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# Form 990-PF

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

OMB No 1545-0052

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 cale	endar year 2011, or tax year beginning	, 2011,	, and ending			
	FAMILY FOUNDATION QUAIL MEADOW RD.				mployer identification num 94-3132432	nber
	ALTOS, CA 94024		1		elephone number (see the (650) 969-2780	
			_	C if	exemption application is	pending, check here 🕨 🗌
<b>G</b> Che	ck all that apply Initial return	Initial Return of a fore	mer public charity	D 1 F	oreign organizations, chec	k here
H C	Address change	Name change (c)(3) exempt private f	oundation		oreign organizations meet ere and attach computatio	
اًاً	Section 4947(a)(1) nonexempt charitable t	rust Other taxable r	orivate foundation		f private foundation status inder section 507(b)(1)(A)	
(fi	rom Part II, column (c), line 16)	ounting method: X Counting method: X Counting method:		F If	the foundation is in a 60-	-month termination
<b>▶</b> \$		column (d) must be or	n cash basis )	l ui	nder section 507(b)(1)(B)	, check here
Part I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))	(a) Revenue and expenses per books	(b) Net investment income	nt	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1 Contributions, gifts, grants, etc, received (att sch)	48,000.				
	2 Ck if the foundn is not req to att Sch B			$-\!$	<u>-</u>	
	3 Interest on savings and temporary cash investments			ı		
	4 Dividends and interest from securities					
	5a Gross rents					
	b Net rental income or (loss)		· · · · · · · · · · · · · · · · · · ·			
Ŗ	6a Net gain/(loss) from sale of assets not on line 10				<del> </del>	
E	b Gross sales price for all assets on line 6a				····	
Ē	7 Capital gain net income (from Part IV, line 2)					
N U	Net short-term capital gain     Income modifications	<del> </del>				<del></del>
Ě		<del></del>				
	10 a Gross sales less returns and allowances					
	b Less Cost of goods sold					
	c Gross profit/(loss) (att sch)					
	11 Other income (attach schedule) .					
	12 Total. Add lines 1 through 11	48,000.		0.	0.	
	13 Compensation of officers, directors, trustees, etc	48,000.		<del></del>	0.	
I	14 Other employee salaries and wages					
	15 Pension plans, employee benefits				*	
Α .	16a Legal fees (attach schedule)					
D M	<b>b</b> Accounting fees (attach sch)		I R	PEN.	<i>]</i> /	
N	c Other prof fees (attach sch)		1 1 -	-46	IVFD	
O Ï P S	17 Interest .		14			
E T R R	18 Taxes (attach schedule (see instrs)		III AI	PP 7	3 2012   S	<del></del>
A A	19 Depreciation (attach sch) and depletion	1		ء و	3 2012   5	
NV	20 Occupancy .		L (NG)	MA		
GÉ	21 Travel, conferences, and meetings		3.01	201	$I.IIT^{*}I$	
A E N X D P	22 Printing and publications					
D P	23 Other expenses (attach schedule)					
N S	24 Total operating and administrative				<del></del>	
E S	expenses. Add lines 13 through 23					
	25 Contributions, gifts, grants paid STMT 1	51,542.				51,542.
	26 Total expenses and disbursements. Add lines 24 and 25	51,542.		0.	0.	51,542.
	27 Subtract line 26 from line 12:					
	a Excess of revenue over expenses and disbursements	-3,542.		_		
	<b>b</b> Net investment income (if negative, enter -0-)			0.		
	C Adjusted net income (if negative, enter -0-)		L		0.	

