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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

| For | calendar year 2012 or tax year beginning | | , and ending | | |
|----------------|---|---------------------------------------|---------------------|--|---|
| Nar | me of foundation | | | A Employer identification | number |
| С | 'ARLO'S FUND | | | 46-1592888 | |
| | mber and street (or P O box number if mail is not delivered to street a | address) | Room/suite | B Telephone number | |
| P | O.O. BOX 483 | 847-345-72 | 55 | | |
| | y or town, state, and ZIP code | | | C If exemption application is p | ending, check here |
| L | AGUNA BEACH, CA 92652-048 | 83 | | | |
| G | Check all that apply X Initial return | Initial return of a fo | rmer public charity | D 1. Foreign organizations | s, check here |
| | Final return | Amended return | | 2 | A 45 - 0.504 A4 |
| | Address change | Name change | | Foreign organizations me check here and attach co | mputation test, |
| H C | Check type of organization X Section 501(c)(3) exe | empt private foundation | | E If private foundation sta | tus was terminated |
| | Section 4947(a)(1) nonexempt charitable trust | Other taxable private founda | tion | under section 507(b)(1) | (A), check here |
| l Fa | air market value of all assets at end of year J Accountin | ng method: X Cash | Accrual | F If the foundation is in a | 60-month termination |
| (fr | rom Part II, col. (c), line 16) | her (specify) | | under section 507(b)(1) | (B), check here 🕨 🔲 |
| | \$ 3,000,000. (Part I, colur | mn (d) must be on cash b | asis) | | |
| Pa | Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not | (a) Revenue and | (b) Net investment | (c) Adjusted net | (d) Disbursements for charitable purposes |
| | necessarily equal the amounts in column (a)) | expenses per books | ıncome | income | (cash basis only) |
| | 1 Contributions, gifts, grants, etc., received | 3,000,000. | | N/A | |
| | 2 Check It the foundation is not required to attach Sch. B | | | | |
| | 3 Interest on savings and temporary cash investments | | | | |
| | 4 Dividends and interest from securities | | | | |
| ١ | 5a Gross rents | | | | |
| = | D Net rental income or (loss) | | | | |
| و ا | 6a Net gain or (loss) from sale of assets not on line 10 | | | R _{EL} CE _A | 1.0 |
| בּ מר | b Gross sales price for all assets on line 6a | | | | |
| Revenue | 7 Capital gain net income (from Part IV line 2) | | 0. | MAY 2 9 | |
| | 8 Net short-term capital gain | | | | 121 |
| | 9 Income modifications Gross sales less returns | | | 00 134 | |
| 3 | 10a and allowances | | · | 000 | LIT |
| • | b Less Cost of goods sold | | | · | |
| | c Gross profit or (loss) | | | | |
| | 11 Other income | 3,000,000. | 0. | | |
| | 12 Total Add lines 1 through 11 | 3,000,000. | 0. | | 0. |
| | 13 Compensation of officers, directors, trustees, etc | · · · · · · | | | 0. |
| | 14 Other employee salaries and wages | | | | |
| es | 15 Pension plans, employee benefits | | | | |
| | 16a Legal fees b Accounting fees | | | | |
| Expens | c Other professional fees | | | | |
| | 17 Interest | | | | |
| aţ. | 18 Taxes | | | 1 | |
| istr | 19 Depreciation and depletion | · · · · · · · · · · · · · · · · · · · | | | |
| ij | 20 Occupancy | | | | |
| Administrative | 21 Travel, conferences, and meetings | | | <u> </u> | |
| and, | 22 Printing and publications | | | 1 | |
| | | | | <u> </u> | <u> </u> |
| atin | 24 Total operating and administrative | | | | İ |
| Operating | expenses Add lines 13 through 23 | 0. | 0. | , | 0. |
| Õ | 25 Contributions, gifts, grants paid | 0. | | | 0. |
| | 26 Total expenses and disbursements | | | | |
| | Add lines 24 and 25 | 0. | 0. | | 0. |
| | 27 Subtract line 26 from line 12 | | | | |
| | Excess of revenue over expenses and disbursements | 3,000,000. | | | |
| | b Net investment (ncome (if negative enter 0-) | | 0. | | |
| | c Adjusted net income (if negative enter -0-) | | | N/A | |

