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Form **990-PF**

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.

Department of the Treasury

Ford	alen	dar year 2012 or tax year beginning FEB	15, 2012	, and endin	ng	DEC 31, 2012		
Name of foundation						A Employer identification number		
ARBONNE CHARITABLE FOUNDATION						45-5136989		
		nd street (or P O box number if mail is not delivered to street	address)	Roc	om/suite	B Telephone number		
		0 JERONIMO ROAD				949-770-26	10	
		own, state, and ZIP code				C If exemption application is pe	ending, check here	
		INE, CA 92618	- T - T					
GC	neck	all that apply:	Initial return of a fo	ormer public chari	ity	D 1. Foreign organizations	, check here	
		Final return	Amended return			Foreign organizations me check here and attach co	eting the 85% test,	
		Address change	Name change					
n C	٦.	type of organization: X Section 501(c)(3) ex	Other taxable private founda-	ation		E If private foundation stat		
_ <u></u>		ction 4947(a)(1) nonexempt charitable trust irket value of all assets at end of year J Accounti		X Accrual		under section 507(b)(1)	•	
			ther (specify)	ZI Acciual		F If the foundation is in a 6 under section 507(b)(1)		
>		189,996. (Part I, colu		basis)		under Section 307(b)(1)	(D), CHECK HEIE	
Pa	_	Analysis of Revenue and Expenses	(a) Revenue and	(b) Net invest	tment	(c) Adjusted net	(d) Disbursements	
		(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	expenses per books	income		income	for charitable purposes (cash basis only)	
	1	Contributions, gifts, grants, etc., received	209,553.					
	2	Check I if the foundation is not required to attach Sch. B				,		
	3	Interest on savings and temporary cash investments						
	4	Dividends and interest from securities	DECENTER	`			•	
	5a	Gross rents	TEULIVE					
l	b	Net rental income or (loss)	2	25				
ا	6a	Net gain or (loss) from sale of assets not on line 10	PI 1111 2 2 2 2013					
en G	O b	Gross sales price for all assets on line 6a	j J	122				
*	7 7	Capital gain net income (from Part IV, line 2)	OCDENI I	1	0.			
~	≥8	Net short-term capital gain	OGDEN, U					
3	Z 9	Income modifications						
1	∏0a	Gross sales less returns and allowances 83,739.					STATEMENT 1	
1	_ b	Less. Cost of goods sold 73,051.					STATEMENT 2	
₫	Ęc	Gross profit or (loss)	10,688.			0.		
9	71	Other income	000 041				,	
	12	Total. Add lines 1 through 11	220,241.		0.	0.	•	
Į	₹3 3 .	Compensation of officers, directors, trustees, etc	0.		0.	0.	0.	
₫	₹.	Other employee salaries and wages						
န္မ	-	Pension plans, employee benefits						
		Legal fees Accounting fees STMT 3	1,861.		0.	0.	1 861	
ğ		Other professional fees STMT 4	2,207.		0.	0.	1,861.	
е Ш		Interest .	2,201		•	0.	2,207.	
ati	18	Taxes						
istr	19	Depreciation and depletion						
	20	Occupancy	-					
호	21	Travel, conferences, and meetings						
힏	22	Printing and publications			-			
g	23	Other expenses STMT 5	10,784.		0.	0.	10,784.	
턡	24	Total operating and administrative						
Operating and Administrative Expen		expenses. Add lines 13 through 23	14,852.		0.	0.	14,852.	
ō	25	Contributions, gifts, grants paid	73,890.				73,890.	
ļ		Total expenses and disbursements.		•				
		Add lines 24 and 25	88,742.		0.	0.	88,742.	
	27	Subtract line 26 from line 12:						
	a	Excess of revenue over expenses and disbursements	131,499.					
		Net investment income (if negative, enter -0-)			0.			
0000	С	Adjusted net income (if negative, enter -0-)				0.		
22350	1						F 000 DE (2012)	

