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### Em 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

15 Form 990-PF (2012)

Fo	ca	lendar year 2012 or tax year beginning	, and	ending						
Na	me c	f foundation	<del></del>		A I	Employer Identification nun	nber			
Scl	ilino	ger Family Foundation				52-23909	70			
		and street (or P O box number if mail is not delivered to street addre	ess)	Room/suite	В	Telephone number (see instru	ictions)			
125	0 N	Lakeview Avenue		В		(800) 839-	1754			
_		own, state, and ZIP code			C II	f exemption application is per		▶ 🗀		
An	ahe	m	CA 92	2807		<b>-</b>	<b>3</b> ,			
			I return of a former pub	-	D 1	Foreign organizations, chec	k here	ightharpoons		
	<b>U</b>		nded return	o onay				· Ш		
			ne change		2		oreign organizations meeting the 85% test, neck here and attach computation			
	Ch	eck type of organization X Section 501(c)(3) exem				diode note and allast com	patation	٠ ـــ		
		<del>-</del>	other taxable private for	undation		f private foundation status wa		▶□		
<u> </u>			<u>-</u>		١	inder section 507(b)(1)(A), ch	еск пете			
i		r market value of all assets at end J Accounting n		Accrual		f the foundation is in a 60-mo inder section 507(b)(1)(B), ch				
		/ear (from Part II, col. (c), ☐ Other (sp. + 16) ► \$ 2,055,674 (Part I, column (d			١	211de: 3eet(011 001(b)(1)(b), G1	COR HEID			
Pa			a) illust be off casif basis				(d) Disbursem	ents		
Га	111	amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue and expenses per	(b) Net investme	ent	(c) Adjusted net	for chantable			
		the amounts in column (a) (see instructions) )	books	ıncome		ıncome	purposes (cash basis or			
	4		656 030				(00011 00010 01	,		
	1 2	Contributions, gifts, grants, etc., received (attach schedule)	656,830							
	3	Check If the foundation is not required to attach Sch B Interest on savings and temporary cash investments	310		310	<del>\</del>				
	4	Dividends and interest from securities	67,530	67	,530					
	_	a Gross rents .	07,330		,000					
	"	b Net rental income or (loss)								
e	6	a Net gain or (loss) from sale of assets not on line 10	68,968							
Revenue	ľ	b Gross sales price for all assets on line 6a 3,065,552	55,555							
ě	7	· · · · · · · · · · · · · · · · · · ·		227	,99°	1		T i		
	8	Net short-term capital gain			•					
៩៣%	9	, -								
3	10	a Gross sales less returns and allowances								
റ		b Less Cost of goods sold								
N.		c Gross profit or (loss) (attach schedule)								
	11	Other income (attach schedule)	263							
⋛	12	Total. Add lines 1 through 11	793,901	295	5,83	1 0				
$\frac{-s}{2}$	13	Compensation of officers, directors, trustees, etc.				_				
EXPENSES Expenses	14	Other employee salaries and wades								
<b>Z</b>	15	Pension plans, employee benefits								
ZX	16	a Legal fees (attach schedule) NOV 1 5 2015	9				<u></u>			
ھوچ	i									
ૹૼૺૺૺ		Other professional reco (attach contoado) 4 = 4=1======	当 11,664	11	1,664	4				
ta ta	17									
nis	18	* * * * * * * * * * * * * * * * * * * *	12,061		1,993	3		<del></del> i		
Ē	19	,				<del>                                     </del>	<u> </u>			
ğ	20		<del></del>	<del></del>						
్వర్ట్ Operating and Administrative	21 22		}			-				
a	23		13,312		17	7	<del></del>	13,135		
ng	24	· · · · · · · · · · · · · · · · · · ·	13,312		17	<u>'</u>		10,100		
ati	24	Total operating and administrative expenses.  Add lines 13 through 23	37,037	16	5,834	4 0		13,135		
ĕ	25	<b>G</b>	592,090	- 10	-,00	·		92,090		
ŏ	26	* - ·	629,127	14	5,83	4 0		05,225		
	27		023,121		٠,٠٥٠		<del></del>	10,220		
	12"	a Excess of revenue over expenses and disbursements	164,774							
		b Net investment income (if negative, enter -0-)	<u> </u>	278	3,99	7				
		c Adjusted net income (if negative, enter -0-)				0				

4 Add lines 1, 2, and 3

5 Decreases not included in line 2 (itemize) ▶ 6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30

2,062,025

4

5

6

Form 990-PF (2012) Schlinger Fa	imily Foundation			52-2390970 Page <b>3</b>			
	Losses for Tax on Investme	ent Income					
(a) List and describe the kir	nd(s) of property sold (e g , real estate, or common stock, 200 shs MLC Co )	(b) How acquired P—Purchase D—Donation	(c) Date acc				
1a Publicly-traded Securities		D-Donation	<del> </del>	<del></del>			
b		<del></del>					
С			Ì				
d							
е							
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (loss) (e) plus (f) minus (g)			
a 3,065,552		2,837,561		227,991			
b		_					
С							
d							
e							
Complete only for assets showing	g gain in column (h) and owned by th	e foundation on 12/31/69	(1) (	Gains (Col. (h) gain minus			
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	1	col (k), but not less than -0-) or Losses (from col (h))			
a				227,991			
b							
С							
d							
е							
2 Capital gain net income or (ne		nter in Part I, line 7	2	227,991			
3 Net short-term capital gain or (							
	8, column (c) (see instructions)	` ' ' ' '					
ın Part I, line 8			3	0			
	r Section 4940(e) for Reduc	ed Tax on Net Investm	ent Incom	<u> </u>			
(For optional use by domestic priv				• • • • • • • • • • • • • • • • • • • •			
(i or optional use by domestic pilv	ate foundations subject to the set	Stion 4340(a) tax on het inv	estinent inco	ine )			
If section 4940(d)(2) applies, leave	e this part blank						
Was the foundation liable for the s	section 4942 tax on the distributat	ole amount of any vear in th	e base perio	od? ☐ Yes ☒ No			
If "Yes," the foundation does not q		• •					
	it in each column for each year, s	<u></u>	nakına anv e	ntries			
(a)				(d)			
Base period years	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use a	ssets	Distribution ratio			
Calendar year (or tax year beginning in)				(col (b) divided by col (c))			
2011	301,655		2,715	0 212028			
2010	287,926		4,425	0 253808			
2009	254,204		6,611	0 323164			
2008	315,787		3,777	0 378743			
2007	296,651	960	0,947	0 308707			
2 Total of line 1, column (d)			2	1 476450			
3 Average distribution ratio for the							
the number of years the found	lation has been in existence if les	s than 5 years	3	0 295290			
4 Enter the net value of nonchar	ritable-use assets for 2012 from F	Part X, line 5	4	1,844,386			
5 Multiply line 4 by line 3			5	544,629			
o manupiy into 4 by line o			-	344,028			
6 Enter 1% of net investment inc	come (1% of Part I, line 27b)		. 6	2,790			
7 Add lines 5 and 6			7	547,419			