223501 12-05-12 LHA For Paperwork Reduction Act Notice, see instructions

CARLO'S FUND 46-1592888 Page 2 Form 990-PF (2012) Beginning of year End of year Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (a) Book Value (b) Book Value (c) Fair Market Value Cash - non-interest-bearing 3,000,000. 3,000,000. 2 Savings and temporary cash investments 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 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Investments - U.S. and state government obligations b Investments - corporate stock c Investments - corporate bonds 11 Investments land buildings and equipment basis Less accumulated depreciation 12 Investments - mortgage loans 13 Investments - other 14 Land, buildings, and equipment, basis Less accumulated depreciation 15 Other assets (describe ▶ 3,000,000. 3,000,000. 16 Total assets (to be completed by all filers) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Loans from officers, directors, trustees and other disqualified persons 21 Mortgages and other notes payable 22 Other liabilities (describe 0. 23 Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31 24 Unrestricted 25 Temporarily restricted 26 Permanently restricted $\triangleright X$ Foundations that do not follow SFAS 117, check here and complete lines 27 through 31 0 0 27 Capital stock, trust principal, or current funds 0. 28 Paid-in or capital surplus, or land, bldg., and equipment fund 0. 3,000,000. 29 Retained earnings, accumulated income, endowment, or other funds 0. 3,000,000. 30 Total net assets or fund balances

Part III Analysis of Changes in Net Assets or Fund Balances

31 Total liabilities and net assets/fund balances

| 1 | Total net assets or fund balances at beginning of year - Part II, column (a), line 30 | | |
|---|---|-----|------------|
| | (must agree with end-of-year figure reported on prior year's return) | 1 | 0. |
| 2 | Enter amount from Part I, line 27a | . 2 | 3,000,000. |
| 3 | Other increases not included in line 2 (itemize) | 3 | 0. |
| 4 | Add lines 1, 2, and 3 | . 4 | 3,000,000. |
| 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 | 3,000,000. |

Form **990-PF** (2012)

