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DLN: 93491156006073

OMB No 1545-0052

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

Open to Public

For	cale	endar year 2012, or tax year beginning 01-	01-2012 , and	d end	ing 12-31-	2012			
		Indation			A Employer id	entification numbe	r		
GC	יטט אטנ	PE MEDICAL FOUNDATION			95-0782640				
Num	ber and	d street (or P O box number if mail is not delivered to street address	s) Room/suite		B Telephone nu	mber (see instruction	s)		
		OAKS AVE			(626) 796-2226	5			
		n, state, and ZIP code ADENA, CA 91030			C If exemption	application is pending	J, check here ►		
	1 1		C = C = = = = = = = = = = = = = = = = =						
GC	песка	all that apply	f a former public chai rn	rity	2. Foreign o	ganizations, check he rganizations meeting e and attach computa	the 85% test, 🔒 🦳		
H C	neck ty	ype of organization	ate foundation						
Γ_{S}	ection	14947(a)(1) nonexempt charitable trust Other taxa			F 76				
		ket value of all assets at end J Accounting method	I Cash I ✓ Accr	rual		undation status was to n 507(b)(1)(A), checl			
		from Part II, col. (c), \$\frac{1}{5} \text{ Other (specify)} \\ \$\frac{1}{5} \text{ (Part I, column (d) musical part I)} \\ \$\frac{1}{5} \text{ (Part I)} \\ \$	_ t be on cash basıs.)			ation is in a 60-month			
Pa	rt I	Analysis of Revenue and Expenses (The			under section	n 507(b)(1)(B), checl	(d) Disbursements		
		total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))	(a) Revenue and expenses per books		et investment income	(c) Adjusted net income	for charitable purposes (cash basis only)		
	1	Contributions, gifts, grants, etc , received (attach schedule)							
	2	Check ► 🔽 if the foundation is not required to attach Sch B							
	3	Interest on savings and temporary cash investments	20		20	20			
	4	Dividends and interest from securities	744,582		744,582	744,582			
	5a	Gross rents							
	b	Net rental income or (loss)							
<u>Ф</u>	6a	Net gain or (loss) from sale of assets not on line 10	734,665						
Φ	b	Gross sales price for all assets on line 6a 3,263,349			724.665				
Revenue	7	Capital gain net income (from Part IV, line 2)			734,665	18,625			
_	8	Net short-term capital gain				10,023			
	10a	Gross sales less returns and allowances							
	ь	Less Cost of goods sold							
	c	Gross profit or (loss) (attach schedule)							
	11	Other income (attach schedule)			10,094				
	12	Total. Add lines 1 through 11	1,489,361		1,489,361	763,227			
	13	Compensation of officers, directors, trustees, etc							
,n	14	Other employee salaries and wages							
δ	15	Pension plans, employee benefits							
용	16a	Legal fees (attach schedule)							
Expense	b	Accounting fees (attach schedule)	16,588		8,294		8,294		
₹	C	Other professional fees (attach schedule)			77,329		20,625		
and Administrative	17	Interest							
∃ St	18	Taxes (attach schedule) (see instructions)	30,795		1,377				
<u>=</u>	19	Depreciation (attach schedule) and depletion							
Ą	20	Occupancy							
n D	21	Travel, conferences, and meetings							
	22	Printing and publications			2,459		5,738		
ğ		Total operating and administrative expenses.	0,137		2,133		3,730		
Operating	24	Add lines 13 through 23	153,534		89,459		34,657		
ö	25	Contributions, gifts, grants paid			55,155		1,141,926		
	26	Total expenses and disbursements. Add lines 24 and 25	1,295,460		89,459		1,176,583		
	27	Subtract line 26 from line 12			•				
	а	Excess of revenue over expenses and disbursements	193,901						
	ь	Net investment income (if negative, enter -0-)			1,399,902				
	С	Adjusted net income (If negative, enter -0-)				763,227			

Part I	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year			nd of year	
		(a) Book Value	(b) Bo	ok Value	(c) Fair Market Va	√ alue
1	Cash—non-interest-bearing	F60 466		728,8	916 720	28,816
2	Savings and temporary cash investments	569,466		720,0	316 /26	10,010
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 (attach schedule) (see page 15 of the					
	Instructions)					
7	Other notes and loans receivable (attach schedule)					
ام	Less allowance for doubtful accounts 🕨					
∯ 8	Inventories for sale or use					
Assets 6 8	Prepaid expenses and deferred charges					
10a	Investments—U S and state government obligations (attach schedule)					
Ь	Investments—corporate stock (attach schedule)	10,840,764	%	12,044,9	957 12,044	44,957
c	Investments—corporate bonds (attach schedule)	23,942	%	61,8	375 61	51,875
11	Investments—land, buildings, and equipment basis 🟲					
	Less accumulated depreciation (attach schedule) 🟲					
12	Investments—mortgage loans					
13	Investments—other (attach schedule)	14,160,795	%	14,878,6	694 14,878	⁷ 8,694
14	Land, buildings, and equipment basis 🟲					
	Less accumulated depreciation (attach schedule) 🟲					
15	Other assets (describe 🟲)	34,440	% 3	31,1	168 📆 31	31,168
16	Total assets (to be completed by all filers—see the					
	instructions Also, see page 1, item I)	25,629,407		27,745,5	510 27,745	ŧ5,510
17	Accounts payable and accrued expenses	10,710		7,6	630	
18	Grants payable	790,000		163,0	074	
∳ 19	Deferred revenue				\neg	
مدا 🖨	Loans from officers, directors, trustees, and other disqualified persons					
를 21 금 21	Mortgages and other notes payable (attach schedule)					
□ 22	Other liabilities (describe 🟲)	47,136	%	64,2	231	
23	Total liabilities (add lines 17 through 22)	847,846		234,9	935	
	Foundations that follow SFAS 117, check here 🕨 🔽					
.n	and complete lines 24 through 26 and lines 30 and 31.					
Fund Balances 25 26	Unrestricted	21,140,673		23,565,6		
호 25	Temporarily restricted	2,527,963		2,832,0		
器 26	Permanently restricted	1,112,925		1,112,9) 25	
핕	Foundations that do not follow SFAS 117, check here 🕨 🦵					
리	and complete lines 27 through 31.					
는 27	Capital stock, trust principal, or current funds				_	
28 29 30	Paid-in or capital surplus, or land, bldg , and equipment fund				_	
∯ 29	Retained earnings, accumulated income, endowment, or other funds				_	
전 30	Total net assets or fund balances (see page 17 of the					
₩.	instructions)	24,781,561		27,510,5	575	
31	Total liabilities and net assets/fund balances (see page 17 of					
	the instructions)	25,629,407		27,745,5	510	
Part I	Analysis of Changes in Net Assets or Fund Balances					
1	Total net assets or fund balances at beginning of year—Part II, column	(a) line 30 (must a	aree	\top		
-	with end-of-year figure reported on prior year's return)			. 1	24,781,	.561
2	Enter amount from Part I, line 27a			2	193,	
3	Other increases not included in line 2 (itemize)		 1953	3	2,698,	
4	Add lines 1, 2, and 3			. 4	27,673,	
5	Decreases not included in line 2 (itemize)		· · · · · · · · · · · · · · · · · · ·	5	163,	
6	Total net assets or fund balances at end of year (line 4 minus line 5)—			. 6	27,510,	