8 Enter qualifying distributions from Part XII, line 4
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

	990-PF (2012) Schlinger Family Foundation  LVI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—	-800	52-239 instruct			ge 4	
		366	Instruct	101137			
та	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1					1	
h	Date of ruling or determination letter(attach copy of letter if necessary—see instructions)  Domestic foundations that meet the section 4940(e) requirements in Part V, check	1			,790	l	
U	here $\blacktriangleright$ X and enter 1% of Part I, line 27b	•	<u> </u>		,,,,,,		
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4%						
	of Part I, line 12, col (b)						
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)							
3	Add lines 1 and 2	3_		2	,790		
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	4	ļ				
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	_5_	<u> </u>	2	,790		
6	Credits/Payments					l	
	2012 estimated tax payments and 2011 overpayment credited to 2012 6a 2,579						
	Exempt foreign organizations—tax withheld at source 6b					l	
	Tax paid with application for extension of time to file (Form 8868)  6c 211	ļ					
	Backup withholding erroneously withheld 6d 6d				700		
7	Total credits and payments Add lines 6a through 6d	7		2	,790	⊢	
B	Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached	8 9	<u> </u>		5 5	├─	
9 10	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	10			0		
1	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid  Enter the amount of line 10 to be Credited to 2013 estimated tax  Refunded	11	1		0	$\vdash$	
		···	J			L	
	t VII-A Statements Regarding Activities				<u></u>		
l a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it			1a	Yes	N	
_	participate or intervene in any political campaign? <b>b</b> Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see						
b							
	Instructions for the definition)?					$\vdash$	
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials						
_	published or distributed by the foundation in connection with the activities			1c		>	
	Did the foundation file Form 1120-POL for this year?			10		H	
u	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year						
_	(1) On the foundation ▶ \$ (2) On foundation managers ▶ \$ Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed						
e	on foundation managers  \$				l	1	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? .			2		-;	
-	If "Yes," attach a detailed description of the activities			<del>-</del>		广	
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles				l		
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3			
4 a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		1	
	If "Yes," has it filed a tax return on Form 990-T for this year?			4b	N/A	Γ	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5	Х	Τ	
	If "Yes," attach the statement required by General Instruction T					Г	
3	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either						
	By language in the governing instrument, or				İ		
	By state legislation that effectively amends the governing instrument so that no mandatory directions						
	that conflict with the state law remain in the governing instrument?			6	Х	Γ	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV							
Ва	Enter the states to which the foundation reports or with which it is registered (see instructions)					Γ	
	CA				ĺ		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney							
General (or designate) of each state as required by General Instruction G? If "No," attach explanation							
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3)					Г	
	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			9		Ŀ	
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing						
	their names and addresses			10	l	1:	

Form	990-PF (2012) Schlinger Family Foundation 52-239	<u>0970</u>	Pa	age <b>5</b>
Par	t VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had			
	advisory privileges? If "Yes," attach statement (see instructions)	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	<u> </u>	
	Website address			
14	The books are in care of ▶ Foundation Source Telephone no ▶	(800	) 839-	1754
	Located at ► 501 Silverside Road, Suite 123 Wilmington DE ZIP+4 ► 19809-1377			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here		•	· 🗆
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2012, did the foundation have an interest in or a signature or other authority	,	Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		<u> X</u>
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1. If "Yes," enter the name of			
	the foreign country	<u> </u>	ļ	
Pai	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?  Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person? Yes X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?  Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? X Yes No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	If the foundation agreed to make a grant to or to employ the official for a period			
	after termination of government service, if terminating within 90 days )			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		Х
	Organizations relying on a current notice regarding disaster assistance check here			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts,			
	that were not corrected before the first day of the tax year beginning in 2012?	1c		Х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	At the end of tax year 2012, did the foundation have any undistributed income (lines 6d			
	and 6e, Part XIII) for tax year(s) beginning before 2012?			
	If "Yes," list the years 20 , 20 , 20 , 20			
b	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)			
	to all years listed, answer "No" and attach statement—see instructions)	2b	N/A	
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
_	► 20, 20, 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business			
_	enterprise at any time during the year?  Yes X No			
b	If "Yes," did it have excess business holdings in 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, Form 4720, to determine		<del> </del>	<u> </u>
_	if the foundation had excess business holdings in 2012 )	3b_	N/A	<del>  , ,</del>
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	<u>4a</u>	ļ	X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable		<del> </del>	<del>  ,,</del>
	purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2012?	4b		X