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Б	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of	
뜨	art	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			
	2	Savings and temporary cash investments		172,596.	172,596.
	3	Accounts receivable ►		•	
		Less: allowance for doubtful accounts ▶			
	4	Pledges receivable ▶			
		Less; allowance for doubtful accounts ▶		•	
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable			· · · · · · · · · · · · · · · · · · ·
	`	Less: allowance for doubtful accounts	,		
s	l a	Inventories for sale or use			
Assets	ı	Prepaid expenses and deferred charges		17,400.	17,400.
As		Investments - U.S. and state government obligations			
	ı	Investments - corporate stock			<u> </u>
	l	Investments - corporate bonds			
	Ι	·			
	' '	Investments - land, buildings, and equipment basis		****** *** ** **	
	40	Less accumulated depreciation			
		Investments - mortgage loans			
	l	Investments - other			
	14	Land, buildings, and equipment basis	~ ^ ^		* *****
		Less accumulated depreciation			
	15	Other assets (describe)			
				100 000	100 000
	_	Total assets (to be completed by all filers)	0.	189,996.	189,996.
		Accounts payable and accrued expenses		58,497.	
	18	Grants payable _			
es	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
iab	21	Mortgages and other notes payable			
_	22	Other liabilities (describe)			
		· ·	_		
	23	Total liabilities (add lines 17 through 22)	0.	58,497.	
		Foundations that follow SFAS 117, check here			
"		and complete lines 24 through 26 and lines 30 and 31.			
nces	24	Unrestricted			
<u>la</u>	25	Temporarily restricted			
Ва	26	Permanently restricted			
텉		Foundations that do not follow SFAS 117, check here			
Ę		and complete lines 27 through 31.			
S O	27	Capital stock, trust principal, or current funds	0.	0.	
set	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
Net Assets or Fund Bala	29	Retained earnings, accumulated income, endowment, or other funds	0.	131,499.	
ě	30	Total net assets or fund balances	0.	131,499.	
_		i			
	31	Total liabilities and net assets/fund balances	0.	189,996.	
\equiv	_	Analysis of Changes in Not Assats or Fund B	alancae		
Ľ	art	Analysis of Changes in Net Assets or Fund B			
1	Tota	net assets or fund balances at beginning of year - Part II, column (a), line	30		
	(mus	st agree with end-of-year figure reported on prior year's return)		. 1	0.
2	Ente	r amount from Part I, line 27a		2	131,499.
3	Othe	r increases not included in line 2 (itemize)		3	0.
4	Add	lines 1, 2, and 3		4	131,499.
5	Decr	eases not included in line 2 (itemize)		5	0.
6	Tota	net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	lumn (b), line 30	6	131,499.
					5 - 000 DE (0040)

