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Form 990-PF

Department of the 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 Open to public Inspection

For o	alen	dar year 2012 or tax year beginning		, and ending		· · · · · · · · · · · · · · · · · · ·
Nar	ne of	foundation			A Employer identification	number
		KLING FAMILY FOUNDATIO			33-6272913	
		nd street (or P O box number if mail is not delivered to street	address)	Room/suite	B Telephone number	0.0
	35			100	949-533-03	
		wn, state, and ZIP code FIN, CA 92780			C If exemption application is po	ending, check here
			Initial return of a fo	rmer public charity	D 1. Foreign organizations	check here
u U	HECK	all that apply Initial return Final return	Amended return	imer public cliafity		
		Address change	Name change		2. Foreign organizations me check here and attach ∞	eting the 85% test, putation
H C	heck	type of organization X Section 501(c)(3) ex			E If private foundation stat	us was terminated
	_		Other taxable private founda	tion	under section 507(b)(1)	
l Fa	ır ma	rket value of all assets at end of year J Accounting	ng method X Cash	Accrual	F if the foundation is in a 6	
			her (specify)		under section 507(b)(1)	(B), check here ►
_	***	872,651. (Part I, colu.				(4) 5: 1
Pa	ırt l	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(0) Disbursements for chantable purposes
	4	necessarily equal the amounts in column (a))	1,109,000.		N/A	(cash basis only)
	ı	Contributions, gifts, grants, etc., received Check In the foundation is not required to attach Sch. B.	1,100,000		***************************************	
	3	Interest on savings and temporary cash investments	<u> </u>			**************************************
	4	Dividends and interest from securities	12,458.	12,458	,	STATEMENT 1
	1	Gross rents				
	b	Net rental income or (loss)		// / / / / / / / / / / / / / / / / / /		
ø	6a	Net gain or (loss) from sale of assets not on line 10	8,275.			
ğ	b	Gross sales price for all assets on line 6a 8,275.			<u> </u>	· · · · · · · · · · · · · · · · · · ·
Revenue	7	Capital gain net income (from Part IV, line 2)		8,275	•	
<u> </u>	8	Net short-term capital gain	·····	······		
	9	Income modifications Gross sales less returns			-	
	10a	and allowances		4 -, (, ,'''' -,- ,, , ','''' ,, '		
		Less Cost of goods sold				
		Gross profit or (loss)				· · · · · · · · · · · · · · · · · · ·
	11	Other income Total. Add lines 1 through 11	1,129,733.	20,733	•	
	13	Compensation of officers, directors, trustees, etc	15,000.	0		0.
	14	Other employee salaries and wages				
		Pension plans, employee benefits				
ses	160	Legal fees			CEIVED 1	
ë	b	Accounting fees			10	
Expens	C	Other professional fees			QV 2 5 2013 10	
Ĭ.	17	Interest			0 V 2 3 2013 (8)	
Operating and Administrative	18	Taxes			DEN HT	<u> </u>
inis	19	Depreciation and depletion		- 1 0	GDEN, UI	i
Ę	20	Occupancy				
δĀ	21	Travel, conferences, and meetings				
je	22	Printing and publications Other expenses STMT 2	905.	0	•	0.
ţi	24	Total operating and administrative				
era	-	expenses. Add lines 13 through 23	15,905.	0		0.
ှ် ဝိ	25	Contributions, gifts, grants paid	1,352,000.			1,352,000.
		Total expenses and disbursements.				
		Add lines 24 and 25	1,367,905.	0	•	1,352,000.
	27	Subtract line 26 from line 12				
	a	Excess of revenue over expenses and disbursements	<238,172.	20 722		
	1	Net investment income (if negative, enter -0-)		20,733	· N/A	
222		Adjusted net income (if negative, enter -0-)	I4			Form 990-PF (2012
12-0	501)5-12	LHA For Paperwork Reduction Act Notice, see	instructions.	_	γ u	ruiiii 330-FF (2012

	''	Accounts payable and accided expenses		 		 	
	18	Grants payable		 		 	
S	19	Deferred revenue		 		 	
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons		 		 	
ap	21	Mortgages and other notes payable		 		 	
_	22	Other liabilities (describe)	 			
	23	Total liabilities (add lines 17 through 22)			0.		0.
		Foundations that follow SFAS 117, check here					
		and complete lines 24 through 26 and lines 30 and 31.					
ő	24	Unrestricted		 		 	
<u>la</u>	25	Temporarily restricted		 		 	
8	26	Permanently restricted				 	
und Balances		Foundations that do not follow SFAS 117, check here	X		- 1	•	1
Ī		and complete lines 27 through 31	'				- 1

Part III Analysis of Changes in Net Assets or Fund Balances

27 Capital stock, trust principal, or current funds

31 Total liabilities and net assets/fund balances

30 Total net assets or fund balances

28 Paid-in or capital surplus, or land, bldg, and equipment fund

29 Retained earnings, accumulated income, endowment, or other funds

1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30		
Ť	(must agree with end-of-year figure reported on prior year's return)	1	1,059,485.
2	Enter amount from Part I, line 27a	2	<238,172.>
3	Other increases not included in line 2 (itemize)	3	0.
4	Add lines 1, 2, and 3	4	821,313.
5	Decreases not included in line 2 (itemize)	5	0.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	821,313.

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821,313

0

1,059,485.

1,059,485.