	Schlinger Family Foundation							, .		2390	570		age <b>U</b>
	rt VII-B Statements Regarding Activit			m 4	1720 May Be	Reg	uired	(continue	<u>ed)</u> _				<del></del> ,
5a	During the year did the foundation pay or incur any												1
	(1) Carry on propaganda, or otherwise attempt to	ınflu	ience legislation (s	ecti	on 4945(e))?			Yes	X N	No			
	(2) Influence the outcome of any specific public e		•	55),	or to carry								
	on, directly or indirectly, any voter registration	drıv	e?					Yes	X N	No		- 1	
	(3) Provide a grant to an individual for travel, stud	dy, o	r other similar pum	ose	s?			Yes	X	No			ŀ
	(4) Provide a grant to an organization other than	-						_		1			[
	in section 509(a)(1), (2), or (3), or section 494	(b)04	(2)? (see instruction	ns)				Yes	X	No			
	(5) Provide for any purpose other than religious, educational purposes, or for the prevention or						Yes	X	No				
b	If any answer is "Yes" to 5a(1)-(5), did any of the ti	ansa	ections fail to qualif	fy ur	nder the exception	ns de	scribed	ın		j_			
	Regulations section 53 4945 or in a current notice in	_	=			1s)?				L	5b	N/A	
	Organizations relying on a current notice regarding	dısa	ster assistance ch	eck I	here			<b>&gt;</b>	· 🔲			أ	
C	If the answer is "Yes" to question 5a(4), does the fo	ounda	ation claim exempt	ion 1	from the								
	tax because it maintained expenditure responsibility	•	· <del>-</del>					Yes	ı	No			
	If "Yes," attach the statement required by Regulati	ons :	section 53 4945–5	(d)									
6a	Did the foundation, during the year, receive any fur	ids, d	directly or indirectly	, to	pay								
	premiums on a personal benefit contract?							Yes	ΧI				
b	Did the foundation, during the year, pay premiums,	dire	ctly or indirectly, or	nap	ersonal benefit c	ontra	ct?			L	6b		X
	If "Yes" to 6b, file Form 8870								_	j			
7a	At any time during the tax year, was the foundation	a pa	irty to a prohibited	tax :	shelter transactio	n?		Yes	ΧI	No			
b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?  7b N/A													
Р	art VIII Information About Officers,	Dir	ectors, Truste	es	Foundation	Mai	nager	s, Highly	Paid	Emp	oloy	ees,	
	and Contractors												
1	List all officers, directors, trustees, foundat		,			(se							
	(a) Name and address	, ,	Title, and average hours per week		:) Compensation I not paid, enter		employee	tributions to benefit plan			(e) Expense account, other allowances		
QE	E ATTACHMENT	d	evoted to position		-0-)	an	u aeterre	d compensat	ion				
J.	C / (1 / / ()												
		L											
2	Compensation of five highest-paid employe enter "NONE."	es (	other than those	e in	cluded on line	1—s	ee ins	tructions)	. If no	ne,			
			(b) Title, and avera	ae				Contributions					
(:	a) Name and address of each employee paid more than \$50,0	00	hours per week devoted to positio	-	(c) Compensation	on	piar	ployee benef is and deferre ompensation	it ed			se acco lowance	
NC	NE												
				00									
				00									
								-					
	00												
00													
	<del></del>		l	00									
To	tal number of other employees paid over \$50.00	າດ											

Form 990-PF (2012)	Schlinger Family Foundation		52-2390970 Page <b>7</b>
Part VIII	Information About Officers, Directors, Trustees, Fo and Contractors (continued)	undation Managers, Highly Paid	
3 Five highest	t-paid independent contractors for professional services (see in	estructions) If none enter "NONE"	
	ame and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		(b) Type of service	(c) compensation
NONE			
	<del></del>	<del>-</del>	
	***	·	<del>-</del>
	•	İ	
Total number of	others receiving over \$50,000 for professional services	<b>&gt;</b>	
Part IX-A	Summary of Direct Charitable Activities		
	four largest direct charitable activities during the tax year. Include relevant statist		Expenses
	nizations and other beneficiaries served, conferences convened, research papers	produced, etc	
1			
2			
3			
_			<del> </del>
4			
Part IX-B	Summary of Program-Related Investments (see ins		
	gest program-related investments made by the foundation during the tax year on I	ines 1 and 2	Amount
1			
2			
	lated investments. See instructions		
3			
Total A	4 Abraniah 2		
Total. Add lines	i unouan 3	▶	(

_	990-PF (2012) Schlinger Family Foundation  1 X Minimum Investment Return (All domestic foundations must complete this part. Foreign		2390970 Page <b>8</b> dations,
	see instructions )		
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	1,580,830
b	Average of monthly cash balances	1b	291,643
C	Fair market value of all other assets (see instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	1,872,473
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	1,872,473
4	Cash deemed held for charitable activities Enter 1 ½ % of line 3 (for greater amount, see		
	instructions)	4	28,087
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	1,844,386
6	Minimum investment return. Enter 5% of line 5	6	92,219
Par	<b>TXI</b> Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here and do not complete this part.)		
1	<del></del>	1	92,219
і 2а	Minimum investment return from Part X, line 6	$\vdash$	92,219
za b	Tax on investment income for 2012 from Part VI, line 5 Income tax for 2012 (This does not include the tax from Part VI)		
C	Income tax for 2012 (This does not include the tax from Part VI )  Add lines 2a and 2b	2c	2,790
3		3	89,429
4	Distributable amount before adjustments Subtract line 2c from line 1  Recoveries of amounts treated as qualifying distributions	4	09,429
5	Add lines 3 and 4	5	89,429
6	Deduction from distributable amount (see instructions)	6	09,429
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII,	H	
•	line 1	7	89,429
Par	t XII Qualifying Distributions (see instructions)	لستسا	90,120
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes	r - 1	
a	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	605,225
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.,	<del></del>	
_	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the	一	
a	Suitability test (prior IRS approval required)	3a	

Cash distribution test (attach the required schedule)

income Enter 1% of Part I, line 27b (see instructions)

