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

OMB No 1545-0052

2009

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 c | ale | nda | r year 2009, or | tax year beginni | ing | | , 2009 | and end | lina | | | | |
|-------------------|----------------------------|--|---|---|----------------------|-------------------------|---------------------------------------|---|---------------------------------------|------------------------|--|---------------------------|--|
| | | | II that apply | Initial return | 724 | tial Return | of a former p | ' | | | ··-· | T F | nal return |
| | | | | Amended ret | | | Address | | · — | | change | Ш'' | narretum |
| | | | | Amended ret | um | - | Address | change | INa | T. | | 1.0 | |
| Use IRS I | | | BOUKAT EN | MILY FOUND | ייי ראי | | | | | ^ | Employer iden | | umber |
| Other | | | 7 CHAPARR | | ATTOM | | | | | L | 01-0788 | | |
| pr | ınt | - 1 | | S, CA 92688 |) | | | | | В | Telephone nun | nber (see th | e instructions) |
| ort | ype | | IAS LIONE. | 5, CA 92000 | , | | | | | ┕ | | | |
| See Sp | See Specific Instructions. | | | | | | | | | C | | | is pending, check here 🕨 |
| | | L | | | | | | | |] D | 1 Foreign organi | zations, ch | eck here |
| Н | <u>Çh</u> | ٦ . | type of organiz | | | | mpt private | | | | 2 Foreign organi | zations me | eting the 85% test, check |
| | L | Se | ction 4947(a)(1 |) nonexempt cha | | | her taxable | private fo | undation |]_ | here and attac | | |
| | | | rket value of all ass | | J Aco | counting m | ethod XC | ash | Accrual | E | under section | dation stat 507/63/13/ | us was terminated |
| | (IIC | m Pa | art II, column (c), lu | ne 16) | | Other (specif | y) | | | F | If the foundati | on is in a f | 60-month termination |
| <u> </u> | \$ | | | | (Part I | , column (c | l) must be o | n cash ba | isis) | ľ | under section | 507(b)(1)(| B), check here |
| Part | <u> </u> | | nalysis of R | | | (a) Rev | enue and | (h) No | t investme | nt | (c) Adjust | od not | (d) Dishursome etc |
| | | E | xpenses (The | e total of amount | s ın | evnenses | s per books | | ncome | :111 | incon | | (d) Disbursements for charitable |
| | | CC | DIUMNS (D), (C), and equal the s | and (d) may not amounts in colum | neces- | ' | • | | | | | | purposes |
| | | (5 | ee the instructi | ons)) | iii (a) | 1 | | | | | | | (cash basis only) |
| | Т | 1 | Contributions, gifts | s, grants, etc, received | (att sch) | | 176,603. | . 1400 | ţ. | \$C 28 |) AL 3 / | .1686 | 7 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 |
| | | 2 | | foundn is not req to at | | | - 1 % set | | 15°23''' | , | Tribally. | | : 1.24 |
| | | 3 | Interest on sa | vings and tempo | rary | | | <u> </u> | | | , sp. 40.57 K | | |
| | | _ | cash investme | | | | 207. | | 20 | <u>)7.</u> | | 207 | |
| 10 | | 4 | | erest from securities | | | | | | | | | 1 N. N. |
| 2010 | | | Gross rents Net rental income | | | V 1 32 3 45 | | , | OR 1 OR 1 + N 1 | | | 4.4 | N 138 1 1 1 1 1 |
| | | _ | or (loss) | | | 1 54.5. | · | 94) | | | ļ | */: <u> </u> | |
| -F | | | Net gain/(loss) from Gross sales price f | m sale of assets not or | n line 10 | 3 % | ## U : | 7 100 | A. A. A. | ~** _{\$8} ,5. | 1 0 000 | #85.2 % | |
| Ţ | - | _ | assets on line 6a | | | 4757 (0.2) | | `* ⁴⁸ \$1 | | | | () | |
| CANNED APRALLI | | 7 | | come (from Part IV, Iir | ne 2) | 7, 3% 4 | <u> </u> | | | 2 *** | , '; | 182 272 | |
| ₹, | | 8 9 | Net short-term Income modifi | | | 8 s | \$ 4 's | 461 / ******* | | 3 889 | 1. | | |
| ΩĔ | - | _ | Gross sales less returns and | | | 1 15 killing 2 alb. c . | · · · · · · · · · · · · · · · · · · · | ******** | E'M ELVI | | ** 46 00 1 | 86-23 | |
| Щ | | 104 | returns and allowances | | | | , | k,, - ``.s | | 1. | * | | |
| | | b | Less Cost of goods sold | | | | la'. | P. Maria | 77 34 V V | l i | \$ | *** ** | The state of the s |
| ₹ | | , | • | (att sch) | | *38. | \$ \$ 15. | 4 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 | · · · · · · · · · · · · · · · · · · · | 1.33 | 1 E ! C > 'L' 2 | | |
| <u>ල</u> | | c Gross profit/(loss) (att sch) 11 Other income (attach schedule) | | 1 | | | | <u> </u> | | | | | |
| W , | | • | | (attaon sonedate | , | | | | | | | | 1 / 18/18/7 |
| | | 12 | Total. Add line | es 1 through 11 | | 1 | 76,810. | | 20 | 17 | | 207. | 1/2 mg/s 1/4 |
| | Ť | 13 | | officers, directors, trust | ees, etc. | <u> </u> | 0. | | | <u> </u> | | 201 | · · · · · · · · · · · · · · · · · · · |
| | | 14 | Other employee sa | alaries and wages | | | | | | | | | |
| | | 15 | Pension plans | s, employee bene | fits | | | | | | Ī | | |
| А | | 16 a | Legal fees (attach | schedule) | | | | | | = | 1) /ED | ī | |
| D M | | b | Accounting fees (a | attach sch) See | St. 1 | | 893. | | - REC | ٦Ļ | : ∨∟∪ | | |
| , N | | | Other prof fees (a | • | | _ | | | <u> </u> | | 1 | اد | |
| O i | - 1 | 17 | Interest | , | | _ | | 52 | \ \D |) M | 2 2010 | | |
| O P E R A T I | | 18 | Taxes (attach schedule) | (see instr.) | | | | 8 | 1 AFP | , v | 12 - | 'n | 1 |
| R A A | | 19 | | | | | | | <u> </u> | | | Ĕ | <u> </u> |
| ŢŢ | | | sch) and deple | etion | | | | | 001 | JE | N. UT | | » ^ ' |
| N V | | 20 | Occupancy | | | | | ـ | | | 1, 0, | <u> </u> | |
| | | 21 | | ences, and meet | ings | | | | | | ļ | | |
| A E N X D P | | 22 23 | Printing and p | es (attach schedu | | | _ | | | | ļ | | |
| U P | | 23 | Other expense | See Stateme | ne) | | 107 | | | | | | |
| E N S | | 24 | | | | | 107. | | | | - | | |
| S E S | | 24 | expenses. Add | i g and administra d lines 13 through | au ve h 23 | | 1,000. | | | | | | |
| 3 | | 25 | | s, grants paid Part | | 1 | 70,985. | | | | - | | 170,985. |
| | - 1 | | | s and disbursen | | | .,0,,00. | | | | | | 110, 303. |
| | | | Add lines 24 a | ind 25 | | 1 | 71,985. | | | 0. | | 0. | 170,985. |
| | Τ | | Subtract line 2 | 26 from line 12: | | | | | | | 1 | | |
| | | a | Excess of reve | enue over expen | ses | | | | | | | | |
| | | | and disburser | | | | 4,825. | | | | <u> </u> | | |
| | | | | ome (if negative, ente | | | | | 20 | 7. | | | ı |
| | L | <u> </u> | Adjusted net incon | ne (if negative, enter - | 0-) | | | | | | 1 | 207. | |