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Part IV Capital Gains	and Losses for Tax or	n Investmen	t Income				-			
2-story brick warehouser or common stock 200 she MI C Co \				I. b	How ac - Purc - Dona	hase	(c) Date (mo., d	acquired lay, yr.)	(d) Date sold (mo., day, yr.)	
1a	1a									
b NO	NE									
<u>c</u>				L.			_			
<u>d</u>				<u> </u>						
	I (0.5)	1		Ц,						
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale					ain or (loss) s (f) minus (
<u>a</u>										
<u>b</u>					_	-				
d		+		-						
e		-							· · · · · · · · · · · · · · · · · · ·	
	ng gain in column (h) and owned	by the foundation	n on 12/31/69				(I) Gains (C	ol. (h) gain	minus	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) E:	xcess of col. (i)				òl. (k), but r	not less that (from col. (n -0-) or	
a										
b			 :					 _		
C										
d										
<u>e</u>										
2 Capital gain net income or (net ca	If gain, also e	nter in Part I, line r -0- in Part I, line	7 : 7	}	2					
3 Net short-term capital gain or (los if gain, also enter in Part I, line 8,	ss) as defined in sections 1222(5			٦						
If (loss), enter -0- in Part I, line 8	column (c).			引	3					
Part V Qualification U	Inder Section 4940(e) 1	or Reduced	Tax on Net	Inv	estn	nent In	come			
(For optional use by domestic private	e foundations subject to the secti	on 4940(a) tax or	net investment in	come	3.)		-	-	N/A	
If section 4940(d)(2) applies, leave ti	his nart hlank									
Was the foundation liable for the sec If "Yes," the foundation does not qual	lify under section 4940(e). Do no	t complete this pa	art.						Yes No	
1 Enter the appropriate amount in (a)		ie instructions de	nore making any e T						(d)	
Base periód years Calendar year (or tax year beginni	ng in) Adjusted qualifying	distributions	Net value of no	(c) nchai		use asset	s	Distributión ratio (col. (b) divided by col. (c))		
2011								_		
2010									- 	
2008		. =					1			
2007			·				·			
			I							
2 Total of line 1, column (d)							2			
3 Average distribution ratio for the	5-year base period - divide the to	tal on line 2 by 5,	or by the number	of ye	ars					
the foundation has been in existe	nce if less than 5 years	•					3			
4 Enter the net value of noncharitable-use assets for 2012 from Part X, line 5					4					
•										
5 Multiply line 4 by line 3					5					
6 Enter 1% of net investment income (1% of Part I, line 27b)					6					
7 Add lines 5 and 6	-						7			
8 Enter qualifying distributions from	n Part XII, line 4						8			
If line 8 is equal to or greater than See the Part VI instructions.	If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.									

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Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b),	4940(e), or 4	1948 - 9	see instr	uctio	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 instruct	tions)				
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🔲 and enter 19	% }	1			0.
of Part I, line 27b					
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, co	ol. (b). 🕽	1			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		2		_	0.
3 Add lines 1 and 2		3			0.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	-	4			0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5			0.
6 Credits/Payments:					
a 2012 estimated tax payments and 2011 overpayment credited to 2012 6a					
b Exempt foreign organizations - tax withheld at source 6b]			
c Tax paid with application for extension of time to file (Form 8868)]			
d Backup withholding erroneously withheld 6d] . [_
7 Total credits and payments. Add lines 6a through 6d		7			0.
8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached		8			
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		9			0.
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	· •	10			
11 Enter the amount of line 10 to be: Credited to 2013 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 partic	ipate or intervene	: 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 copies of any m	atenals publish	ed or			
distributed by the foundation in connection with the activities.					
c Did the foundation file Form 1120-POL for this year?			10		Х
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:				<u> </u>	
(1) On the foundation. ► \$ 0 . (2) On foundation managers. ► \$	0.				
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on	foundation	_			
managers. ► \$ 0 .					
2 Has the foundation engaged in any activities that have not previously been reported to the IRS?		_	2		X
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 instrument, articles of	of incorporation, o	or			
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes					
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		X
b If "Yes," has it filed a tax return on Form 990-T for this year?		N/.	A 4b		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		X
If "Yes," attach the statement required by General Instruction T					
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 con 	flict with the state	e law	1		
remain in the governing instrument?			6	Х	
7 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.					
8a Enter the states to which the foundation reports or with which it is registered (see instructions)		_	İ		
CA					
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or c	lesignate)				
of each state as required by General Instruction G? If "No," attach explanation					
9 Is the foundation claiming status as a private operating foundation within the meaning of section 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," complete Part XIV					X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names an	d addresses .		10		X
			Form 990)-PF	(2012)

4a

 $\overline{\mathbf{x}}$

X

Yes X No

N/A

b If "Yes," did it have excess business holdings in 2012 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

Form 4720, to determine if the foundation had excess business holdings in 2012.)

had not been removed from jeopardy before the first day of the tax year beginning in 2012?

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

during the year?