Adjusted qualifying distributions. Subtract line 5 from line 4

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

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

605,225

602,435

3b

4

5

d Excess from 2011 e Excess from 2012

art XI	Schlinger Family Foundation  Private Operating Foundations		and Part VII-A	question 9)	52-239	0970 Page <b>1</b>
	ne foundation has received a ruling or determin			, question o)		
	ndation, and the ruling is effective for 2012, er			<b>•</b>		
<b>b</b> Ch	eck box to indicate whether the foundation is a	private operating fou	ndation described	ın section	4942(j)(3) oi	4942(j)(5)
	ter the lesser of the adjusted net	Tax year	· <del></del>	Prior 3 years	<del></del>	
	ome from Part I or the minimum estment return from Part X for each	(a) 2012	(b) 2011	(c) 2010	(d) 2009	(e) Total
	ar listed					
<b>b</b> 85	% of line 2a		•			-
c Qu	alifying distributions from Part XII,					
line	e 4 for each year listed					
<b>d</b> Am	ounts included in line 2c not used directly					
	active conduct of exempt activities					
	alifying distributions made directly active conduct of exempt activities					
	btract line 2d from line 2c					
	mplete 3a, b, or c for the					
alte	ernative test relied upon					
	ssets" alternative test—enter				[	
	Value of all assets					
	Value of assets qualifying under section 4942(j)(3)(B)(i)					
	ndowment" alternative test—enter 2/3 minimum investment return shown in					
	rt X, line 6 for each year listed					
c "Sı	upport" alternative test—enter					
(1)	Total support other than gross					
	investment income (interest, dividends, rents, payments					
	on securities loans (section	•				
	512(a)(5)), or royalties)					
(2)	Support from general public and 5 or more exempt					
	organizations as provided in section 4942(j)(3)(B)(iii)					
(3)	Largest amount of support from an exempt organization					
(4)	Gross investment income	<u></u>				
Part X	Supplementary Information (Coassets at any time during the y			undation had \$5	5,000 or more in	
l Inf	ormation Regarding Foundation Manag	ers:				
	t any managers of the foundation who have co			•	the foundation	
	fore the close of any tax year (but only if they be	lave contributed more	than \$5,000) (Se	e section 507(d)(2) )		
	Stewart Schlinger t any managers of the foundation who own 10	% or more of the stoc	k of a cornoration	or an equally large p	ortion of the	
	nership of a partnership or other entity) of whi				ordorr or the	
ONE			•			
	ormation Regarding Contribution, Gran	t, Gift, Loan, Scho	larship, etc., Pro	ograms:		
Ch	eck here <b>X</b> if the foundation only make	s contributions to pre	selected charitable	e organizations and de	oes not accept	
	solicited requests for funds. If the foundation m	nakes gifts, grants, etc	(see instructions	) to individuals or orga	anızatıons under	
	er conditions, complete items 2a, b, c, and d					
a Th	e name, address, and telephone number or e-	mail of the person to v	wnom applications	snould be addressed	I	
<b>b</b> Th	e form in which applications should be submitt	ed and information ar	nd materials they s	hould include		
<b>c</b> An	y submission deadlines			<del> </del>		

# Form 990-PF (2012) Schlinger Family Foundation Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During th	ne Year or Approved	for Future	Payment	
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
<ul> <li>a Paid during the year</li> <li>AMERICAN FAMILY HOUSING</li> <li>15161 JACKSON ST</li> </ul>	N/A	509(a)(1)	General & Unrestricted	1,000
MIDWAY CITY, CA 92655 AMERICAN GI FORUM OF CALIFORNIA PO BOX 1681	N/A	509(a)(1)	General & Unrestricted	2,500
SANTA MARIA, CA 93456 ANGELS FOSTER CARE OF SANTA BARBARA 3905 STATE ST 7-115	N/A	509(a)(1)	General & Unrestricted	2,000
SANTA BARBARA, CA 93105 ARTHRITIS FOUNDATION 1330 W PEACHTREE ST NW STE 100	N/A	509(a)(1)	General & Unrestricted	1,500
ATLANTA, GA 30309 BOYS CLUB OF BUENA PARK 7758 KNOTT AVE	N/A	509(a)(1)	General & Unrestricted	5,000
BUENA PARK, CA 90620 BRENTWOOD PRESBYTERIAN CHURCH 12000 SAN VICENTE BLVD	N/A	509(a)(1)	General & Unrestricted	500
LOS ANGELES, CA 90049 CALIFORNIA ASSN FOR RES IN ASTRONOMY 65-1120 MAMALAHO HWY	N/A	509(a)(1)	General & Unrestricted	5,000
KAMUELA, HI 96743 CANCER CENTER OF SANTA BARBARA 300 W PUEBLO ST	N/A	509(a)(1)	Jessica Feezell and Barbara Ireland Walk for Breast Cancer Research	500
SANTA BARBARA, CA 93105 CHAPMAN UNIVERSITY 1 UNIVERSITY DR	N/A	509(a)(1)	General & Unrestricted	2,500
ORANGE, CA 92866 CHILDREN GIVING GIFTS INC 2322 N BATAVIA ST STE 108	N/A	509(a)(1)	General & Unrestricted	5,000
ORANGE, CA 92865 ECHELON SANTA BARBARA PO BOX 30846	N/A	509(a)(1)	General & Unrestricted	1,000
SANTA BARBARA, CA 93130  Total See Attached Statement			<u> </u>	592,090
b Approved for future payment				
Total			<b>▶</b> 3b	000 PE 1010