Page 2

| D | 11 | D. I | Attached schedules and amounts in the description column should be for end-of-year amounts only | Beginning of year | E | nd of | r year |
|---------------|------|--|---|--|--|---------------|---|
| ran | 11, | Balance Sheets | column should be for end-of-year amounts only (See instructions) | (a) Book Value | (b) Book Value | | (c) Fair Market Value |
| | 1 | Cash - non-interest | <u> </u> | 6,354. | 4,00 | | |
| | _ | | ary cash investments | 66,186. | 78,36 | _ | |
| | 2 | | ary cash investments | | | / | * * - * 3: 2 |
| | 3 | Accounts receivable | [| | | | |
| | _ | Less allowance for | doubtful accounts | | | | · · · · · · · · · · · · · · · · · · · |
| | 4 | Pledges receivable | | and account attitudes an among a special and | | | |
| | | Less allowance for | doubtful accounts ► | | | \dashv | |
| | 5 | Grants receivable | | | | | |
| | 6 | Receivables due from offic disqualified persons (atta | cers, directors, trustees, and other ch schedule) (see the instructions) | | | | |
| | 7 | Other notes and loans rec | eivable (attach sch) | | | | |
| A | | Less allowance for | doubtful accounts > | | | | |
| Š | 8 | Inventories for sale | or use | | | | |
| Ē | 9 | Prepaid expenses a | nd deferred charges | | | | |
| A S S E T S | | , , | and state government | | | | |
| | 1 | b Investments — corporate | stock (attach schedule) | | | | |
| | l | c Investments — corporate | · · · · · · · · · · · · · · · · · · · | | | | |
| | l | Investments – land, | · · · | 28.61 | , | ise i | |
| | '' | equipment basis. | | | | , , | |
| | | Less: accumulated deprec (attach schedule) | rauon ► | | | ļ | |
| | 12 | Investments - morte | gage loans | | | | |
| | 13 | | | | | | |
| | 14 | Land, buildings, and e | | 2 42 22 48 5 | | 7 | .; .*// . x; '24 |
| | | Less accumulated deprec (attach schedule) | |) All Marie | er distinuituu eseesitä Konsentinen konsen | | reaction of the second of authorities and |
| | 15 | • | he▶) | | | | |
| | | Total assets (to be | completed by all filers — o, see page 1, item I) | 72,540. | 82,36 | 55. | 0. |
| Ļ | 17 | Accounts payable ar | nd accrued expenses | | 5,00 | 00. | 4 " (! * 1/4%s, 1 |
| Ĭ | 18 | Grants payable | · | | | | |
| A B | 19 | Deferred revenue | | | | | |
| .! | 20 | | tors, trustees, & other disqualified persons | | | | |
| ī | 21 | | s payable (attach schedule) | | | | |
| Ť | 22 | Other liabilities (descr | ' ' ' | | | \neg | |
| F | | Other habilities (desci | | | | | |
| <u>S</u> | 23 | | lines 17 through 22) | 0. | 5,00 | <u> </u> | |
| | | and complete lines | llow SFAS 117, check here 24 through 26 and lines 30 and 31. | | | | |
| N F E U | 24 | Unrestricted | | | | | |
| TN | 25 | Temporarily restricted | | | | | |
| , D | 26 | Permanently restrict | | | | | |
| A B S A L T A | | Foundations that do and complete lines | o not follow SFAS 117, check here X 27 through 31. | | | | |
| LL | 27 | Capital stock, trust p | orincipal, or current funds | | | | y * 3 |
| SŅ | 28 | Paid-in or capital surplus | , or land, building, and equipment fund | | | | ** |
| O E | 29 | Retained earnings, accum | ulated income, endowment, or other funds. | 72,540. | 77,30 | 65. | |
| RS | 30 | Total net assets or | fund balances (see the instructions) | 72,540. | 77,30 | 65. | |
| | 31 | | net assets/fund balances | 72,540. | 82,3 | | 2 d marco |
| Part | 111 | Analysis of Char | ges in Net Assets or Fund Balanc | es | | | |
| | Tota | I net assets or fund b | alances at beginning of year — Part II, colu d on prior year's return) | | gree with | 1 | 72,540. |
| 2 | | er amount from Part I, | | | ļ | 2 | 4,825. |
| | | increases not included in t | | | ŀ | 3 | |
| | | lines 1, 2, and 3. | | | · - | 4 | 77,365. |
| 5 | | eases not included in line 2 | (Itomiza) > | | ŀ | 5 | |
| _ | | | alances at end of year (line 4 minus line 5) | - Part II column (b) | line 30 | 6 | 77,365. |
| | 1010 | n nocussous at talla D | alances arena di veal unie 4 milius Mic Ji | | | | |

