					
			tion return for the organization nam		The extension	on
ıs f	or the organization's return for:					
>	$\overline{\mathbf{X}}$ calendar year 2011 or					
>	tax year beginning	, an	nd ending		_ •	
2 f t	ne tax year entered in line 1 is for less than 12 months, o	heck reas	ion: Initial return I	Final retur	n	
L	Change in accounting period					
3a If t	his application is for Form 990-BL, 990-PF, 990-T, 4720,	or 6069, e	enter the tentative tax, less any			
	nrefundable credits. See instructions.			3a_	\$	0.
	his application is for Form 990-PF, 990-T, 4720, or 6069,	enter any	refundable credits and			
	imated tax payments made. Include any prior year over			3ь	\$	0.
	lance due. Subtract line 3b from line 3a. Include your pa					
	using EFTPS (Electronic Federal Tax Payment System).			3с	\$	0.
	If you are going to make an electronic fund withdrawal			orm 8879-	EO for paym	ent instructions.
	or Privacy Act and Paperwork Reduction Act Notice,					868 (Rev. 1-2012)

LHA

	If Additional (Not Automatic) 3-Month E		nt I (on page 1). n of Time. Only file the origin	nal (no co	pies need	ed).
			Enter filer's	identifying	number, se	e instruct
Туре о	· ·				Employer identification number (E	
print	ROBERT & MARY STRANAHAN					
File by th				X	48-639	3036
due date filing you return. Se	Number, sitest, and routed for it a r.o. box, see itisit deficits.			Social sec	urity number	· (SSN)
instructio	City, town or post office, state, and ZIP code. For a final LAS VEGAS, NV 89131	oreign add	ress, see instructions.			
Enter t	he Return code for the return that this application is for (fil	e a separa	te application for each return)			0
Applic	eation	Return	Application			Re
Is For		Code ·	Is-For-	, ,		c
Form 9		01				
Form 9	990-BL	02	Form 1041-A			
Form 9	Form 990-EZ		Form 4720			
Form 990-PF		04	Form 5227			
Form 9	990-T (sec. 401(a) or 408(a) trust)	05	Form 6069			
Form 9	990-T (trust other than above)	06	Form 8870			
• If th	ephone No. (805) 966-1751 The organization does not have an office or place of business is for a Group Return, enter the organization's four digit If it is for part of the group, check this box	Group Exe		If this is for	the whole g	
box 🕨						SION IS IOF.
4	I request an additional 3-month extension of time until		BER 15, 2012.			SION IS IOF.
4 5	I request an additional 3-month extension of time until For calendar year 2011, or other tax year beginning	NOVEM	BER 15, 2012. , and end	ng		SION IS IOF.
4 5 6	I request an additional 3-month extension of time until For calendar year 2011, or other tax year beginning If the tax year entered in line 5 is for less than 12 months, Change in accounting period	NOVEM	BER 15, 2012. , and end			SION IS FOR.
4 5 6	I request an additional 3-month extension of time until For calendar year 2011, or other tax year beginning If the tax year entered in line 5 is for less than 12 months, Change in accounting period State in detail why you need the extension	NOVEM	BER 15, 2012, and endi	ng Final re	eturn	
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