Fund

Net Assets or

0

3,000,000

| Form 990-PF (2012) CARI | LO'S FUND | | | | 46-159 | 2888 | Page : |
|---|--|--|---------------------|--|---|-----------------------------|---------|
| | and Losses for Tax | on Investmen | t Income | | | | |
| (a) List and descr 2-story brick war | ibe the kind(s) of property s rehouse, or common stock, | sold (e g., real estate, 200 shs. MLC Co) | | (b) How acquired P - Purchase D - Donation | (c) Date acquired (mo., day, yr.) | (d) Dat (mo., da | |
| 1a ' | | | | | | | |
| b NOI | NE | | | | | | |
| C | | | | | | | |
| d | | | | | | | |
| е | | | , | <u> </u> | | | |
| (e) Gross sales price (f) Depreciation allowed (g) Cost or other basis plus expense of sale | | | | | (h) Gain or (loss) (e) plus (f) minus (| | |
| a | | | | | | | |
| b | | | | | | | |
| C . | | | | | | | |
| d | | | | | | | |
| Complete only for assets showing | a asin in column (h) and as | vned by the foundation | on 12/31/69 | | I) Gains (Col. (h) gain | minue | |
| (i) F.M V as of 12/31/69 | (j) Adjusted basis as of 12/31/69 | (k) E> | cess of col (i) | co | i. (k), but not less that Losses (from col. (| 1 -0-) or | |
| a | | | | | | | |
| b | | | | | | | |
| С | | | | | | | |
| d | | | | | | | |
| e | | | | | · · · · · · · · · · · · · · · · · · · | | |
| 2 Capital gain net income or (net cap | ortal loss) { If gain, a | lso enter in Part I, line enter -0- in Part I, line | 7 | } 2 | | | |
| | • | | • | / | | · | |
| 3 Net short-term capital gain or (los if gain, also enter in Part I, line 8, in the short of | | .22(3) and (0) | |) | | | |
| If (loss), enter -0- in Part I, line 8 | oolamii (o) | | | 引 3 | | | |
| Part V Qualification U | nder Section 4940 | (e) for Reduced | Tax on Ne | t Investment In | come | | |
| (For optional use by domestic private | foundations subject to the | section 4940(a) tax or | net investment i | ncome.) | | N/A | • |
| | | | | | | | |
| If section 4940(d)(2) applies, leave th | iis part biank | | | | | | |
| Was the foundation liable for the sect | ion 4942 tax on the distribi | itable amount of any y | ear in the base pe | riod? | | Yes | L No |
| If "Yes," the foundation does not qual | | | | | | | |
| 1 Enter the appropriate amount in a | each column for each year, | see the instructions be | fore making any i | entries. | | 741 | |
| (a) Base period years Calendar year (or tax year beginnir | ng in) Adjusted quali | (b) Adjusted qualifying distributions Net value of no | | (c) oncharitable-use asset | Distribution ratio ets (col (b) divided by col. (c | | |
| 2011 | | | | | - | | |
| 2010 | | | | | | | |
| 2009 | | | | | | | |
| 2008 | | | | | <u> </u> | | |
| 2007 | <u></u> | | <u> </u> | | | | |
| | | | | | | | |
| 2 Total of line 1, column (d) | e | | as hou tha accepta | 1 | 2 | | |
| 3 Average distribution ratio for the | • | the total on line 2 by 5, | , or by the numbe | r or years | 3 | | |
| the foundation has been in exister | nce it less than 5 years | | | | | | |
| 4 Enter the net value of noncharitab | ele-use assets for 2012 from | n Part X, line 5 | | | 4 | | |
| 5 Multiply line 4 by line 3 | | | | | 5 | | |
| 6 Enter 1% of net investment incom | ne (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 | n line 7, check the box in Pa | rt VI, line 1b, and com | plete that part usi | ng a 1% tax rate | · | | |
| | | | | | | orm QQO_ | DE (201 |