1,059,485

	(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co.) (b) How acquired P - Purchase D - Donation		`P.	(c) Date (mo , d	acquired ay, yr)	(d) Date sold (mo , day, yr)				
1a CAPITAL GAINS	DIVI	DENDS								
<u>b</u>			<u> </u>		—					
d d					├					
е					 					
(e) Gross sales price		Depreciation allowed (or allowable)		st or other basis expense of sale					ain or (loss) s (f) minus (g)
a 8,275	•								·	8,275.
<u>b</u>										
<u>c</u>			 							
e	1									
Complete only for assets show	ving gain in	column (h) and owned by	y the foundation	on 12/31/69					ol (h) gain	
(i) F M V as of 12/31/69		(j) Adjusted basis as of 12/31/69		cess of col (i) col (j), if any					ot less than (from col. (f	ı))
<u>a</u>	<u> </u>									8,275.
<u>b</u>						_				
<u>c</u>	 		+							
е -	 							-		
2 Capital gain net income or (net	capital loss	If gain, also ent	er in Part I, line 0- in Part I, line	7 7	}	2				8,275.
3 Net short-term capital gain or (loss) as defi									
if gain, also enter in Part I, line	8, column (20 (0)		}				27 / 2	
If (loss), enter -0- in Part I, line	8				, ,					
For optional use by domestic priv	Under S ate foundati	ons subject to the section					ent In	come	N/A	
(For optional use by domestic privif section 4940(d)(2) applies, leaving was the foundation liable for the siff "Yes," the foundation does not q	Under S ate foundati e this part bl ection 4942 ualify under	ons subject to the section ank tax on the distributable a section 4940(e) Do not o	4940(a) tax on mount of any ye complete this pa	net investment ii ear in the base pe irt	riod?)	ent In	come	N/A	Yes X No
(For optional use by domestic priviles of section 4940(d)(2) applies, leaviles the foundation liable for the solf "Yes," the foundation does not quantum to the appropriate amount (a)	Under S ate foundati e this part bl ection 4942 ualify under	ons subject to the section ank tax on the distributable a <u>section 4940(e) Do not o</u> mn for each year, see the	4940(a) tax on mount of any ye complete this pa	net investment ii ear in the base pe irt	riod?)	ent In	come		
	Under S ate foundati e this part bl ection 4942 ualify under in each colu	ons subject to the section ank tax on the distributable a <u>section 4940(e) Do not o</u> mn for each year, see the (b) Adjusted qualifying d	1 4940(a) tax on mount of any year mount of any year mount of any year mount on so be a strictions be	net investment ii ear in the base pe irt	riod? entries (c)) itable-u	use asset	s	Distrib	(d) ution ratio ded by col (c))
(For optional use by domestic priviles of section 4940(d)(2) applies, leaviles the foundation liable for the solf "Yes," the foundation does not quality the section of the	Under S ate foundati e this part bl ection 4942 ualify under in each colu	ons subject to the section ank tax on the distributable a section 4940(e) Do not of mn for each year, see the (b) Adjusted qualifying d	mount of any year complete this parainstructions before the stributions 38,000.	net investment in ear in the base pe int fore making any e	riod? entries (c)	itable-u	use asset	s 5 •	Distrib	(d) ution ratio ded by col (c)) 1.092932
(For optional use by domestic privilege (For optional use by domestic privilege (For optional use by domestic privilege (For optional use) (For op	Under S ate foundati e this part bl ection 4942 ualify under in each colu	ons subject to the section ank tax on the distributable a section 4940(e) Do not of mn for each year, see the (b) Adjusted qualifying d 1,1	mount of any year complete this parainstructions be instructions 38,000.	net investment in ear in the base pe int fore making any e	entries (c) prichar	itable-u	use asset 1,230 9,44	s 6 •	Distrib	(d) ution ratio ded by col (c)) 1.092932
(For optional use by domestic priviles of section 4940(d)(2) applies, leaved was the foundation liable for the solf "Yes," the foundation does not quark the appropriate amount (a) Base period years Calendar year (or tax year begin 2011 2010 2009	Under S ate foundati e this part bl ection 4942 ualify under in each colu	ons subject to the section ank tax on the distributable a section 4940(e) Do not of mn for each year, see the (b) Adjusted qualifying d 1,1 9 1,0	mount of any year complete this parametrictions be astrobutions 38,000.14,745.60,800.	net investment in ear in the base pe int fore making any e	entries (c) prichar	ntable-u	use asset	s 6. 1.	Distrib	(d) ution ratio ded by col (c)) 1.092932
(For optional use by domestic privilege (For optional use by domestic privilege (For optional use by domestic privilege (For optional use) (For op	Under S ate foundati e this part bl ection 4942 ualify under in each colu	ons subject to the section ank tax on the distributable a section 4940(e) Do not of mn for each year, see the (b) Adjusted qualifying d 1,1 9 1,0 9	mount of any year complete this parainstructions be instructions 38,000.	net investment in ear in the base pe int fore making any e	entries (c) prichar	itable-u , 04] 989 , 008	use asset 1,230 9,44 3,97	s 6. 1. 4. 6.	Distrib	(d) ution ratio ded by col (c)) 1.092932 .924507 1.051365
(For optional use by domestic privilege (For optional use by domestic privilege (For optional use by domestic privilege (For optional use) (For op	under S ate foundati e this part bl ection 4942 ualify under in each colu	ons subject to the section ank tax on the distributable a section 4940(e) Do not or mn for each year, see the (b) Adjusted qualifying d 1,1 9 1,0 9 9	mount of any year complete this parametrictions be astributions 38,000.14,745.60,800.23,350.57,200.	ear in the base pe ent fore making any o	entries (c) prichar 1) ntable-u , 04] 983 , 008 982	ise asset 1,23 9,44 3,97 7,24	s 6. 1. 4. 6.	Distrib	(d) ution ratio ded by col (c)) 1.092932 .924507 1.051365 1.064692 .974150
(For optional use by domestic privilege (For optional use by domestic privilege (For optional use by domestic privilege (For optional use) (For op	under S ate foundation this part blood ection 4942 ualify under in each columning in)	ons subject to the section ank tax on the distributable a section 4940(e) Do not of mn for each year, see the (b) Adjusted qualifying d 1,1 9 1,0 9:	mount of any year complete this parametrictions be astributions 38,000.14,745.60,800.23,350.57,200.	ear in the base pe ent fore making any o	entries (c) prichar 1) ntable-u , 04] 983 , 008 982	ise asset 1,23 9,44 3,97 7,24	s 6. 1. 4. 6.	Distrib	(d) ution ratio ded by cof (c)) 1.092932 .924507 1.051365 1.064692 .974150
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(For optional use by domestic privilege (For optional use) (For	under S ate foundation this part bit ection 4942 ualify under in each columning in) are 5-year basetence if less	ons subject to the section ank tax on the distributable a section 4940(e) Do not of mn for each year, see the (b) Adjusted qualifying d 1,1 9 1,0 9: 9: see period - divide the total ithan 5 years	mount of any year complete this parametrictions be istributions $38,000.14,745.60,800.23,350.57,200.10$	ear in the base pe ent fore making any o	entries (c) prichar 1) ntable-u , 04] 983 , 008 982	ise asset 1,23 9,44 3,97 7,24	s 5. 1. 4. 6. 0.	Distrib	(d) ution ratio ded by col (c)) 1.092932 .924507 1.051365 1.064692 .974150 5.107646 1.021529 729,171.
(For optional use by domestic privilege (For optional use of section 4940(d)(2) applies, leaving the foundation liable for the section (a) the foundation does not quanta (a) and the foundation liable for the foundation has been in existence of the foundation has been in existence (For optional use of for the foundation has been in existence (For optional use of for the foundation has been in existence (For optional use of for the foundation has been in existence (For optional use of for optional use o	Under S ate foundation this part bluection 4942 ualify under in each columning in) the 5-year bastence if less table-use as	ons subject to the section ank tax on the distributable a section 4940(e) Do not of mn for each year, see the (b) Adjusted qualifying d 1,1 9 1,0 9: se period - divide the totals than 5 years sets for 2012 from Part X	mount of any year complete this parametrictions be istributions $38,000.14,745.60,800.23,350.57,200.10$	ear in the base pe ent fore making any o	entries (c) prichar 1) ntable-u , 04] 983 , 008 982	ise asset 1,23 9,44 3,97 7,24	s 6. 1. 4. 6. 0.	Distrib	(d) ution ratio ded by cof (c)) 1.092932 .924507 1.051365 1.064692 .974150 5.107646 1.021529 729,171. 744,869.
(For optional use by domestic privilege (For optional use by domestic privilege (For optional use by domestic privilege (For optional use optional use of the state of the sta	Under S ate foundation this part bluection 4942 ualify under in each columning in) the 5-year bastence if less table-use as	ons subject to the section ank tax on the distributable a section 4940(e) Do not of mn for each year, see the (b) Adjusted qualifying d 1,1 9 1,0 9: se period - divide the totals than 5 years sets for 2012 from Part X	mount of any year complete this parametrictions be istributions $38,000.14,745.60,800.23,350.57,200.10$	ear in the base pe ent fore making any o	entries (c) prichar 1) ntable-u , 04] 983 , 008 982	ise asset 1,23 9,44 3,97 7,24	s 6 . 1 . 4 . 6 . 0 . 2 3 4 5	Distrib	(d) ution ratio ded by col (c)) 1.092932 .924507 1.051365 1.064692
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	990-PF(2012) THE KLING FAMILY FOUNDATION	\ 40.40(i)\ 40.40(i)\		62/2			age 4
	rt VI Excise Tax Based on Investment Income (Section 4940(a		4948	- see II	nstru	ction	is)
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter						
	Date of ruling or determination letter (attach copy of letter if necess:	ary-see instructions)				2	٦7
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here	X and enter 1%	1	ļ			07.
	of Part I, line 27b	2 11 1 10 11 (1)					
	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of		١.				0.
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others	s enter -U-)	2	 		20	07.
	Add lines 1 and 2		3				0.
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Other	's enter -u-)	5	 		21	07.
	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-		- 3				
	Credits/Payments	_{5a} 360) _				
	2012 obtainated tax payments and 2011 observations are	6b	~				
	Exempt foreign organizations tax withinstead observe	6c	\dashv				
	Tax paid with application for shorter of time to the Commerce,	6d	1				
	backap with relating strengths, which	<u> </u>	7			3	60.
	Total credits and payments Add lines 6a through 6d Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	d	8	 			
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		→ 9				
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		10	İ		1	53.
	Enter the amount of line 10 to be Credited to 2013 estimated tax	153. Refunded		1			0.
	ert VII-A Statements Regarding Activities			. '	-		
	During the tax year, did the foundation attempt to influence any national, state, or local legislation	on or did it participate or interv	ene in			Yes	No
	any political campaign?				1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes	(see instructions for definition)?		1b		X
_	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and c						
	distributed by the foundation in connection with the activities.						
C	Did the foundation file Form 1120-POL for this year?				10		<u>X</u>
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year	ar	_				
	(1) On the foundation ▶ \$ O . (2) On foundation managers ▶	\$	<u>) .</u>				
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure	e tax imposed on foundation					
	managers > \$O.						v
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?				2		<u>X</u>
	If "Yes," attach a detailed description of the activities.						
3	Has the foundation made any changes, not previously reported to the IRS, in its governing insti	rument, articles of incorporation	n, or				х
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes				3		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		N	I/A	4a 4b		
	o If "Yes," has it filed a tax return on Form 990-T for this year?		•	17 21	5		X
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?						
_	If "Yes," attach the statement required by General Instruction T.	ır					
b	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied eithe	1					
	 By language in the governing instrument, or By state legislation that effectively amends the governing instrument so that no mandatory displayed. 	rections that conflict with the	state law				
					6	Х	
7	remain in the governing instrument? Did the foundation have at least \$5,000 in assets at any time during the year?				7	X	
′	If "Yes," complete Part II, col. (c), and Part XV.						
g.	a Enter the states to which the foundation reports or with which it is registered (see instructions)	▶ _					
00	CA						
,	of the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attor	rney General (or designate)					
١	of each state as required by General Instruction G? If "No," attach explanation	· · · · · · · · · · · · · · · · · · ·			8b	X	<u> </u>
g	Is the foundation claiming status as a private operating foundation within the meaning of section	on 4942(j)(3) or 4942(j)(5) for	calendar				
•	year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If "Yes," con	nplete Part XIV			9_	L	X
10	and the second s	isting their names and addresses			10	L <u>. </u>	X
				For	m 990	-PF	(2012)

