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Department of he Treasury Internal Revenue Service

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

Treated as a Private Foundation

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

OMB No 1545-0052

2011

For	calen	dar year 2011 or tax year beginning		, 2011, a	and ending		, 20
Nar	ne of fou	undation			A Employer	identification numbe	r
Ja	lali	Family Foundation			26-072	9549	
Nur	nber and	d street (or P O box number if mail is not delivered to street address)	·	Room/sui		number (see instructio	ns)
		30x 406				5-1558	,
		n, state, and ZIP code					
					C If exempti	on application is pend	ing, check here ▶ [
		ler, CA 90608					_
G	Cneck	all that apply: Initial return Initial return	•	oublic ch	arity D 1. Foreigr	organizations, check	here ►[
		☐ Final return ☐ Amended			2. Foreigr	organizations meetin	g the 85% test,
	<u> </u>	Address change Name cha			check I	nere and attach compu	ıtatıon ►[
		type of organization: X Section 501(c)(3) exempt p			E If private t	oundation status was	terminated under
		n 4947(a)(1) nonexempt charitable trust Other tax				07(b)(1)(A), check here	• ▶[
		narket value of all assets at J Accounting method	∐ Cash	X Accı	j i ii iiie ioui	idation is in a 60-mont	h termination
		f year (from Part II, col. (c), Other (specify)			under sec	tion 507(b)(1)(B), che	ck here ► {
		6)▶ \$ 1,107,453 (Part I, column (d) must be	e on cash basis	s)			
Pa	art I		(a) Revenue		b) Net investment	(a) Adjusted not	(d) Disbursement for charitable
		amounts in columns (b), (c), and (d) may not necessarily equal	expenses p		income	(c) Adjusted net income	purposes
		the amounts in column (a) (see instructions))	DOORS				(cash basis only)
	1	Contributions, gifts, grants, etc , received (attach schedule)				· · · · · · · · · · · · · · · · · · ·	
	2	Check ► ☐ If the foundation is not required to attach Sch B					
	3	Interest on savings and temporary cash investments		238	238		
	4	Dividends and interest from securities	32,	232	32,232		
	5a	Gross rents					
	b	Net rental income or (loss)	ļ				
<u>a</u>	6a	Net gain or (loss) from sale of assets not on line 10					
Revenue	b	Gross sales price for all assets on line 6a					
Š	7	Capital gain net income (from Part IV, line 2)			34,056		
ď	8	Net short-term capital gain					
	9	Income modifications					
)	10a	Gross sales less returns and allowances					
) >	b	Less: Cost of goods sold					
,	С	Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule)					
i	12	Total. Add lines 1 through 11	32,	470	66,526		
	13	Compensation of officers, directors, trustees, etc.			·	-	
seuses	14	Other employee salaries and wages					
Ë	15	Pension plans, employee benefits					
ğ	16a	Legal fees (attach schedule)			· -	·	***
EX	b	Accounting fees (attach schedule)	-				1
<u>×</u>	C	Other professional fees (attach schedule)					1
Operating and Administrative	17	Interest					1
stı	18	Taxes (attach schedule) (see instructions)		73	73		1
Ξ.	19	Depreciation (attach schedule) and depletion			, 5		1
톭	20	The state of the s					
Ă	21	Occupancy RECEIVED. Travel, conferences, and meetings				-	
p	22	Printing and publications					
ā	23	Other expenses (attach schedule)	Α	551	8,190		
<u> </u>	24	Total operating and administrative expenses.	· · · · ·	<u> </u>	0,190		+
äŧ		Add lines 13 through 23 N. U.T.	Ω	624	8,263		
Эē	25	Contribution of the contri			0,203		+
Ö	25	Contributions, gifts, grants paid		598	0 262		
_	26	Total expenses and disbursements. Add lines 24 and 25	33,	222	8,263	· · · · · · · · · · · · · · · · · · ·	
	27	Subtract line 26 from line 12:	100	<u> </u>			
	a	Excess of revenue over expenses and disbursements	(22,	752)	<u> </u>		ļ
	b	Net investment income (if negative, enter -0-)	\		58,263		
	C	Adjusted net income (If negative, enter -0-) work Reduction Act Notice, see instructions.				<u> </u>	yrm 990-PF (20