Part XVI-A Analysis of Income-Producing Activ	/ities				
Enter gross amounts unless otherwise indicated	Unrelated bus	siness income	Excluded by section	n 512, 513, or 514	(e)
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
1 Program service revenue					(See instructions )
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			14	310	
Dividends and interest from securities			14	67,530	
5 Net rental income or (loss) from real estate				07,000	
` .				· · · · · · · · · · · · · · · · · · ·	
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property				<del> · · · - · - ·</del>	
7 Other investment income		. ———	10	22.22	
8 Gain or (loss) from sales of assets other than inventory			18	68,968	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue a Federal Tax Refund			01	263	
b					
c					
d			<u> </u>		
e					
12 Subtotal Add columns (b), (d), and (e)		<u> </u>	)	137,071	
13 Total. Add line 12, columns (b), (d), and (e)				13	137,071
(See worksheet in line 13 instructions to verify calculations)					
Part XVI-B Relationship of Activities to the Acc					
Line No. Explain below how each activity for which income	•				
▼ the accomplishment of the foundation's exempt p	urposes (other tha	n by providing fu	inds for such purpo	oses) (See instru	ctions)
				•	
					_
			•		_
	<u> </u>				
	=	-			
	_				
			·· <u> </u>		
	<del></del>	<del>_</del>	<del>_</del>		
I					
	-				

#### Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable **Exempt Organizations**

1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?												Yes	No
а	(1)	Cash	from the reporting for	oundation to	a noncharitable	exempt org	anızatıo	n of			1a(1) 1a(2)		X X
(1) Sales of assets to a noncharitable exempt organization (2) Purchases of assets from a noncharitable exempt organization										1b(1) 1b(2) 1b(3)	. 93 ~	X X X	
<ul> <li>(4) Reimbursement arrangements</li> <li>(5) Loans or loan guarantees</li> <li>(6) Performance of services or membership or fundraising solicitations</li> <li>c Sharing of facilities, equipment, mailing lists, other assets, or paid employees</li> </ul>								1b(4) 1b(5) 1b(6) 1c		X X X			
d 	If the value value	ansve ansve of the	wer to any of the abone goods, other assent transaction or sh	ove is "Yes," ets, or service aring arrange	complete the following given by the rement, show in comment, show in comment.	lowing sche eporting fou olumn (d) t	edule Co undation he value	If the	foundation recei	ved less than fai	narket ir marke	et ed	
(a) I	Line no	<u>'</u>	(b) Amount involved	(c) Name	of nonchantable exe	mpt organization	on	( <b>d</b> ) De	escription of transfers,	transactions, and sh	anng arra	ngeme	ents
		+					-						
		$\top$			·								
		+											
		+											
		+							· · · · · · · · · · · · · · · · · · ·	<del> </del>			
		1		-									
									•				
										•			
		_											
		<u>Ļ</u>											
	desc	ribed es," c	ndation directly or in in section 501(c) of omplete the followin	the Code (ot							res X	No	
			(a) Name of organization		(b) T	ype of organiza	ation		(c)	Description of relatio	nship		
				_						<del>- · - · · · · · · · · · · · · · · · · ·</del>			
		Under	penalties of perjury, I declare the	nat Jave exammed	this return, including acci	ompanying sched	lules and sta	tements, a	nd to the best of my know	ledge and belief, it is true	 e,		
Siç	- 1								discuss thi				
пе	re	<b>)</b>			1/0/29	<u>//3</u> /_	Par	5101	BN/	instructions)?	X Ye		No
	$\perp$	Sign	nature of officer or trustee		Date /		tľe						
Pai	id		Print/Type preparer's na	me )	Preparer's signatur	е			Date	Check I if	PTIN		
	o par	or i	Jeffrey D Haskell-		Jeffrey D. H	laskell			10/18/2013	self-employed	P0134	5770	
	:par e Oi			undation Soul							1-03983		
		ıı y			e, Suite 212, Lal	ke Success	, NY 110	042			) 839-1		
											.m 990		(2012)

#### Schedule B (Form 990, 990-EZ,

(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
Schlinger Family Foundat	ion	52-2390970
Organization type (check	<del></del>	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)( ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a pr	rivate foundation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private	e foundation
	501(c)(3) taxable private foundation	
, ,	n is covered by the <b>General Rule</b> or a <b>Special Rule.</b> (c)(7), (8), or (10) organization can check boxes for both the General	il Rule and a Special Rule See
General Rule		
	on filing Form 990, 990-EZ, or 990-PF that received, during the year y one contributor Complete Parts I and II	r, \$5,000 or more (in money or
Special Rules		
sections 509(a)(1	(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% s) and 170(b)(1)(A)(vi) and received from any one contributor, during 2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 9	the year, a contribution of the greater
the year, total cor	(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that receivntributions of more than \$1,000 for use <i>exclusively</i> for religious, charpses, or the prevention of cruelty to children or animals. Complete P	ritable, scientific, literary, or
the year, contribute total to more than year for an exclusion.	(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that receivitions for use exclusively for religious, charitable, etc., purposes, but a \$1,000 if this box is checked, enter here the total contributions that sively religious, charitable, etc., purpose Do not complete any of the ganization because it received nonexclusively religious, charitable, exceptions are contributed.	t these contributions did not at were received during the e parts unless the <b>General Rule</b>
990-EZ, or 990-PF), but it	that is not covered by the General Rule and/or the Special Rules do must answer "No" on Part IV, line 2 of its Form 990, or check the b	oox on line H of its Form 990-EZ or on

Name of organizationEmployer identification numberSchlinger Family Foundation52-2390970

Part I	Contributors (see instructions) Use duplicate copie	s of Part I if additional space is n	eeded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Michael S Schlinger Trust dtd 10/12/00 c/o Ttee, 5792 Grandview Ave Yorba Linda CA 92886 Foreign State or Province Foreign Country	\$256,830_	Person Payroll Noncash X (Complete Part II if there is a noncash contribution )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	Warren & Katharine Schlinger Foundation  3835 Shadow Grove Road  Pasadena CA 91107  Foreign State or Province  Foreign Country	\$400,000	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
	Foreign State or Province Foreign Country	\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) <b>N</b> o.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Foreign State or Province Foreign Country	\$	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
	Foreign State or Province Foreign Country	\$	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
<del></del>	Foreign State or Province Foreign Country	\$	Person Payroll Occupate Part II of there is a noncash contribution Part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the part II of the