	90-PF (2012)	4 1 for Torrer Torre				Page 3
Part.	<u>va</u> Capital Gains an	d Losses for Tax on Inve	stment Incon	(b) How acquired	4	
		e kınd(s) of property sold (e g , re se, or common stock, 200 shs N		P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1 a	VARIOUS WHITTIER T	RUST COMPANY L/T (STATEM	ENT 17	P	2011-01-01	2012-12-31
ь	VARIOUS UNION BAN	K L/T (STATEMENT 17)		P	2011-01-01	2012-12-31
С С	VARIOUS UNION BAN	K L/T (STATEMENT 17)		Р	2011-01-01	2012-12-31
d	VARIOUS UNION BAN	K S/T (STATEMENT 17)		Р	2012-01-01	2012-12-31
е						
(e) Gross sales price	(f) Depreciation allowe (or allowable)	1	expense of sale		or (loss)) mınus (g)
a	744,	,148		5 36 ,6 2	1	207,527
ь	2,116,	,782		1,658,70	7	458,075
С С	252,	,914		202,47	6	50,438
d	149,	,505		130,88	0	18,625
<u>—</u>						
Co	mplete only for assets sho	owing gain in column (h) and owne	d by the foundat	ion on 12/31/69	(I) Gains (Col	(h) gain minus
		(j) Adjusted basis		xcess of col (ı)	col (k), but not	ess than -0-) or
	FMV as of 12/31/69	as of 12/31/69	ove	rcol (j), ıfany	Losses (fr	om col (h))
а						207,527
b						458,075
С						50,438
d						18,625
е						
2	Capital gain net income	or (net capital loss)		er in Part I , line 7 0 - in Part I , line 7	2	734,665
3	Net short-term capital g	ي gaın or (loss) as defined ın sectio	ns 1222(5) and	, (6)	2	734,003
	If gain, also enter in Par in Part I, line 8	rt I, line 8, column (c) (see instru	ctions) If(loss),	, enter -0 -	. 3	18,625
Dart	V Qualification Un	der Section 4940(e) for R	educed Tax (on Not Investme	l l	10,023
	nonal use by domestic priv on 4940(d)(2) applies, lea	vate foundations subject to the se ve this part blank	ection 4940(a) ta	ax on net investment	:income)	
		ection 4942 tax on the distribut qualify under section 4940(e) Do			eriod?	┌ Yes ┌ No
1 En	ter the appropriate amount	t in each column for each year, s	ee page 18 of the	ınstructions before	making any entries	
Base	(a) period years Calendar	(b) Adjusted qualifying distributions	((c) harıtable-use assets	(d) Distribution	
year (or tax year beginning in) 2011	1,357,020		26,687,649	(col (b) divided	0 05085
	2010	1,226,488		25,614,230		0 04788
	2009	1,115,446		22,891,079		0 04873
	2008	1,340,722		26,563,609		0 05047
	2007	1,178,319		29,504,899		0 03994
	•					
2	Total of line 1 column (d)			2	0 23787
				_	2	0 23707
A verage distribution ratio for the 5-year base period—divide the total on line 2 by 5, or the number of years the foundation has been in existence if less than 5 years					3	0 04757
4	Enter the net value of no	oncharitable-use assets for 2012	2 from Part X, line	e 5	4	25,422,512
5	Multiply line 4 by line 3				5	1,209,425
6	Enter 1% of net investn	nent income (1% of Part I, line 2	7b)		6	13,999
7	Add lines 5 and 6				7	1,223,424
8	Enter qualifying distribu	itions from Part XII, line 4			8	1,176,583
,		reater than line 7, check the box		<u> </u>	-	

	990-PF (2012)			age 4
	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the ins	tructio	ns)	
1 a	Exempt operating foundations described in section 4940(d)(2), check here T and enter "N/A" on line 1			
	Date of ruling or determination letter (attach copy of letter if necessary–see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		2	7,998
	here Fand enter 1% of Part I, line 27b			
c	Township on the 544 (downship on the 4047(a)/4) broads and broadly foundations and Chlore on the 20			
2	Add lines 1 and 2			
3	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			7,998
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0		2	7,998
6	C redits/Payments			,,,,,,
a	2012 estimated tax payments and 2011 overpayment credited to 2012 6a 27,013			
b	Exempt foreign organizations—tax withheld at source 6b			
c	Tax paid with application for extension of time to file (Form 8868) 6c 2,000			
d	Backup withholding erroneously withheld 6d			
7	Total credits and payments Add lines 6a through 6d		2	9,013
8	Enter any penalty for underpayment of estimated tax. Check here 🔽 if Form 2220 is attached 🕏 8			12
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10			1,003
11	Enter the amount of line 10 to be Credited to 2013 estimated tax 1,003 Refunded 11			
Par	t VII-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did		Yes	No
	ıt participate or intervene in any political campaign?	. 1a		No
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 of			
	the instructions for definition)?	. 1b		No
	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.			
C	Did the foundation file Form 1120-POL for this year?	1c		No
d	Enter the amount (If any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation \$ (2) On foundation managers \$ \$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
2	on foundation managers 🕨 \$	_		N.
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	. 2		No
-	If "Yes," attach a detailed description of the activities.			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	. 3		No
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		No
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		No
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		No
_	If "Yes," attach the statement required by General Instruction T.	Ť		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions			
	that conflict with the state law remain in the governing instrument?	. 6	Yes	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
	► <u>CA</u>			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney			
	General (or designate) of each state as required by General Instruction G? If "No," attach explanation .	8b	Yes	<u> </u>
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3)			
	or 4942(j)(5) for calendar year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)?			
	If "Yes," complete Part XIV	. 9		No
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		No