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Total. Add lines 1 through 3

Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) Part X 1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: 0. a Average monthly fair market value of securities 1a b Average of monthly cash balances 67,649. 1b c Fair market value of all other assets 1c d Total (add lines 1a, b, and c) 67,649. 10 e Reduction claimed for blockage or other factors reported on lines 1a and 0. 1c (attach detailed explanation) Acquisition indebtedness applicable to line 1 assets 2 Subtract line 2 from line 1d 3 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 1,015. 4 66,634. Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 5 Minimum investment return. Enter 5% of line 5 ADJUSTED FOR SHORT TAX PERIOD 2,922. 6 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.) 2,922.Minimum investment return from Part X, line 6 1 2a Tax on investment income for 2012 from Part VI, line 5 b Income tax for 2012. (This does not include the tax from Part VI.) 2b c Add lines 2a and 2b Distributable amount before adjustments. Subtract line 2c from line 1 3 Recoveries of amounts treated as qualifying distributions 4 5 Add lines 3 and 4 2.922 5 6 Deduction from distributable amount (see instructions) 6 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: 88,742 a 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: 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 88,742 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 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 whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

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Form 990-PF (2012)

Form 990-PF (2012)

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,				0.000
line 7				2,922.
2 Undistributed income, if any, as of the end of 2012				
a Enter amount for 2011 only			0.	
b Total for prior years:		0		
3 Excess distributions carryover, if any, to 2012:		0.		·
•				
a From 2007				
bFrom 2008				
c From 2009 d From 2010				
e From 2011				
<u> </u>	0.			
f Total of lines 3a through e 4 Qualifying distributions for 2012 from				
Part XII, line 4: ▶\$ 88,742.				
a Applied to 2011, but not more than line 2a			0.	
b Applied to undistributed income of prior			0.	
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus		<u> </u>		
(Election required - see instructions)	0.			
d Applied to 2012 distributable amount				2,922.
e Remaining amount distributed out of corpus	85,820.			4,344.
5 Excess distributions carryover applied to 2012	03,020.			0.
(If an amount appears in column (d), the same amount				0.
must be shown in column (a)) 6 Enter the net total of each column as indicated below:				-
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	85,820.			
b Prior years' undistributed income. Subtract	03,020.			
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				· · · · · · · · · · · · · · · · · · ·
amount - see instructions		0.		
e Undistributed income for 2011. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2012. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2013				0.
7 Amounts treated as distributions out of				_
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2007				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2013.				
Subtract lines 7 and 8 from line 6a	85,820.			
10 Analysis of line 9:				
a Excess from 2008				
b Excess from 2009				
c Excess from 2010				
d Excess from 2011				
e Excess from 2012 85,820.	<u> </u>			5 000 DE (00.10)

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3 Grants and Contributions Paid During the Y	<u> </u>	Downant		
Recipient	If recipient is an individual,	Payment	I	
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		<u> </u>
a Paid during the year				
EVANGEL CHURCH	NONE	170(B)(T)(A)(T)	SUPPORT UNIQUELY YOU	
1414 E. 103RD ST.			EVENT	
KANSAS CITY, MO 64131				2,390
				-
•				
BOYS & GIRLS CLUBS OF THE EAST VALLEY	NONE	170(B)(I)(A)(VI	GENERAL OPERATIONS	Ì
1405 EAST GUADALUPE ROAD #4				
TEMPE, AZ 85283				5,000.
BIG BROTHERS BIG SISTERS OF SOUTHERN	NONE	170/8\/T\/X\/	GENERAL OPERATIONS	
KANE AND KENDALL COUNTIES	NONE	1,0(B)(1)(X)(V1	GENERAL OPERATIONS	
70 SOUTH RIVER STREET				
AURORA, IL 60506				1,000.
				<u> </u>
BOYS & GIRLS CLUB OF COLLIER COUNTY	NONE	509(A)(2)	GENERAL OPERATIONS	
PO BOX 8896				
NAPELS, FL 34101		ļ		3,000.
		}		
BIG BROTHERS BIG SISTERS OF NORTHEAST	NONE	170/B)/T)/A)/VT	GENERAL OPERATIONS	
INDIANA INC.	110112		BENEKAL OF EKATIONS	
2439 FAIRFIELD AVE.				
FORT WAYNE, IN 46807				2,500.
Total SEE CON	TINUATION SHEE	T(S)	▶ 3a	73,890.
b Approved for future payment				
	1			
11017				
NONE				
	 		,	
		1		
		1		
				ļ <u>.</u>
	1			
				1
				1
	1			1
	1			
Total			. D 3b	0.

