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Form **990-PF**

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

OMB No 1545-0052 **2012**

	union to the treasury	Freated as a Privat be able to use a copy of this	e Foundation	ortina requirements	Open to public inspection
		10, 2012	, and ending	DEC 31, 2012	Spen to baptic inshection
	me of foundation			A Employer identification in	umber
W	AGNER FAMILY FOUNDATION				
	/O APERCEN PARTNERS LLC			46-1537126	
	nber and street (or P O box number if mail is not delivered to street	address)	Room/suite	B Telephone number	
_	14 LYTTON AVE STE 200			650-804-710	
_	y or town, state, and ZIP code ALO ALTO, CA 94301			C If exemption application is pen	iding, check here
	ALO ALTO, CA 94301 Check all that apply: X Initial return	Initial return of a fo	rmer public charity	D 1. Foreign organizations,	check here
	Final return	Amended return	armor public charty		
	Address change	Name change		Foreign organizations meet check here and attach com	ing the 85% test, putation
H CI	Check type of organization: X Section 501(c)(3) ex	empt private foundation		E If private foundation statu	s was terminated _
	Section 4947(a)(1) nonexempt charitable trust	Other taxable private founda	ition	under section 507(b)(1)(A	
Fai	air market value of all assets at end of year J Accounti	•	Accrual	F If the foundation is in a 60	
	rom Part II, col (c), line 16)	her (specify)		under section 507(b)(1)(E	B), check here $ ightharpoonup$ L
<u>></u>					(d) Disbursements
<u>Pa</u>	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	for charitable purposes (cash basis only)
\neg	Contributions, gifts, grants, etc., received	17,365,941.		 	loggi, pagis outh)
	2 Check I if the foundation is not required to attach Sch 8	,555,511.		+	
	3 interest on savings and temporary cash investments				
	4 Dividends and interest from securities				
	5a Gross rents				
	b Net rental income or (loss)				
9	68 Net gain or (loss) from sale of assets not on line 10 Gross sales price for all				
Revenue	D assets on line 6a		0.		
æ	7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
	b Less Cost of goods sold				
-	c Gross profit or (loss)				. <u></u>
ł	11 Other income	17 265 041	0	0.	
\dashv	12 Total Add lines 1 through 11	17,365,941.	0		
	13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages			•	
ŀ	15 Pension plans, employee benefits				~
ses	16a Legal fees		R	CEIVED	
	b Accounting fees			1()	
Exper	c Other professional fees		_ اوا _	10V 1 8 2013	
Ę.	17 Interest		8 1		
and Administrative	18 Taxes				·
١	19 Depreciation and depletion 20 Occupancy		 C	ODEN, UT	 -
퉏	21 Travel, conferences, and meetings				
2	22 Printing and publications				
ratii	24 Total operating and administrative		_		
Operating	expenses. Add lines 13 through 23	0.	0	0.	
	25 Contributions, girts, grants paid	0.			
-	26 Total expenses and disbursements.	_	o		
	· · · · · · · · · · · · · · · · · · ·	, n			
	Add lines 24 and 25	0.		' 	
	Add lines 24 and 25 27 Subtract line 26 from line 12:			,	
	Add lines 24 and 25	17,365,941.	0		