Name of organizationEmployer identification numberSchlinger Family Foundation52-2390970

Part II	Noncash Property (see instructions) Use duplicate co	ppies of Part II if additional spa	ce is needed
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	UNITED PARCEL SERVICE UPS, 3500 sh	\$ 256,830	12/28/2012
(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
		\$	

Name of or		-			Employer identification number					
	amily Foundation				52-2390970					
Part III	Exclusively religious, charitable, etc., in									
	total more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry  For organizations completing Part III, enter the total of exclusively religious, charitable, etc.									
	contributions of \$1,000 or less for the year			iction	s) <b>&gt;</b> \$0					
(a) No.	Use duplicate copies of Part III if additional	space is need	ea T							
from	(b) Purpose of gift	(c	) Use of gift	(0	d) Description of how gift is held					
Part I		· ·	, ,	•						
	••									
		(a) T	ronofor of sift							
		(e) i	ransfer of gift							
	Transference manner address and	71D + 4	Dalatianah	:£						
	Transferee's name, address, and Z	<u> </u>	Relationsh	ib oi	transferor to transferee					
			***************************************							
	For Prov Country									
(a) No.			I							
from Part I	(b) Purpose of gift	(с	) Use of gift	(0	d) Description of how gift is held					
Faiti										
	(e) Transfer of gift									
	Transferee's name, address, and 2	ZIP + 4	Relationsh	Relationship of transferor to transferee						
				•						
	For Prov Country									
(a) No. from	(h) Durnoss of sift	1-	s) Use of gift		(d) Description of how gift is hold					
Part I	(b) Purpose of gift	(0	c) Use of gift (		d) Description of how gift is held					
	(e) Transfer of gift									
	Transferee's name, address, and 2	ZIP + 4	Relationsh	ip of	transferor to transferee					
				<b>-</b>						
(a) No.	For Prov Country									
from	(b) Purpose of gift	(c	) Use of gift	(6	d) Description of how gift is held					
Part I	. , , ,	<u> </u>	<u> </u>							
		/-\ 7								
		(e) 1	ransfer of gift							
	Tanadanah nama addam 15	71D . 4	<b>n</b>		Annual annual annual annual annual annual annual annual annual annual annual annual annual annual annual annual					
	Transferee's name, address, and a	LIP + 4	Kelationsh	ip of	transferor to transferee					
	For Prov Country									
	Outlier		1							

Part I, Line 11 (990-PF) - Other Income

	263	. 0	0
	Revenue		
	and Expenses	Net Investment	Adjusted
Description	per Books	Income	Net Income
1 Federal Tax Refund	263	0	0

Part I, Line 16c (990-PF) - Other Professional Fees

		11,664	11,664	0	0
					Disbursements
- 1		Revenue and			for Charitable
		Expenses per	Net Investment	Adjusted Net	Purposes
l	Description	Books	Income	Income	(Cash Basis Only)
	1 Investment Management Services	11,664	11,664	0	0

Part I, Line 18 (990-PF) - Taxes

		12,061	4,993	0	0
		Revenue	·		Disbursements
		and Expenses	Net Investment	Adjusted	for Charitable
	Description	per Books	Income	Net Income	Purposes
1	Estimated Tax for 2012	2,300	0	0	0
2	Foreign Tax Paid	4,993	4,993	0	0
3	990-T Estimated Tax for 2011	2,968	0	0	0
4	State UBTI Tax for 2011	1,800	0	0	0

Part I, Line 23 (990-PF) - Other Expenses

		13,312	177	0	13,135	
		Revenue and Expenses	Net Investment	Adjusted Net	Disbursements for Charitable	
	Description	per Books	Income	Income	Purposes	
1	Administrative Fees	13,021	0	0	13,021	
2	Bank Charges	177	177	0	0	
3	Website Domain Registration	114	0	0	114	

Part II, Line 10b (990-PF) - Investments - Corporate Stock

aitii,	Line 10b (990-PF) - Investments	- Corporate 3		1 000 000	0	1,892,631
		Norm Observed	1,517,642	1,898,982	FMV I	FMV
	D	Num Shares/	Book Value	Book Value		
	Description	Face Value	Beg of Year	End of Year	Beg of Year	End of Year
1_1_	AMER INTERNATIONAL GROUP INC	1,430		47,607		50,479
2	BB&T CP	640		18,322		18,630
3	BP PLC SPONSORED ADR	740		31,903		30,814
4	CISCO SYSTEMS INC	3,600		63,713		70,736
5	COMERICA INC	1,340		42,615		40,656
6	CORNING INC	7,000		96,403		88,340
7	CSX CORP	1,060		21,297		20,914
8	DEVON ENERGY CORPORATION	845		44,949		43,974
9	DU PONT DE NEMOURS	630		26,707		28,336
10	EATON VANCE FLOATING RATE INCOME T	1,300		21,294		22,152
11	EATON VANCE TAX ADV GLBL DIV INC FD	1,800		26,763		24,444
12	FAIRHOLME FD	1,497		51,309		47,055
13	FRANCE TELECOM ADS	8,800		140,764		97,240
14	JOHNSON & JOHNSON	340		23,859		23,834
15	LAZARD INTERNATIONAL	13,504		105,920		114,920
16	LOOMIS SAYLES BOND FUND	12,327		177,659		186,379
17	MORGAN STANLEY	1,745		30,140		33,364
18	MYLAN INC	545		13,608		14,960
19	TENNECO INC	530		16,282		18,608
20	TRANSOCEAN LTD	500		24,082		22,330
21	UNITED PARCEL SERVICE	8,500		622,419		626,706
22	WESTERN ASSET MANAGED HIGH Y	10,700		67,470		66,019
23	YACKTMAN FUND, INC (THE)	10,551		183,897		201,741