Form	n 990-PF (2012)		Р	age 5
Pai	rt 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		No
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		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	
	Website address ► <u>N/A</u>			
14	The books are in care of ►WHITTIER TRUST COMPANY Telephone no ►(626)441-	5188	
	Located at ▶625 FAIR OAKS AVENUE SOUTH PASADENA CA ZIP+4 ▶91030			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here			<u> </u>
13	and enter the amount of tax-exempt interest received or accrued during the year		•	- ,
	<u> </u>			
16	At any time during calendar year 2012, did the foundation have an interest in or a signature or other authority over		1	T
	a bank, securities, or other financial account in a foreign country?	16		No
	See instructions for exceptions and filing requirements for Form TD F 90-22 1 If "Yes", enter the name of the foreign country			
Pai	rt VIII-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?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes V No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes V 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"			
	ıf 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) Yes 🔽 No			
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 page 20 of the instructions)?	1b		No
	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		No
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?			
L	If "Yes," list the years 20, 20, 20, 20 Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
D	(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		No
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here	20		140
·	> 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at			
Sa	any time during the year?			
h	If "Yes," did it have excess business holdings in 2012 as a result of (1) any purchase by the foundation			
U	or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved			
	by the Commissioner under section $4943(c)(7)$) to dispose of holdings acquired by gift or bequest, or (3)			
	the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine			
	if the foundation had excess business holdings in 2012.).	3b		No
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	<u> </u>		.
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2012?	4b		No

	rt VII-B Statements Rega	rdii	na Activities for	· WŁ	ich Form 4720	Max	Be Required (cont	inue	d)	r age O
5a	During the year did the foundation		_		11011 1 01111 47 20	114)	be required (come	,,,,,,,,	i,	
	(1) Carry on propaganda, or other		•		islation (section 49	45(e))?	- No		
							••	110		
	(2) Influence the outcome of any specific public election (see section 4955), or to carry									
	on, directly or indirectly, any voter registration drive?									
	(4) Provide a grant to an organiza					cert		110		
	in section 509(a)(1), (2), or (7 Na		
						•	Tes	NO		
	(5) Provide for any purpose other						□ v ₂₂ □	7 Na		
L	educational purposes, or for t									
D	If any answer is "Yes" to 5a(1)-(₈₁₋
	Regulations section 53 4945 or i								5b	No
	Organizations relying on a curren									
С	If the answer is "Yes" to question				•		-			
	tax because it maintained expend					•	Yes	✓ No		
	If "Yes," attach the statement requ									
6a	Did the foundation, during the yea	r, re	ceive any funds, dire	ectly	or indirectly, to pay	prer				
	a personal benefit contract?						\ \ Yes \	√ No		
b	Did the foundation, during the yea	r, pa	y premiums, directl	y or ı	ndirectly, on a perso	onal	benefit contract?		6b	No
	If "Yes" to 6b, file Form 8870.									
7a	At any time during the tax year, v	as t	he foundation a part	y to a	a prohibited tax shel	tert	ransaction? TYes F	√ No		
b	If yes, did the foundation receive	any	proceeds or have an	ıy ne	t income attributable	e to t	the transaction?		7b	No
Da	Information About	t Of	ficers, Directors	s, Tı	rustees, Founda	atio	n Managers, Highly	Paid	Emp	loyees,
	and Contractors									
_1	List all officers, directors, trustees									
	(a) Name and address	(b)	Title, and average hours per week		c) Compensation If not paid, enter		(d) Contributions to mployee benefit plans			e account,
	(a) Name and address	de	evoted to position	\ `.	-0-)		deferred compensation	ot	her allo	owances
See	Additional Data Table									
		1								
				<u> </u>						
_2	Compensation of five highest-paid	emp	oloyees (other than	thos	e included on line 1–	-see		nter "I	NONE."	·
(-)	Name and address of each ample		(b) Title, and aver	age			(d) Contributions to	(0)	=vnana	0.000unt
(a,	Name and address of each employ paid more than \$50,000	ree	hours per week		(c) Compensation	n	employee benefit plans and deferred			e account, owances
			devoted to positi	on			compensation			
NON	IE									
]							
			1							
			1							
			-							
								ļ		
			_							
Tota	I number of other employees hald o	ver	\$50 000				▶	I		

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

3 Five highest-paid independent contractors for professional	services (see instructions). If none, enter "NONE".	
(a) Name and address of each person paid more than \$50,000	O (b) Type of service	(c) Compensation
UNION BANK OF CALIFORNIA NA TRUSTEE	TRUSTEE	17,989
P O BOX 45174 SAN FRANCISCO,CA 94145		
WHITTIER TRUST COMPANY	ADMIN & ACCOUNTING	20,625
625 FAIR OAKS AVE 360 SOUTH PASADENA,CA 91030	10.00	
LILY WONG	ACCOUNTING	3,648
776 EAST GREEN STREET STE 230 PASADENA,CA 91101		
LEE SPERLING HISAMUNE AC	AUDITING AND TAX	11,700
550 NORTH BRAND BLVD STE 525 GLENDALE,CA 91203		
METROPOLITAN WEST CAPITAL MANAGEMENT LLC	INVESTMENT COUNSELOR	59,340
610 NEWPORT CENTER DRIVE STE 1000 NEWPORT BEACH,CA 92660		
Total number of others receiving over \$50,000 for professional s	ervices	
Part IX-A Summary of Direct Charitable Activiti		
organizations and other beneficiaries served, conferences convened, research p		Expenses
1CHILDREN'S HEALTH INITIATIVE - CONTRIBUTION MA CHALLENGE GRANT TO BE ABLE TO MAINTAIN HEALTH		500,000
2COMMUNITY HEALTH COUNCIL'S INC - CONTRIBUTIO CARE INTITATIVE	N MADE TO PROVIDE ENHANCED DIABETES	100,000
3 PARTNERS IN CARE FOUNDATION - CONTRIBUTION MA CHRONIC DISEASE SELF MANAGEMENT	ADE TO PROGRAM FOR HEALTHIER LIVING	100,000
4WILMINGTON COMMUNITY CLINIC - CONTRIBUTION M MINORITY, AND UNINSURED PATIENTS	ADE TO PROVIDE CARE TO LOWINCOME,	90,000
Part IX-B Summary of Program-Related Investr	ments (see instructions)	
Describe the two largest program-related investments made by the foundat	tion during the tax year on lines 1 and 2	A mount
1		
2		
All other program-related investments See page 24 of the ins	structions	
3		