D . 1 10 // 1	A 1				
Part XVI-A	Anai	ysis ot	income	-Producing	Activities

	Unrolat	ad business income	T = :		
Enter gross amounts unless otherwise indicated.	(a) Business	ed business income (b)	(C) Exclu- sion	(d)	(e) Related or exempt
1 Program service revenue:	code	Amount	code	Amount	function income
a	-		_		
b					
c	-				
d					
e	-				
f	_				
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					
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		<u> </u>			
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory		:			
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory			01	10,688.	
11 Other revenue:			1		
a					
b			1		
C	•			- "-"	
d			1		
e					
12 Subtotal. Add columns (b), (d), and (e)	-	0		10,688.	0.
13 Total. Add line 12, columns (b), (d), and (e)				13	10,688.
(See worksheet in line 13 instructions to verify calculations.)					
Part XVI-B Relationship of Activities	to the Acc	omplishment of E		+ Dumosoo	_
rait Avi-b netationship of Activities	to the Acc	ompusiment of E	zzemp	it Purposes	
Line No. Explain below how each activity for which inc	ome is reported	ın column (e) of Part XVI-	-A contrib	outed importantly to the accon	plishment of
the foundation's exempt purposes (other tha	n by providing fu	inds for such purposes).			
			_		
					
				· · · · · · · · · · · · · · · · · · ·	
					
					
					
					

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Form 990-l		NE CHARITABLE FOUNDATION	45-513	6989	Page 13
Part X	VII Information Re Exempt Organ	egarding Transfers To and Transactions are izations	nd Relationships With Nonch	aritable	
1 Did th	ne organization directly or indi	rectly engage in any of the following with any other organization	n described in section 501(c) of	Y	es No
thể C	ode (other than section 501(c))(3) organizations) or in section 527, relating to political organiz	zations?		
a Trans	fers from the reporting founda	ation to a noncharitable exempt organization of:			
(1) (Cash		_	1a(1)	X
(2) (Other assets			1a(2)	Х
b Other	transactions:				Ī
(1) 5	Sales of assets to a noncharital	ble exempt organization	_	1b(1)	X
(2) F	Purchases of assets from a noi	ncharitable exempt organization	-	1b(2)	Х
(3) F	Rental of facilities, equipment,	or other assets		1b(3)	X
(4) F	Reimbursement arrangements	•		1b(4)	X
(5) L	oans or loan guarantees		-	1b(5)	X
(6) F	Performance of services or me	mbership or fundraising solicitations	• •	1b(6)	X
c Shari	ng of facilities, equipment, ma	iling lists, other assets, or paid employees		1c	X
d If the	answer to any of the above is	"Yes," complete the following schedule. Column (b) should alw	ays show the fair market value of the goods,	other assets	S,
		oundation. If the foundation received less than fair market value	in any transaction or sharing arrangement,	show in	
		other assets, or services received.			
(a)Line no	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and	sharing arran	gements
		N/A			
					.
					·
			 		
•					
			-		

2a	Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described
	in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?