| (a) List and descr 2-story brick wareho | ibe the kind(s) of property sold (e.g., rouse, or common stock, 200 shares ML | eal estate, C Company) | (b) How acquired P — Purchase D — Donation | (C) Date acquired (month, day, year) | (d) Date sold (month, day, year) |
|---|---|---|--|--|---|
| 1a N/A | | | | | |
| b | | | | | |
| с | | | | | |
| d | | | | | |
| <u>e</u> | | 43.0 | | 42.02.22 | (1000) |
| (e) Gross sales price | (f) Depreciation allowed (or allowable) | (g) Cost or other ba plus expense of sa | sis le | (h) Gain or (e) plus (f) m | |
| a | | ···· | - | | |
| <u>b</u> | | | | | |
| d d | | | | | |
| e | | | - | | |
| | owing gain in column (h) and owned by | the foundation on 12/31/6 | 9 | (I) Gains (Coli | umn (h) |
| (i) Fair Market Value as of 12/31/69 | | | <u>) (i) </u> | gain minus column (k an 0-) o r Losses (fr | k), but not less |
| a b | | | | | |
| C | | | | | |
| d | | | | | |
| e | | | | | |
| 2 Capital gain net income or (i | net capital loss) If gain, also | enter in Part I, line 7 er -0- in Part I, line 7 | . 2 | | |
| 3 Net short-term capital gain of | or (loss) as defined in sections 1222(5) | _ | | | |
| | ine 8, column (c) (see the instructions) | If (loss), enter -0- | . 3 | | |
| In Part I, line 8 Part V Qualification Und | ler Section 4940(e) for Reduced | Tay on Net Investme | | 1 | · · · · · · · · · · · · · · · · · · · |
| | e trils part blarik section 4942 tax on the distributable an ualify under section 4940(e) Do not co | | se period? | Yes | ☐ No |
| Enter the appropriate amour | nt in each column for each year, see th | e instructions before makir | ng any entries. | | |
| (a) Base period years Calendar year (or tax year beginning in) | (b) Adjusted qualifying distributions | (c) Net value of noncharitable-use as | sets (col | (d) Distribution umn (b) divided | |
| 2008 | | | | | |
| 2007 | | | | | |
| 2006 | | | | | |
| 2005 | _ | - | | | |
| 2004 | | | | | |
| 2 Total of line 1, column (d) | | | 2 | | |
| | the 5-year base period — divide the to ion has been in existence if less than 5 | | 3 | | ···· |
| 4 Enter the net value of nonch | arıtable-use assets for 2009 from Part | X, line 5 | 4 | | |
| 5 Multiply line 4 by line 3 | | | 5 | | <u></u> |
| 6 Enter 1% of net investment | income (1% of Part I, line 27b) | | 6_ | | |
| 7 Add lines 5 and 6 | | | 7 | | |
| 8 Enter qualifying distributions | from Part XII, line 4 | | 8 | | |
| If line 8 is equal to or greate Part VI instructions | r than line 7, check the box in Part VI, | line 1b, and complete that | part using a 1 | % tax rate See | the |