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223551 12-05-12

Total. Add lines 1 through 3

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Part X Minimum Investment Return (All domestic foundations must complete this part. Fore	ign foundations, s	ee instructions.)
1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
a Average monthly fair market value of securities	1a	171,687.
b Average of monthly cash balances	1b	171,687. 568,588.
c Fair market value of all other assets	1c	
d Total (add lines 1a, b, and c)	1d	740,275.
e Reduction claimed for blockage or other factors reported on lines 1a and		
1c (attach detailed explanation)	0.	
2 Acquisition indebtedness applicable to line 1 assets	2	O.
3 Subtract line 2 from line 1d	3	740,275.
4 Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	11,104.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	729,171.
6 Minimum investment return. Enter 5% of line 5	6	36,459.
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating founds foreign organizations check here and do not complete this part.)	ations and certain	
1 Minimum investment return from Part X, line 6	1	36,459.
	207.	<u></u>
b Income tax for 2012 (This does not include the tax from Part VI)		
c Add lines 2a and 2b	2c	207.
3 Distributable amount before adjustments Subtract line 2c from line 1	3	36,252.
4 Recoveries of amounts treated as qualifying distributions	4	0.
5 Add lines 3 and 4 — — — — — — —	5	36,252.
6 Deduction from distributable amount (see instructions)	6	0.
7 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	36,252.
Part XII Qualifying Distributions (see instructions)		
1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	1,352,000.
b Program-related investments - total from Part IX-B	1b	0.
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3 Amounts set aside for specific charitable projects that satisfy the		
a 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	1,352,000.
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		<u> </u>
Income Enter 1% of Part I, line 27b	5	207.
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	1,351,793.