| Form 990-PF (2012) CARLO'S FUND | | | 46- | 1592888 | | Page 4 |
|--|--|------------------------------|----------|-----------------|----------|--|
| Part VI Excise Tax Based on Investme | ent Income (Section 4940(a), 4940 | ົງ(b), 4940(e), or 4 | 948 - | see instru | ıctio | ns) |
| 1a Exempt operating foundations described in section 4940 | O(d)(2), check here and enter "N/A" on | line 1. | | | | |
| Date of ruling or determination letter: | (attach copy of letter if necessary-see i | instructions) | | | | |
| b Domestic foundations that meet the section 4940(e) req | uirements in Part V, check here 🕨 🔲 and e | enter 1% | 1 | | | 0. |
| of Part I, line 27b | | | | | | |
| c All other domestic foundations enter 2% of line 27b Exe | mpt foreign organizations enter 4% of Part I, line | e 12, col. (b). 🕽 | | | | |
| 2 Tax under section 511 (domestic section 4947(a)(1) tru | sts and taxable foundations only Others enter -0 | l-) | 2 | | | <u>0.</u> |
| 3 Add lines 1 and 2 | | | 3 | | | 0. |
| 4 Subtitle A (income) tax (domestic section 4947(a)(1) tru | ists and taxable foundations only. Others enter -C |)-) | 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 cr | edited to 2012 6a | |]] | | | |
| b Exempt foreign organizations - tax withheld at source | 6b | | | | | |
| c Tax paid with application for extension of time to file (Fo | rm 8868) 6c | | <u> </u> | | | |
| 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. Cl | neck 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 | ▶ 1 | 9 | | | 0. |
| 10 Overpayment If line 7 is more than the total of lines 5 a | nd 8, enter the amount overpaid | ▶ | 10 | | | |
| 11 Enter the amount of line 10 to be Credited to 2013 esti | | Refunded ▶ | 11 | | | |
| Part VII-A Statements Regarding Activ | ities | | | | | |
| 1a During the tax year, did the foundation attempt to influer | ice any national, state, or local legislation or did i | it participate or intervene | ın | | Yes | |
| any political campaign? | | | | 1a | | Х |
| b Did it spend more than \$100 during the year (either dire | ctly or indirectly) for political purposes (see instr | uctions for definition)? | | 1b | | Χ |
| If the answer is "Yes" to 1a or 1b, attach a detailed | d description of the activities and copies of | any materials publishe | ed or | | | |
| distributed by the foundation in connection with t | he activities | | | | | |
| c Did the foundation file Form 1120-POL for this year? | | | | 1c | ļ | X |
| d Enter the amount (if any) of tax on political expenditures | | _ | | 1 | ł | |
| (1) On the foundation 🕨 \$ | | 0. | | ļ | | |
| e Enter the reimbursement (if any) paid by the foundation | during the year for political expenditure tax impo | sed on foundation | | İ | | |
| managers. ► \$0. | | | | | | |
| 2 Has the foundation engaged in any activities that have n | - · | | | 2 | <u></u> | X |
| If "Yes," attach a detailed description of the activit | | | | ļ. | | |
| 3 Has the foundation made any changes, not previously re | | rticles of incorporation, o | r | | i | <u></u> |
| bylaws, or other similar instruments? If "Yes," attach a | | | | 3 | | X |
| 4a Did the foundation have unrelated business gross incom | | | | / 4a | <u> </u> | Х |
| b If "Yes," has it filed a tax return on Form 990-T for this y | | | N | /A 4b | <u> </u> | |
| 5 Was there a liquidation, termination, dissolution, or sub- | | | | 5 | | X |
| If "Yes," attach the statement required by General | | | | | | |
| 6 Are the requirements of section 508(e) (relating to section 508) | ons 4941 through 4945) satisfied either | | | | | |
| By language in the governing instrument, or | | | | | | |
| By state legislation that effectively amends the govern | ing instrument so that no mandatory directions t | hat conflict with the state | aw | | | ٠,, |
| remain in the governing instrument? | | | | 6 | | <u> </u> |
| 7 Did the foundation have at least \$5,000 in assets at any | time during the year? | | | 7 | X | <u> </u> |
| 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) | | | | | |
| CA | had a convert Form DOO DE to the August Oct | ural (ar danimate) | | | | |
| b If the answer is "Yes" to line 7, has the foundation furnis | | rar (ur uesignate) | | | v | |
| of each state as required by General Instruction G? If | | 1/2) or 40.42/11/E) for colo | nda- | 86 | X | |
| 9 Is the foundation claiming status as a private operating to | | | iiuai | 9 | | х |
| year 2012 or the taxable year beginning in 2012 (see ins | • | | тмт | | - x | <u> </u> |

X

X

3b

4a

Yes X No

N/A

3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time

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

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?

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

during the year?