590 4 5 6 590. Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

4 Add lines 1, 2, and 3.

Decreases not included in line 2 (itemize)

<u> ran</u>	(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 acq P — Purch D — Donat	ase	(C) Date acquired (month, day, year)	(d) Date sold (month, day, year)
1 2	N/A	<del></del>	····	D Donat	.1011		
b	<del></del>						
		· · · · · · · · · · · · · · · · · · ·			-		
d	— <del> </del>			<del></del>			
е			·-·-				
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other bas plus expense of sal			(h) Gain or (e) plus (f) m	
a			· · · · · · · · · · · · · · · · · · ·				
t							
			·				
е							
	Complete only for assets show	ng gain in column (h) and owned by	the foundation on 12/31/69			(I) Gains (Coli	ımn (h)
	(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column over column (j), if a		g tha	ain minus column (k an -0-) <b>or</b> Losses (fr	(), but not less
a							
<u>t</u>	<u> </u>						
	·					·	· =====
			·····				
e							
2	Capital gain net income or (net	capital loss) — If gain, also if (loss), en	enter in Part I, line 7 ter -0- in Part I, line 7		2		
3	Net short-term capital gain or (	loss) as defined in sections 1222(5)	and (6) <sup>-</sup>	Ţ			<u>.</u>
	If gain, also enter in Part I, line in Part I, line 8	e 8, column (c) (see instructions) If	(loss), enter -0-		3	:	
Par		Section 4940(e) for Reduce	d Tax on Net Investme	ent Incor	ne		
		foundations subject to the section				N/A	
	ction 4940(d)(2) applies, leave the foundation liable for the sec	his part blank tion 4942 tax on the distributable an	nount of any year in the bas	e period?		Yes	No
lf 'Y€		ify under section 4940(e) Do not co					
1	Enter the appropriate amount i	n each column for each year; see th	e instructions before makin	g any entri	es.	<u> </u>	··
	(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use ass	sets	(colu	<b>(d)</b> Distribution umn (b) divided	
	2010						
	2009						
	2008						
	2007						
	2006						
2	Total of line 1, column (d)				2		
3	Average distribution ratio for the	ne 5-year base period — divide the to n has been in existence if less than !	otal on line 2 by 5, or by the		3		
4	-	table-use assets for 2011 from Part		_	4		
4		lable-use assets for 2011 from Part	A, line 5	-		-	
5	Multiply line 4 by line 3			-	5		<del></del>
6	Enter 1% of net investment inc	ome (1% of Part I, line 27b)			6		
7	Add lines 5 and 6				7		·
8	Enter qualifying distributions from	om Part XII, line 4			8		<del></del>
	If line 8 is equal to or greater to Part VI instructions	han line 7, check the box in Part VI,	line 1b, and complete that	part using	a 1%	tax rate. See th	ne