Note. 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

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4940(e) reduction of tax in those years

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2011	(c) 2011	(d) 2012
1 Distributable amount for 2012 from Part XI,				
line 7		:	—	36,252.
2 Undistributed income, if any, as of the end of 2012				
a Enter amount for 2011 only	!! '	· · · · · · · · · · · · · · · · · · ·	0.	
h Total for prior years		•		
	, , , , , , , , , , , , , , , , , ,	0.	13414-111111111111111111111111111111111	***************************************
3 Excess distributions carryover, if any, to 2012				
a From 2007 908,611.				
b From 2008 880, 359.				
c From 2009 1,010,701.				
d From 2010 865, 471.			:	
e From 2011 1,086,280.	4,751,422.			
f Total of lines 3a through e	4,731,422.			
4 Qualifying distributions for 2012 from				
Part XII, line 4. ► \$ 1,352,000.			0.	
a Applied to 2011, but not more than line 2a				
b Applied to undistributed income of prior		0.		
years (Election required - see instructions)			;·····	H.,''PH:-PH-H.KHHHHH.K.
c Treated as distributions out of corpus	0.			
(Election required - see instructions)			••••••••••••••••••••••••••••••••••••••	36,252.
d Applied to 2012 distributable amount e Remaining amount distributed out of corpus	1,315,748.			·
5 Excess distributions carryover applied to 2012	0.	······································	(*************************************	0.
(if an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below:				
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	6,067,170.			
b Prior years' undistributed income. Subtract		-		
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of				
deficiency has been issued, or on which the section 4942(a) tax has been previously				
assessed		0.		
d Subtract line 6c from line 6b Taxable		_		
amount - see instructions		0.		ļ
e Undistributed income for 2011 Subtract line			0.	
4a from line 2a Taxable amount - see instr			0.	
f Undistributed income for 2012 Subtract				
lines 4d and 5 from line 1. This amount must				0.
be distributed in 2013			·	· · · · · · · · · · · · · · · · · · ·
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by	0.			
section 170(b)(1)(F) or 4942(g)(3)				
8 Excess distributions carryover from 2007	908,611.			
not applied on line 5 or line 7	500,011.			
9 Excess distributions carryover to 2013. Subtract lines 7 and 8 from line 6a	5,158,559.			
10 Analysis of line 9	3,200,000			
a Excess from 2008 880, 359.		,		
b Excess from 2009 1,010,701.	t .			
© Excess from 2010 865, 471.				
d Excess from 2011 1,086,280.	`			
e Excess from 2012 1,315,748.				
				Form 990-PF (2012)

223581 12-05-12

2 Greats and Contributions Boid During the M		D	<u> </u>	
3 Grants and Contributions Paid During the Y	If recipient is an individual	Payment		
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year				
- '				
VARIOUS RECIPIENTS- SEE ATTACHED	NONE			
VARIOUS RECIFIENTS- SEE ATTACHED	NONE			1,352,000.
			1	
-				
		,		
				-
				
		[
	<u> </u>			
Total		,	► 3a	1,352,000.
b Approved for future payment				
NONE				
		j		
		·		
		1		
		}		
	<u></u>	<u> </u>		
Total			▶ 3b	0.

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated	Unrelated t	Unrelated business income		oy section 512, 513, or 514	(8)	
•	(a) Business	(b) Amount	Exclu- sion	(d) Amount	Related or exempt function income	
1 Program service revenue	code	Amount	code	Amount	Tunction income	
a	-					
b	_ -					
<u> </u>						
0	- -					
e	-	····				
g Fees and contracts from government agencies	-					
-						
2 Membership dues and assessments						
3 Interest on savings and temporary cash investments						
4 Dividends and interest from securities			14	12,458.		
5 Net rental income or (loss) from real estate						
a Debt-financed property						
b Not debt-financed property						
6 Net rental income or (loss) from personal						
property 7 Other investment income						
8-Gain or (loss) from sales of assets other						
than inventory	-		14	8,275.		
9 Net income or (loss) from special events						
O Gross profit or (loss) from sales of inventory			_			
1 Other revenue			_ _ -			
a						
b			- - - - - - - - - - 			
c	_					
d						
0						
2 Subtotal Add columns (b), (d), and (e)			0.	20,733.		
13 Total. Add line 12, columns (b), (d), and (e)				13	20,73	
(See worksheet in line 13 instructions to verify calculations)					

Tille No.	the foundation's exempt purposes (other than by providing funds for such purposes)	iit Oi
223621 12-05-12	For	m 990-PF (2012)

Part AVII	Exempt Organ		31613 10 6	and mansactions a	inu neiations	nips With Noncha	rnable	,	
1 Did the ord			of the followin	g with any other organization	on described in secti	on 501(c) of	<u> </u>	Yes	No
				7, relating to political organ		011 30 1(0) 01	i l		
	from the reporting found				neutrono.				
(1) Cash				ya			1a(1)	1	Х
(2) Other	assets						1a(2)		X
b Other trans							1.0(2)		
(1) Sales	of assets to a noncharital	ble exempt organizat	tion				1b(1)	1	Х
	ases of assets from a no	•					1b(2)		X
	of facilities, equipment,	•	3				1b(3)		X
	oursement arrangements						1b(4)		X
	or loan guarantees						1b(5)		X
	mance of services or me	mbership or fundral	sing solicitatio	ns			1b(6)		X
	facilities, equipment, ma						10		X
d If the answ	er to any of the above is	"Yes," complete the f	following sche	dule Column (b) should alv	ways show the fair n	narket value of the goods,	other ass	ets,	
				ed less than fair market valu					
column (d)	the value of the goods,	other assets, or serv	ices received						
(a) Line no ((b) Amount involved	(c) Name of	noncharitable	exempt organization	(d) Description	of transfers, transactions, and	shanng arr	angeme	nts
			N/A						
				·. · · · · · · · · · · · · · · · · · ·		····			
-		-	<u> </u>						
									
									
					ļ. <u></u>				
		<u></u>		··					
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		 	-						
0- 1-45-4		Alica of Clarks of County			zationa dagasibad				
	=	-		or more tax-exempt organi	zations described	Г	Yes	Y	No
	501(c) of the Code (other)(3)) or in seci	1011 3277		L	162		טוו ב
D II Yes, co	mplete the following sche (a) Name of org			(b) Type of organization		(c) Description of relations	hin		
	N/A	Janization		(b) Type of organization		(a) Boothpalon or rollations	p		
	N/A								
		 -			··				
	-								
									
Under	penalties of perjury, I declare	that I have examined thi	s return, includir	g accompanying schedules and	statements, and to the	best of my knowledge	y the IRS d	Soules 1	bio 1
Sign and bel	liet it is true, correct, and con	notete Declaration of pri	eparer (other tha	n taxpayer) is based on all inform	nation of which preparer	nas any knowledge ret	um with the own below	prepan	er
Here	HAMAI U.	SULLIN		11/15/13	PRESTI		X Yes	See ins	j _{No}
Signa	ature of officer or trustee	0		Date	Title				
	Print/Type preparer's na	ame	Preparer's s	gnature	Date , /	Check If PTIN			
				P+-10	1 /11/12	self- employed			
Paid	JOHN POSTM	A, II	LAM	Joshna IICH	1 [1]	P0	0078	629	
Preparer	Firm's name ► LES		AS, SC	HWARZ & POST	MA, INC.	Firm's EIN ▶ 95-3	8648	90	
Use Only									
	Firm's address ▶ 2	SAN JOAQU	IN PLA	ZA, SUITE 25	0				
	NE	WPORT BEA	CH, CA	92660			650		
						Fo	m 990	-PF (2012)