For	m 99	0-PF (2012) C/O APERCEN PARTNERS LL	C	46-3	1537126 Page 2
<u></u>		Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of	·
Р	art_	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			
		Accounts receivable ▶			
	_	Less; allowance for doubtful accounts ▶			
	4	Pledges receivable ▶			
	•	Less; allowance for doubtful accounts			
	5	Grants receivable			
		Receivables due from officers, directors, trustees, and other			
	0				
	_	disqualified persons			
	′	Other notes and loans receivable			
		Less; allowance for doubtful accounts			
ets		Inventories for sale or use	 .		
Assets	l.	Prepaid expenses and deferred charges			
⋖	10a	Investments - U.S. and state government obligations			
	ь	Investments - corporate stock STMT 1	0.	17,473,570.	17,473,570.
	C	Investments - corporate bonds			
	11	Investments (and, buildings, and equipment basis			
		Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other			
	14	Land, buildings, and equipment; basis ▶			
		Less accumulated depreciation			
	15	Other assets (describe ►			
	"			-	
	16	Total assets (to be completed by all filers)	0.	17,473,570.	17,473,570.
		Accounts payable and accrued expenses			
	18	·		······································	
Liabilities		Deferred revenue			
Ę		Loans from officers, directors, trustees, and other disqualified persons			
ï	21				
_	22	Other liabilities (describe			
	l			_	
_	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here			
w	ŀ	and complete lines 24 through 26 and lines 30 and 31.			
ances		Unrestricted	0.	17,473,570.	
	25	Temporarily restricted			
Net Assets or Fund Bal	26	Permanently restricted			
Ē		Foundations that do not follow SFAS 117, check here			
Ţ		and complete lines 27 through 31.			
Ō	27	Capital stock, trust principal, or current funds			
set	•	Paid-in or capital surplus, or land, bidg., and equipment fund			
Asi	29	Retained earnings, accumulated income, endowment, or other funds			
et	30	Total net assets or fund balances	0.	17,473,570.	
_	••			· · · · · · · · · · · · · · · · · · ·	
	31	Total liabilities and net assets/fund balances	0.	17,473,570.	
_				11/11/5/5/00	
Р	art	III Analysis of Changes in Net Assets or Fund B	Balances		
1	Tota	net assets or fund balances at beginning of year - Part II, column (a), line	30		<u> </u>
'		st agree with end-of-year figure reported on prior year's return)		1	0.
•	•	r amount from Part I, line 27a		2	17,365,941.
			CATN		107,629.
		r increases not included in line 2 (itemize) UNREALIZED	GUTIA	3	17,473,570.
		lines 1, 2, and 3		4	17,473,570.
		eases not included in line 2 (itemize)	-l (b) 1 00	5	
6	Fota	net assets or fund balances at end of year (line 4 minus line 5) - Part II, c	olumn (b), line 30		17,473,570.
					Form 990-PF (2012)

WAGNER FAMILY FOUNDATION (2012) C/O APERCEN PARTNERS LLC 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 shs. MLC Co.)

(f) Depreciation allowed

(or allowable)

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

(j) Adjusted basis

as of 12/31/69

NONE

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(e) Gross sales price

(i) F.M.V. as of 12/31/69

1a

b

e

e

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(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
(h) Gain or (loss) (e) plus (f) minus (
(I) Gains (Col. (h) gain ol. (k), but not less that Losses (from col. (n -0-) or
<u>.</u>	
come	
	N/A
	74 \ \\ \

(b) How acquired P - Purchase D - Donation

2

(g) Cost or other basis

plus expense of sale

(k) Excess of col. (i)

over col. (j), if any

Part V	Qualification Under Section 4940(e) for Reduced Tax on Net Investment	inc
(Enr ontiona	aluse by domestic private foundations subject to the section 4940(a) tax on net investment income.)	

If gain, also enter in Part I, line 7

If (loss), enter -0- in Part I, line 7

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

3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6):

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

2 Capital gain net income or (net capital loss)

If (loss), enter -0- in Part I, line 8

If gain, also enter in Part I, line 8, column (c).

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

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

Yes No)
--------	---

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	Distribution ratio (col. (b) divided by col. (c))
2011			
2010			
2009			
2008	-		
2007			

2 Total of line 1, column (d)

- 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
- 4 Enter the net value of noncharitable-use assets for 2012 from Part X, line 5
- 5 Multiply line 4 by line 3
- 6 Enter 1% of net investment income (1% of Part I, line 27b)
- 7 Add lines 5 and 6
- 8 Enter qualifying distributions from Part XII, line 4

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.