	990-PF (2011) HAUS FAMILY FOUNDATION	94-	313243	2	F	age <b>5</b>
Part	t VII-A Statements Regarding Activities (continued)			,		
11 ,	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes', attach schedule (see instructions)			11		<u>x</u>
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualif advisory privileges? If 'Yes,' attach statement (see instructions)	ed perso	on had	12		x
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption Website address  N/A	applica	tion?	13	X	
14	The books are in care of ► ADA HAU Telephone			69-2	2780	)
15	Located at • 1901 QUAIL MEADOW RD, LOS ALTOS, CA ZIP + 4 • Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here.	940		. N/A		
	and enter the amount of tax-exempt interest received or accrued during the year	<b>-</b> [	15			N/A
16	At any time during calendar year 2011, did the foundation have an interest in or a signature or other arbank, securities, or other financial account in a foreign country?	ithority o	over a	16	Yes	No X
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1. If 'Yes,' enter the national foreign country.	me of th	ne			
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required					
	File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.				Yes	No_
1 a	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?	Yes	XNo			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	Yes	X No			!
	<ul><li>(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?</li><li>(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?</li></ul>	Yes Yes	X No			,
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	Yes	X No			
	(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the 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.)	Yes	XNo			   
b	If any answer is 'Yes' to 1a(1)-(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)	? <b>►</b>		1b	N	/A
	Organizations relying on a current notice regarding disaster assistance check here .	-				
С	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?			1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):					
а	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	Yes	XNo			;
		(2)(2)				
L	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942 (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942) all years listed, answer 'No' and attach statement — see instructions)	a)(2) to		2 b	- N	/A
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years I	ere				
	► 20, 20, 20					¦
3 a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	Yes	X No			
b	olf '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 approve 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	d				
_	determine if the foundation had excess business holdings in 2011)			3b	N	/A
4 a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?			4a		<u>x</u>
t:	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?			4b		<b>X</b>
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Part VII-B   Statements Regarding Activiti		1 4720 May Be Requ	uired (continued)	<del> , -</del>	
5a During the year did the foundation pay or incu	-			.	
(1) Carry on propaganda, or otherwise attempt	-		Yes X	No	
(2) Influence the outcome of any specific pub on, directly or indirectly, any voter registra				No	
(3) Provide a grant to an individual for travel,	study, or other similar	purposes?	∐ Yes X	No	
(4) Provide a grant to an organization other the in section 509(a)(1), (2), or (3), or section	nan a charitable, etc, or 4940(d)(2)? (see instru	rganization described uctions)	Yes X	No	}
(5) Provide for any purpose other than religion educational purposes, or for the prevention	us, charitable, scientific n of cruelty to children	c, literary, or or animals?	Yes X	No	
b If any answer is 'Yes' to 5a(1)-(5), did any of described in Regulations section 53.4945 or in (see instructions)?	the transactions fail to a current notice regard .	qualify under the except ding disaster assistance	tions 	5 b	N/A
Organizations relying on a current notice rega	rding disaster assistand	ce check here	. ▶ 🗌		
c If the answer is 'Yes' to question 5a(4), does to tax because it maintained expenditure response	the foundation claim ex sibility for the grant?	emption from the	N/A Yes	No	1
If 'Yes,' attach the statement required by Regi	ulations section 53.494	5-5(d).			
6a Did the foundation, during the year, receive ar on a personal benefit contract?			∐ Yes X	No .	
<b>b</b> Did the foundation, during the year, pay premi	iums, directly or indirec	tly, on a personal benef	fit contract?	6b	<u>  X</u> _
If 'Yes' to 6b, file Form 8870	dation a norty to a neab	whited toy chalter transa	otion? Ves V	No	
7a At any time during the tax year, was the found b if 'Yes,' did the foundation receive any procee				N/A 76	-
Part VIII Information About Officers, D					<del></del>
and Contractors	,,	. • • • • • • • • • • • • • • • • • • •	, o. o, <b>g ,</b>		,
1 List all officers, directors, trustees, foundation	n managers and their	compensation (see inst	ructions).		
(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 other allo	account, wances
ADA_HAU	DIRECTOR	0.	0.		0.
1901 QUAIL MEADOW RD	0			ł	
LOS ALTOS, CA 94027					
BENNY HAU 1244 W HIGHLAND AVE REDLANDS, CA 92373	CFO 0	0.	0.		0.
REDIANDS, CA 92373					<del></del>
	<u>L</u>			<u> </u>	
2 Compensation of five highest-paid employee				T	
(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 other allo	e account, wances
NONE					
			· · ·		<del></del>
	-				
Total number of other employees paid over \$50,000	TEEA0306L	12/05/11	<b>•</b>	Form <b>990</b>	0 - <b>PF</b> (2011)