Pa	rt X Minimum Investment Return (All domestic foundations must complete this part. Fo see instructions.)	reign	foundations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc ,		
	purposes		
а	A verage monthly fair market value of securities	1a	25,116,482
b	A verage of monthly cash balances	1b	693,175
C	Fair market value of all other assets (see instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	25,809,657
e	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	25,809,657
4	Cash deemed held for charitable activities $$ Enter 1 $$ 1/2 $$ % of line 3 (for greater amount, see		
	instructions)	4	387,145
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	25,422,512
6	Minimum investment return. Enter 5% of line 5	6	1,271,126
Pai	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operations foreign organizations check here \blacktriangleright and do not complete this part.)	atıng	foundations and
1	Minimum investment return from Part X, line 6	1	1,271,126
2a	Tax on investment income for 2012 from Part VI, line 5 2a 27,998		
b	Income tax for 2012 (This does not include the tax from Part VI) 2b		
c	Add lines 2a and 2b	2c	27,998
3	Distributable amount before adjustments Subtract line 2c from line 1	3	1,243,128
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	1,243,128
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	7	1,243,128
Par	Qualifying Distributions (see instructions)	•	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	1,176,583
b	Program-related investments—total from Part IX-B	1b	
2	A mounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc ,		
	purposes	2	
3	A mounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	За	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	1,176,583
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	ıncome Enter 1% of Part I, line 27b (see instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	1,176,583

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

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

	olidistributed flicollie (see liistid	ictions)			
		(a) Corpus	(b) Years prior to 2011	(c) 2011	(d) 2012
1	Distributable amount for 2012 from Part XI, line 7				1,243,128
	Undistributed income, if any, as of the end of 2012				
	Enter amount for 2011 only				
	Total for prior years 20, 20, 20				
3					
	From 2007				
	From 2008				
	From 2009				
	From 2010				
	From 2011				
f	Total of lines 3a through e	75,168			
	Qualifying distributions for 2012 from Part				
	XII, line 4 🕨 \$ 1,176,583				
а	Applied to 2011, but not more than line 2a				
	Applied to undistributed income of prior years				
	(Election required—see instructions)				
C	Treated as distributions out of corpus (Election				
	required—see instructions)	0			
d	Applied to 2012 distributable amount				1,176,583
е	Remaining amount distributed out of corpus				
5	Excess distributions carryover applied to 2012	66,545			66,545
	(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:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	8,623			
b	Prior years' undistributed income Subtract				
С	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				
a	Subtract line 6c from line 6b Taxable amount —see instructions				
_	Undistributed income for 2011 Subtract line				
_	4a from line 2a Taxable amount—see				
	instructions				
f	Undistributed income for 2012 Subtract				
	lines 4d and 5 from line 1 This amount must				,
_	be distributed in 2013				
′	A mounts treated as distributions out of corpus to satisfy requirements imposed by				
	section 170(b)(1)(F) or 4942(g)(3) (see				
	instructions)				
8	Excess distributions carryover from 2007 not				
	applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2013.	8,623			
10	Subtract lines 7 and 8 from line 6a	5,025			+
	Excess from 2008				
	Excess from 2009				
	Excess from 2010				
	Excess from 2011 8,623				
	Excess from 2012				
	<u> </u>		1		1

P	art XIV Private Operating Fou	ndations (see ın	structions and Pa	art VII-A, questic	on 9)		
1a	If the foundation has received a ruling or of foundation, and the ruling is effective for 2						
b	Check box to indicate whether the organiz	licate whether the organization is a private operating foundation described in section Γ 4942(j)(3) or Γ 4942(j)(5)					
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total	
	income from Part I or the minimum investment return from Part X for each	(a) 2012	(b) 2011	(c) 2010	(d) 2009	(-)	
	year listed						
	85% of line 2a						
С	Qualifying distributions from Part XII, line 4 for each year listed						
d	Amounts included in line 2c not used directly for active conduct of exempt activities						
е	Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c						
3	Complete 3a, b, or c for the					_	
	alternative test relied upon						
а	"Assets" alternative test—enter						
	(1) Value of all assets(2) Value of assets qualifying						
	under section 4942(J)(3)(B)(I)						
b	"Endowment" alternative test— enter 2/3 of minimum investment return shown in						
_	Part X, line 6 for each year listed						
С	"Support" alternative test—enter (1) Total support other than gross						
	investment income (interest,						
	dividends, rents, payments						
	on securities loans (section 512(a)(5)), or royalties)						
	(2) Support from general public						
	and 5 or more exempt organizations as provided in						
	section 4942(j)(3)(B)(iii)						
	(3) Largest amount of support					_	
	from an exempt organization (4) Gross investment income						
Pa	rt XV Supplementary Information	n (Complete th	his part only if	the organization	on had \$5.000 c	or more in	
	assets at any time during	the year—see i					
1	Information Regarding Foundation Manag List any managers of the foundation who h		rathan 20% of that	otal contributions r	accured by the foun	dation	
a	before the close of any tax year (but only					adcion	
b	List any managers of the foundation who o				ly large portion of th	ne	
	ownership of a partnership or other entity) of which the foundation has a 10% or greater interest						
2	Information Regarding Contribution, Gran	t, Gift, Loan, Schola	ırship, etc., Progran	ns:			
	Check here 📂 if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under						
	other conditions, complete items 2a, b, c, and d						
-	a The name, address, and telephone number or e-mail of the person to whom applications should be addressed						
u	JULIE LYTLE NESBIT						
	625 FAIR OAKS AVE 360						
	SOUTH PASADENA, CA 91030						
b	The form in which applications should be			ls they should inclu	ıde		
	NO SPECIAL FORMATS REQUIRED BY	HE FOUNDATION	l				
C	Any submission deadlines						
_	NONE	auch ac hu =====	ahigal areas -t- 1	abla fialds liveds 1	Inatitution		
a	Any restrictions or limitations on awards, factors	such as by geograp	onicai areas, charit	avie lielas, KINAS OF	mistitutions, or othe	: I	
	NONE						