| Form | 990-PF (2009) BOUKAI FAMILY FOUNDATION | 01-07 | <u>88855</u> | | _ Pa | age 4 |
|------|--|-------------------------|-----------------------|-----------------|---|--|
| Part | VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 | - see the | e instruc | tions) | | |
| 1 a | Exempt operating foundations described in section 4940(d)(2), check here and enter 'N/A' on line 1 | | ži Ž. | 3.3 | , î | |
| | Date of ruling or determination letter (attach copy of letter if necessary - see instr.) | İ | | | | |
| b | Domestic foundations that meet the section 4940(e) requirements in Part V, | - [_ | 1 | | | 4. |
| | check here ► and enter 1% of Part I, line 27b | | 2. | | | . : |
| С | All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, column (b) | | 255 | | | |
| 2 | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable | | 11.3 | / | 1 /, 4 lin' | 1 |
| _ | foundations only Others enter -0-) | | 2 | | | 0. |
| 3 | Add lines 1 and 2 | | 3 | | | 4. |
| 4 | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0 | 0-) | 4 | | | 0. |
| 5 | Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- | L | 5 | - | | 4. |
| 6 | Credits/Payments | | 1.2 | | ~ | 7 |
| а | 2009 estimated tax pmts and 2008 overpayment credited to 2009 6a | | 333 | , , | | |
| b | Exempt foreign organizations — tax withheld at source 6b | | | * | () | (4 |
| c | Tax paid with application for extension of time to file (Form 8868) 6c | | | | | (3 |
| d | Backup withholding erroneously withheld 6d | | | أسمال المستعالب | | |
| 7 | Total credits and payments Add lines 6a through 6d | | 7 | | | 0. |
| 8 | Enter any penalty for underpayment of estimated tax. Check here | | 8 | | | |
| 9 | Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed | ▶ | 9 | | | 4. |
| 10 | Overpayment if line 7 is more than the total of lines 5 and 8, enter the amount overpaid | ▶ 1 | 0 | | | |
| _11 | Enter the amount of line 10 to be Credited to 2010 estimated tax | _ ▶ 1 | 1 | | | |
| Parl | VII-A Statements Regarding Activities | | | | | |
| 1 a | During the tax year, did the foundation attempt to influence any national, state, or local legislation or did participate or intervene in any political campaign? | d it | | 1a | Yes | No X |
| b | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)? | | | 1 b | | Х |
| | If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any material or distributed by the foundation in connection with the activities | als publi | shed | ii. | Ą. | 3 7 |
| c | Did the foundation file Form 1120-POL for this year? | | | 1 c | *************************************** | Х |
| | Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year | | _ | | | |
| | (1) On the foundation $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$ | | 0. | | | k id |
| е | Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imp foundation managers \$ 0. | osea on | | | l | 1 |
| 2 | Has the foundation engaged in any activities that have not previously been reported to the IRS? | | | 2 | v 800 x | X |
| 2 | If 'Yes,' attach a detailed description of the activities | | | 3 | š. 8 | |
| 3 | Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, a of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the change | articles <i>es</i> | | 3 | Ž. | X_ |
| | Did the foundation have unrelated business gross income of \$1,000 or more during the year? | | | 4a | | X |
| b | If 'Yes,' has it filed a tax return on Form 990-T for this year? | | | 4b | N | |
| 5 | Was there a liquidation, termination, dissolution, or substantial contraction during the year? | | | 5 | | X |
| | If 'Yes,' attach the statement required by General Instruction T | | | 1 3 1 | | Σ |
| 6 | Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either | | | | | |
| | By language in the governing instrument, or | | | | | |
| | • By state legislation that effectively amends the governing instrument so that no mandatory directions to | that conf | flict | -4 | - + | نــــــن |
| | with the state law remain in the governing instrument? | | | 6 | X | |
| 7 | Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV | | | 7 | X | |
| 8 a | Enter the states to which the foundation reports or with which it is registered (see the instructions) CA | | | | ~ | |
| b | of the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by <i>General Instruction G? If 'No,' attach explanation</i> | | | 8ь | Х | ······································ |
| 9 | Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If 'Yes,' co |)(3) or 49 implete l | 942(J)(5) Part XIV | 9 | | X |
| 10 | Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing and addresses | their nai | | 10 | | X |
| BAA | | | Fo | orm 990 |)-PF (| 2009) |

| Form 990-PF (2009) BOUKAI FAMILY FOUNDATION 01-078 | 8855 | Page 5 |
|---|-----------------|---------------------|
| Part VII-A Statements Regarding Activities Continued | | |
| At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes', attach schedule (see instructions). | 11 | X |
| 12 Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008? | 12 | X |
| 13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ▶ N/A | | Х |
| 14 The books are in care of ► AMER BOUKAI Telephone no ► | | |
| Located at ► 7 CHAPPARAL CT LAS FLORES CA ZIP + 4 ► 92688 | | |
| 15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here | N/A | . ▶ |
| and enter the amount of tax-exempt interest received or accrued during the year | | N/A |
| 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. | \$ 31 | Yes No |
| 1 a During the year did the foundation (either directly or indirectly) | 3, | |
| (1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X | No | |
| (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? Yes | | |
| (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? $\qquad \qquad | 1.5 | |
| (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? $\qquad \qquad | 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 | No | |
| for the benefit or use of a disqualified person)? | 10 | |
| (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) | No No | |
| b If any answer is 'Yes' to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see the instructions)? | 1 b | N/A |
| Organizations relying on a current notice regarding disaster assistance check here | i | 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 before the first day of the tax year beginning in 2009? | | |
| 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)) | | |
| a At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2009? | No | |
| If 'Yes,' list the years ▶ 20 , 20 , 20 , 20 | | 6.0 8. |
| 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 the instructions.) | 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 here | | 13,5 |
| ► 20 , 20 , 20 | * * | |
| 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 : | |
| b If 'Yes,' did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation | j | . \$ |
| 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 2009) | 3b | N/A |
| • | | |
| 4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? | <u>4a</u> | X |
| b Did the foundation make any investment in a prior year (but after December 31, 1969) that could | | |
| jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2009? | 4b | $- \frac{1}{x}$ |
| BAA | | 90-PF (2009) |