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see instructions.)	roreign iou	
1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:  a Average monthly fair market value of securities.	1 a	
<b>b</b> Average of monthly cash balances	1 b	
c Fair market value of all other assets (see instructions)	1 c	
d Total (add lines 1a, b, and c)	1 d	0.
e Reduction claimed for blockage or other factors reported on lines 1a and 1c		
(attach detailed explanation)		
2 Acquisition indebtedness applicable to line 1 assets	2	
3 Subtract line 2 from line 1d	3	
4 Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	-12
5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	0.
6 Minimum investment return. Enter 5% of line 5	6	0.
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operand certain foreign organizations check here ► and do not complete this part.		ndations
1 Minimum investment return from Part X, line 6 .	1	
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) . 2b		
c Add lines 2a and 2b	2c	
3 Distributable amount before adjustments Subtract line 2c from line 1	3	
4 Recoveries of amounts treated as qualifying distributions	4	
5 Add lines 3 and 4 .	5	
6 Deduction from distributable amount (see instructions)	6	
7 Distributable amount as adjusted. Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	0.
Part XII Qualifying Distributions (see instructions)		
<ul> <li>Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes.</li> <li>a Expenses, contributions, gifts, etc — total from Part I, column (d), line 26</li> </ul>	1a	51,542.
<b>b</b> Program-related investments — total from Part IX-B	1 b	
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes.	2	_
3 Amounts set aside for specific charitable projects that satisfy the	<del>.</del>	
<ul> <li>Amounts set aside for specific charitable projects that satisfy the</li> <li>Suitability test (prior IRS approval required)</li> </ul>	3a	
<b>b</b> Cash distribution test (attach the required schedule)	3 b	<del>-</del>
4 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	. 4	51,542.
Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions)	5	· · · · · · · · · · · · · · · · · · ·
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	51,542.
Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whe qualifies for the section 4940(e) reduction of tax in those years	ther the founda	ation
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## Part XIII Undistributed Income (see instructions)

	<b>(a)</b> Corpus	<b>(b)</b> Years prior to 2010	<b>(c)</b> 2010	<b>(d)</b> 2011
Distributable amount for 2011 from Part XI, line 7				0.
2 Undistributed income, if any, as of the end of 2011:				
a Enter amount for 2010 only			0.	
<b>b</b> Total for prior years. 20, 20, 20		0.		
3 Excess distributions carryover, if any, to 2011				
<b>a</b> From 2006 45, 900.				l
<b>b</b> From 2007 55, 282.				
c From 2008 81,229.				
<b>d</b> From 2009 . 57,550 .				
e From 2010 55,198.	295,159.	·		
f Total of lines 3a through e 4 Qualifying distributions for 2011 from Part	293,139.			
XII, line 4. ► \$ 51, 542.				ĺ
a Applied to 2010, but not more than line 2a			0.	
<b>b</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				0.
e Remaining amount distributed out of corpus	51,542.		•	)
5 Excess distributions carryover applied to 2011	0.			0.
(If an amount appears in column (d), the same amount must be shown in column (a))				!
came amount must be enount in column (4)				
6 Enter the net total of each column as				į
indicated below:				
a Corpus. Add lines 3f, 4c, and 4e Subtract line 5	346,701.			
<b>b</b> Prior years' undistributed income Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistribut-				
ed income for which a notice of deficiency has been issued, or on which the section				
4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b Taxable				<b>'</b>
amount - see instructions		0.		
e Undistributed income for 2010 Subtract line 4a from			0.	
line 2a. Taxable amount — see instructions				
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)				ŀ
(see instructions)	0.			
8 Excess distributions carryover from 2006 not			·	
applied on line 5 or line 7 (see instructions)	45,900.			1
9 Excess distributions carryover to 2012. Subtract lines 7 and 8 from line 6a	300,801.			
10 Analysis of line 9:			<i>i</i> ~	
<b>a</b> Excess from 2007 55, 282.				ļ
<b>b</b> Excess from 2008 81, 229.				
<b>c</b> Excess from 2009 57,550.				
<b>d</b> Excess from 2010 . 55,198.				
<b>e</b> Excess from 2011 51, 542.				