Part II Balance		Balance Sheets Attached schedules and amounts in the description column	Beginning of year	<u>End</u>	f year	
_ <u>a</u>		should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value	
	1	Cash—non-interest-bearing	949,384	926,632	1,107,453	
	2	Savings and temporary cash investments				
	3	Accounts receivable ▶				
- 1		Less: allowance for doubtful accounts ▶				
	4					
1	•	Pledges receivable ► Less: allowance for doubtful accounts ►				
- 1	5	Grants receivable				
1	6	Receivables due from officers, directors, trustees, and other			 	
- 1	•	disqualified persons (attach schedule) (see instructions)				
	-				 	
- 1	7	Other notes and loans receivable (attach schedule)				
		Less: allowance for doubtful accounts ▶				
Assets	8	Inventories for sale or use		···	<u> </u>	
SS	9	Prepaid expenses and deferred charges				
Ä	10a	Investments—U.S. and state government obligations (attach schedule)				
	b	Investments—corporate stock (attach schedule)				
ļ	C	Investments—corporate bonds (attach schedule)				
	11	Investments—land, buildings, and equipment: basis ▶				
		Less accumulated depreciation (attach schedule) ▶			,	
	12	Investments—mortgage loans				
	13	Investments—other (attach schedule)	· · · · · · · · · · · · · · · · · · ·	· · · · · ·		
	14	Land, buildings, and equipment: basis ▶				
- 1	17	Less accumulated depreciation (attach schedule) ▶				
	15					
	16	Other assets (describe) Total assets (to be completed by all filers—see the				
	10	instructions. Also, see page 1, item I)	040 304	026 63	1 107 452	
\longrightarrow			949,384	926,63	2 1,107,453	
	17	Accounts payable and accrued expenses			_	
S	18	Grants payable	<u> </u>		1	
ij	19	Deferred revenue				
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons				
<u>.a</u>	21	Mortgages and other notes payable (attach schedule)				
-	22	Other liabilities (describe ►)				
	23_	Total liabilities (add lines 17 through 22)				
alances		Foundations that follow SFAS 117, check here ▶ ⊠ and complete lines 24 through 26 and lines 30 and 31.				
ğ	24	Unrestricted	949,384	926,63	2	
ali	25	Temporarily restricted				
8	26	Permanently restricted			7	
Net Assets or Fund B		Foundations that do not follow SFAS 117, check here ▶ ☐ and complete lines 27 through 31.				
6	27	Capital stock, trust principal, or current funds				
ts	28	Paid-in or capital surplus, or land, bldg , and equipment fund			1	
se	29	Retained earnings, accumulated income, endowment, or other funds			-	
As	30	Total net assets or fund balances (see instructions) .	949,384	926,63	<u> </u>	
et '	31	Total liabilities and net assets/fund balances (see	747,304	<u> </u>	_	
Ž	"	instructions)	949,384	926,63	2	
	7.611			920,03		
	rt ill	Analysis of Changes in Net Assets or Fund Balances at net assets or fund balances at beginning of year—Part II, colu		agree with		
1		al net assets or fund balances at beginning of year—Part II, colu -of-year figure reported on prior year's return)		· !	040 204	
_						
2		er amount from Part I, line 27a				
3	Oth	er increases not included in line 2 (itemize)		3		
4	Add	l lines 1, 2, and 3		<u> 4</u>		
5	Dec	reases not included in line 2 (itemize)		5		
6	Tota	reases not included in line 2 (itemize) ► al net assets or fund balances at end of year (line 4 minus line 5)—	-Part II, column (b), lir	ne 30 . 6		
					Form 990-PF (2011)	