| Form 990-PF (2009) BOUKAI FAMILY FOUN | | | 01-07 | 88855 Page 6 |
|--|--|--|--|---------------------------------------|
| Part VII-B Statements Regarding Activit | | n 4720 May Be Req | uired (continued) | |
| 5a During the year did the foundation pay or incu | r any amount to: | | | . |
| (1) Carry on propaganda, or otherwise attempt | ot to influence legislation | on (section 4945(e))? | Yes X | No |
| (2) Influence the outcome of any specific pub on, directly or indirectly, any voter registra | lic election (see section ation drive? | n 4955); or to carry | Yes X |] No |
| (3) Provide a grant to an individual for travel, | - | | 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 instr | rganization described uctions) | Yes X |] No |
| (5) Provide for any purpose other than religio educational purposes, or for the preventio | us, charitable, scientific n of cruelty to children | c, literary, or or animals? | Yes |] 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 regar | qualify under the exception ding disaster assistance | tions | 5b 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 tax because it maintained expenditure responsif 'Yes,' attach the statement required by Region 1. | sibility for the grant? | · | N/A Yes |] No |
| 6a Did the foundation, during the year, receive ar on a personal benefit contract? | ny funds, directly or ind | lirectly, to pay premiums | Yes X | No |
| b Did the foundation, during the year, pay premi | iums, directly or indirec | etly, on a personal bene | | 6b X |
| If 'Yes' to 6b, file Form 8870 7a At any time during the tax year, was the found | tation a norty to a arch | uhitad tav shaltar transa | ction? Yes X | No |
| b If yes, did the foundation receive any proceed | | | | 7b N/A |
| Part VIII Information About Officers, D | | | | |
| and Contractors | | | , o. o, g , | |
| 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 account, other allowances |
| ZIAD BOUKAI | President | 0. | 0. | 0. |
| 7 CHAPARRAL CT. | 0 | | | |
| LAS FLORES, CA 92688 | | | | |
| AMER BOUKAI | Treasurer | 0. | 0. | 0. |
| 7 CHAPARRAL CT | 0 | | | |
| LAS FLORES, CA 92688 | | | · · · · · · · · · · · · · · · · · · · | |
| AKMRAM BOUKAI | Director | 0. | 0. | 0. |
| 7 CHAPARRAL CT | 0 | | | |
| LAS FLORES, CA 92688 | | | | |
| | | | | |
| 2 Compensation of five highest-paid employee | es (other than those inc | cluded on line 1— see ir | structions). If none, e | enter 'NONE.' |
| (a) Name and address of each employee | (b) Title and average | (c) Compensation | (d) Contributions to | (e) Expense account, |
| paid more than \$50,000 | hours per week devoted to position | | employee benefit plans and deferred | other allowances |
| No. | | | compensation | |
| None | | | | |
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| | | | | |
| | | | | |
| Total number of other employees paid over \$50,000 |) TEEA0306L (| 07/06/09 | | Form 990-PF (2009) |

Form 990-PF (2009)

BAA

3 Amounts set aside for specific charitable projects that satisfy the a Suitability test (prior IRS approval required) **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 4 170,985 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income 5 Enter 1% of Part I, line 27b (see instructions)

6 Adjusted qualifying distributions. Subtract line 5 from line 4 The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation

qualifies for the section 4940(e) reduction of tax in those years.

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Form 990-PF (2009)

170,985.

6

Part XIII Undistributed Income (see instructions)

| - | | (a) Corpus | (b) Years prior to 2008 | (c) 2008 | (d) 2009 |
|------------------|--|---------------------------------------|--|--------------------|--------------------|
| 1 Distri | butable amount for 2009 from Part XI, | | | | |
| | ributed income, if any, as of the end of 2009. | | | | 0. |
| | amount for 2008 only | | | 0. | |
| b Total f | or prior years 20, 20, 20 | | 0. | | |
| 3 Excess | distributions carryover, if any, to 2009 | | | | |
| a From | | | | | |
| b From | | | | | |
| c From | | | | | |
| d From | | | , | | |
| e From | <u> </u> | | | | * |
| | of lines 3a through e | 843,055. | | | |
| | fying distributions for 2009 from Part | | | | |
| | ne 4 \$ 170,985. | | | | |
| а Арри | ed to 2008, but not more than line 2a | * | | 0. | <u> </u> |
| | ed to undistributed income of prior years tion required – see instructions) | ^ | 0. | | < v-v |
| | ed as distributions out of corpus tion required — see instructions) | 0. | | | × . |
| • | ed to 2009 distributable amount | 1 | ······································ | | 0. |
| | aining amount distributed out of corpus | 170,985. | | | |
| | distributions carryover applied to 2009 | 0. | | | 0. |
| (If ar | amount appears in column (d), the amount must be shown in column (a)) | | * } | { | \ < |
| Same | amount must be shown in column (a) | , " | | | , |
| | the net total of each column as ated below: | | | | 4 |
| | Add lines 3f, 4c, and 4e Subtract line 5 | 1,014,040. | | | |
| b Prior | years' undistributed income Subtract | · | | | , + |
| line 4 | b from line 2b | - | 0. | \$ | <u> </u> |
| c Enter | the amount of prior years' undistribut- come for which a notice of deficiency | v 🗱 💰 | | | |
| has b | een issued, or on which the section | | • | | |
| 4942 | (a) tax has been previously assessed | ~ y | 0. | | |
| | act line 6c from line 6b Taxable int — see instructions | * | 0. | | |
| | | ∮ ∗ ∴ | | | |
| | ubuted income for 2008 Subtract line 4a from . Taxable amount — see instructions | * * | | 0. | ! |
| 11110 22 | Taxable amount | * * * * * * * * * * * * * * * * * * * | | | |
| | tributed income for 2009 Subtract lines | ì | | | |
| | d 5 from line 1 This amount must be outed in 2010 | | | | 0. |
| | ints treated as distributions out of | | | | |
| corpu by se | s to satisfy requirements imposed ction 170(b)(1)(F) or 4942(g)(3) | | | | |
| (see | nstructions) | 0. | | | |
| 8 Exce | ss distributions carryover from 2004 not | | | | ļ |
| appli | ed on line 5 or line 7 (see instructions) | 128,650. | | | |
| 9 Exce Subtr | ss distributions carryover to 2010. act lines 7 and 8 from line 6a | 885,390. | | | |
| | rsis of line 9 | 200,000 | | | |
| - | ss from 2005 150, 205. | | | | |
| b Exce | ss from 2006 231, 650. |] | | | |
| c Exce | ss from 2007 168, 900. | | | | |
| d Exce | ss from 2008 163,650. | | | | |
| e Exce | ss from 2009 170, 985. | | | | |