	2011) HAUS FAMILY FOUN		<del></del>		94-3132434	
	Private Operating Foundate					N/A
1 a If the four	indation has received a ruling or over the for 2011, enter the date of the	determination letter ruling	tnat it is a private	operating foundation	n, and the ruling .	
<b>b</b> Check bo	ox to indicate whether the foundate	t <u>ion is a private ope</u>	erating foundation of	described in section	4942(j)(3) or	4942(j)(5)
	e lesser of the adjusted net	Tax year		Prior 3 years		
income t investme each yea	rom Part I or the minimum int return from Part X for ir listed	(a) 2011	<b>(b)</b> 2010	(c) 2009	(d) 2008	(e) Total
<b>b</b> 85% of li				<del> </del>		
line 4 for	g distributions from Part XII, each year listed					<del></del> -
for active of	cluded in line 2c not used directly onduct of exempt activities		-			
for active	g distributions made directly conduct of exempt activities line 2d from line 2c					
	e 3a, b, or c for the ve test relied upon:					
	alternative test — enter			ł		
• •	e of all assets .					
secti	e of assets qualifying under on 4942(j)(3)(B)(i)					
minimum i	t' alternative test — enter 2/3 of nvestment return shown in Part X, ach year listed					
<b>c</b> 'Support	alternative test — enter:					
inves divid on s	support other than gross stment income (interest, ends, rents, payments ecurities loans (section a)(5)), or royalties).					
more	rt from general public and 5 or exempt organizations as provided tion 4942(j)(3)(B)(iii)					
<b>(3)</b> Larg an e	est amount of support from xempt organization					
	s investment income upplementary Information	<u> </u>				
1 Informat a List any close of	ssets at any time during the ion Regarding Foundation Manamanagers of the foundation who any tax year (but only if they hav	gers: have contributed m e contributed more	ore than 2% of the than \$5,000) (See	section 507(d)(2))		
<b>b</b> List any a partne	managers of the foundation who rship or other entity) of which the	own 10% or more of foundation has a 1	of the stock of a co 0% or greater inter	rporation (or an equi rest	ally large portion of	the ownership of
Check he requests complete	for funds If the foundation make tems 2a, b, c, and d	makes contributions es gifts, grants, etc,	s to preselected cha (see instructions)	arıtable organızatıon to ındıvıduals or org	anızatıons under oth	
<b>a</b> The nam	e, address, and telephone numb	er of the person to	whom applications	should be addresse	d	
<b>b</b> The form	n in which applications should be	submitted and info	rmation and materi	als they should inclu	de:	
c Any sub	mission deadlines:					
<b>d</b> Any rest	rictions or limitations on awards,	such as by geograp	ohical areas, charita	able fields, kinds of i	nstitutions, or other	factors:
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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)	substantial contributor	recipient						
a Paid during the year	substantial contributor	recipient						
	<u></u>		<u> </u>					
Total	T	Т	<u>► 3a</u>					
<b>b</b> Approved for future payment								
Total			► 3h	l				

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

Enter aross	amounts unless otherwise indicated.	Unrelate	ed business income	Excluded by section 512, 513, or 514			
, -		(a) Business code	(b) Amount	(c) Exclu- sion	(d) Amount	(e) Related or exempt function income (See instructions)	
•	am service revenue:		<del></del>	code		<del></del>	
			<del></del>	<del>                                     </del>			
			<u> </u>		<del></del>		
f						<del></del>	
g Fees	and contracts from government agencies			ļ			
	pership dues and assessments		********				
	t on savings and temporary cash investments			<del>  </del>			
	ends and interest from securities			1			
	ental income or (loss) from real estate:			<del>                                     </del>			
	financed property ebt-financed property			1 1			
	ital income or (loss) from personal property						
	investment income			1			
	(loss) from sales of assets other than inventory						
	ncome or (loss) from special events.						
	profit or (loss) from sales of inventory						
11 Other	revenue						
a							
p					· · · ·		
				-			
d e			<del></del>	-			
	otal Add columns (b), (d), and (e)	· · · · · · · · · · · · · · · · · · ·					
ı∡ Subto	nai Auu Coluitiis toi. tui. anu tei						
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13 Total. (See works Part XVI	Add line 12, columns (b), (d), and (e) theet in line 13 instructions to verify calculation.  Relationship of Activities to the	Accompl			oses		