Schlinger Family Foundation

52-2390970

Part II, Line 14 (990-PF) - Land, Buildings, and Equipment

а	art ii, Eine 14 (330-71) - Land, Buildings, and Equipment													
		7,919	7,919	7,919	. 0	0	0							
			Accumulated	Accumulated	-									
	1	Cost or	Depreciation	Depreciation	Book Value	Book Value	FM∨							
	Asset Description	Other Basis	Beg of Year	End of Year	Beg of Year	End of Year	End of Year							
	1 Office Equipment	6,264	6,264	6,264	0	0	0							
	2 Computer Equipment	1,655	1,655	1,655	0	0	0							

Schlinger Family Foundation 52-2390970

s statement is submitted to report the distribution of certain a	isets during the above-referenced year. The distributions resulted in a substantial confraction of assets.
following information is submitted in accordance with Treas	try Regulation Section 1 6043-3(a)(1) and the Form 990-PF instructions
ing the taxable year ending December 31, 2012, Schlinger F	amily Foundation (the "Foundation") made distributions from assets from sources other than current income Collectively, the distributions in excess of current income totaled \$526,140
amount represents over 25% of the Foundation's net asset	of \$1,887,273 (as measured by fair market value) at the beginning of the Foundation's taxable year ending December 31, 2012
ough the Foundation technically experienced a "substantial	contraction," it will continue in existence and has no plans for dissolution
Foundation made distributions of cash to the grantees listed	in the attachment to Part XV, Line 3a, each such grant was made solely for the charitable purpose specified therein

Schlinger Family Foundation

Part VIII, Line 1 (990-PF) - Compensation of Officers, Directors, Trustees and Foundation Managers

	ini, Emio i (ccc i i ) com					<u> </u>				0	0	(
Г	Name	Check "X" If Business	Street	Crty	State	Zıp Code	Foreign Country	Title	Avg Hrs Per Week	Compensation	Benefits	Expense Account
	Greg S Schlinger		1250 N. Lakeview Avenue, B.	Anaheim		92807		VP	1 00	0	0	(
1												
	Leanne M Schlinger		1250 N Lakeview Avenue, B	Anaheim	CA	92807		VP	1 00	0	0	(
2												
	Michael Stewart Schlinger		1250 N Lakeview Avenue, B	Anaheim	CA	92807		Pres / Dir	1 00	0	0	(
3												
4	Stacy S Schlinger		1250 N Lakeview Avenue, B	Anaheim	CA	92807		VP / Sec / Treas / CFO	1 00	0	0	(

52-2390970

#### Part XIII, Line 4c (990-PF) - Qualifying Distribution Made Out of Corpus

Pursuant to IRC Section 4942(h) and Treasury Regulation 53 4942(a)-3(d)(2), Schlinger Family Foundation hereby elects to treat \$539,275 of its current year qualifying distributions in excess of the immediately preceding tax year's undistributed income as being made out of corpus

Date

Ву

Name

Title

le PARSIABIOT

#### Part XIII, Line 7 (990-PF)

Schlinger Family Foundation (the "Foundation") received grants of \$400,000 in the taxable year ending 12/31/2011 and \$400,000 in the taxable year ending 12/31/2012 from Warren & Katharine Schlinger Foundation, a private nonoperating foundation. As reported in Part XIII, Line 7, the Foundation elects to treat all of its 2012 qualifying distributions in excess of the prior year's undistributed income, \$539,275, as distributions out of corpus to satisfy requirements imposed by Section 4942(g)(3) as follows (1) \$387,723 is applied to the balance of the amount received in 2011, and (2) \$151,552 is applied to the amount received in 2012. This leaves a balance of \$248,448 (\$400,000-\$151,552) to be redistributed in 2013 from the grant received in 2012.

Amount

1,000

Purpose of grant/contribution

Team GSF SB International Marathon Campaign

Continuation of Part XV, Lin Recipient(s) paid during the year	ne 3a (990-PF) -	Gran	ts and Con	tributions Paid	During the	e Year
Name						
HAWAII COMMUNITY FOUNDATION Street						
827 FORT ST						
City	·	State	Zip Code	Foreign Countr	У	
HONOLULU		HI	96813			
Relationship	Foundation Status					
N/A Purpose of grant/contribution	509(a)(1)	_	·		Amount	<del></del> ·
General & Unrestricted						5,000
Name						
INVISIBLE CHILDREN INC						
Street						
1620 5TH AVE STE 400		·	Te: 0. 1.	JE		
City SAN DIEGO		State CA	<b>Zip Code</b> 92101	Foreign Counti	ry	
Relationship	Foundation Status		192101	I		
N/A	509(a)(1)					
Purpose of grant/contribution					Amount	
Kony 2012					<u> </u>	100
Name						
JUNIOR LEAGUE OF SANTA BARBAR	RA INC					
Street						
229 E VICTORIA ST		State	Zip Code	Foreign Count	nv	
SANTA BARBARA		CA	93101	l Oreign Count	• •	
Relationship	Foundation Status					
N/A	509(a)(2)				T :	
Purpose of grant/contribution					Amount	4 750
General & Unrestricted						1,75 <u>0</u>
Name						
KAISER WOODLAND SCHOOLS FOU	NDATION					
Street PO BOX 11333						
City		State	Zip Code	Foreign Count	гу	
COSTA MESA		CA	92627			
Relationship	Foundation Status					
N/A	509(a)(1)				A	
Purpose of grant/contribution General & Unrestricted					Amount	10,000
						10,000
Name						
KIDSINGERS Street						
3947 E LA PALMA AVE						
City		State	Zip Code	Foreign Count	ry	*
ANAHEIM		CA	92807			
Relationship	Foundation Status					
N/A Purpose of grant/contribution	509(a)(2)				Amount	
General & Unrestricted					Amount	5,000
						0,000
Name						
LANCE ARMSTRONG FOUNDATION Street				<del></del>		
P O BOX 6003						
City		State		Foreign Count	ту	
ALBERTLEA	1	MN	56007			
Relationship	Foundation Status					
N/A Purpose of grant/contribution	509(a)(1)	<del></del>			Amount	
General & Unrestricted					,	350