See Additional Data Table Total Total Approved for future psy/ment Total T	3 Grants and Contributions Paid	If recipient is an individual,		uture Payment	
Total	Recipient	show any relationship to		Purpose of grant or contribution	A mount
Total		or substantial contributor	recipient		
	a Paid during the year	any foundation manager or substantial contributor		Contribution	
B Approved for future payment		<u> </u>			1,141,92
	Total	1	1		

P		-A Analysis of Income-Produc	ina Activitie				r age 2.2
		s amounts unless otherwise indicated		usiness income	Excluded by section	n 512, 513, or 514	(e)
1	Program	n service revenue	(a) Business code	(b) A mount	(c) Exclusion code	(d) A mount	Related or exempt function income (See instructions)
2 3 4 5 6 7 8 9	a b c d e f g Fees a Membe Interest of Dividen Net renta Debt- b Not do Net renta Other III Gain or (Net inc Gross p Other r b	and contracts from government agencies rship dues and assessments on savings and temporary cash investments ads and interest from securities tal income or (loss) from real estate financed property ebt-financed property al income or (loss) from personal property nivestment income loss) from sales of assets other than inventory ome or (loss) from special events profit or (loss) from sales of inventory evenue a		Amount	14 14 14	20 744,582	Instructions)
13 P	Subtota Total. A (See w art XVI	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Orksheet in line 13 instructions to verify B Relationship of Activities to Explain below how each activity for wh the accomplishment of the foundation's instructions) THE INCOME GENERATED BY THE INTHE SOLE MEANS TO ACCOMPLISH T LIMITED FINANCIAL RESOURCES AN	calculations) o the Accom ich income is re s exempt purpo: TEREST AND D THE FOUNDATI	plishment of E ported in column (ses (other than by IVIDEND FROM S ON'S GOAL OF P	Exempt Purpos (e) of Part XVI-A c providing funds for SECURITIES, AND ROVIDING MEDIO	ontributed importa r such purposes) (O THE SALE OF SE CAL SERVICES T	1,489,361 ntly to See CURITIES IS