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

OMB No 1545-0047

2012

Employer identification number

	THE KLING FAMILY FOUNDATION	33-6272913
Organization type (chec	k one):	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
• •	n is covered by the General Rule or a Special Rule. (c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Ru	le. See instructions.
X For an organiza	tion filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in maniplete Parts I and II.	oney or property) from any one
Special Rules		
509(a)(1) and 17	01(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the reg (O(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the gin (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.	
total contribution	01(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contrins of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or edulor for use the complete Parts I, II, and III.	
contributions fo If this box is che purpose. Do no	01(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributions of use exclusively for religious, charitable, etc., purposes, but these contributions did not to ecked, enter here the total contributions that were received during the year for an exclusive to complete any of the parts unless the General Rule applies to this organization because if able, etc., contributions of \$5,000 or more during the year	tal to more than \$1,000. ly religious, chantable, etc.,
-	n that is not covered by the General Rule and/or the Special Rules does not file Schedule E on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on Part	

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

Name of organization

Employer identification number

THE KLING FAMILY FOUNDATION

33-6272913

Part I	Contributors (see instructions). Use duplicate copies of Part I	ıf addıtıonal space ıs needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	P.O. BOX 1325 NEWPORT BEACH, CA 92653	\$1,109,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroli Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroli Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there Is a noncash contribution.)

Name of organization

Employer identification number

THE KLING FAMILY FOUNDATION

33-6272913

art II	Noncash Property (see instructions). Use duplicate copies of P	art II if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		s	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received

Name of org	anization		Employer identification number
THE KI	LING FAMILY FOUNDATION		33-6272913
Part III	Exclusively religious, charitable, etc., individea. Complete columns (a) through (e) and the total of exclusively religious, charitable, etc. Use duplicate copies of Part III if additional	e following line entry. For organization, , contributions of \$1,000 or less fol	(7), (8), or (10) organizations that total more than \$1,000 for the
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gif	t
	Transferee's name, address, an		Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
1		(e) Transfer of gif	't
-	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee
			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gif	ft
-	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gif	ft
	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee
			

Form 886	8 (Rev. 1-2013)				Page 2
o If you a	are filing for an Additional (Not Automatic) 3-Month Ex	tension,	complete only Part II and check the	s box	\triangleright X
Note. On	ly complete Part II if you have already been granted an a	automatic	3-month extension on a previously	filed Form 8868.	
≏ If you a	are filing for an Automatic 3-Month Extension, comple	te only Pa	art I (on page 1).		
'art II	Additional (Not Automatic) 3-Month E	xtensio	n of Time. Only file the origin	nal (no copies need	ed).
			Enter filer's	identifying number, s	ee instructions
Type or	Name of exempt organization or other filer, see instru	ictions		Employer identification	number (EIN) or
print					
File by the	THE KLING FAMILY FOUNDATION			33-627	2913
due date for	Number, street, and room or suite no. If a P.O. box, s	ee instruc	tions.	Social security number	(SSN)
filing your return See	335 CENTENNIAL WAY, NO. 100				
instructions	City, town or post office, state, and ZIP code. For a fo	oreign add	dress, see instructions.		
	TUSTIN, CA 92780				
Enter the	Return code for the return that this application is for (file	e a separa	te application for each return)		0 4
		r	•		
Applicati	on	Return	Application		Return
<u>ls For</u>		Code	Is For		Code
	or Form 990-EZ	01			
Form 990		02	Form 1041-A		08
	0 (individual)	03	Form 4720		09
Form 990	· · ·	04	Form 5227		10
	-T (sec. 401(a) or 408(a) trust)	05	Form 6069	- "	11
	-T (trust other than above)	06	Form 8870		12
STOP! Do	o not complete Part II if you were not already granted		<u>natic 3-month extension on a prev</u>	riously filed Form 8868	<u> </u>
	MR. DARRYL SHEI		CUITED 100 BUCET	N	
	books are in the care of > 335 CENTENNIAL	WAY,		N, CA 92/80	
•	ione No. ► 949-553-0300		FAX No. ▶		
	organization does not have an office or place of business				
If this i	s for a Group Return, enter the organization's four digit	1			
DOX ►			ach a list with the names and EINs o	f all members the extens	sion is for.
	·	NOVEM	BER 15, 2013.		
	calendar year 2012 , or other tax year beginning		, and endin		·
6 If th	te tax year entered in line 5 is for less than 12 months, c	heck reas	on: L Initial return L	Final return	
	☐ Change in accounting period				
	te in detail why you need the extension	THOMO	ADDITIONAL MINE M	O CAMUED	
	E TAXPAYER RESPECTFULLY REQU				
<u> IN</u>	FORMATION TO FILE A COMPLETE	E AND	ACCURATE TAX RETU	KN.	
	nis application is for Form 990-BL, 990-PF, 990-T, 4720, o	or 6069, e	nter the tentative tax, less any		0
	refundable credits. See instructions.			8a \$	0.
	nis application is for Form 990-PF, 990-T, 4720, or 6069,				
	payments made. Include any prior year overpayment all	owed as a	a credit and any amount paid		0
	eviously with Form 8868.		·	8b	0.
	ance due. Subtract line 8b from line 8a. Include your pa	-	h this form, if required, by using		0
EFT	PS (Electronic Federal Tax Payment System). See instru			8c \$	0.
	•		st be completed for Part II o	-	
Under pena	alties of perjury, I declare that I have examined this form, includi orrect, and complete, and that I am authorized to prepare this fo	ing accomp	panying schedules and statements, and to	o the best of my knowledge	and belief,
				.	
Signature	► Title ► C	JPA		Date	