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WAGNER FAMILY FOUNDATION

	990-PF (2012) C/O APERCEN PARTNERS LLC				<u> 1537</u>		<u> </u>	age 4
Par			40(e), or 4	948	see i	nstru	ction	ns)
1a E	xempt operating foundations described in section 4940(d)(2), check here 🕨 📖 and en	ter "N/A" on line 1.)	i				
	Date of ruling or determination letter: (attach copy of letter if nece		s)					_
b [Domestic foundations that meet the section 4940(e) requirements in Part V, check here	and enter 1%	þ	1				0.
	of Part I, line 27b		ŀ					
c A	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4%	of Part I, line 12, col. (b). 丿					_
2 1	ax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Oth	ners enter -0-)		2				0.
	Add lines 1 and 2			3				0.
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Ot	hers enter -0-)		4				0.
5	Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-			5				0.
6 (Credits/Payments:							
a 2	2012 estimated tax payments and 2011 overpayment credited to 2012	6a						
b E	exempt foreign organizations - tax withheld at source	6b						
c 7	ax paid with application for extension of time to file (Form 8868)	6c						
d E	Backup withholding erroneously withheld	_6d						•
	otal credits and payments. Add lines 6a through 6d			7				0.
	enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attac	ched		8				
9	Fax due If the total of lines 5 and 8 is more than line 7, enter amount owed			9				0.
10 (Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			10				
	Inter the amount of line 10 to be: Credited to 2013 estimated tax		Refunded 🚩	11				
	t VII-A Statements Regarding Activities						<u> </u>	
1a [During the tax year, did the foundation attempt to influence any national, state, or local legisla	ation or did it participa	te or intervene	ın			Yes	
	any political campaign?					1a		X
	Old it spend more than \$100 during the year (either directly or indirectly) for political purpos					1b		Х
	f the answer is "Yes" to $_{1a}$ or $_{1b}$, attach a detailed description of the activities and	d copies of any mate	enals publish	ed or				
	distributed by the foundation in connection with the activities.							3.7
	Old the foundation file Form 1120-POL for this year?					10		X
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the		^					
	1) On the foundation. > \$ 0 . (2) On foundation managers.		0.	-				
	Enter the reimbursement (if any) paid by the foundation during the year for political expendit	ture tax imposed on fo	undation					
	managers ▶ \$					١ .		v
	las the foundation engaged in any activities that have not previously been reported to the IR	157				2		<u> </u>
	f "Yes," attach a detailed description of the activities							
	las the foundation made any changes, not previously reported to the IRS, in its governing in		icorporation,	or		١,		х
	pylaws, or other similar instruments? If "Yes," attach a conformed copy of the change					3 4a		X
	Oid the foundation have unrelated business gross income of \$1,000 or more during the year	•		N.	/A	4a 4b	-	
	f "Yes," has it filed a tax return on Form 990-T for this year?			14	<i>/</i> A	5		X
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?					۰	_	
	if "Yes," attach the statement required by General Instruction T Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied eit	thor						
		uiei.						
	 By language in the governing instrument, or By state legislation that effectively amends the governing instrument so that no mandatory 	directions that conflic	t with the ctat	a law				
•		y un ections that commi	it with the stat	2 IGAA		6	x	
7 1	remain in the governing instrument?					17	X	
	Did the foundation have at least \$5,000 in assets at any time during the year?					 -		
	If "Yes," complete Part II, col (c), and Part XV Enter the states to which the foundation reports or with which it is registered (see instruction	ne\						
Oal	CA					i		
, ,	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the At	Horney General (or dec	innate)					
	of each state as required by General Instruction G? If "No," attach explanation	winey denotal (of des	igilale)			8b	x	}
	or each state as required by General Instruction G211 No, "attach explanation" Is the foundation claiming status as a private operating foundation within the meaning of sec	ction 4942/i)/2) or 40/	2(1)(5) for cal	ndar		"	 	
	year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If "Yes," ca		e())(o) for car	muai		9	l	x
	Did any persons become substantial contributors during the tax year? if "yes," attach a schedul		ddressee (TMT	2	10	X	ᢡ
	z.a.a, paraaria paadina dadaminan danin manaid dadining tila ami jami ili 100, dilibili dibilibili.							

Part VII-A Statements Regarding Activities (continued)			
11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?	1 1		
If "Yes," attach statement (see instructions)	12		X
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
Website address ► N/A			
14 The books are in care of ► THE FOUNDATION Telephone no. ► 650-80		L00	
Located at ► 314 LYTTON AVE STE 200, PALO ALTO, CA ZIP+4 ►94	301		
15 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	N/		
16 At any time during calendar year 2012, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
securities, or other financial account in a foreign country?	16		<u> </u>
See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of the foreign			
country	<u> </u>		
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.	<u> </u>	Yes	No
1a 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?	l		
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)]]		
a disqualified person?	1 1		
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	l l		
(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)?	l i		
(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.)			
b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	١١		
section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		
Organizations relying on a current notice regarding disaster assistance check here	1 1		
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected	1 . 1		37
before the first day of the tax year beginning in 2012?	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)):	1		
a At the end of tax year 2012, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
before 2012? Yes X No	1 1		
If "Yes," list the years \blacktriangleright	1 1		
b Are there any years listed in 2a for which the foundation is not 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.) N/A	2b		
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here	1 1		
3a 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	1 I		
b If "Yes," did it have excess business holdings in 2012 as a result of (1) any purchase by the foundation or disqualified persons after] !		i
b If "Yes," did it have excess business holdings in 2012 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			
b If "Yes," did it have excess business holdings in 2012 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 If "Yes," did it have excess business holdings in 2012 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 2012)	3b		77
b If "Yes," did it have excess business holdings in 2012 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 2012) N/A Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	3b 4a		X
b If "Yes," did it have excess business holdings in 2012 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 2012) N/A	-		x