Page 13

Part X	<u>VII </u>	nformation R Exempt Organ	egarding Tra	insfers To and	I Transaction	is and F	Relationship	s With Nor	icharitable		
- ,		-xempt organ	- IIZAGONS					· · · · · · · · · · · · · · · · · · ·		Yes	No
des	scribed	rganization direc I in section 501 (c o political organi	c) of the Code (	engage in any of other than section	the following wi i 501(c)(3) orgai	th any oth nizations)	er organization or in section 5	n 27,			
	_			a noncharitable	exempt organiz	ation of					
	Cash								. 1a(1)		X
(2)	Other	r assets		•					1a(2)		X
<b>b</b> Otl	her trai	nsactions									
(1)	Sales	of assets to a r	noncharitable ex	empt organization	n .				1 b (1)		Х
(2)	Purch	nases of assets f	rom a noncharit	able exempt orga	anization				1 b (2)		Х
(3)	Renta	al of facilities, eq	juipment, or oth	er assets					1 b (3)		Х
(4)	Reim	bursement arran	igements						1b (4)		_ X
(5)	Loan	s or loan guaran	tees					•	1 b (5)		X
٠.				hip or fundraising					1 b (6)		X
<b>c</b> Sh	arıng d	of facilities, equip	oment, mailing l	ists, other assets	, or paid employ	rees			1 c		<u> </u>
the an	good: y trans	s other assets o	or services giver g arrangement,	' complete the fold by the reporting show in column (or of noncharitable exempts)	foundation. If the distance of	he founda he goods,	tion received le	ess than fair n or services re	narket value in ceived		
(a) Line i N/A	110.	(b) Amount involved	(C) Name	of Honellaritable exem	ipt organization	1 (4)	bescription of trunc	sters, dunisactions	, and sharing arrai	igomoni	
14/ 11											
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de	scribed 'Yes,' <u>d</u>	d in section 501( complete the foll	c) of the Code ( owing schedule.		n 501(c)(3)) or ıı	n section !	527? 	<u>-</u>	Yes	s X	No
N/A	(a)	Name of organiz	zation	( <b>b)</b> type	e of organization	<del>'</del>		Description o	n relationship		
N/A		<del> </del>	-	<del></del>					- <del> </del>		
		·	<del></del>		-						
-											
			<del></del> -	·				-			
T	Under pe	enaities of perjury, I de	eclare that I have exa	mined this return, incluer than taxpayer) is bas	ding accompanying s	chedules and	statements, and to	the best of my kno	owledge and belief,	it is true	,
	correct,	and complete Declara	ation of preparer (other	er than taxpayer) is bas	ed on all information	of which prep	parer has any knowl	edge	May the		
Sign	N)	(Il	Haw		1 47-1	1	TDECEOD		this retur	n with th	ne
Here	<u> </u>	huse of officer or brief.			Date _		IRECTOR	· · · · · ·	(see <u>inst</u>	ructions)	12
	oignat	ture of officer or truste Print/Type preparer's		Primaler's	signature	<del>\</del>	Date 4	Charl	If PTIN	Yes	No
		E. DEAN DE			AN DEATON	W.	2-22-12	Check self-employer	J"   B0000	5576	
Paid		Firm's name		CHAELS RIC		HAT.T.	<u>'                                    </u>		4-2586927	20,0	
Prepai		Firm's name		ERSITY AVE.	SUITE #22			2			
Use O	шу	s address		, CA 95032-			-	Phone no (	408) 354-	9922	<u>;                                    </u>

Form **990-PF** (2011)