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|--|---|---|--|---------------------------|-------------------------------|
| Part VII-B Statements Regarding Activities for Which I | Form 4720 May Be I | Required (contin | ued) | | |
| 5a During the year did the foundation pay or incur any amount to | | | | | |
| (1) Carry on propaganda, or otherwise attempt to influence legislation (section | 1 4945(e))? | Y | es 🗓 No | | |
| (2) Influence the outcome of any specific public election (see section 4955); o | r to carry on, directly or indire | | | - | |
| any voter registration drive? | | | es X No | | |
| (3) Provide a grant to an individual for travel, study, or other similar purposes | 7 | Y | es 🗓 No | | |
| (4) Provide a grant to an organization other than a charitable, etc., organizatio | n described in section | | ļ | , | |
| 509(a)(1), (2), or (3), or section 4940(d)(2)? | | Y | es 🗓 No | | 1 |
| (5) Provide for any purpose other than religious, charitable, scientific, literary, | or educational purposes, or f | | | - 1 | |
| the prevention of cruelty to children or animals? | | Y | es X No | 1 | |
| b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und | ler the exceptions described i | n Regulations | | | |
| section 53 4945 or in a current notice regarding disaster assistance (see instru | ctions)? | | N/A | 5b | |
| Organizations relying on a current notice regarding disaster assistance check h | ere | | | | |
| c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr | om the tax because it mainta | ined | 1 | 1 | İ |
| expenditure responsibility for the grant? | N | [/A 🔲 Y | es 🔲 No | | |
| If "Yes," attach the statement required by Regulations section 53 4945 | 5-5(d) | | | | |
| 6a Did the foundation, during the year, receive any funds, directly or indirectly, to | pay premiums on | | 1 | - 1 | ł |
| a personal benefit contract? | | Y | es X No | | - [|
| b Did the foundation, during the year, pay premiums, directly or indirectly, on a p | ersonal benefit contract? | | | 6b | x |
| If "Yes" to 6b, file Form 8870 | | | | \neg | 1 |
| 7a At any time during the tax year, was the foundation a party to a prohibited tax s | helter transaction? | Y | es X No | - 1 | |
| b If "Yes," did the foundation receive any proceeds or have any net income attribu | table to the transaction? | | N/A | 7b | |
| Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors | ees, Foundation Ma | nagers, Highl | у | | |
| List all officers, directors, trustees, foundation managers and their | compensation. | | | | |
| (a) Name and address | (b) Title, and average hours per week devoted to position | (c) Compensation (If not paid, enter -0-) | (d) Contributions to employee benefit plans and deferred compensation | (e) E: accour allow | xpense nt, other vances |
| ULIAN MACK | DIRECTOR | | сотрепзацоп | | |
| PO BOX 483 | | | | | |
| AGUNA BEACH, CA 92652-0483 | 0.00 | 0. | 0. | | 0. |
| AMY MACK | DIRECTOR | | | | |
| PO BOX 483 | | | | Ì | |
| AGUNA BEACH, CA 92652-0483 | 0.00 | 0. | 0. | | 0. |
| | | | | | |
| | | ļ | | | |
| | | 1 | } | | |
| | | | | | |
| | | | | | |
| | | l |] | | |
| Compensation of five highest-paid employees (other than those inc | luded on line 1). If none, | enter "NONE." | | | |
| (a) Name and address of each employee paid more than \$50,000 | (b) Title, and average hours per week devoted to position | (c) Compensation | (d) Contributions to employee benefit plans and deferred | (e) E: accour | xpense nt, other |
| NONE | devoted to position | | compensation | allow | vances |
| NOINE | | | | | |
| - | | | · · · · · · · · · · · · · · · · · · · | | |
| - | | 1 | | | |
| | | | - | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | ĺ | } | |
| Total number of other employees paid over \$50,000 | | | | | |

Total. Add lines 1 through 3

0.

| Pa | Minimum Investment Heturn (All domestic foundations must complete this part. Foreign fou | ndations, see instruction | ns) |
|----|---|---------------------------|----------|
| 1 | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes | | |
| а | Average monthly fair market value of securities | 1a | 0. |
| b | Average of monthly cash balances | 1b | |
| C | Fair market value of all other assets | 1c | |
| d | Total (add lines 1a, b, and c) | 1d | 0. |
| е | Reduction claimed for blockage or other factors reported on lines 1a and | | |
| | 1c (attach detailed explanation) 1e 0. | | |
| 2 | Acquisition indebtedness applicable to line 1 assets | 2 | 0. |
| 3 | Subtract line 2 from line 1d | 3 | 0. |
| 4 | Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) | 4 | |
| 5 | Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4 | 5 | 0. |
| 6 | Minimum investment return Enter 5% of line 5 | 6 | 0. |
| P | Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here in and do not complete this part (see instructions) | nd certain | |
| 1 | Minimum investment return from Part X, line 6 | 1 | 0. |
| 2a | Tax on investment income for 2012 from Part VI, line 5 | | |
| b | Income tax for 2012. (This does not include the tax from Part VI) | | |
| C | Add lines 2a and 2b | 2c | 0. |
| 3 | Distributable amount before adjustments. Subtract line 2c from line 1 | 3 | 0. |
| 4 | Recoveries of amounts treated as qualifying distributions | 4 | 0. |
| 5 | Add lines 3 and 4 | 5 | 0. |
| 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 | 0. |
| P | art XII Qualifying Distributions (see instructions) | | |
| 1 | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes | 1 40 | Λ |
| | Expenses, contributions, gifts, etc - total from Part I, column (d), line 26 | 1a | 0. |
| | Program-related investments - total from Part IX-B | 1b | <u> </u> |
| 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: | _ | |
| | Suitability test (prior IRS approval required) | 3a | |
| þ | Cash distribution test (attach the required schedule) | 3b | 0. |
| 4 | Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 | 4 | <u> </u> |
| 5 | Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment | <u> </u> | 0 |
| | income Enter 1% of Part I, line 27b | 5 | 0. |
| 6 | Adjusted qualifying distributions Subtract line 5 from line 4 | 6 | <u> </u> |
| | Note The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation 4940(e) reduction of tax in those years | qualifies for the section | |