WAGNER FAMILY FOUNDATION 46-1537126 Form 990-PF (2012) C/O APERCEN PARTNERS LLC Page 6 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: Yes X No (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, Yes X No any voter registration drive? Yes X No (3) Provide a grant to an individual for travel, study, or other similar purposes? (4) Provide a grant to an organization other than a charitable, etc., organization described in section Yes X No 509(a)(1), (2), or (3), or section 4940(d)(2)? (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for Yes X No the prevention of cruelty to children or animals? b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations N/A 5b section 53.4945 or in a current notice regarding disaster assistance (see instructions)? 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 」Yes □□ No N/A expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53 4945-5(d) 6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on Yes X No a personal benefit contract? 6b Х b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870 Yes X No 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? 7b b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors 1 List all officers, directors, trustees, foundation managers and their compensation. (c) Compensation (d) Contributions to employee benefit plans and deferred compensation (b) Title, and average hours per week devoted to position (e) Expense account, other (If not paid enter -0-) (a) Name and address allowances JAMES PETER WAGNER PRESIDENT/DIRECTOR 314 LYTTON AVE, SUITE 200 0. PALO ALTO, CA 94301 1.00 0 0 AMY HAIG WAGNER SECRETARY/TREASURER/DIRECTOR 314 LYTTON AVE, SUITE 200 PALO ALTO, CA 94301 1.00 0. 0 0. 2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (d) Contributions to employee benefit plans and deferred (b) Title, and average hours per week devoted to position (e) Expense account, other (a) Name and address of each employee paid more than \$50,000 (c) Compensation allowances compensation NONE

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

Part VIII Information About Officers, Directors, Trustees, Foundat Paid Employees, and Contractors (continued)	ion Managers, Highly	
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	(c) Compensation
NONE	(-)	
110212	1	
	· · · · · · · · · · · · · · · · · · ·	
	┪	
		
		
		
	_	
		
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 statistic	cal information such as the	Expenses
number of organizations and other beneficiaries served, conferences convened, research papers produ	ced, etc.	
1 N/A		
2		
3		
		 -
4		
Port IV P Comment of Decrees Polated Investments		
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on li	nos 1 and 2	Amount
	nes i and z.	
1 N/A		
2		
All other program-related investments See instructions.		
3		
Total. Add lines 1 through 3	>	0.
		Form 990-PF (2012)

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P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations,	see 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	<u>239</u> ,364.
Ь	Average of monthly cash balances	1b	
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	239,364.
е	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	239,364.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	3,590.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	235,774.
6	Minimum investment return. Enter 5% of line 5 ADJUSTED FOR SHORT TAX PERIOD	6	711.
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)	d certain	
1	Minimum investment return from Part X, line 6	1	711.
2a	Tax on investment income for 2012 from Part VI, line 5		
b	Income tax for 2012. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	_0.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	711.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	711.
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	711.
_	art XII Qualifying Distributions (see instructions)	T - 1	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	1a	0.
a		1b	0.
b	· · · · · · · · · · · · · · · · · · ·	2	<u> </u>
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	- -	
3	Amounts set aside for specific charitable projects that satisfy the:	3a	
8		3b	
b	Cash distribution test (attach the required schedule)	4	0.
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	 	<u> </u>
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment	5	0.
	Income. Enter 1% of Part I, line 27b	6	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4 Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation		
	4940(e) reduction of tax in those years	quaiilles IUI	the section

Form **990-PF** (2012)

WAGNER FAMILY FOUNDATION C/O APERCEN PARTNERS LLC

Part XIII Undistributed Income (see instructions)