#### 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		Employer identification number
HAUS FAMILY FOUNDATION		94-3132432
Organization type (check one)		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust <b>not</b> 527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treat 501(c)(3) taxable private foundation	ted as a private foundation
Check if your organization is covered <b>Note.</b> Only a section 501(c)(7), (8), o	by the <b>General Rule</b> or a <b>Special Rule</b> or (10) organization can check boxes for both the General	Rule and a Special Rule. See instructions
General Rule  X For an organization filing Form 90 contributor. (Complete Parts I and	90, 990-EZ, or 990-PF that received, during the year, \$5,0 d II.)	)00 or more (in money or property) from any one
Special Rules		
For a section 501(c)(3) organizate 509(a)(1) and 170(b)(1)(A)(vi), ar (2) 2% of the amount on (i) Form	ion filing Form 990 or 990-EZ that met the 33-1/3% suppond received from any one contributor, during the year, a congenial Part VIII, line 1h or (ii) Form 990-EZ, line 1. Comple	irt test of the regulations under sections ontribution of the greater of (1) \$5,000 or ete Parts I and II
total contributions of more than \$	0) organization filing Form 990 or 990-EZ that received from 1,000 for use exclusively for religious, charitable, scientificen or animals. Complete Parts I, II, and III.	om any one contributor, during the year, ic, literary, or educational purposes, or
If this box is checked, enter here purpose Do not complete any of	0) organization filing Form 990 or 990-EZ that received from religious, charitable, etc., purposes, but these contributed the total contributions that were received during the year the parts unless the <b>General Rule</b> applies to this organizations of \$5,000 or more during the year	tions did not total to more than \$1,000.  for an <i>exclusively</i> religious, charitable, etc.
3 , , , ,	· · ·	т
990-PF) but it must answer 'No' on F	covered by the General Rule and/or the Special Rules doe Part IV, line 2, of its Form 990, or check the box on line H not meet the filing requirements of Schedule B (Form 990,	l of its Form 990-EZ or on Part I, line 2, of its
BAA For Paperwork Reduction Act 990EZ, or 990-PF.	Notice, see the Instructions for Form 990,	Schedule <b>B</b> (Form 990, 990-EZ, or 990-PF) (2011)

	<b>B</b> (Form 990, 990-EZ, or 990-PF) (2011)	Page Is-stown	1 of 1 of Part 1
Name of org	AMILY FOUNDATION	' '	132432
Part I	Contributors (see instructions) Use duplicate copies of Part I if additional s	pace is needed.	
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	ADA HAU  1901 QUAIL MEADOW DR.  LOS ALTOS, CA 94024	\$ 33,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	BENNY HAU  1244 W. HIGHLAND AVE.  REDLANDS, CA 92373	\$ 15,000.	Person X Payroli Noncash  (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash  (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- \$	Person Payroll Noncash  (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution )

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

Page

1 of

1 of Part 1

1 to

1 of Part II

Name of organization

HAUS FAMILY FOUNDATION

Employer identification number 94-3132432

Partill 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
1	N/A		
-		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
-			
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
-		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
BAA		dule <b>B</b> (Form 990, 990-E2	7 000 DE) (201

Page	
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to

of Part III

Employer identification number 94-3132432 Name of organization
HAUS FAMILY FOUNDATION PartIII

<i>Exclusively</i> religious,	charitable, etc, individual contributions to section 501(c)(7), (8), or (10)	
organizations that tot	Il more than \$1,000 for the year. Complete cols (a) through (e) and the following line en	ıtry

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). Use duplicate copies of Part III if additional space is needed.

_		37 /
	\$	N/Z

	Ose duplicate copies of Part III if additiona					
(a) o. 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) o. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
	Transferee's name, addre	(e) Transfer of gift ss, and ZIP + 4	Relationship of transferor to transferee			
(a)	4.					
(a) . from Part I	(b) Purpose of gift	(c) Use of gift	(d)  Description of how gift is held			
	Transferen's name addre	(e) Transfer of gift	Relationship of transferor to transferee			
	Transferee's name, address, and ZIP + 4 Relationshi		netationship of transferor to transferee			
(a) . from Part I	(b) Purpose of gift	(c) Use of gift	(d)  Description of how gift is held			
		-				
	Transferee's name, addre	Relationship of transferor to transferee				
		,				