| Form 990-PF (2009) BOUKAI FAMILY FOU | | | <u>.</u> | 01-0788855 | <u> </u> |
|---|-------------------------------------|---|--|---|----------------------------------|
| Part XIV Private Operating Foundation | | | | | N/A |
| 1a If the foundation has received a ruling or consistency is effective for 2009, enter the date of the | ruling | | | > | - |
| b Check box to indicate whether the foundat | | erating foundation o | | 4942(j)(3) or | 4942(j)(5) |
| 2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed | Tax year (a) 2009 | (b) 2008 | (c) 2007 | (d) 2006 | (e) Total |
| 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 | | | | | |
| 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(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 | | | | | ** |
| Part XV Supplementary Information assets at any time during th | | | organization h | ad \$5,000 or mor | e in |
| 1 Information Regarding Foundation Managa List any managers of the foundation who had close of any tax year (but only if they have See Statement 3 | nave contributed m | nore than 2% of the than \$5,000) (See | total contributions section 507(d)(2).) | received by the found | ation before the |
| b List any managers of the foundation who can partnership or other entity) of which the None | own 10% or more of foundation has a | of the stock of a cor 10% or greater inter | poration (or an equest | ially large portion of the | ne ownership of |
| 2 Information Regarding Contribution, Gran Check here ▶ X If the foundation only n requests for funds If the foundation makes complete items 2a, b, c, and d | nakes contribution | s to preselected cha | ritable organization | ns and does not accep panizations under othe | ot unsolicited er conditions, |
| a The name, address, and telephone numbe | r of the person to | whom applications | should be addresse | ed | |
| b The form in which applications should be s | submitted and info | rmation and materia | als they should incl | ude | |
| c Any submission deadlines | | | | | |
| d Any restrictions or limitations on awards, s | such as by geogra | phical areas, charita | able fields, kinds of | institutions, or other | factors |

| 3 Grants and Contributions Paid During the Y | ear or Approved for Fut | ure Paymen | nt | |
|--|---|----------------------|-------------|----------|
| Recipient | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of | T | Amount |
| Name and address (home or business) | substantial contributor | recipient | | |
| a Paid during the year See Statement 4 | | | | |
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| | | | | |
| Tabel | | | ▶ 3a | 170,985 |
| Total b Approved for future payment | | T | | 170,965 |
| u Approved for lattire payment | | | | |
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| Total | | | <u>► 3t</u> | <u> </u> |

Part XVI-A Analysis of Income-Producing Activities

| nter gross amounts unless otherwise indicated | Unrelated | business income | Excluded by | section 512, 513, or 514 | |
|--|-------------------------|----------------------|--|--------------------------|---|
| 1 Program service revenue | (a) Business code | (b) Amount | (c) Exclu- sion code | (d) Amount | (e) Related or exempt function income (see the instructions |
| a | | ··- | | | |
| b | | | | | |
| c | | | | | |
| d | | ··· | | | |
| e | ļ | | - | | |
| <u> </u> | | | 1 | | |
| g Fees and contracts from government agencies | | | | | |
| 2 Membership dues and assessments | | | - | | |
| 3 Interest on savings and temporary cash investments | | | | | 207 |
| 4 Dividends and interest from securities | | | | | |
| 5 Net rental income or (loss) from real estate | | * | | | <u>}</u> |
| a Debt-financed property | | | | | |
| b Not debt-financed property | | | | | |
| 6 Net rental income or (loss) from personal property | | | 1 | | |
| 7 Other investment income | ļ | · · · · · | 1 | | |
| 8 Gain or (loss) from sales of assets other than inventory | | | | | |
| 9 Net income or (loss) from special events | | | - | | |
| O Gross profit or (loss) from sales of inventory | | | | | |
| 1 Other revenue | | | | | |
| a | | | | - | |
| b | | | + + | | |
| c | | | | | |
| d | | | | | |
| e | | | | | |
| 2 Subtotal Add columns (b), (d), and (e) | | | | | 207 |
| 3 Total. Add line 12, columns (b), (d), and (e) | | | | 13 | 207 |
| ee worksheet in the instructions for line 13 to verify ca | ilculations) | | | | |

| Line No. ▼ | Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See the instructions) |
|---------------|---|
| N/A | |
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Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