b c d e (e) a b c d e Corr (i) F M a b c d e Corr (i) F M a b c d e 2 Cap 3 Net If ga Part V (For option If section 4 Was the fo If "Yes," the	oital gain net income or	(net capital loss) { If (los	plus expended by the foundation (k) Exce	iss of col (i) ol (j), if any	(e) plus (2011 n or (loss) (f) minus (g) 34,056 I (h) gain minus t less than -0-) or from col (h)) 34,056
c d e (e) a b c d e Corr (i) F M a b c d e 2 Cap 3 Net If ga Part V (For option If section 4 Was the fo If "Yes," the	1,624,362 Inplete only for assets show V as of 12/31/69 Dital gain net income or short-term capital gain	(or allowable) ving gain in column (h) and owner (j) Adjusted basis as of 12/31/69 (net capital loss) { If gair	plus expended by the foundation (k) Exce over co	on 12/31/69 ss of col (i) ol (j), if any	(e) plus ((f) minus (g) 34,056 1 (h) gain minus t less than -0-) or from col (h))
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e (e) a b c d e Com (i) F M a b c d e 2 Cap 3 Net If ga Part V (For option If section 4 Was the fo	1,624,362 Inplete only for assets show V as of 12/31/69 Dital gain net income or short-term capital gain	(or allowable) ving gain in column (h) and owner (j) Adjusted basis as of 12/31/69 (net capital loss) { If gair	plus expended by the foundation (k) Exce over co	on 12/31/69 ss of col (i) ol (j), if any	(e) plus ((f) minus (g) 34,056 1 (h) gain minus t less than -0-) or from col (h))
(e) (e) (e) (e) (e) (e) (f) (e) (f) (e) (e) (f) (e) (e) (f) (e) (f) (f) (f) (f) (f) (f) (f) (f) (f) (f	1,624,362 Inplete only for assets show V as of 12/31/69 Dital gain net income or short-term capital gain	(or allowable) ving gain in column (h) and owner (j) Adjusted basis as of 12/31/69 (net capital loss) { If gair	plus expended by the foundation (k) Exce over co	on 12/31/69 iss of col (i) oil (j), if any	(e) plus ((f) minus (g) 34,056 1 (h) gain minus t less than -0-) or from col (h))
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b c d e Corr (i) F M a b c d e 2 Cap 3 Net If ga Part V (For option If section 4 Was the fo	nplete only for assets show IV as of 12/31/69 Dital gain net income or	(j) Adjusted basis as of 12/31/69 (net capital loss) { If gair If (los	(k) Exce over co	on 12/31/69 ess of col (i) ol (j), if any	(I) Gains (Col	I (h) gain minus t less than -0-) or rom col (h))
c d e Corr (i) F M a b c d e 2 Cap 3 Net If ga Part V (For option f section 4 Was the fo f "Yes," the	oital gain net income or	(j) Adjusted basis as of 12/31/69 (net capital loss) { If gair If (los	(k) Exce over co	iss of col (i) ol (j), if any	col (k), but not	t less than -0-) or from col (h))
d e Com (i) F M a b c d e 2 Cap 3 Net If ga Part V (For option of section 4 Was the for f "Yes," the	oital gain net income or	(j) Adjusted basis as of 12/31/69 (net capital loss) { If gair If (los	(k) Exce over co	iss of col (i) ol (j), if any	col (k), but not	t less than -0-) or from col (h))
e Com (i) F M a b c d e 2 Cap 3 Net If ga Part V (For option of section 4 Was the fo	oital gain net income or	(j) Adjusted basis as of 12/31/69 (net capital loss) { If gair If (los	(k) Exce over co	iss of col (i) ol (j), if any	col (k), but not	t less than -0-) or from col (h))
Corr (i) F M a b c d e 2 Cap 3 Net If ga Part V For option f section 4 Was the fo f "Yes," the 1 Ent	oital gain net income or	(j) Adjusted basis as of 12/31/69 (net capital loss) { If gair If (los	(k) Exce over co	iss of col (i) ol (j), if any	col (k), but not	t less than -0-) or from col (h))
a b c d e 2 Cap 3 Net If ga Part V For option f section 4 Was the fof "Yes," the 1 Ent	oital gain net income or	(j) Adjusted basis as of 12/31/69 (net capital loss) { If gair If (los	(k) Exce over co	iss of col (i) ol (j), if any	col (k), but not	t less than -0-) or from col (h))
a b c d e 2 Cap 3 Net If gare Part V For option f section 4 Was the for f "Yes," the	oital gain net income or	as of 12/31/69 (net capital loss) { If gair If (los	over co	ol (j), if any		rom col (h))
b c d e 2 Cap 3 Net If ga Part V (For option f section 4 Was the fo f "Yes," the	short-term capital gain	(net capital loss) { If (los	•			34,05
c d e 2 Cap 3 Net If gare Part V (For option of section 4 Was the for f "Yes," the	short-term capital gain	(net capital loss) { If (los	•			
d e 2 Cap 3 Net If ga Part V (For option If section 4 Was the fo	short-term capital gain	(net capital loss) { If (los	•			
e 2 Cap 3 Net If ga Part V (For option If section 4 Was the fo	short-term capital gain	(net capital loss) { If (los	•			
2 Cap 3 Net If ga Part V (For option If section 4 Was the fo If "Yes," the	short-term capital gain	(net capital loss) { If (los	•	 	 	
3 Net If gare Part V (For option If section 4 Was the four	short-term capital gain	(net capital loss) { If (los	•		ļ	
If gart V Part V (For option If section 4 Was the for If "Yes," the			,,	,	2	34,05
Part V For option f section 4 Was the fo f "Yes," the		or (loss) as defined in section I, line 8, column (c) (see insti	ructions). If (los	s), enter -0- in		
For option f section 4 Was the fo f "Yes," the				<u> </u>	3	
f section 4 Was the fo f "Yes," the	Qualification Und	er Section 4940(e) for Re	duced Tax on	Net Investmen	t Income	
1 Ent	undation liable for the s	section 4942 tax on the distrib qualify under section 4940(e).			ase penod?	☐ Yes 🏻 No
		unt in each column for each ye		<u>-</u>	aking any entries	
	(a) Base penod years year (or tax year beginning in)	(b)		(c) of noncharitable-use a	Dis Dis	(d) tribution ratio divided by col (c))
<u> </u>	2010				(401 (10)	divided by coi (c))
<u></u> -	2009				 -	
	2008	 			- 	
	2007					
	2006					
	2000					
2 Tot	tal of line 1, column (d)				2	
		or the 5-year base period—d		line 2 by 5, or by		
		lation has been in existence if				
4 Ent	ter the net value of non	charitable-use assets for 2011	from Part X, line	e 5	4	
5 Mu	Itiply line 4 by line 3				. 5	
6 Ent	ter 1% of net investmer	nt income (1% of Part I, line 27	7b)		. 6	
7 Add					. 7	
						1% tax rate. See th