2011 FE	DERAL STATEMENTS	PAGE 1
CLIENT D1172	IAUS FAMILY FOUNDATION	94-3132432
2/20/12  STATEMENT 1 FORM 990-PF, PART I, LINE 25 CONTRIBUTIONS, GIFTS, AND GRANTS		02 17PN
CASH GRANTS AND ALLOCATIONS		
CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:	GREAT COMMISSION CNTR INTERNAT 1101 SAN ANTONIO AVE STE 400 MOUNTAIN VIEW, CA 94043	
RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DONEE: AMOUNT GIVEN:		\$ 1,000.
CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:	BRIDGES COMMUNITY CHURCH 625 MAGDALENA AVE. LOS ALTOS, CA 94024	
RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DONEE: AMOUNT GIVEN:		8,200.
CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:	CAMPUS CRUSADE FOR CHRIST P.O. BOX 628222 ORLANDO, FL 32862	
RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DONEE: AMOUNT GIVEN:	OKLANDO, FL 32002	3,711.
CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:	CHOSEN PEOPLE MINISTRY 241 EAST 51 ST. NEW YORK, NY 10022	
RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DONEE: AMOUNT GIVEN:	NEW TORK, NT 10022	4,000.
CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:	SALVATION ARMY 1161 S. BERNARDO AVE SUNNYVALE, CA 94088	
RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DONEE: AMOUNT GIVEN:	SUNTIVALE, CA 54000	300.
CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:	FAR EAST BROADCASTING CO. P.O. BOX 1	
RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DONEE: AMOUNT GIVEN:	LA MIRADA, CA 90637	1,000.
CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:	OPEN DOORS USA 2953 E. PULLMANN ST	
RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DONEE: AMOUNT GIVEN:	SANTA ANA, CA 92705	500.

2011	FEDERAL STATEMENTS		PAGE 2
CLÌENT D1172	HAUS FAMILY FOUNDATION		94-3132432
2/20/12  STATEMENT 1 (CONTINUED) FORM 990-PF, PART I, LINE 2 CONTRIBUTIONS, GIFTS, AN	25		02 17PM
CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS: RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF AMOUNT GIVEN:	SAN FRANCISCO, CA 94102	\$	9,000.
CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS: RELATIONSHIP OF DONEE:		·	
ORGANIZATIONAL STATUS O AMOUNT GIVEN:  CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:  RELATIONSHIP OF DONEE:	BILLY GRAHAM EVANGELISTIC ASSOC 1 BILLY GRAHAM PARKWAY CHARLOTTE, NC 28201		1,500.
ORGANIZATIONAL STATUS OF AMOUNT GIVEN:  CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:  RELATIONSHIP OF DONEE:	OF DONEE:  GRACE IN CHRIST PO BOX 4868 PALO VERDES PENINSULA, CA 90274		800.
ORGANIZATIONAL STATUS O AMOUNT GIVEN: CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:			1,000.
RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF AMOUNT GIVEN: CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:			3,500.
RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS ( AMOUNT GIVEN:  CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:	PRISON FELLOWSHIP 438 E. SHAW AVE. PMB#231 FRESNO, CA 93710		1,200.
RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS ( AMOUNT GIVEN: CLASS OF ACTIVITY:			300.

2011

#### FEDERAL STATEMENTS

PAGE 3

**CLIENT D1172** 

#### HAUS FAMILY FOUNDATION

94-3132432

2/20/12

02 17PM

STATEMENT 1 (CONTINUED) FORM 990-PF, PART I, LINE 25 CONTRIBUTIONS, GIFTS, AND GRANTS

DONEE'S NAME: DONEE'S ADDRESS: **MISCELLANEOUS** 

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

2,781.

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

GLOBAL RECORDING INTERNATIONAL

1605 ELIZABETH STREET

PASADENA, CA 91104

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

3,600.

CLASS OF ACTIVITY:

DONEE'S NAME: DONEE'S ADDRESS:

COMPASSION BRIDGES 400 N WINCHESTER BLVD SANTA CLARA, CA 95050

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

900.

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

THE GIDEONS INTERNATIONAL

1443 IRIS CT SAN JOSE, CA 95125

RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

750.

CLASS OF ACTIVITY:

DONEE'S NAME:

DONEE'S ADDRESS:

SANTA CLARA CHURCH 175 SANTA CLARA AVE EUGENE, OR 94704

RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

5,500.

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

OVERSEAS MISSIONARY FELLOWSHIP

10 W DRY CREEK CIRCLE

LITTLETON, CO 80120

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

2,000.

51,542. TOTAL \$