****** Signature of officer or trustee Date Title	Form 990-PF	(2012)							Pa	ge 13
SOLIC of the Code (other than section 501(cl(3) expansions) or an section 527, eleting to posterol organizations a Transfers from the reporting foundation to a nonchantable exempt organization of (3) Cash. (2) Other assets. (3) Cash. (4) Other transactions (1) Sales of assets to a nonchantable exempt organization. (3) Rental of facilities, equipment, or other assets. (4) Reimbursement arrangements. (5) Loans or loan quarantees. (6) Heritamisement arrangements. (7) Substitutes, equipment, making lists, chief essets, or paid employees. (8) Loans or loan quarantees. (9) Ferformance of services or membership or fundrising solicitations. (1) Sales of assets to an onchantable exempt organization. (2) Fundamental organizations. (3) Loans or loan quarantees. (4) Reimbursement arrangements. (5) Loans or loan quarantees. (6) Loans or loan quarantees. (7) Loans or loan quarantees. (8) Loans or loan quarantees or services or membership or fundrising solicitations. (9) Ferformance of services or membership or fundrising solicitations. (9) Loans of the above is "Yes," complete the following schedule Column (b) should allows show the fair market value of the goods, other assets, or services received use in any transaction or sharing arrangement, shown in column (d) the value of the goods, other assets, or services received described in section 501(c) of the Code (other than section 501(c)(d)) or in section 527? (a) Italy the container of described in section 501(c) of the Code (other than section 501(c)(d)) or in section 527? (b) Type of organization (c) Description of elatomorphy. (a) Italy a possible and steppiny, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and hellef, its true, correct, and completed. Declaration of preparer (other than biopayer of fluctions) asset on all information of visich preparer has any knowledge. Printy (2)	Part XVII					actions	and Relationships Wit	h		
a Transfers from the reporting foundation to a nonchantable exempt organization of (3) Cash.	1 Did the orga	anızatıon dırectly or ındırectly	engage in a	any of the following	g with any other orga	nızatıon desc	ribed in section		Yes	No
(2) Other assets. (2) Other transactions (3) Sales of assets to a nonchantable exempt organization. (3) Purchase of assets from a nonchantable exempt organization. (3) Rental of facilities, equipment, or other assets. (4) Rental continuement arrangements. (5) Loans or loan guarantees. (6) Performance of services or membership or fundrasing solicitations. (7) Exemplify the answer to any of the above is "Yes," complete the following schedule Column (b) should always show the fair market value in the post, other assets, or paid employees. (8) Loans or loan guarantees. (9) Inc. Bio. (9) Amount mobile of the solicities, equipment, making lists, other assets, or paid employees. (9) Inc. Bio. (9) Amount mobile of the solicities, of the assets, or paid employees. (10) Inc. Bio. (11) Annual mobile of the solicities of particular distance that is a service or particular of the solicities of the goods, other assets, or services green by the reporting domation if the foundation received less than fair market value in any transaction or sharing arrangements, show in column (d) the value of the goods, other assets, or services received (10) Inc. Bio. (10) Amount mobile of the Code (other than section 501(c)(3)) or in section 5272. (11) Yes, or particular distance that it have examined this return, including accompanying schedules and statements, and the best of my knowledge and belief, it is true, correct, and complete beclaration of prepare (other than taxpayer or flouriery) is based on all information of which prepare has any knowledge. Print yes, complete the following and belief, it is true, correct, and complete beclaration of prepare (other than taxpayer or flouriery) is based on all information of which prepare has any knowledge. Print yes from y knowledge and belief, it is true, correct, and complete beclaration of prepare (other than taxpayer or flouriery) is based on all information of which prepare has any knowledge. Print yes from the solicities of the contraction of prepare (other than taxpa	501(c) of th	ne Code (other than section !	501(c)(3) o	rganizations) or in s	section 527, relating t	o political org	anizations?			
(2) Other assets. Ba(2) No b Other transactions 18(2) No 10 State of assets to a nonchantable exempt organization. 18(1) No (2) Purchases of assets from a nonchantable exempt organization. 18(2) No (3) Renabursement arrangements. 18(2) No (4) Reimbursement arrangements. 18(3) No (5) Loses or loan guarantees. 18(3) No (5) Performance of services or membership or fundrasing solicitations. 18(0) No c Sharing of fecilities, equipment, mailing lists, other assets, or paid employees. 1c No d If the answer or any of the aboves in Yes's, Complete the following schedule Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting fundation If the fundation received less than fair market value of the goods, other assets, or services given by the reporting fundation If the fundation received less than fair market value of the goods, other assets, or services given by the reporting fundation If the fundation received less than fair market value of the goods, other assets, or services given by the reporting fundation If the fundation received less than fair market value in any transaction or sharing a rangement, shown in column (d) the value of the goods, other assets, or services given by the reporting fundation If the fundation received less than fair market value of the goods, other assets, or services given by the reporting fundation of the value of the goods, other assets, or services exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 5277. Yes No b If Yes Complete the following schedule (a) Name of organization (b) Type of organization (c) Description of relationships If Yes Complete the following schedule (b) Type of organization (c) Description of relationships If yes No	a Transfers	from the reporting foun	datıon to	a noncharıtable	exempt organiza	tion of				
Sign Solution So	(1) Cash	1						1a(1)		No
(3) Putchases of assets to a noncharitable exempt organization. (3) Putchases of assets from a noncharitable exempt organization. (4) Reimbursement arrangements. (5) Loans or forcitities, equipment, or other assets. (5) Loans or loan guarantees. (6) Performance of services or membership or fundraising solicitations. (6) Performance of services or membership or fundraising solicitations. (6) Performance of services or membership or fundraising solicitations. (7) Individual organization of the season of	(2) Othe	rassets						. 1a(2)		No
(2) Purchases of assets from a noncharitable exempt organization. (3) Rental of facilities, equipment, or other assets. (4) Reimbursement arrangements. (5) Loans or loan guarantees. (6) Performance of services or membership or fundrasing solicitations. (7) Exemplance of services or membership or fundrasing solicitations. (8) Performance of services or membership or fundrasing solicitations. (8) Performance of services or membership or fundrasing solicitations. (9) Performance of services or membership or fundrasing solicitations. (10) Performance of services or membership or fundrasing solicitations. (10) Performance of services or membership or fundrasing solicitations. (10) Performance of services or membership or fundrasing solicitations. (11) Interest of the pools, other assets, or services given by the reporting fundration if the foundation received less than fair market value or the pools, other assets, or services year by the reporting fundration if the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received (a) Une to (b) Amount involved (c) Rome of monchamable exempt organization (d) Description of transfers, transactions, and sharing arrangements described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? (a) Name of organization (b) Trype of organization (c) Description of relationship (a) Name of organization of minch preparer has any knowledge and belief, it is true, correct, and complete Declaration of preparer (other than tax payer or fiduciary) is based on all information of which preparer has any knowledge. Proparer (a) Under penaltities of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than tax payer or fiduciary) is based on all information of which preparer has any knowle	b Other tra	nsactions								
(3) Rental of facilities, equipment, or other assets.	(1) Sales	s of assets to a noncha	ntable exe	empt organizati	on			1b(1)		No
(4) Reimbursement arrangements. (5) Loans or loan guarantees. (6) Performance of services or membership or fundrarising solicitations. (7) Performance of services or membership or fundrarising solicitations. (8) Performance of services or membership or fundrarising solicitations. (9) Performance of services or membership or fundrarising solicitations. (10) Performance of services or membership or fundrarising solicitations. (10) Performance of services or membership or fundrarising solicitations. (10) Performance of services or membership or fundrarising solicitations. (10) Performance of services or membership or fundrarising solicitations. (10) Performance of services or membership or fundrarising solicitations. (10) Performance of services or servic	(2) Purc	hases of assets from a	noncharit	able exempt org	ganızatıon			1b(2)		No
(5) Loans or loan guarantees. (6) Performance of services or membership or fundreising solicitations. (7) Sharing of facilities, equipment, mailing lists, other assets, or paid employees. (8) Lie Mo d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (a) Line No. (b) Amount involved. (c) Name of nondaniable exempt organization. (d) Description of itemsfers, transactions, and sharing arrangements. 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax—exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? (a) No. 1b(5) No. (b) Implication (d) Amount involved (e) Name of nondaniable exempt organization of itemsfers, transactions, and sharing arrangements of described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? (a) No. 1c(c) Description of relationship 1c(d) Description of itemsfers, transactions, and sharing arrangements of the section of preparations of the section of preparations of the section of preparation of relationship. (a) Name of organization (b) Type of organization (c) Description of relationship (c) Description of relationship (d) Description of itemsfers, transactions, and sharing arrangements of the section of preparations of the section of preparation of relationship. (a) Implication of vivial properties and the section of preparation of preparation of which preparation of which preparation of vivial preparat	(3) Rent	al of facilities, equipme	nt, or othe	rassets				1b(3)		No
(6) Performance of services or membership or fundraising solicitations. 2 Sharing of facilities, equipment, mailing lists, other assets, or paid employees. 3 It It a No. 1c No. N	(4) Reim	bursement arrangemen	ts					. 1b(4)		No
c Shanng of facilities, equipment, mailing lists, other assets, or peid employees. d If the answer to any of the above is "Yes," complete the following schedule Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation if the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received (a) Line No (b) Amount involved (c) Rame of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)) and the section 501(c) of the Code (other than secti	(5) Loan	s or loan guarantees.						. 1b(5)		No
al If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services green by the reporting foundation if If the foundation received least him is market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (a) Line No (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements. 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax—exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?	(6) Perfoi	rmance of services or m	embershi	p or fundraising	solicitations			1b(6)		No
of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received (a) Line No (b) Amount invoked (c) Name of noncharidable exempt organization (d) Description of transfers, transactions, and sharing arrangements (d) Description of transfers, transactions, and sharing arrangements (e) Line No (b) Amount invoked (c) Name of noncharidable exempt organizations (d) Description of transfers, transactions, and sharing arrangements (e) Line No (f) Description of transfers, transactions, and sharing arrangements (g) Line No (h) Amount invoked (h) Amount invoked (h) Type of organization (h) Type of organization (h) Description of relationship (h) Descriptio	c Sharing o	f facılıtıes, equipment, r	naılıng lıs	ts, other assets	s, or paid employe	es		1c		No
2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?	of the god	ods, other assets, or sei	vices giv	en by the report	ting foundation It	the founda	ition received less than fair	market value		
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?	(a) Line No	(b) Amount involved	(c) Name	of noncharitable ex	kempt organization	(d) Desc	cription of transfers, transactions, a	and sharing arra	ngemer	nts
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?										
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?										
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?										
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?										
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?	+									
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?										
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?										
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?										
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?										
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described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?										
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?										
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?										
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?	2- I- th- f									
the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge ****** 2013-06-05 ****** Signature of officer or trustee Date Title	described	in section 501(c) of the complete the following s	e Code (o chedule	ther than section	on 501(c)(3)) or	n section 5	527?		es F	, No
the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge ****** 2013-06-05 ****** Signature of officer or trustee Date Title										
the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge ****** 2013-06-05 ****** Signature of officer or trustee Date Title										
the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge ****** 2013-06-05 ****** Signature of officer or trustee Date Title										
Print/Type preparer's name	Sign bas	best of my knowledge a ed on all information of *****	nd belief, which pre	it is true, corre	ct, and complete nowledge 2013-06-05	Declaratio	n of preparer (other than tax	payer or fidu	s this ret	urn
Paid Preparer Use Only Frank M Saito CPA Firm's name Black if self-employed ▶ □ Firm's EIN ▶ Phono po. (818) 507-6645		Despt/T		D. w.a. w	not	Date	PT	I N		
Preparer Use Conly LEE SPERLING HISAMUNEAC Firm's EIN From State Firm's Name Firm's EIN From State Firm's EIN From S			iidiile					P001906	559	
Use Only 550 NORTH BRAND BLVD STE 525 Phono po. (818) 507-6645	Paid	Frank M Saito CPA		Frank M Sar	TO CPA					
Phono no. (818) 507-6645	Use	Firm's name ►					Firm's EIN ►			
Firm's address F GLENDALE, CA 91203	Only		550 N	ORIH BRAND	BLVD STE 525					
· · · · · · · · · · · · · · · · · · ·		Firm's address ▶	GLEN	DALE,CA 912	203		Phone no (818) 50	7-6645		