As of December 31, 2012 Name

Αď

Num

Date

Type

Donation

Accrual Basis

1:27 PM 11/13/13

Debit

Split

10,000.00 5,000.00 1,500.00 7,500.00 3,000.00 65,000.00 41,000.00 10,000.00 1,500.00 4,500.00 18,000.00 8,800.00 4,000.00 4,000 00 7,600.00 75,000.00 10,000.00 5,000 00 1,500 00 5,000 00 2,500 00 3,000 00 1,500 00 1,500 00 1,500 00 6,000 00 3,800 00 5,000 00 600 00 5,000 00 10,000 00 2,000 00 5,000 00 10,000 00 4,000 00 2,000 00 9,000 00 8,000 00 10,000 00 30,000 00 1,500 00 5,000 00 10,000 00 18,000 00 6,000 00 18,000 00 20,000 00 10,000 00 15,000 00 15,000 00 Comerica Bank Checking #0835 Comerca Bank Checking #0835 Comerca Bank Checking #0835 Comerica Bank Checking #0835 Comerica Bank Checking #0835 Comenca Bank Checking #0835 Comerica Bank Checking #0835 Comerica Bank Checking #0835 Comerica Bank Checking #0835 Comenca Bank Checking #0835 Comenca Bank Checking #0835 Comenca Bank Checking #0835 Comerica Bank Checking #0835 Comenca Bank Checking #0835 Comerica Bank Checking #0835 Comerica Bank Checking #0835 Comerica Bank Checking #0835 Comenca Bank Checking #0835 Comerca Bank Checking #0835 Comenca Bank Checking #0835 Comerica Bank Checking #0835 Comerica Bank Checking #0835 Comerica Bank Checking #0835 Comerica Bank Checking #0835 Comenca Bank Checking #0835 Comerica Bank Checking #0835 Comerica Bank Checking #0835 Comerca Bank Checking #0835 Comerica Bank Checking #0835 Comenca Bank Checking #0835 Comenca Bank Checking #0835 Comenca Bank Checking #0835 Comerica Bank Checking #0835 Comerica Bank Checking #0835 Comerica Bank Checking #0835 Foundation World Cultural Heritage Of The Foundation World Cultural Heritage Of The Foundation World Cultural Hentage Of The Boys & Girls Club/Annapolis & A A County Fairmont Private Schools Parents Assoc Fairmont Private Schools Parents Assoc Boys & Girls Club Of Laguna Beach Boys & Girls Club Of Laguna Beach center for Action & Contemplation College Foundation at Dehli, Inc Salifornia Gray Whale Coalition Claremont Institute for Study of Calvary Chapel San Clemente Calvary Chapel San Clemente Calvary Chapel San Clemente Calvary Chapel San Clemente CHOC Children's Foundation CHOC Children's Foundation El Toro Battalion Sea Cadets Cerritos College Foundation **Baltimore Medical Sys Inc** 3 Brothers / Big Sisters Decorative Arts Society Decorative Arts Society Decorative Arts Society -amilies Forward ree The Slaves CAF America CAF America CAF America CAF America 5249 5356 5340 5300 5318 5268 5335 5389 5314 5324 5338 5248 5298 5368 5283 5286 5258 330 5288 5289 3352 3308 5257 3317 5350 5387 5381 5337 5294 5351 06/02/2012 06/08/2012 09/21/2012 11/21/2012 02/24/2012 08/24/2012 11/21/2012 11/21/2012 06/02/2012 08/30/2012 08/15/2012 08/30/2012 02/11/2012 01/26/2012 05/11/2012 10/13/2012 06/02/2012 09/25/2012 09/04/2012 03/30/2012 04/04/2012 05/25/2012 02/20/2012 09/22/2012 02/20/2012 06/27/2012 03/30/2012 02/20/2012 04/13/2012 08/20/2012 04/08/2012 04/08/2012 09/22/2012 04/28/2012 09/12/2012 Check
16,100.00

5,000 00

1,000 00

KlingFamilyFoundation General Ledger As of December 31, 2012

1:27 PM 11/13/13 Accrual Basis 8,100.00 5,000.00 10,000.00

33,000.00

3,000 00

10,000 00

2,000 00 10,000 00 15,000 00

3,000 00

10,000 00

50,000.00

20,000 00

10,000 00 20,000 00 15,000 00

30,000.00

48,000.00

30,000 00

Debit

600 00 7,500 00 5,000 00

•		;	:	As of December 31, 2012	11-0
lype	Date	E	<u></u>	Name	hide
Check	08/16/2012	5325		Free The Slaves	Comerica Bank Checking #0835
Check	09/12/2012	5346		Friendship Shelter	Comerica Bank Checking #0835
Check	10/18/2012	5370		Friendship Shelter	Comenca Bank Checking #0835
Check	08/11/2012	5322		Gary Sinise Charitable Foundation	Comerica Bank Checking #0835
Check	02/20/2012	5254		Golden Bone Rescue & Rehab	Comenca Bank Checking #0835
Check	05/25/2012	5303		Happy Valley Elementary School Parents	Comerica Bank Checking #0835
Check	12/14/2012	5398		Happy Valley Elementary School Parents	Comerica Bank Checking #0835
Check	06/02/2012	5304		Happy Valley Elementary School Parents	Comerica Bank Checking #0835
Check	08/16/2012	5329		Happy Valley Elementary School Parents	Comerica Bank Checking #0835
Check	06/02/2012	5305		Happy Valley Elementary School Parents	Comerica Bank Checking #0835
Check	03/28/2012	5278		Hoag Hospital Foundation	Comenca Bank Checking #0835
Check	11/21/2012	5382		Hoag Hospital Foundation	Comerica Bank Checking #0835
Check	11/21/2012	5383		Hoag Hospital Foundation	Comenca Bank Checking #0835
Check	02/20/2012	5260		Holy Family Services Adoption Guild Of So	Comerica Bank Checking #0835
Check	11/21/2012	5385		Holy Family Services Adoption Guild Of So	Comenca Bank Checking #0835
Check	02/20/2012	5253		Humane Socetly of Truckee	Comenca Bank Checking #0835
Check	08/16/2012	5326		Humane Socerty of Truckee	Comerica Bank Checking #0835
Check	06/02/2012	5309		Italian Greyhound Rescuee Foundation	Comerica Bank Checking #0835
Check	08/24/2012	5333		Kinsey Research Institute	Comerica Bank Checking #0835
Check	03/15/2012	5272		Laguna Beach Seniors	Comerica Bank Checking #0835
Check	09/12/2012	5349		Laguna Food Pantry	Comerica Bank Checking #0835
Check	10/13/2012	5369		Laguna Food Pantry	Comerica Bank Checking #0835
Check	02/20/2012	5261		Leukemia & Lymphoma Society	Comerica Bank Checking #0835
Check	09/04/2012	5341		Liberty Institute	Comerica Bank Checking #0835
Check	11/21/2012	5378		Lithuanian American Community	Comerica Bank Checking #0835
Check	04/08/2012	5290		Lithuanian Assistance Foundation	Comerica Bank Checking #0835
Check	08/20/2012	5331		Lithuanian Assistance League	Comerica Bank Checking #0835
Check	06/02/2012	5307		Little Orphan Animals, Inc	Comerica Bank Checking #0835
Check	12/21/2012	5402		Little Orphan Animals, Inc	Comerica Bank Checking #0835
Check	03/17/2012	5274		Maple Youth Ballet	Comerica Bank Checking #0835
Check	03/17/2012	5275		Maple Youth Ballet	Comerica Bank Checking #0835
Check	04/08/2012	5291		Maple Youth Ballet	Comerica Bank Checking #0835
Check	04/12/2012	5293		Maple Youth Ballet	Comerica Bank Checking #0835
Check	06/02/2012	5316		Maple Youth Ballet	Comerica Bank Checking #0835
Check	09/25/2012	5357		Maple Youth Ballet	Comerica Bank Checking #0835
Check	10/01/2012	5359		Maple Youth Ballet	Comerica Bank Checking #0835
Check	12/03/2012	5393		Maple Youth Ballet	Comenca Bank Checking #0835