| Part XIII Undistributed Income (see instructions) (a) (b) (c) | (d) |
|---|----------------|
| Corpus Years prior to 2011 2011 | 2012 |
| 1 Distributable amount for 2012 from Part XI, line 7 | 0. |
| 2 Undistributed income, if any, as of the end of 2012 | |
| a Enter amount for 2011 only | • |
| b Total for prior years | |
| ,, | |
| 3 Excess distributions carryover, if any, to 2012 | |
| a From 2007 | |
| b From 2008 | |
| c From 2009 | |
| dFrom 2010 | |
| e From 2011 | |
| f Total of lines 3a through e O . | |
| 4 Qualifying distributions for 2012 from | |
| Part XII, line 4 ▶\$ | |
| a Applied to 2011, but not more than line 2a | • |
| b Applied to undistributed income of prior | |
| years (Election required - see instructions) | |
| c Treated as distributions out of corpus | |
| (Election required - see instructions) 0. | 0. |
| d Applied to 2012 distributable amount e Remaining amount distributed out of corpus 0 • | <u> </u> |
| 0 | 0. |
| 5 Excess distributions carryover applied to 2012 (If an amount appears in column (d) the same amount must be shown in column (a)) | |
| 6 Enter the net total of each column as indicated below. | |
| a Corpus Add lines 3t, 4c, and 4e Subtract line 5 | |
| b Prior years' undistributed income. Subtract | |
| line 4b from line 2b O • | |
| 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 | • |
| 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 | |
| | - |
| 9 Excess distributions carryover to 2013 Subtract lines 7 and 8 from line 6a 0. | |
| | |
| 10 Analysis of line 9 a Excess from 2008 | |
| b Excess from 2009 | |
| c Excess from 2010 | |
| dExcess from 2011 | |

e Excess from 2012

| Form 990-PF (2012) CARLO'S FUND Part XV Supplementary Information |) | | 46-1592 | 2888 Page 1 |
|---|---|---------------------|----------------------------------|-------------|
| | | Payment | | |
| 3 Grants and Contributions Paid During the Recipient | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation | Purpose of grant or contribution | Amount |
| Name and address (home or business) | any foundation manager or substantial contributor | status of recipient | Contribution | |
| a Paid during the year | | | | |
| | | | | |
| NONE | | | | |
| | | | | |
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| | | | | |
| | | | | |
| Total | | | ▶ 3a | - |
| b Approved for future payment | | ·. | Ja | |
| | | | | |
| NONE | | | | |
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| | | | | |
| | | | | |
| | | | | |
| Total | , I | l | ▶ 3b | |

| ı | Part XVI-A | Analysis of Income-Producing A | Activities |
|---|------------|---------------------------------|------------|
| ı | | rinaryoro or moonio i roddomg r | |