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

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) Expense account, other allowances
ALEXANDER LI	Director	0		
625 FAIR OAKS AVE 360 SOUTH PASADENA,CA 91030	5 0 0			
CYNTHIA TRIBULL	Director	0		
625 FAIR OAKS AVE 360 SOUTH PASADENA,CA 91030	5 00			
JOHN QUINN	Treasurer	0		
625 FAIR OAKS AVE 360 SOUTH PASADENA,CA 91030	5 0 0			
LYNN YONEKURA	Director	0		
625 FAIR OAKS AVE 360 SOUTH PASADENA,CA 91030	5 00			
ERNEST A BRYANT III	Director	0		
625 FAIR OAKS AVE 360 SOUTH PASADENA,CA 91030	5 0 0			
THOMAS WACHTELL	Director	0		
625 FAIR OAKS AVE 360 SOUTH PASADENA,CA 91030	5 00			
PHILIP V SWAN	Director	0		
625 FAIR OAKS AVE 360 SOUTH PASADENA,CA 91030	5 00			
MICHAEL SEGAL	Director	0		
625 FAIR OAKS AVE 360 SOUTH PASADENA,CA 91030	5 00			
HOWARD KAHN	Director	0		
625 FAIR OAKS AVE 360 SOUTH PASADENA,CA 91030	5 00			
THOMAS HUDNUT	Director	0		
625 FAIR OAKS AVE 360 SOUTH PASADENA,CA 91030	5 0 0			
J PATRICK WHALEY	SECRETARY 5 00	0		
625 FAIR OAKS AVE 360 SOUTH PASADENA,CA 91030				
ROBERT E TRANQUADA MD	President	0		
625 FAIR OAKS AVE 360 SOUTH PASADENA,CA 91030	5 00			