| _ | | | | | | | | | | |
|------------------|--|--|--|--|---|--------------------|---|------------------|-------------|----------|
| | descr | ne organization directly ibed in section 501(c) | of the Code (o | ngage in any of ther than section | the following wit 501(c)(3) organ | th any other organ | ization ction 527, | | Yes | No |
| | | ng to political organizat ifers from the reporting | | a noncharitable | evemnt organiz | ation of | | | | |
| | (1) Cash | | | | | | | | | X |
| (2) Other assets | | | | | | | 1a (1) 1a (2) | | <u>x</u> | |
| | b Other | transactions | | | | | | | | |
| | (1) Sales of assets to a noncharitable exempt organization | | | | | | | 1 b (1) | | _ X |
| | (2) P | urchases of assets fror | m a noncharita | able exempt orga | inization | | | 1 b (2) | | _ X |
| | • • | ental of facilities, equip | • | r assets | | | | 1 b (3) | | _X |
| | | eimbursement arrange | | | | | | 1 b (4) | | X |
| | | oans or loan guarantee | | | | | | 1b (5) | | <u>X</u> |
| | • • | erformance of services | | | | ••• | | 1b (6) | | X |
| | C Shan | ng of facilities, equipm | ent, maning is | sis, other assets, | or paid employ | ees | | 1c | | _X_ |
| | the q | oods, other assets, or s | services given | by the reporting | foundation. If the | e foundation recei | ld always show the fair inved less than fair marke sets, or services receive | t value in | ue of | |
| (| a) Line no | (b) Amount involved | | of noncharitable exem | | 1 | of transfers, transactions, and | | ngement | s |
| N | /A | | | | | | | | | |
| _ | | | | - ···· | | | | | | |
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| _ | | | | = . | | | | | | |
| _ | 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? b If 'Yes,' complete the following schedule (a) Name of organization (b) Type of organization (c) Description of relative to the following schedule or the following schedule o | | | | | Yes | X | No | | |
| _ | | | | | | | | | | |
| _ | | | | | | | | | | |
| _ | | | | | | | | | | |
| - s | ► <u>#</u> _ | alties of perjury, I declare that Declaration of predate to her to ature of officer or trustee | have examined the than taxpayer of fid | us return, including acc luciary) is based on all | companying schedule I information of which | 1 3-24- | o the best of my knowledge and ledge Treesus Title | | e, corre | ct, and |
| G N | Sign | active or onicer or trustee | -1/1 - 1 | · Ha h | • | Date / | | arer's Identify | ıng num | ber |
| H | Paid | Preparer's signature | /// . , (') | ///w//h | PA | 3/12/10 | Check if (See | Signature in | the instr | s) |
| HERE | Pre- parer's | | | Dany II | W11_ | | 22.00 | 0705616 41360 |) | |
| | Üse | Firm's name (or yours if selfemployed), Faru. | | pany, LLP ago Blvd., | Ste 200 | | EIN ► 33-09 | 41200 | | |
| | Only | employed), address, and ZIP code Oran | | 867 | JLC 200 | | Phone no ► (71 | .4) 283 | -100 | 0 |
| B | AA | | <u> </u> | · | | | Triblie to (11 | Form 99 | | |
| | | | | | | | | | | |

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

2009

| Name of the organization | | Employer identification number |
|--|---|---|
| BOUKAI FAMILY FOUNDATI | ON | 01-0788855 |
| Organization type (check one). | | |
| Filers of: | Section: | |
| Form 990 or 990-EZ | 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not 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 covere Note: Only a section 501(c)(7), (8), | ed by the General Rule or a Special Rule 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 Scontributor (Complete Parts I are | 990, 990-EZ, or 990-PF that received, during the year, \$5,0 nd II) | 000 or more (in money or property) from any one |
| Special Rules — | | |
| 509(a)(1)/170(b)(1)(A)(vi) and receive | ation filing Form 990 or 990-EZ, that met the 33-1/3% suppoved from any one contributor, during the year, a contribution of the III, line 1h or (ii) Form 990-EZ, line 1 Complete Parts I and | e greater of (1) \$5,000 or (2) 2% of the |
| aggregate contributions of more | (10) organization filing Form 990 or 990-EZ, that received fr than \$1,000 for use <i>exclusively</i> for religious, charitable, sc or animals Complete Parts I, II, and III. | om any one contributor, during the year, cientific, literary, or educational purposes, or the |
| this box is checked, enter here t | (10) organization filing Form 990 or 990-EZ, that received from religious, charitable, etc, purposes, but these contributions that were received during the year for fit the parts unless the General Rule applies to this organization. | ions did not aggregate to more than \$1,000. If r an exclusively religious, charitable, etc. |
| religious, charitable, etc, contrib | outions of \$5,000 or more during the year | ► \$ |
| 990-PF) but it must answer 'No' on | covered by the General Rule and/or the Special Rules doe Part IV, line 2 of their Form 990, or check the box on line Feet the filing requirements of Schedule B (Form 990, 990-E | H of its Form 990-EZ, or on line 2 of its Form |
| BAA For Privacy Act and Paperwo for Form 990, 990EZ, or 990-PF. | ork Reduction Act Notice, see the Instructions | Schedule B (Form 990, 990-EZ, or 990-PF) (2009) |

| • | B (Form 990, 990-EZ, or 990-PF) (2009) | Page 1 | of 1 of Part I |
|---------------|---|-----------------------------------|--|
| Name of org | anization | Employe | identification number |
| | FAMILY FOUNDATION | [01-0] | 788855 |
| Part I | Contributors (see instructions.) | | |
| (a) Number | (b) Name, address, and ZIP + 4 | (c) Aggregate contributions | (d) Type of contribution |
| 1 | GLOBAL LINK SOLUTIONS, INC. 2 CALADIUM | \$25,000. | Person X Payroll Noncash |
| | LAS FLORES, CA 92688 | | (Complete Part II if there is a noncash contribution) |
| (a) Number | (b) Name, address, and ZIP + 4 | (c) Aggregate contributions | (d) Type of contribution |
| 2 | AMER BOUKAI 7 CHAPARRAL CT LAS FLORES, CA 92688 | \$125,000. | Person X Payroll Noncash (Complete Part II if there is a noncash contribution) |
| (a) Number | (b) Name, address, and ZIP + 4 | (c) Aggregate contributions | (d) Type of contribution |
| 3 | ZIAD BOUKAI 7 CHAPARRAL CT LAS FLORES, CA 92688 | \$25,000. | Person X Payroll Noncash (Complete Part II if there is a noncash contribution) |
| (a) Number | (b) Name, address, and ZIP + 4 | (c) Aggregate 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) Aggregate 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) Aggregate contributions | (d) Type of contribution |
| | | | Person |

Payroll Noncash

(Complete Part II if there is a noncash contribution.)