Firm's address ▶ 9665 GRANITE RIDGE DRIVE, SUITE 600

SAN DIEGO, CA 92123

Yes	X	N
-----	---	---

b If "Yes," complete the following schedule.		
(a) Name of organization	(b) Type of organization	(c) Description of relationship
N/A		

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge May the IHS discuss this return with the preparer shown below (see instr.)? and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge Sign Here X Yes Signature of officer or trustee Title Print/Type preparer's name Preparer's signature Check self- employed Paid PATRICIA J. MAYER P00188643 Preparer Firm's name ► MOSS ADAMS Firm's EIN ▶ 91-0189318 **Use Only**

Form **990-PF** (2012)

858-627-1400

Phone no.

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

Department of the Treasury Internal Revenue Service **Schedule of Contributors**

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

OMB No 1545-0047

2012

Name of the organization **Employer identification number** ARBONNE CHARITABLE FOUNDATION 45-5136989 Organization type (check 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 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. **Special Rules** For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, chantable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF),

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2012)

but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on Part I, line 2 of its Form 990-PF, to

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

ARBONNE CHARITABLE FOUNDATION

45-5136989

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	al space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	FUSION PACKAGING I LP 13628A BETA ROAD, SUITE A DALLAS, TX 75244-4531	\$5,000.	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 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
	Name, address, and En + +	\$	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.)

Employer identification number

ARBONNE CHARITABLE FOUNDATION

45-5136989

Part II	Noncash Property (see instructions). Use duplicate copies of Pa	rt 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
		<u></u>	
(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
		<u> </u>	
(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
23453 12-21-	12	Schedule B (Form 9	990, 990-EZ, or 990-PF) (201

Name of orga	inization	Employer identification number					
ARBONN	E CHARITABLE FOUNDATIO	ON		45-5136989			
Part III	Exclusively religious, charitable, etc., ind year. Complete columns (a) through (e) and the total of exclusively religious, charitable, e Use duplicate copies of Part III if addition	ividual contributions to section 501(the following line entry. For organizati tc., contributions of \$1,000 or less fo	c)(7), (8), or one completing the year. (Ent	(10) organizations that total more than \$1,000 for the grant III, enter er this information once)			
(a) No.		T					
from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held			
-		(e) Transfer of gi	ft -				
_	Transferee's name, address, a	and ZIP + 4	Relat	ionship 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 gi					
	Transferee's name, address, and 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			
-							
_		(a) Transfer of vi					
	(e) Transfer of gift						
-	Transferee's name, address, and ZIP + 4		Relat	ionship of transferor to transferee			
-							
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	,	(d) Description of how gift is held			
			<u> </u>				
[-			— -				
	(e) Transfer of gift						
-	Transferee's name, address, a	and ZIP + 4	Relat	ionship of transferor to transferee			
-							

3 Grants and Contributions Paid During the				
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	Contribution	
GIRLS INCORPORATED OF ORANGE COUNTY	NONE	509(A)(2)	GENERAL OPERATIONS	
150 PAULARINO AVE., D-290				
COSTA MESA, CA 92626				5,00
BIG BROTHERS BIG SISTER OF AMERICA	NONE	170(B)(I)(A)(VI	GENERAL OPERATIONS	<u> </u>
230 NORTH 13TH STREET				
PHILADELPHIA, PA 19107	<u> </u>			50,00
JUNIOR ACHIEVEMENT OF ORANGE COUNTY 301 E. 17TH STREET	NONE	509(A)(2)	GENERAL OPERATIONS	
COSTA MESA, CA 92627				5,00
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	!	-		
		1		
				 -
-				
			•	
	<u> </u>	<u></u>		
Total from continuation sheets				60,00

FORM 990-PF	INCOME AND COST OF GOODS SOLD INCLUDED ON PART I, LINE 10		STATEMENT 1
INCOME			
1. GROSS RECEIPTS 2. RETURNS AND ALLOWAN 3. LINE 1 LESS LINE 2		83,739	83,739
	(LINE 15)	73,051	10,688
6. OTHER INCOME			
7. GROSS INCOME (ADD L	INES 5 AND 6)		10,688
COST OF GOODS SOLD	,		
8. INVENTORY AT BEGINN 9. MERCHANDISE PURCHAS: 10. COST OF LABOR 11. MATERIALS AND SUPPL	ED		
12. OTHER COSTS 13. ADD LINES 8 THROUGH	12	73,051	73,051
14. INVENTORY AT END OF 15. COST OF GOODS SOLD	YEAR (LINE 13 LESS LINE 14)		73,051