	(a)	(b)	(c)	(d)
	Corpus	Years prior to 2011	2011	2012
1 Distributable amount for 2012 from Part XI, line 7				711.
2 Undistributed income, if any, as of the end of 2012	·			
a Enter amount for 2011 only			0.	
b Total for prior years:				
, ,		0.		
3 Excess distributions carryover, if any, to 2012:				
a From 2007	l			
b From 2008				
c From 2009				
d From 2010				
eFrom 2011	_			
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2012 from				
Part XII, line 4: ► \$ 0 •				
a Applied to 2011, 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	0			
(Election required - see instructions)	0.		···	
d Applied to 2012 distributable amount	0	-		0.
e Remaining amount distributed out of corpus	0.	· - ·		0.
5 Excess distributions carryover applied to 2012 (If an amount appears in column (d), the same amount must be shown in column (a))	U•		-	0.
6 Enter the net total of each column as indicated below:				
& Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years' 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 2011. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2012. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2013				711.
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 2007				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2013.				
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:				
a Excess from 2008				
b Excess from 2009				
c Excess from 2010				
dExcess from 2011				
e Excess from 2012			<u> </u>	Form 990-PF (2012)

Part XIV Private Operating F	oundations (see ins	structions and Part VI	I-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 fo	r 2012, enter the date of t	he ruling	▶					
b Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)								
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years					
income from Part I or the minimum	(a) 2012	(b) 2011	(c) 2010	(d) 2009	(e) Total			
investment return from Part X for					<u></u> _			
each year listed								
b 85% of line 2a								
c Qualifying distributions from Part XII,								
line 4 for each year listed								
d Amounts included in line 2c not								
used directly for active conduct of								
exempt activities								
e Qualifying distributions made directly			-					
for active conduct of exempt activities.								
Subtract line 2d from line 2c								
3 Complete 3a, b, or c for the								
alternative test relied upon:								
a "Assets" alternative test - enter:(1) Value of all assets								
, ,		<u>-</u>	 					
(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,	}		i					
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			1					
an exempt organization								
(4) Gross investment income Part XV Supplementary Info	rmation (Comple	te this part only	if the foundation	had \$5 000 or m	nre in assets			
at any time during t			ii the roundation	i ilda qo,ooo oi ili	510 III 4000tu			
				<u> </u>				
 Information Regarding Foundation List any managers of the foundation wh 	_	than 2% of the total con	tributions received by the	foundation before the clo	se of any tax			
year (but only if they have contributed r			and and the control by and					
SEE STATEMENT 3								
b List any managers of the foundation wh	o own 10% or more of th	e stock of a corporation	(or an equally large portion	on of the ownership of a p	artnership or			
other entity) of which the foundation ha			A management of the beauty		·			
NONE								
2 Information Regarding Contribut	ion, Grant, Gift, Loan,	Scholarship, etc., P	rograms:					
				not accept unsolicited requ	ests for funds. If			
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 num	ber or e-mail of the perso	n to whom applications	should be addressed:					
·								
b The form in which applications should I	oe submitted and informa	tion and materials they s	hould include:					
c Any submission deadlines;								
				N				
d Any restrictions or limitations on award	s, such as by geographic	ai areas, charitable fields	, KINDS Of INSTITUTIONS, OF	other factors:				

b Approved for future payment NONE	Part XV Supplementary information	(continued)	·		
a Paid during the year NONE Total b Approved for future payment NONE	3 Grants and Contributions Paid During the You	ear or Approved for Future	Payment		
a Paid during the year NONE Total b Approved for future payment NONE		If recipient is an individual, show any relationship to any foundation manager	l status of	Purpose of grant or contribution	Amount
NONE Total D. Approved for future payment NONE		or substantial contributor	recipient		
Total b Approved for future payment NONE	a Paid during the year				
Total b Approved for future payment NONE					
Total b Approved for future payment NONE	NONE				
NONE NONE					
NONE NONE					
NONE NONE					
NONE NONE					
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NONE NONE					
NONE NONE					
NONE NONE					
NONE	Total			▶ 3a	0
	b Approved for future payment				
	MONTE				
Total	NONE				
Total > 3b					
Total → 3b					
Total Description of the state					
Total 3b					
Total Description of the state					
Total Description of the state					
Total ▶ 3b					
Total ▶ 3b		<u> </u>			
Total ▶ 3b					
Total ▶ 3b					
Total ▶ 3b					
Total ▶ 3b					
	Total	<u> </u>	<u> </u>	▶ 3b	(