Page 1

of 1 of Part II

Name of organization BOUKAI FAMILY FOUNDATION Employer identification number 01-0788855

| Part II | Noncash Property (see instructions) | | |
|---------------------------|--|--|----------------------|
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | 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 | Scher | dule B (Form 990, 990-E2 | ', or 990-PF) (2009) |

| | 3 (Form 990, 990-EZ, or 990-PF) (2009) | | | Page 1 | of 1 | of Part III | |
|---------------------------|--|---|--|-------------------------------------|--|-----------------|--|
| lame of organ | | - | | | Employer identificati | | |
| | FAMILY FOUNDATION | | | | 01-0788855 | | |
| Part III | 」 <i>Exclusively</i> religious, charitable, control organizations aggregating more t | han \$1,000 for the year.(Co | omplete cols | on 501(c) (a) through | (7), (8), or (10) (e) and the following | ng line entry.) | |
| | For organizations completing Part III, enter contributions of \$1,000 or less for the year | total of <i>exclusively</i> religious, ct (Enter this information once – | naritable, etc, see instructio | ons.) | ► \$ | N/A | |
| (a) | (b) | (c) | | - | (d) | | |
| No. from Part I | Purpose of gift | Use of gift | | Description of how gift is held | | | |
| | N/A | | | | | | |
| | | | | | | | |
| | | (e) Transfer of gift | | | | | |
| | Transferee's name, addre | Transferee's name, address, and ZIP + 4 | | | transferor to trans | sferee | |
| | | | | | | | |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | | (d) Description of how gift is h | | is held | |
| | | | | | | | |
| | | | | | | | |
| } | Two of a was 's many and do | (e) Transfer of gift | | | | | |
| | Transferee's name, addre | ss, and ZIP + 4 | | uonsnip oi | transferor to trans | steree | |
| | | | | · - | | | |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | | | (d) cription of how gift | is held | |
| | | | | | | | |
| | (e) Transfer of gift Transferee's name, address, and ZIP + 4 | | Relationship of transferor to transferee | | | sferee | |
| | | | | | | | |
| (a) | (b) | (c) | | | (d) | | |
| No. from Part I | Purpose of gift | Use of gift | | Description of how gift is held | | is held | |
| | | | | | | | |
| - | | | | | | | |
| | (e) Transfer of gift Transferee's name, address, and ZIP + 4 | | Relationship of transferor to transferee | | | | |
| | | | | | | | |
| | | | | | | | |

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|--|---|---------------------------|---------------------------------|---------------------------------------|
| | BOUKAI FAMILY F | OUNDATION | l | 01-07888 |
| Statement 1 Form 990-PF, Part I, Line 16b Accounting Fees | | | | |
| Accounting Fees | (a) Expense per Book \$ 89 Total \$ 89 | | ment Adjusted me Net Income | (d) Charitable Purposes |
| Statement 2 Form 990-PF, Part I, Line 23 Other Expenses | | | | |
| Filing Fees | | s Invest | ment Adjusted ome Net Income | (d) Charitable Purposes |
| Statement 3 Form 990-PF, Part XV, Line 1a Foundation Managers - 2% or More | e Contributors | | | |
| ZIAD BOUKAI | | | | |
| ZIAD BOUKAI AMER BOUKAI Statement 4 Form 990-PF, Part XV, Line 3a | | | | · · · · · · · · · · · · · · · · · · · |
| ZIAD BOUKAI AMER BOUKAI Statement 4 | Donee Relationship | Found- ation Status | Purpose of Grant | Amount |
| ZIAD BOUKAI AMER BOUKAI Statement 4 Form 990-PF, Part XV, Line 3a Recipient Paid During the Year | | ation | | <u>Amount</u> \$ 5,000 |
| Statement 4 Form 990-PF, Part XV, Line 3a Recipient Paid During the Year Name and Address O. C. ISLAMIC FOUNDATION 23581 MADERO DR., STE 101 | | ation <u>Status</u> | Grant_ | - |

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|--|-----------------------|---------------------------|---------------------|----------|
| | BOUKAI FAMILY F | OUNDATION | | 01-07888 |
| Statement 4 (continued) Form 990-PF, Part XV, Line 3a Recipient Paid During the Year | | | | |
| Name and Address | Donee Relationship | Found- ation Status | Purpose of Grant | Amount |
| NEW HORIZON ELEMENTARY SCHOOL ONE TRUMAN STREET IRVINE, CA 92620 | | EXEMPT | CHARITABLE | \$ 16,40 |
| SYRIAN AMERICAN WOMEN ASSOC 1125 E BROADWAY ST. STE 321 GLENDALE, CA 91205 | | EXEMPT | CHARITABLE | 11,000 |
| MUSLIMS PUBLIC AFFAIRS COUCIL 3010 WILSHIRE BLVD. #217 LOS ANGELES, CA 90010 | | EXEMPT | CHARITABLE | 30,000 |
| ST JOHN'S EPISCOPAL SCHOOL 30382 VIA CON DIOS RANCHO SANTA MARGARITA, CA 92688 | | EXEMPT | CHARITABLE | 4,000 |
| ILM FOUNDATION 2711 1/2 W. JEFFERSON BLVD LOS ANGELES, CA 90018 | | EXEMPT | CHARITABLE | 5,000 |
| DAVE THOMAS FOUNDATION 4150 TULLER ROAD, STE 404 DUBLIN, OH 43017 | | EXEMPT | CHARITABLE | 15,080 |
| ISLAMIC RELIEF 6131 ORANGETHORPE AVE, # 450 BUENA PARK, CA 90620 | | EXEMPT | CHARITABLE | 5,000 |
| CHOC CHILDREN'S FOUNDATION 455 S. MAIN ST. ORANGE, CA 92868 | | EXEMPT | CHARITABLE | 5,750 |
| INDO-CHINESE MUSLIM REFUGEE ASSOCIATION 1001 E. GRANT ST. #B2 SANTA ANA, CA 92701 | | EXEMPT | CHARITABLE | 750 |

Total \$ 170,985.