35,000.00 10,000.00 10,000.00 3,000.00

10,000 00

20,000 00

3,600.00 5,000.00 1,000.00

3,000 00 5,000 00 1,000 00

3,000 00

40,000.00

18,000 00 12,000 00 10,000 00 7,500 00 2,500 00

17,500.00

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KlingFamilyFoundation General Ledger As of December 31, 2012

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	5,000.00	3,000.00	10,000.00			5,000.00	00.009	1,000.00				58,000.00			43,000.00	7,000.00		3,500.00	1,000.00		7,500.00	3,000.00	1,000.00	2,500.00			22,000.00	12,500.00					75,500.00		5,000.00	
Debit	2,000 00	3,000 00	10,000 00	1,000 00	2,000 00	2,000 00	00 009	1,000 00	15,000 00	20,000 00	20,000 00	3,000 00	30,000 00	5,000 00	8,000 00	7,000 00	2,000 00	1,500 00	1,000 00	5,000 00	2,500 00	3,000 00	1,000 00	2,500 00	8,000 00	8,000 00	9,000 00	12,500 00	15,000 00	10,000 00	3,000 00	17,500 00	30,000 00	2,300 00	2,700 00	00000
Split	Comenca Bank Checking #0835	Comerica Bank Checking #0835	Comerica Bank Checking #0835	Comerica Bank Checking #0835	Comerica Bank Checking #0835	Comerica Bank Checking #0835	Comerica Bank Checking #0835	Comenca Bank Checking #0835	Comerica Bank Checking #0835	Comenca Bank Checking #0835	Comerica Bank Checking #0835	Comerica Bank Checking #0835	Comerica Bank Checking #0835	Comenca Bank Checking #0835	Comenca Bank Checking #0835	Comerica Bank Checking #0835	Comenca Bank Checking #0835	Comerica Bank Checking #0835	Comerica Bank Checking #0835	Comenca Bank Checking #0835	Comerica Bank Checking #0835	Comerica Bank Checking #0835	Comerica Bank Checking #0835	Comerica Bank Checking #0835	Comerica Bank Checking #0835	Comenca Bank Checking #0835	Comerica Bank Checking #0835	Comerica Bank Checking #0835	TOOM SENSON ACCOUNTS							
As of December 31, 2012 Name	Matt Leinart Foundation	maur Classical Music Festival	MiND Institute	National Junior Basketball League	National Junior Basketball League	National Junior Basketball League	Newport Beach Firefighter's Benvolence	Newport/Mesa Proliteracy	Noohra Foundation	Noohra Foundation	Noohra Foundation	Noohra Foundation	Ocean Institute	Ocean Institute	Ocean Institute	Old Town Mission	Orange County Performing Arts Center	Orange County Performing Arts Center	Orchard Hills School PTO	Sage Hill School	Sage Hill School	Saint Casimir's Chruch	Saliy's Fund	Sara's Wish Foundation	Seasonal Pauses	Seasonal Pauses	Seasonal Pauses	Sedona Adult Community Center	Sedona Arts Center, Inc Sedona Gay Pnde	Sedona Gay Pnde	1 . 2					
Num	J	5259	5384	5245	5313	5344	5347	5390	5266	5282	5301	5366	5287	5310	5353	5255	5263	5269	5332	5284	5377	5355	5363	5386	5262	5354	5395	5401	5277	5345	5360	5392	5358	5319	5319	0
Date	06/02/2012	02/20/2012	11/21/2012	01/26/2012	06/02/2012	09/11/2012	09/12/2012	11/21/2012	02/20/2012	03/30/2012	05/25/2012	10/11/2012	04/08/2012	06/02/2012	09/22/2012	02/20/2012	02/20/2012	02/24/2012	08/21/2012	03/30/2012	11/19/2012	09/22/2012	10/11/2012	11/21/2012	02/20/2012	09/22/2012	12/05/2012	12/21/2012	03/22/2012	09/12/2012	10/09/2012	11/30/2012	10/01/2012	06/29/2012	06/29/2012	0,00,00
Tvee	Check	Check	Check	Check	Check	Check	Check	Check	Check	Check	Check	Check	Check	Check	Check	Check	Check	Check	Check	Check	Check	Check	Check	Check	Check	Check	Check	Check	Check	Check	Check	Check	Check	Check	Check	O. P. C. C.