nter gross amounts unless otherwise indicated.		usiness income		by section 512, 513, or 514	(e)
•	(a) Business	(b) Amount	Exclu- sion	(d) Amount	Related or exempt function income
Program service revenue:	code		code	741100111	
å			+++		
b	— 		++	· 	
d	_ 		+ +		
e	_		+ +		
1	_		+ +		
g Fees and contracts from government agencies	_		+ +		
Membership dues and assessments			+		
Interest on savings and temporary cash	<u> </u>				
investments				İ	
Dividends and interest from securities					
Net rental income or (loss) from real estate:					
a Debt-financed property		· -			-
b Not debt-financed property					
Net rental income or (loss) from personal					
property					
Other investment income					
Gain or (loss) from sales of assets other					
than inventory					
Net income or (loss) from special events					
Gross profit or (loss) from sales of inventory					
Other revenue:					
a					
b					
С					
d					
e					
Subtotal. Add columns (b), (d), and (e)			0.	0.	
Total. Add line 12, columns (b), (d), and (e)				¹³	·-·
ee worksheet in line 13 instructions to verify calculation	s.)				
Part XVI-B Relationship of Activitie	es to the Accon	nplishment of	Exempt F	Purposes	
					aliabasant of
ine No. Explain below how each activity for which the foundation's exempt purposes (other				o importantly to the accom	pustituent of
the foundation's exempt purposes (other	triair by providing fund	s for such purposes)	•		
		 _			
- 	<u>-</u>	<u></u> ,	.		

Term 000 DE (2012)

Form **990-PF** (2012)

Part XVII	Information Re Exempt Organ		o and Transactions a	nd Relationships With Nonch	naritable	•	
1 Did the org			owing with any other organizatio	n described in section 501(c) of		Yes	No
			n 527, relating to political organi				
a Transfers	from the reporting founda	ition to a noncharitable exemp	ot organization of:				
(1) Cash					1a(1)		X
(2) Other	assets				1a(2)		Х
b Other trans	sactions:						٠,,
	of assets to a noncharital	• =			1b(1)		X
		ncharitable exempt organization	חכ		1b(2)		X
• •	I of facilities, equipment,	or other assets			1b(3)		X
٠.	bursement arrangements				1b(4)		X
	s or loan guarantees	mbarahin ar fiyadrayayan aalia	itations		1b(5) 1b(6)		X
• •		mbership or fundraising solici iling lists, other assets, or paid			1c		X
_				vays show the fair market value of the good		ets.	
or services	s given by the reporting fo		ceived less than fair market valu	e in any transaction or sharing arrangemen		,	
	(b) Amount involved	(c) Name of nonchari	table exempt organization	(d) Description of transfers, transactions, a	and sharing arr	rangeme	ents
		N/	<u>A</u>	<u> </u>			
			,,				
						_	
			_				
				-			
		-					
			<u> </u>				
ın section	•	r than section 501(c)(3)) or in	one or more tax-exempt organizes section 527?	zations described	Yes	X	No No
•	(a) Name of org	anization	(b) Type of organization	(c) Description of relation	onship		
	N/A			-			
		<u>-</u>					
Sign Here		nplete Declaration of preparer (oth		statements, and to the best of my knowledge lation of which preparer has any knowledge PRESIDENT Title	May the IRS or return with the shown below X Yes	e prepa (see in:	rer
	Print/Type preparer's na		er's signature	Date Check if PT	IN		
			0 ~11	self- employed			
Paid	PAUL D. KE	LLER	la DKelle		00179)
Preparer	Firm's name ► MOS	S ADAMS LLP		Firm's EIN ► 91-	01893	18	
Use Only			Green 500				
		5 OAK STREET,			11 \ 60	<i>C</i> 1	0.40
	j EU	GENE, OR 9740) <u>T</u>	Phone no. (54	1) 68		

Schedule B (Form 990, 990-EZ,

or 990-PF)
Department of the Treasury
Internal Revenue Service

Name of the organization

Schedule of Contributors

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

OMB No 1545-0047

Employer identification number

2012

WAGNER FAMILY FOUNDATION C/O APERCEN PARTNERS LLC 46-1537126 Organization type (check one) Filers of: Section: 501(c)() (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization X 501(c)(3) exempt private foundation Form 990-PF 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

certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

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

LHA 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) (2012)

Name of organization WAGNER FAMILY FOUNDATION C/O APERCEN PARTNERS LLC Employer identification number

46-1537126

Part i	Contributors (see instructions) Use duplicate copies of Part I	ıf addıtıonal space ıs needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	JAMES AND AMY WAGNER 314 LYTTON AVE, SUITE 200 PALO ALTO, CA 94301	\$\$ \$17,365,941.	Person Payroll Noncash X (Complete Part II if there is a noncash contribution)
(a) No.	(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) No.	(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) No.	(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) No.	(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) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
223452 12-		\$\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution) 1990, 990-EZ, or 990-PF) (2012)