#### Name MONTANA NATIONAL GUARD FAMILY SUPPORT FUND

Street PO BOX 4789

FORT HARRISON **Foundation Status** Relationship

Purpose of grant/contribution General & Unrestricted

City

509(a)(1)

State Zip Code

59636

MT

Foreign Country

**Amount** 

1,000

Continuation of Part XV, Line Recipient(s) paid during the year	e 3a (990-PF) -	Gran	ts and Con	tributions Paid	During the	e Year
Name						
MONTEREY PENINSULA FOUNDATION	<u> </u>				_	
Street						
1 LOWER RAGSDALE DR City	I	State	Zip Code	Foreign Count	n,	
MONTEREY		CA	93940	Foreign Count	ıy	
Relationship	Foundation Status	<u> </u>	1000 10	<b>!</b>		
N/A	509(a)(1)					
Purpose of grant/contribution					Amount	
General & Unrestricted						25,000
Name						
MUSCULAR DYSTROPHY ASSOCIATION	<u>N</u>					
Street						
3300 E SUNRISE DR		04-4-	T	In		
City TUCSON		State AZ	<b>Zip Code</b> 85718	Foreign Count	гу	
Relationship	Foundation Status	AZ	100/10			
N/A	509(a)(1)					
Purpose of grant/contribution	[***(*/( . /				Amount	
General & Unrestricted						1,000
Name						
NORTH ORANGE CHRISTIAN CHURCH	1					
Street	•					
1001 E LINCOLN AVE						
City		State	Zip Code	Foreign Count	гу	
ORANGE		CA	92865			
Relationship	Foundation Status					
N/A	509(a)(1)				1	
Purpose of grant/contribution					Amount	2 200
General & Unrestricted	·				<u> </u>	2,000
Name						
OPTIMIST INTERNATIONAL FOUNDAT	ION - DOWNEY OPT	IMIST C	CLUB			
Street			•			
PO BOX 831		Ctata	Tin Code	Transian Caund		
City DOWNEY		State CA	<b>Zip Code</b> 90241	Foreign Count	гу	
Relationship	Foundation Status		190241			
N/A	509(a)(1)					
Purpose of grant/contribution	1000(0)(1)		······································		Amount	
General & Unrestricted						500
Name						
ORANGE COUNTY COMMUNITY FOUN	IDATION					
Street				<del></del> `		
4041 MACARTHUR BLVD STE 510						
City			Zip Code	Foreign Count	гу	
NEWPORT BEACH		CA	92660			
Relationship	Foundation Status					
N/A	509(a)(1)				1.	
Purpose of grant/contribution					Amount	2.500
General & Unrestricted						2,500
Name						
PACIFIC SYMPHONY						
Street						
3631 S HARBOR BLVD STE 100 City		State	Zip Code	English Court		
SANTA ANA		CA	92704	Foreign Count	ıy	
Relationship	Foundation Status		102104		·	
N/A	509(a)(2)					
Purpose of grant/contribution	··· · · · · · · · · · · · · · · · · ·	_			Amount	
General & Unrestricted						10,000

Continuation of Part XV, Lin	e 3a (990-PF) -	Gran	ts and Con	tributions Paid	During the Year
Recipient(s) paid during the year					
Name					
PERFORMING ANIMAL WELFARE SOC	CIETY				
Street					
PO BOX 849 City		State	Zip Code	Foreign Count	
GALT		CA	95632	oreign Count	· <b>y</b>
Relationship	Foundation Status		1,,,,,,	L	
N/A	509(a)(1)				
Purpose of grant/contribution					Amount
General & Unrestricted	٠				2,000
Name					
POSTPARTUM EDUCATION FOR PARI	ENTS				
Street					
PO BOX 261 City		State	Zip Code	Foreign Count	
SANTA BARBARA		CA	93116	i oreign count	· <b>,</b>
Relationship	Foundation Status	-	•	•	
N/A	509(a)(2)				
Purpose of grant/contribution					Amount
Touch a Truck	<del></del>				50
Name					
SAN ANTONIO GOLF ASSOCIATION IN	IC			<u> </u>	
Street					
PO BOX 690330 City	· ···	State	Zip Code	Foreign Count	n/
SAN ANTONIO		TX	78269	Foreign Count	ıy
Relationship	Foundation Status		1.0200		
N/A	509(a)(2)				
Purpose of grant/contribution					Amount
General & Unrestricted		_			1,00
Name					
SANTA BARBARA FORESTERS					
Street					
4299 CARPINTERIA AVE City		State	Zip Code	Foreign Count	m.
CARPINTERIA		CA	93013	Foreign Count	ıy
Relationship	Foundation Status	0/1	100010	<b>.</b>	
N/A	509(a)(1)				
Purpose of grant/contribution					Amount
General & Unrestricted					60
Name					
SANTA YNEZ VALLEY PEOPLE HELPII	NG PEOPLE				
Street					
545 N ALISAL RD 10			T=- 0 1	- Im	
City		State	Zip Code	Foreign Count	ry
SOLVANG Relationship	Foundation Status	CA	93463		· · · · · · · · · · · · · · · · · · ·
N/A	509(a)(1)				
Purpose of grant/contribution	1000(0)(1)				Amount
SYV Polo					1,50
Name					
SEGERSTROM CENTER FOR THE AR	TS				
Street				·	
600 TOWN CENTER DR		<del>,</del>	<b></b>		
City			Zip Code	Foreign Count	гу
COSTA MESA	Taundation Otat	CA	92626		
Relationship N/A	Foundation Status				
Purpose of grant/contribution	509(a)(2)			· · · · · · · · · · · · · · · · · · ·	Amount
General & Unrestricted					7,50

**A**mount

1,000

Purpose of grant/contribution

General & Unrestricted

Amount

5,040

Purpose of grant/contribution

General & Unrestricted