Part \	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see in	nstrı	ıctio	ns)				
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1. Date of ruling or determination letter: (attach copy of letter if necessary—see instructions)							
b								
	here ▶ □ and enter 1% of Part I, line 27b							
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col. (b).							
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		1,	<u> 165</u>				
3	Add lines 1 and 2		1,	165				
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)							
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		1,	165				
6	Credits/Payments:							
a	2011 estimated tax payments and 2010 overpayment credited to 2011 6a			1				
b	Exempt foreign organizations—tax withheld at source 6b Tax paid with application for extension of time to file (Form 8868) 6c							
c d	Tax paid with application for extension of time to file (Form 8868) Backup withholding erroneously withheld							
7	Total credits and payments. Add lines 6a through 6d							
8	Enter any penalty for underpayment of estimated tax. Check here from 2220 is attached 8							
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		1,	165				
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid . 10							
11	Enter the amount of line 10 to be: Credited to 2012 estimated tax ▶ Refunded ▶ 11							
Part '	VII-A Statements Regarding Activities							
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No				
	participate or intervene in any political campaign?	1a		X				
b	b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 of the instructions for definition)?							
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.							
С	c Did the foundation file Form 1120-POL for this year?							
d	d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. ▶ \$ (2) On foundation managers. ▶ \$							
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$							
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities.	2		X				
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X				
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		Х				
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b						
5	· · · · · · · · · · · · · · · · · · ·							
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 that							
_	conflict with the state law remain in the governing instrument?	6		Х				
7	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	7	Х					
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ► CA - California							
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General							
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	X	ļ				
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or		ļ	ļ				
	4942(j)(5) for calendar year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes," complete Part XIV			\ _v				
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	9		X				
	names and addresses	10		Х				

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		Х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address N/A	13		X
14	The books are in care of ▶ Jere McDonald, CPA Located at ▶ 13305 Penn St. #150, Whittier, CA Telephone no. ▶ 562) 9 ZIP+4 ▶ 90602	45-	155	8
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			▶ □
16	At any time during calendar year 2011, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	Yes	No
	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.		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? . ☐ Yes ☐ Y			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(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 section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b	ļ	
	Organizations relying on a current notice regarding disaster assistance check here ▶□			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2011?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			
а	At the end of tax year 2011, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2011?			
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.)	2b		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. 20 , 20 , 20 , 20	2.5		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?			
b	If "Yes," did it have excess business holdings in 2011 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2011.)	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		Х
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2011?	4b		X