| nter gross amounts unless otherwise indicated. | Unrelated b | usiness income | | by section 512, 513, or 514 | (e) |
|---|----------------------|--------------------|---------------|-----------------------------|---|
| • | (a) | (b) | (C) Exclu- | (d) | Related or exempt |
| Program service revenue: | Business code | Amount | sion | Amount | function income |
| a | | | | | |
| b | | | | | |
| c | - | | | - | |
| d | | | | | |
| e | - | | | | |
| 1 | | | | | |
| g Fees and contracts from government agencies | _ | | | | |
| Membership dues and assessments | | | | | |
| Interest on savings and temporary cash | | | | | * |
| investments | | | | ľ | |
| Dividends and interest from securities | | | | | · |
| Net rental income or (loss) from real estate | | | | | |
| a Debt-financed property | | · | | | |
| b Not debt-financed property | | | | | |
| Net rental income or (loss) from personal | | | | | |
| property | | | | | |
| Other investment income | | | | | |
| Gain or (loss) from sales of assets other | | | | | |
| than inventory | - - - | | | | |
| Net income or (loss) from special events | | **** | | | |
| Gross profit or (loss) from sales of inventory | | | | | |
| Other revenue | | | | | |
| a | | | 1 1 | | |
| b | | | | | |
| С | | | | | |
| d | | | | | |
| е | | | | | |
| Subtotal. Add columns (b), (d), and (e) | | (| 0.[| 0. | |
| Total Add line 12, columns (b), (d), and (e) | | | | 13 | |
| ee worksheet in line 13 instructions to verify calculations) | | | | | |
| Part XVI-B Relationship of Activities | to the Accom | plishment of | Exempt P | urposes | |
| ine No Explain below how each activity for which in | | | | d importantly to the accomp | olishment of |
| the foundation's exempt purposes (other that | n by providing funds | for such purposes) | <u>-</u> | | |

| ▼ | the foundation's exempt purposes (other than by providing funds for such purposes). |
|-----------------|---|
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223621 12-05-12

| Pa | rt XVII | Information Re Exempt Organ | | sfers To a | and Transact | ions an | d Relatio | nships With Nonch | aritable | е | |
|-------|-------------|---|--|-------------------|-------------------------|---------------|----------------|---------------------------------------|-----------------|-------------|-------|
| 1 | Did the ord | ganization directly or indi | | of the followin | g with any other or | anization (| described in s | ection 501(c) of | | Yes | No |
| | | other than section 501(c | | | - | 7 | | . , | | | |
| | - | from the reporting found | | | | J | | | | | |
| | (1) Cash | , , | | • | • | | | | 1a(1) | | X |
| | (2) Other | assets | | | | | | | 1a(2) | | X |
| b | Other trans | sactions. | | | | | | | | | |
| | (1) Sales | of assets to a noncharita | ble exempt organizat | tion | | | | | 15(1) | | X |
| | (2) Purch | ases of assets from a no | ncharitable exempt o | rganization | | | | | 1b(2) | | X |
| | (3) Renta | l of facilities, equipment, | or other assets | | | | | | 1b(3) | | X |
| | (4) Reimb | oursement arrangements | | | | | | | 1b(4) | | _X_ |
| | (5) Loans | or loan guarantees | | | | | | | 1b(5) | | X |
| | (6) Perfor | rmance of services or me | mbership or fundrais | sıng solicitatio | ns | | | | 1b(6) | | X |
| C | Sharing of | facilities, equipment, ma | iling lists, other asse | ts, or paid em | ployees | | | | 10 | | X |
| d | If the ansv | ver to any of the above is | "Yes," complete the f | following sche | dule. Column (b) st | ould alway | ys show the fa | ur market value of the good: | s, other ass | ets, | |
| | | | | | ed less than fair ma | rket value i | n any transac | tion or sharing arrangement | t, show in | | |
| | |) the value of the goods, | | | | | | · · · · · · · · · · · · · · · · · · · | | | |
| (a)Lı | ne no | (b) Amount involved | (c) Name of | | e exempt organization | on [| (d) Descrip | otion of transfers, transactions, a | nd sharing ar | rangeme | nts |
| | | | | N/A | | | | | | | |
| | | | | | | | | | . | | |
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| 20 | In the four | dation directly or indirect | the offshotod with or a | rolated to ana | or more tay evern | t organizat | ione decoribe | | | | |
| 24 | | idation directly or indirect 501(c) of the Code (other | - | | | i organizat | ions describe | u | Yes | X |] No |
| h | | emplete the following sch | | ((3)) OF III 36CI | 11011 321 | | | | 163 | LAB | טוו נ |
| | 11 103, 00 | (a) Name of org | | | (b) Type of organ | ızatıon | | (c) Description of relatio | nship | | |
| | | N/A | | | (-, -,, | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | · · · · · · · · · · · · · · · · · · · | | | |
| | | | | ··- | | | | | | | - |
| | | ··· | | | | | | 7-2 | | | |
| | | penalties of perjury, I declare | | | | | | | May the IRS | discuss | his |
| Sig | 3n 📞 | elief, it is true correct, and cor | mplete Declaration of pr | eparer (other tha | n taxpayer) is based or | all informati | | barer has any knowledge | eturn with th | e prepar | er |
| He | re | & ann | man | | 15-11-1 | 3 | Scuet | unt Tuasuer | X Yes | | No |
| | Sign | ature of officer or trustee | | | Date | | Title | L | | | |
| | | Print/Type preparer's na | ame | Preparer's s | ignature | D | ate | Check if PTII | N | | |
| | | MICHAEL S. | SOLHEIM, | . / | - 1 | | 1 1 | self- employed | | | |
| Pa | | CPA | _ | Weel | Sel. | \ 5 | 5/7/13 | P | 00570 | 974 | |
| | eparer | | | | | | 7.7. | 5 > 2.0 | 27000 | ^ ^ | |
| | - | LIBITI 2 Hallie MATTA | LOC DAGGG | UPIM U | OMRPT % ? | SHAIN | , PC | Firm's EIN ► 36 - | <i>2</i> / UU 6 | UU | |
| Us | e Only | Firm's address ▶ 18 | | | | | , PC | Firm's EIN > 36- | | | |