KlingFamilyFoundation General Ledger As of December 31, 2012

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		20,500.00						99,200.00	10,000.00		4,500.00	1,500.00	7,000.00			14,000.00	10,000 00		10,000.00	1,000.00	18,000.00		15,000.00	3,000.00	1,500.00	10,000.00	3,000.00	2,500.00				27,000.00	18,000.00	5,000.00	18,000.00	15,000.00
Debit	15,500 00	5,000 00	3,000 00	1,500 00	40,000 00	20,000 00	1,700 00	3,000 00	10,000 00	3,000 00	1,500 00	1,500 00	7,000 00	5,000 00	7,500 00	1,500 00	10,000 00	5,000 00	5,000 00	1,000 00	18,000 00	5,000 00	10,000 00	3,000 00	1,500 00	10,000 00	3,000 00	2,500 00	11,000 00	00 000'9	00 000'6	1,000 00	18,000 00	5,000 00	18,000 00	15,000 00
Split	Comenca Bank Checking #0835	Comenca Bank Checking #0835	Comerica Bank Checking #0835	Comenca Bank Checking #0835	Comenca Bank Checking #0835	Comerica Bank Checking #0835	Comenca Bank Checking #0835	Comerica Bank Checking #0835	Comerica Bank Checking #0835	Comerica Bank Checking #0835	Comerica Bank Checking #0835	Comerica Bank Checking #0835	Comenca Bank Checking #0835	Comerica Bank Checking #0835	Comerica Bank Checking #0835	Comerica Bank Checking #0835	Comerica Bank Checking #0835	Comenca Bank Checking #0835	Comenca Bank Checking #0835	Comerica Bank Checking #0835	Comerica Bank Checking #0835	Comerica Bank Checking #0835	Comerica Bank Checking #0835	Comerica Bank Checking #0835	Comerica Bank Checking #0835	Comenca Bank Checking #0835	Comerica Bank Checking #0835	Comerica Bank Checking #0835	Comerica Bank Checking #0835	Comerica Bank Checking #0835	Comenca Bank Checking #0835	Comenca Bank Checking #0835	Comenca Bank Checking #0835	Comenca Bank Checking #0835	Comerica Bank Checking #0835	Comerica Bank Checking #0835
Name	sedona Manne Corps League	sedona Marine Corps League	Segerstrom Center for the Arts	Squaw Valley Chapel	St Casımır Catholic Church	St Casımır Catholic Church	St Paul's Episcopal Church	stanford Water Polo Foundation	Survivorship A-Z, Inc	Survivorship A-Z, Inc	Survivorship A-Z, Inc	The Canyon Club	The Center for Citizen Leadership	The Center for Citizen Leadership	The Eddie Guardaro Foundation	The Orchestra & Community Choral Artists	The Principia Corporation	The Principia Corporation	the Rocklin Academy	The Thalians	The UCI Foundation	The UCLA Foundation	The Virginia Roseanne Amato Foundation	Therapeutic Touch Foundation	Therapeutic Touch Foundation	Therapeutic Touch Foundation	Therapeutic Touch Foundation	Toccata	Unitanan Universalist Fellowship	United Church of Christ at Squaw Valley	USC Catalina Hyperbanc Chamber					
Adj																																				
E S	5242	5391	5279	5399	5273	5364	5365	5373	5252	5280	5281	5292	5342	5267	5334	5388	5367	5311	5320	5246	5251	5321	5323	5396	5394	5379	5343	5380	5247	5302	5336	9400	5328	5295	5327	5296
Date	01/26/2012	11/26/2012	03/28/2012	12/14/2012	03/17/2012	10/11/2012	10/11/2012	11/12/2012	02/20/2012	03/30/2012	03/30/2012	04/08/2012	09/04/2012	02/23/2012	08/24/2012	11/21/2012	10/12/2012	06/02/2012	07/12/2012	01/26/2012	02/20/2012	07/12/2012	08/15/2012	12/11/2012	12/05/2012	11/21/2012	09/11/2012	11/21/2012	01/26/2012	05/25/2012	08/30/2012	12/14/2012	08/16/2012	04/13/2012	08/16/2012	04/28/2012
Туре	Check '	Check	Check	Check	Check	Check	Check	Check	Check	Check	Check	Check	Check	Check	Check	Check	Check	Check	Check	Check	Check	Check	Check	Check	Check	Check	Check	Check	Check	Check	Check	Check	Check	Check	Check	Check ,

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				As of December 31, 2012	-		
Туре	Date	Num	Adj	Name	Split	Debit	
Check	01/26/2012	5244		Verde Valley Sanctuary	Comerica Bank Checking #0835	7,500 00	7,500.00
Check	03/22/2012	5276		Warm Hearts Foundation	Comerica Bank Checking #0835	15,000 00	15,000 00
Check	12/11/2012	5397		Whitney High School	Comerica Bank Checking #0835	3,000 00	3,000.00
Check	02/20/2012	5264		Women for World Health	Comerica Bank Checking #0835	2,000 00	
Check	02/20/2012	5256		Women for World Health	Comerica Bank Checking #0835	4,000 00	
Check	06/02/2012	5306		Women for World Health	Comerica Bank Checking #0835	8,000 00	14,000.00
Check	02/20/2012	5265		World Cultural Hentage of the Wisdom	Comerica Bank Checking #0835	7,000 00	7,000.00
Check	01/26/2012	5243		Yesterdays Pearls	Comerica Bank Checking #0835	15,000 00	
Check	05/11/2012	5299		Yesterdays Pearls	Comerica Bank Checking #0835	30,000 00	
Check	09/04/2012	5339		Yesterdays Pearls	Comerica Bank Checking #0835	15,000 00	
Check	11/09/2012	5372		Yesterdays Pearls	Comenca Bank Checking #0835	15,000 00	
Check	05/11/2012	5299		Yesterdays Pearls	Comerica Bank Checking #0835	15,000 00	90,000.00

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1,352,000.00

FORM 990-PF DIVIDEN	DS AND	INTER	EST FRO	м з	SECUF	RITIES	STATEMENT	1
SOURCE		GROSS	AMOUN	Г		TAL GAINS	COLUMN (A AMOUNT	.)
COMERICA BANK	•		20,733	3.		8,275.	12,4	58.
TOTAL TO FM 990-PF, PART I,	LN 4		20,733	3.		8,275.	12,4	58.
FORM 990-PF	0'	THER E	XPENSES	<u> </u>			STATEMENT	2
DESCRIPTION	EXPE	A) NSES BOOKS	(I NET IN MENT			(C) ADJUSTED NET INCOM		
FILING FEES BANK CHARGES OTHER TAXES		180. 114. 611.		-	0. 0. 0.			0. 0. 0.
TO FORM 990-PF, PG 1, LN 23		905.			0.			0.
FORM 990-PF	CO	RPORAT	E STOCI	Κ			STATEMENT	3
DESCRIPTION					вос	OK VALUE	FAIR MARKE	T
COMERICA BANK - STOCK				-	·	397,218.	448,5	56.
TOTAL TO FORM 990-PF, PART I	I, LIN	E 10B		-		397,218.	448,5	56.
FORM 990-PF	ОТН	ER INV	ESTMENT	rs			STATEMENT	4
DESCRIPTION			LUATION ETHOD	N	вос	OK VALUE	FAIR MARKE	T
COMERICA BANK - MONEY MARKET	S		COST	_ •		83,420.	83,4	20.

	- LIST OF OFFICERS, DIRECTORS S AND FOUNDATION MANAGERS		STATEMENT 5	
NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
VICKI GUMM 424 LOCUST ST LAGUNA BEACH, CA 92651	0.00	0.	0.	0.
JACKIE GLASS 2641 WAVERLY DRIVE NEWPORT BEACH, CA 92663	PRESIDENT 0.00	0.	0.	0.
DONALYN G KLING 515 DARTMOOR LAGUNA BEACH, CA 92651	0.00	0.	0.	0.
DONALYN MIKLES P.O. BOX 1822 RED LODGE, MT 59068	0.00	0.	.0.	0.
DARYL KLING 515 DARTMOOR LAGUNA BEACH, CA 92651	0.00	0.	0.	0.
ALLEN KLING 7561 CENTER AVE APT 12 HUNTINGTON BEACH, CA 92647	SECRETARY 0.00	0.	0.	0.
DARRYL SHEETZ 10612 SUMTER WAY TUSTIN, CA 92782	DIRECTOR 10.00	15,000.	0.	0.
KENNETH KLING 15221 LAFAYETTE STREET WESTMINSTER, CA 92683	0.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PA	GE 6, PART VIII	15,000.	0.	0.