orm 990-PF (2011)	Jalali	Family	Foundation
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Part	VII-B Statements Regarding Activities	for W	hich Form	4720 M	May Be R	equire	d (contin	ued)			
5a											
	(1) Carry on propaganda, or otherwise attempt to(2) Influence the outcome of any specific public	electio					☐ Yes	⊠ No			
	directly or indirectly, any voter registration drive?									ŀ	
	(3) Provide a grant to an individual for travel, stud (4) Provide a grant to an organization other than	a char	itable, etc., o	rganiza	ition descri	bed in	Yes	⊠ No			
	section 509(a)(1), (2), or (3), or section 4940(☐ Yes	⊠ No		1	
	(5) Provide for any purpose other than religious, purposes, or for the prevention of cruelty to ch	nildren	or animals?				□Yes	⊠ No			
b	If any answer is "Yes" to 5a(1)–(5), did any of the Regulations section 53 4945 or in a current notice r	egardın	ig disaster as	sistance	e (see instru			oed in	5b		X
	Organizations relying on a current notice regarding	_									
С	If the answer is "Yes" to question 5a(4), does the because it maintained expenditure responsibility	for the	grant?				Yes	□ No			
_	If "Yes," attach the statement required by Regula										
6a	Did the foundation, during the year, receive any t	-	•	•							-
_	•						Yes	x No			
b	Did the foundation, during the year, pay premium If "Yes" to 6b, file Form 8870.		•	•	•			•	6b		X
	At any time during the tax year, was the foundation a						Yes	⊠ No			
	If "Yes," did the foundation receive any proceeds								7b		
Par	Information About Officers, Direction and Contractors								mploy 	ees,	
1_	List all officers, directors, trustees, foundation							 -			
	(a) Name and address	hou	e, and average rs per week ed to position	(c) Cor (If not	npensation paid, enter -0-)	emplo	Contributions yee benefit perred compe	olans	(e) Expe	nse acc allowan	count,
	ram Jalali										
	Jere E. McDonald, CPA	8.00)								
	. Box 406	1				Ì					
<u>Whi</u>	ttier, CA 90608										
										-	
	Companyation of the highest world applica	/-41-	- 4h 4h -	:		- 4	!	4 !	-> 16		
	Compensation of five highest-paid employe "NONE."	es (otn	er than tho	se inci	uaea on 11					ione, ——	enter ——
	(a) Name and address of each employee paid more than \$50,00	0	(b) Title, and a hours per v devoted to po	veek	(c) Comper		(d) Contribution of the complex of the compens of t	benefit leferred	(e) Expe	nse acc allowan	
								·			
									-		
			L		L				_		

Part	Information About Officers, Directors, Trustees, Fou and Contractors (continued)	ndation Managers, Highly Paid En	ployees,
3	Five highest-paid independent contractors for professional services	s (see instructions). If none, enter "NON	E."
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
N/A			
Total	number of others receiving over \$50,000 for professional services .		NONE
Part			
rait	IX-A Summary of Direct Charitable Activities		
	the foundation's four largest direct charitable activities during the tax year. Include releva		Expenses
	inizations and other beneficiaries served, conferences convened, research papers produce	a, etc	
1 _			
2			
-			
-			
3			
_			
-			
4 _			
-			
Dod	IV D. Common of Drawow Deleted Investments (see in	A	<u> </u>
Part	IX-B Summary of Program-Related Investments (see inscribe the two largest program-related investments made by the foundation during the tax yet		Amount
1	the two largest program-related investments made by the foundation during the tax ye	our off mico F and 2	
• -			
-			
2			
_			
	other program-related investments. See instructions		
3 _	•••••		
-			
Total	Add lines 1 through 3		0.00
ı vial.	Add lines i through 3		1 0.00

Part	Minimum Investment Return (All domestic foundations must complete this part. Foreig see instructions.)	n foundations,
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
b	Average of monthly cash balances	1b
С	Fair market value of all other assets (see instructions)	1c
d	Total (add lines 1a, b, and c)	1d
е	Reduction claimed for blockage or other factors reported on lines 1a and	
	1c (attach detailed explanation)	
2	Acquisition indebtedness applicable to line 1 assets	2
3	Subtract line 2 from line 1d	3
4	Cash deemed held for charitable activities. Enter 11/2 % of line 3 (for greater amount, see	
	instructions)	4
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5
6	Minimum investment return. Enter 5% of line 5	6
Part 2	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part)	
1	Minimum investment return from Part X, line 6	1
2a	Tax on investment income for 2011 from Part VI, line 5	
b	Income tax for 2011. (This does not include the tax from Part VI)	
С	Add lines 2a and 2b	2c
3	Distributable amount before adjustments Subtract line 2c from line 1	3
4	Recoveries of amounts treated as qualifying distributions	4
5	Add lines 3 and 4	5
6	Deduction from distributable amount (see instructions)	6
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,	
	line 1	7
Part	XII Qualifying Distributions (see instructions)	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes	
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a
b	Program-related investments—total from Part IX-B	1b
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc,	
	purposes	2
3	Amounts set aside for specific charitable projects that satisfy the:	
а	Suitability test (prior IRS approval required)	3a
b	Cash distribution test (attach the required schedule)	3b
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.	
_	Enter 1% of Part I, line 27b (see instructions)	5
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating qualifies for the section 4940(e) reduction of tax in those years.	g whether the foundation