FORM 990-PF COST	OF GOODS SO	LD - OTHER COS	STS S	TATEMENT 2
DESCRIPTION				AMOUNT
COST OF GOODS SOLD				73,051.
TOTAL OTHER COSTS			_	73,051.
FORM 990-PF	ACCOUNTI	NG FEES	S	TATEMENT 3
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING FEES	1,861.	0.	0.	1,861.
TO FORM 990-PF, PG 1, LN 16B	1,861.	0.	0.	1,861.
FORM 990-PF (THER PROFES	SIONAL FEES	S	TATEMENT 4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
WEBSITE CONSULTING FEES	2,207.	0.	0.	2,207.
TO FORM 990-PF, PG 1, LN 16C	2,207.	0.	0.	2,207.
FORM 990-PF	OTHER E	XPENSES	S'	TATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
EVENT MARKETING INSURANCE POSTAGE/COURIER BANK CHARGES & PROCESSING	1,458. 1,002. 1,983.	0. 0. 0.	0. 0. 0.	1,458. 1,002. 1,983.
FEES SOFTWARE MAINTENANCE SUPPLIES	3,537. 900. 1,904.	0. 0. 0.	0. 0. 0.	3,537. 900. 1,904.
TO FORM 990-PF, PG 1, LN 23	10,784.	0.	0.	10,784.

FOOTNOTES

STATEMENT

6

FOOTNOTE WITH RESPECT TO CHARITABLE PURPOSE:

TO PROVIDE SUPPORT FOR PROGRAMS AND OPPORTUNITIES THAT PROMOTE THE DEVELOPMENT OF CONFIDENCE AND SELF-ESTEEM IN TEENAGE GIRLS AND BOYS. THIS SUPPORT MAY BE IN THE NATURE OF PERSONAL CARE PRODUCT DONATIONS OR GRANTS TO TAX-EXEMPT ORGANIZATIONS CLASSIFIED AS PUBLIC CHARITIES, AND VOLUNTEER SERVICES.

'FORM 990-PF, PAGE 5, PART VII-B, LINE 1A(3):

THE FOUNDATION RECEIVES SERVICES AND RENT FREE OF CHARGE FROM ARBONNE.

FORM 990-PF		RT VIII - LIST OF OFFICERS, DIRECTORS STATEMENT TRUSTEES AND FOUNDATION MANAGERS				
NAME AND ADDRESS		TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB		
KAY NAPIER 9400 JERONIMO ROAI IRVINE, CA 92618)	PRESIDENT 1.00	0.	0.	0.	
ASHLEY GOOD 9400 JERONIMO ROAL IRVINE, CA 92618)	SECRETARY 1.00	0.	0.	0.	
GEOFFREY PANKAU 9400 JERONIMO ROAL IRVINE, CA 92618)	TREASURER 1.00	0.	0.	0.	
HEATHER CHASTAIN 9400 JERONIMO ROAD IRVINE, CA 92618)	DIRECTOR 1.00	0.	0.	0.	
STIAN MORCK 9400 JERONIMO ROAD IRVINE, CA 92618		DIRECTOR 1.00	0.	0.	0.	
TOTALS INCLUDED ON	1 990-PF, PAGE 6,	PART VIII	0.	0.	0.	