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 1545-004

2012

Name of the organization **Employer identification number** CARLO'S FUND 46-1592888 Organization type (check one) Filers of: Section: ____ 501(c)(Form 990 or 990-EZ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation ___ 527 political organization 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions General Rule X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor Complete Parts I and II. **Special Rules** For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III 」 For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on Part I, line 2 of its Form 990-PF, to

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

46-1592888

| CIMIL | D I OND | | 203200 |
|------------|--|--------------------------------|---|
| Part I | Contributors (see instructions) Use duplicate copies of Part I | if additional space is needed. | |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 1 | JULIAN MACK PO BOX 483 LAGUNA BEACH, CA 92652 | sssss | Person X Payroll Noncash (Complete Part II if there is a noncash contribution.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II if there is a noncash contribution) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Oncash Complete Part II if there is a noncash contribution) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II if there is a noncash contribution) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II if there is a noncash contribution) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II if there is a noncash contribution) |

Name of organization

Employer identification number

CARLO'S FUND

46-1592888

| | 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 |
| - | | | |
| ······································ | | \$ | |
| (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) | | (c) | <u> </u> |
| No. from Part I | (b) Description of noncash property given | FMV (or estimate) (see instructions) | (d) Date received |
| | | | |
| | | | |
| | | \$ | 990, 990-EZ, or 990-PF) (|

Employer identification number Name of organization CARLO'S FUND 46-1592888 Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations that total more than \$1,000 for the year Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter Part III the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year (Enter this information once) \$ Use duplicate copies of Part III if additional space is needed (a) No. from Part I (d) Description of how gift is held (c) Use of gift (b) Purpose of gift (e) Transfer of gift Relationship of transferor to transferee Transferee's name, address, and ZIP + 4 (a) No. from (d) Description of how gift is held (b) Purpose of gift (c) Use of gift Part I (e) Transfer of gift Relationship of transferor to transferee Transferee's name, address, and ZIP + 4 (a) No. from (d) Description of how gift is held (c) Use of gift (b) Purpose of gift (e) Transfer of gift Relationship of transferor to transferee Transferee's name, address, and ZIP + 4 (a) No. from Part I (c) Use of gift (d) Description of how gift is held (b) Purpose of gift (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

46-1592888

FORM 990-PF LIST OF SUBSTANTIAL CONTRIBUTORS PART VII-A, LINE 10

STATEMENT

1

NAME OF CONTRIBUTOR

JULIAN MACK

ADDRESS

PO BOX 483

LAGUNA BEACH, CA 92652