Jalali Family Foundation Form 990-PF (2011) Page 9 Part XIII Undistributed Income (see instructions) (a) Corpus Years prior to 2010 2010 2011 1 Distributable amount for 2011 from Part XI. Undistributed income, if any, as of the end of 2011: a Enter amount for 2010 only **b** Total for prior years: 20 ___ , 20 ___ , 20 ___ 3 Excess distributions carryover, if any, to 2011: a From 2006 From 2007 c From 2008 . **d** From 2009 e From 2010 Total of lines 3a through e Qualifying distributions for 2011 from Part XII, line 4: ▶ \$ Applied to 2010, but not more than line 2a Applied to undistributed income of prior years (Election required—see instructions) . . . c Treated as distributions out of corpus (Election required—see instructions) d Applied to 2011 distributable amount . . e Remaining amount distributed out of corpus Excess distributions carryover applied to 2011 (If an amount appears in column (d), the same amount must be shown in column (a)) Enter the net total of each column as indicated below: Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income. Subtract line 4b from line 2b 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 Subtract line 6c from line 6b Taxable amount—see instructions e Undistributed income for 2010. Subtract line 4a from line 2a Taxable amount-see instructions Undistributed income for 2011 Subtract lines 4d and 5 from line 1. This amount must be Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions)

Excess distributions carryover from 2006 not applied on line 5 or line 7 (see instructions).

Excess distributions carryover to 2012.

Subtract lines 7 and 8 from line 6a

Analysis of line 9:

a Excess from 2007 . . .

b Excess from 2008 . . .

c Excess from 2009 . .

d Excess from 2010

e Excess from 2011 . . .

	0-PF (2011)					
Part 2					9)	
1a	If the foundation has received a ruling			private operating	/	
	foundation, and the ruling is effective for	•	•	• • • • • • • • • • • • • • • • • • •	N/A	1040///
	Check box to indicate whether the found	Tax year	operating toundat	Prior 3 years	ction) or 🗌 4942(j)(5
2a	Enter the lesser of the adjusted net income from Part I or the minimum	(a) 2011	(b) 2010	(c) 2009	(d) 2008	(e) Total
	investment return from Part X for each year listed	(a) 2011	(6) 2010	(c) 2005	(0) 2008	
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 .					
е	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:					
а	"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					
С	"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	Supplementary Information any time during the year—			the foundation	had \$5,000 or mo	ore in assets a
1	Information Regarding Foundation					
а	List any managers of the foundation before the close of any tax year (but o					by the foundatio
b	List any managers of the foundation ownership of a partnership or other er			•		rge portion of th
2	Information Regarding Contribution	n, Grant, Gift, Lo	an, Scholarship,	etc., Programs:	_ 	
	Check here ► 🖾 if the foundation unsolicited requests for funds. If the fother conditions, complete items 2a, b	only makes con oundation makes	tributions to pres	elected charitable		

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

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

c Any submission deadlines:

Perm 990-PF (2011)

	Part XV Supplementary Information (continued)									
3	Grants and Contributions Paid During t	the Year or Approv	ed for Fut	ture Payment						
	Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount					
_	Name and address (home or business)	or substantial contributor	recipient	CONTRACTOR						
а	Paid during the year									
			ļ							
			ļ		İ					
					1					
	Total	· · · · · · · · · · · · · · · · · · ·		<u> </u>	3a					
_ b	Approved for future payment									
			ļ							
			-							
				•						
	Total	<u> </u>		· · · · · · · · •	3b					