Name of organization

WAGNER FAMILY FOUNDATION C/O APERCEN PARTNERS LLC Employer identification number

46-1537126

No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	CURITIES		
		\$ <u>17,365,941.</u>	12/27/12
(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
		s	
(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
		s	

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee				
-					

FORM 990-PF	CORPORATE STOCK		STATEMENT	1
DESCRIPTION		BOOK VALUE	FAIR MARKE	
GOOGLE FACEBOOK INC. QLIK TECHNOLOGIES INC. IMPERVA INC.		1,505,305. 13,628,727. 1,057,308. 1,282,230.	1,505,3 13,628,7 1,057,3 1,282,2	27. 08.
TOTAL TO FORM 990-PF, P	PART II, LINE 10B	17,473,570.	17,473,5	70.
FORM 990-PF L	IST OF SUBSTANTIAL CONTRIE PART VII-A, LINE 10	BUTORS	STATEMENT	2
NAME OF CONTRIBUTOR	ADDRESS			
JAMES PETER WAGNER	314 LYTTON AV PALO ALTO, CA			
AMY HAIG WAGNER	314 LYTTON AV PALO ALTO, CA			
FORM 990-PF	PART XV - LINE 1A LIST OF FOUNDATION MANAGE	ERS	STATEMENT	3

NAME OF MANAGER

JAMES PETER WAGNER AMY HAIG WAGNER

Form **8868**

(Rev. January 2013)

Application for Extension of Time To File an **Exempt Organization Return**

OMB No. 1545-1709

Internal Rev	enue Service	► File a sepa	rate appli	cation for each return.		<u> </u>	
• If you	are filing for an Aut	omatic 3-Month Extension, complet	e only Pa	rt I and check this box			▶ 🛣
	-	litional (Not Automatic) 3-Month Ext					
-	=	less you have already been granted a				n 8868.	
Electron	ic filing (e-file). Yo	u can electronically file Form 8868 if y	ou need a	3-month automatic extension of tir	ne to file (6	months for a	corporation
required	to file Form 990-T),	or an additional (not automatic) 3-mor	nth extens	ion of time. You can electronically f	ile Form 88	68 to request	an extension
of time to	file any of the form	ns listed in Part I or Part II with the exc	eption of	Form 8870, Information Return for	Transfers A	ssociated Wi	th Certain
		which must be sent to the IRS in paper					
visit www	v.irs.gov/efile and c	lick on e-file for Charities & Nonprofits.	•				<u> </u>
Part I	Automati	c 3-Month Extension of Time	. Only s	ubmit original (no copies ne	eded).		
A corpor	ation required to file	e Form 990-T and requesting an auton	natic 6-mo	inth extension - check this box and	complete		
Part I onl	у					••• ••• •••	▶ □
	corporations (Includome tax returns.	ding 1120-C filers), partnerships, REM	ICs, and ti	rusts must use Form 7004 to reque	st an extens	ion of time	
Type or	Name of exemp	t organization or other filer, see instruc	ctions.		Employer	Identification	number (EIN) or
print	WAGNER F	'AMILY FOUNDATION					
	C/O APER	CEN PARTNERS LLC				46-153	7126
File by the due date for	Number, street,	and room or suite no. If a P.O. box, se	ee instruct	tions.	Social sec	urity number	(SSN)
filing your return. See	314 LYTT	ON AVE STE 200					
Instructions	City, town or po	est office, state, and ZIP code. For a fo	reign add	ress, see instructions.			
	PALO ALT	O, CA 94301					
				-			
Enter the	Return code for th	ne return that this application is for (file	a separa	te application for each return)			0 4
Applicat	ion		Return	Application			Return
is For			Code	ls For			Code
Form 99	0 or Form 990-EZ		01	Form 990-T (corporation)			07
Form 99	0-BL		02	Form 1041-A			08
Form 47:	20 (individual)		03	Form 4720			09
Form 99	0-PF		04	Form 5227			10
Form 99	0-T (sec. 401(a) or 4	108(a) trust)	05	Form 6069			11
Form 99	0-T (trust other than	n above)	06	Form 8870			12
	ooks are in the car	e of 🕨					<u></u>
	hone No. 🕨						. —
		not have an office or place of business					
		urn, enter the organization's four digit					
box 🕨		t of the group, check this box				ers the extens	sion is for.
1 In	•	c 3-month (6 months for a corporation	-	·			
_		, to file the exemp	t organiza	tion return for the organization nam	ned above.	i he extensior	ו
	for the organization						
	X calendar year						
	tax year begii	nning	, an	d ending	~	- ·	
2 lf t	the tax year entered Change in acco	d in line 1 is for less than 12 months, counting period	heck reas	on: Initial return	Final return	า	
32 H	this annlication is fo	or Form 990-BL, 990-PF, 990-T, 4720, (or 6069 a	enter the tentative tay loss any			
		s. See instructions.	UI UUU3, 8	inter die terriauve tax, iess arry	3a	\$	0.
		or Form 990-PF, 990-T, 4720, or 6069,	enter any	refundable credite and	3a	Ψ	
		nts made. Include any prior year over	_		3b	\$	0.
_		ct line 3b from line 3a. Include your pa			- 33		
		ctronic Federal Tax Payment System).	-		3c	\$	0.
		make an electronic fund withdrawal				EO for payme	