Form **8868**

(Rev. January 2013)

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

• If you	are filing for an Automatic 3-Month Extension, comple	te only Pa	art I and check this box			ightharpoons
• If you	are filing for an Additional (Not Automatic) 3-Month Ex	tension, d	complete only Part II (on page 2 of t	his form).		-
Do not c	omplete Part II unless you have already been granted	an automa	atic 3-month extension on a previous	ly filed Fo	rm 8868.	
Electron	ic filing (e-file). You can electronically file Form 8868 if y	you need a	a 3-month automatic extension of tim	ne to file (6 months for a	corporation
required	to file Form 990-T), or an additional (not automatic) 3-mo	nth extens	sion of time. You can electronically fi	le Form 8	868 to request	an extension
	ofile any of the forms listed in Part I or Part II with the ex	-				
	Benefit Contracts, which must be sent to the IRS in page		(see instructions). For more details of	n the ele	ctronic filing of	this form,
	v.irs gov/efile and click on e-file for Charities & Nonprofits					
Part I	Automatic 3-Month Extension of Time					
•	ation required to file Form 990-T and requesting an autor	matic 6-mo	onth extension - check this box and o	complete		
Part I onl			70044			
	corporations (including 1120-C filers), partnerships, REM ome tax returns	iiCs, and t	rusts must use Form 7004 to reques	t an exter	ision of time	
Type or	Name of exempt organization or other filer, see instru	ictions		Employe	r identification	number (EIN) or
print	Name of exempt organization of other filer, see institu	ictions.		Employe	ployer identification number (EIN) or	
print	ARBONNE CHARITABLE FOUNDAT:	ION			45-513	6989
File by the due date for	N 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		tions	Social se	cunty number	
filing your	9400 JERONIMO ROAD		10.10.	000141 00	ounty number	(0011)
return See instructions	City, town or post office, state, and ZIP code. For a for IRVINE, CA 92618	oreign add	fress, see instructions.			
	111111111111111111111111111111111111111					
Enter the	Return code for the return that this application is for (file	e a separa	te application for each return)			0 4
			,			<u> </u>
Applicat	ion	Return	Application			Return
is For		Code	Is For			Code
Form 990	or Form 990-EZ	01	Form 990-T (corporation)			07
Form 990)-BL	02	Form 1041-A			08
Form 472	20 (ındıvıdual)	03	Form 4720			09
Form 990)-PF	04	Form 5227		·· <u>-</u>	10
Form 990	0-T (sec 401(a) or 408(a) trust)	05	Form 6069			11
Form 990	0-T (trust other than above)	06	Form 8870			12
	GEOFFREY PANKA					
• The b	pooks are in the care of \triangleright 9400 JERONIMO 1	ROAD				
	none No ▶ 949-460-1357		FAX No.			. —
	organization does not have an office or place of business					
_	is for a Group Return, enter the organization's four digit					
box ►	. If it is for part of the group, check this box				ers the extens	ion is for.
1 I re	equest an automatic 3-month (6 months for a corporation AUGUST 15, 2013, to file the exemp	•	·		The audence.	
	or the organization's return for:	i organiza	tion return for the organization name	a above.	ine extension	l
15 1	calendar year or					
		an	d ending DEC 31, 2012			
		, uii			<u> </u>	
2 If t	ne tax year entered in line 1 is for less than 12 months, o	heck reas	on: 🗓 Initial return 🔲 i	Final retur	n	
	Change in accounting period					
3a If t	nis application is for Form 990-BL, 990-PF, 990-T, 4720,	or 6069, e	nter the tentative tax, less any			
	nonrefundable credits. See instructions.				\$	0.
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and			3a			
estimated tax payments made. Include any prior year overpayment allowed as a credit.			3ь	\$	0.	
c Ba	lance due. Subtract line 3b from line 3a Include your pa	yment wit	h this form, if required,			
by using EFTPS (Electronic Federal Tax Payment System). See instructions.				3c	\$	0.
Caution.	If you are going to make an electronic fund withdrawal v	with this F	orm 8868, see Form 8453-EO and Fo	rm 8879-		
LHA F	or Privacy Act and Paperwork Reduction Act Notice,	see instr	uctions.		Form 88	68 (Rev. 1·2013)
000044						