nter	gross amounts unless otherwise indicated.	Unrelated bu	siness income	Excluded by section	on 512, 513, or 514	(e)
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exemp function income (See instructions
	rogram service revenue:	_				
í				-		
ا						
9	, — -	-				·
				<u> </u>		
				 		<u> </u>
. !	·					
	Membership dues and assessments	900001	220	<u> </u>	_	
	nterest on savings and temporary cash investments	900001	238 32,232		 _	
	Dividends and interest from securities	900001	32,232			
	Net rental income or (loss) from real estate:					 ·
	Debt-financed property	· · · · · · · · · · · · · · · · · · ·				 -
	Not debt-financed property			ļ <u></u>	_	
	Net rental income or (loss) from personal property			<u> </u>		
	Other investment income			<u> </u>		<u> </u>
	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					
1						
			20. 470			
12	Subtotal. Add columns (b), (d), and (e)		32,470			20 47
12 13	Subtotal. Add columns (b), (d), and (e)		32,470		13	32,47
12 13 See	Bubtotal. Add columns (b), (d), and (e)	 ıs.)			13	32,47
2 3 See	Subtotal. Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e)	 is.) Accomplishm	nent of Exemp	t Purposes		
2 3 See	Subtotal. Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e)	 is.) Accomplishm	nent of Exemp	t Purposes		
2 3 See Part	Subtotal. Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e)	 is.) Accomplishm	nent of Exemp	t Purposes		
12 13 See Sart	Subtotal. Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e)	 is.) Accomplishm	nent of Exemp	t Purposes		
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12 13 See Sart	Subtotal. Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e)	 is.) Accomplishm	nent of Exemp	t Purposes		
12 13 See Sart	Subtotal. Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e)	 is.) Accomplishm	nent of Exemp	t Purposes		
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2 3 ee art	Subtotal. Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e)	 is.) Accomplishm	nent of Exemp	t Purposes		
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2 3 ee ari	Subtotal. Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e)	 is.) Accomplishm	nent of Exemp	t Purposes		
2 3 ee ari	Subtotal. Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e)	 is.) Accomplishm	nent of Exemp	t Purposes		
2 3 ee ari	Subtotal. Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e)	 is.) Accomplishm	nent of Exemp	t Purposes		
2 3 ee ari	Subtotal. Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e)	 is.) Accomplishm	nent of Exemp	t Purposes		
2 3 ee art	Subtotal. Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e)	 is.) Accomplishm	nent of Exemp	t Purposes		
2 3 ee art	Subtotal. Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e)	 is.) Accomplishm	nent of Exemp	t Purposes		
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2 3 ee ari	Subtotal. Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e)	 is.) Accomplishm	nent of Exemp	t Purposes		
2 3 ee	Subtotal. Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e)	 is.) Accomplishm	nent of Exemp	t Purposes		
2 3 ee ari	Subtotal. Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e)	 is.) Accomplishm	nent of Exemp	t Purposes		
2 3 ee art	Subtotal. Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e)	 is.) Accomplishm	nent of Exemp	t Purposes		
2 3 See Part	Subtotal. Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e)	 is.) Accomplishm	nent of Exemp	t Purposes		
12 13 See	Subtotal. Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e)	 is.) Accomplishm	nent of Exemp	t Purposes		32,470 importantly to thions)
2 3 ee art	Subtotal. Add columns (b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e)	 is.) Accomplishm	nent of Exemp	t Purposes		

Part	XVII		n Regarding Tra ganizations	nsfers To and T	ransaction	s and F	Relationships With No	ncharitab	le	<u> </u>
1	in sect	organization o	directly or indirectly				y other organization descri section 527, relating to poli		Yes	No
а	Transf	ers from the rep	oorting foundation to	o a noncharitable e	xempt orgai	nization o	of:			
-		=						. 1a(1)		X
	(2) Oth	ner assets .						1a(2)	_	X
b	Other t	ransactions:								
	(1) Sal	es of assets to	a noncharitable ex	empt organization				. 1b(1)		X
			ets from a nonchari		ization .			. 1b(2)		Χ
	(3) Re	ntal of facilities,	, equipment, or othe	er assets				. 1b(3)		X
	(4) Re	imbursement a	rrangements					1b(4)		Χ
			rantees					1b(5)		Χ
			ervices or members					. 1b(6)		X
С			quipment, mailing I					. 1c		X
d							column (b) should always			
							If the foundation received			
(a) Lini		Amount involved		chantable exempt organi			of the goods, other assets, ription of transfers, transactions, a			
(a) Liii	U) UII 3	Amount involved	(c) Name of non-	Charitable exempt organi	ization	(u) Desci	inputori or transfers, transactions, a	- Ind Straining arre	angeme	
	<u> </u>					••		<u> </u>		
	<u> </u>						 -			
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				 .		 -				
				 						
	-		· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·						
			 							
	<u> </u>		<u> </u>							
				· · · · · · · · · · · · · · · · · · ·						
						•				
2a							e tax-exempt organization on 527?	s 🗍 Ye	s 🏻	No
b	If "Yes	," complete the	following schedule).						
		(a) Name of organ	nization	(b) Type o	f organization		(c) Description of	relationship		
				 						