223B41 01-21-13

LHA

Form 8868 (Rev. 1-2013)

For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form 8868 (Rev. 1-2013)						Page 2	
• If you are filing for an Additional (Not Automatic) 3-Month Ex	tension, d	complete only Part II and check this	box		▶	\mathbf{X}	
Note. Only complete Part II if you have already been granted an a	utomatic	3-month extension on a previously fi	led Form	8868.			
• If you are filing for an Automatic 3-Month Extension, complete							
Part II Additional (Not Automatic) 3-Month E	xtensio	n of Time. Only file the origin	al (no c	opies n	eeded).		
		Enter filer's	identifyir	ig numbe	r, see inst	ructions	
Type or Name of exempt organization or other filer, see instru	ctions		Employe	ridentifica	ation numb	er (EIN) or	
int WAGNER FAMILY FOUNDATION							
File by the C/O APERCEN PARTNERS LLC				46-1	<u>.53712</u>	6	
Number, street, and room or suite no. If a P.O. box, s	ee instruc	tions.	Social se	cunty nur	nber (SSN)		
return See 314 LYTTON AVE STE 200							
City, town or post office, state, and ZIP code. For a fo	oreign add	ress, see instructions.					
PALO ALTO, CA 94301							
Enter the Return code for the return that this application is for (file	e a separa	te application for each return)				0 4	
Application	Return	Application				Return	
Is For	Code	Is For				Code	
Form 990 or Form 990 EZ	01						
Form 990-BL	02	Form 1041-A				08	
Form 4720 (individual)	03	Form 4720				09	
Form 990-PF	04	Form 5227				10	
Form 990-T (sec. 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 autor	natic 3-month extension on a prev	riously file	d Form 8	3868.		
The books are in the care of							
Telephone No. ▶		FAX No			-	_	
 If the organization does not have an office or place of business 							
 If this is for a Group Return, enter the organization's four digit 							
		ich a list with the names and EINs of	f all memb	ers the e	idension is	ior.	
•		BER 15, 2013.					
5 For calendar year, or other tax year beginning1	DEC 1		g_DEC	31,	2012	·	
6 If the tax year entered in line 5 is for less than 12 months, c	heck reas	on: X Initial return	Final i	return			
Change in accounting period							
7 State in detail why you need the extension							
	GATHE	R THE INFORMATION	NECES	SARY	TO FI	LE A	
COMPLETE AND ACCURATE RETURN							
							
8a If this application is for Form 990-BL, 990-PF, 990-T, 4720,	or 6069, e	enter the tentative tax, less any		l		•	
nonrefundable credits. See instructions.	_		8a_	<u>s</u>		0.	
b If this application is for Form 990-PF, 990-T, 4720, or 6069,	-						
tax payments made. Include any prior year overpayment all	lowed as a	a credit and any amount paid		ĺ		_	
previously with Form 8868.			8b	S		<u> </u>	
 Balance due. Subtract line 8b from tine 8a. Include your pa 	lyment wi	th this form, if required, by using	ŀ			_	
EFTPS (Electronic Federal Tax Payment System). See instru			<u>8c</u>	<u> </u>		<u> </u>	
G		st be completed for Part II o	•				
Under penalties of perpury, I declare that I have examined this form, includ it is true, correct, and complete, and that I am authorized to prepare this fo	ling accomp orm.	panying schedules and statements, and t				:hef,	
Signature Title > 0	CPA		Date	× K/	12/13		
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