	10-4-3		1 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4				- d - d - d - d - d - d - d - d - d - d		4 5 - 1 - 2	
Siar	l l						nd statements, and to the best of my reparer has any knowledge	knowledge an	o beller,	it is true,
Sigr						ay the IRS disc th the preparer				
Here	_	ture of officer of tree	- John St	Date	Title			ee instructions)?		
	 _	Print/Type prepare		Date	Title		/ L	PTIN		
Paid		Print/Type prepare	MADIC	Preparer's signature	//AI	alas-	NOV 1 5 2012 Check [If		
Prep		IVIANY C	· conunc s	1 / Muy C	·	w	seir-emp	ioyea		
Use	Only	Firm's name >				·	Firm's EIN ▶		_	
		Firm's address 🕨	JERE E. McE	ONALD, An Accounter	ncy Corporation		Phone no	- 0	n Dr	

P.O. Box 406, Whittier, California 90608 E I No. 95-3624371 - Preparer No.

Signature and Verification must be completed for Part II only.

8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any

b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any

Balance due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS

Under penalties of p	erjury, I declare that	I have examined this t	form, including	accompanying sche	edules and	statements, ar	nd to t	he best o	of my
knowledge and belief,	, it is true, correct, and	complete, and that I ar	n authorized to	prepare this form.				,	

Signature >

nonrefundable credits. See instructions.

amount paid previously with Form 8868.

(Electronic Federal Tax Payment System). See instructions.

Title > CPA

Form 8868 (Rev. 1-2012)

8a |\$

8b

8c

Form **886**'8

(Rev. January 2012)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return.

OMB No. 1545-1709

-	filing for an Automatic 3-Month Extension,		_				▶ 🗷	
-	filing for an Additional (Not Automatic) 3-Monplete Part II unless you have already been g					-	n 8868	
Electronic a corporation 8868 to reconstruction	filing (e-file). You can electronically file Form on required to file Form 990-T), or an addition puest an extension of time to file any of the Transfers Associated With Certain Persona). For more details on the electronic filing of the	n 8868 if yo nal (not auto forms listed I Benefit (u need a 3-month auto omatic) 3-month extens d in Part I or Part II wit Contracts, which must	matic extension or ion of time. You c h the exception of be sent to the I	f time an ele of For RS in	e to file (6 ectronica m 8870, n paper	6 months for ally file Form Information format (see	
A corporati	Automatic 3-Month Extension of Time on required to file Form 990-T and reque	sting an a		ension-check th				
	rporations (including 1120-C filers), partnersh ne tax returns.	ips, REMIC					nsion of time	
	I blance of avampt supplication or other files and is			nter filer's identifyin				
Type or	Name of exempt organization or other filer, see in	istructions.		Employer identi	identification number (EIN) or			
print	JALALI FAMILY FOUNDATION					729549		
File by the due date for	Number, street, and room or suite no. If a P.O. b. P.O. BOX 406	ox, see instr	uctions.	Social security number (SSN)				
filing your return. See instructions	City, town or post office, state, and ZIP code. Fo WHITTIER CA 90608	r a foreign a	ddress, see instructions.	, —				
	eturn code for the return that this application	is for (file a	separate application fo	r each return) .			. 0 4	
Application Is For	n	Return Code	Application Is For				Return Code	
Form 990		01	Form 990-T (corporati	Form 990-T (corporation)			07	
Form 990-	BL	02	Form 1041-A				08	
Form 990-	EZ	01	Form 4720				09	
Form 990-	PF	04	Form 5227				10	
Form 990-	T (sec. 401(a) or 408(a) trust)	05	Form 6069				11	
Form 990-	T (trust other than above)	06	Form 8870 1					
Telephone If the orga If this is fo for the whole a list with the until for the whole with the until for the whole with the wi	s are in the care of ► JERE E MCDONALD AN No. ► 562-945-1558 Initiation does not have an office or place of but a Group Return, enter the organization's fout the group, check this box ► If the names and EINs of all members the extension uest an automatic 3-month (6 months for a contract of the organization's return for: AUGUST 15	Find the second	AX No. the United States, checup Exemption Number (at of the group, check the group) the compared to file Form 990 exation return for the organization.	GEN) is box D-T) extension of tianization named a	► [ime bove	If th	tension is	
2 If the ☐ CI	tax year beginning tax year entered in line 1 is for less than 12 r mange in accounting period	nonths, che	eck reason: 🔲 Initial re	turn LI Final ret	urn	, 20		
nonre	s application is for Form 990-BL, 990-PF, 990 efundable credits. See instructions.				3a	\$	0	
	s application is for Form 990-PF, 990-T, 4 nated tax payments made. Include any prior y				3b	\$		
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.							0	
	u are going to make an electronic fund withdrawal			O and Form 8879-E				