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

			and rear or Approved for i	
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	A mount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
PLANNED PARENTHOOD 1045 N LAKE AVE PASADENA,CA 91104	NONE	PAID	TO PROVIDE FUND FOR START UP OPERATING COST FOR NEW CENTER	75,000
HOUSE RESEARCH INSTITUTE 2100 WEST THIRD STREE LOS ANGELES,CA 90057	NONE	PAID	TO FUND HEARING PROGRAM FOR DISADVANTAGED CHILDREN	25,000
SABAN FREE CLINIC 8405 BEVERLY BLVD LOS ANGELES,CA 90048	NONE	PAID	TO PROVIDE MEDICAL CARE ASSISTANCE	30,000
WESTSIDE NEIGHBORHOOD CLINIC 2125 SANTA FE AVE LONG BEACH,CA 90810	NONE	PAID	TO PROVIDE PATIENT CARE SUPPORT	50,000
HEAR CENTER 301 E DEL MAR BLVD PASADENA,CA 91101	NONE	PAID	TO PROVIDE SUPPORT FOR INDIGENT PATIENTS	20,000
COMMUNITY HEALTH COUNCILS INC 3731 STOCKER STREET 201 LOS ANGELES,CA 90008	NONE	PAID	TO PROVIDE SUPPORT FOR ENHANCED DIABETES CARE INITIATIVE	100,000
WILMINGTON COMMUNITY CLINIC 1009 NORTH AVALON BLVD WILMINGTON,CA 90744	NONE	PAID	TO PROVIDE CARE TO LOW INCOME, MINORITY, AND UNINSURED PATIENTS	90,000
HARBOR COMMUNITY CLINIC 593 W 6TH STREET SAN PEDRO,CA 90731	NONE	PAID	FOR GENERAL OPERATING SUPPORT	90,000
WATTS HEATHCARE FOUNDATION 10300 SOUTH COMPTON AVE LOS ANGELES, CA 90012	NONE	PAID	TO PROVIDE SUPPORT FOR ELECTRONIC HEALTH RECORD SYSTEM	50,000
CHILDRENS HEALTH INITIATIVE 555 WEST 5TH STREET 29TH FLOOR LOS ANGELES,CA 90013	NONE	PAID	TO FUND A PORTION OF THE COST OF CHILDREN'S HEALTH CARE COVERAGE FOR MEMBERS AGES 6-18 IN THE HEALTHY KIDS PROGRAM	500,000
PARTNERS IN CARE FOUNDATION 732 MOTT STREET 150 SAN FERNANDO,CA 91340	NONE	PAID	TO FUND PROGRAM FOR HEALTHIER LIVING CHRONIC DISEASE SELF MANAGEMENT	100,000
HUNTINGTON MEMORIAL HOSPITAL 100 WEST CALIFORNIA PASADENA,CA 91109	NONE	PAID	TO REIMBURSE CERTAIN COST INCURRED BY THE HOSPITAL NOT OTHERWISE PAID FOR IN PROVIDING DISPENSARY SERVICES TO UNINSURED OR UNDERINSURED PATIENTS	11,926
Total				1,141,926

TY 2012 Accounting Fees Schedule

Name: GOOD HOPE MEDICAL FOUNDATION

EIN: 95-0782640

Software ID: 12000229

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING / BOOKKEEPING	16,588	8,294	0	8,294

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93491156006073

TY 2012 Contractor Compensation Explanation

Name: GOOD HOPE MEDICAL FOUNDATION

EIN: 95-0782640

Software ID: 12000229

Contractor	Explanation
WHITTIER TRUST COMPANY	FOUNDATION ADMINISTRATION INCLUDING GRANTS AND ACCOUNTING
UNION BANK OF CALIFORNIA NA TRUSTEE	TRUSTEE FEE
METROPOLITAN WEST CAPITAL MANAGEMENT LLC	PAID FOR INVESTMENT COUNSELOR SERVICES
LEE SPERLING HISAMUNE AC	AUDITING AND TAX
LILY WONG	ACCOUNTING SERVICES

TY 2012 Investments Corporate Bonds Schedule

Name: GOOD HOPE MEDICAL FOUNDATION

EIN: 95-0782640

Software ID: 12000229

Name of Bond	End of Year Book Value	End of Year Fair Market Value
UNITED AIRLINES PASS THRU CTF SER 1991-B	61,875	61,875

TY 2012 Investments Corporate Stock Schedule

Name: GOOD HOPE MEDICAL FOUNDATION

EIN: 95-0782640

Software ID: 12000229

Name of Stock	End of Year Book Value	End of Year Fair Market Value
UNITED CONTL HLDGS INC	1,894	1,894
COMMON STOCK (SEE STATEMENT 16)	12,043,063	12,043,063

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93491156006073

TY 2012 Investments - Other Schedule

Name: GOOD HOPE MEDICAL FOUNDATION

EIN: 95-0782640

Software ID: 12000229

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
AMERICAN INTM BD FD	FMV	6,379,852	6,379,852
AMERICAN CAPTIAL WORLD GROWTH AND INC FD	FMV	963,703	963,703
AMERICAN NEW WORLD FUND CL A	FMV	1,675,023	1,675,023
PIMCO FDS LOW DURATION FD INSTL CL	FMV	2,734,670	2,734,670
PIMCO FUNDS TOTAL RETURN FS INTS CL	FMV	3,125,446	3,125,446

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TY 2012 Other Assets Schedule

Name: GOOD HOPE MEDICAL FOUNDATION

EIN: 95-0782640

Software ID: 12000229

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
PREPAID FEDERAL EXCISE TAX	34,440	5,020	5,020
DIVIDEND RECEIVABLE		26,148	26,148

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TY 2012 Other Decreases Schedule

Name: GOOD HOPE MEDICAL FOUNDATION

EIN: 95-0782640

Software ID: 12000229

	Description	Amount
ì	ACCRUED DISTRIBUTION	163,074

TY 2012 Other Expenses Schedule

Name: GOOD HOPE MEDICAL FOUNDATION

EIN: 95-0782640

Software ID: 12000229

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
MISCELLANEOUS	4,034	1,210		2,824
INSURANCE	4,163	1,249		2,914

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TY 2012 Other Income Schedule

Name: GOOD HOPE MEDICAL FOUNDATION

EIN: 95-0782640

Software ID: 12000229

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
Other Investment Income	10,094	10,094	

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93491156006073

TY 2012 Other Increases Schedule

Name: GOOD HOPE MEDICAL FOUNDATION

EIN: 95-0782640

Software ID: 12000229

Description	Amount
UNREALIZED GAIN IN ASSET VALUES	1,908,187
ACCRUED DISTRIBUTION PAID	790,000

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TY 2012 Other Liabilities Schedule

Name: GOOD HOPE MEDICAL FOUNDATION

EIN: 95-0782640

Software ID: 12000229

Description	Beginning of Year - Book Value	End of Year - Book Value
DEFERRED TAX LIABLITY	47,136	64,231

efile GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 93491156006073

TY 2012 Other Professional Fees Schedule

Name: GOOD HOPE MEDICAL FOUNDATION

EIN: 95-0782640

Software ID: 12000229

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
TRUSTEE FEE - UNION BANK	17,989	17,989	0	0
CONSULTING FEE	59,340	59,340	0	0
ADMINISTRATIVE FEE - WTC	20,625	0	0	20,625

TY 2012 Taxes Schedule

Name: GOOD HOPE MEDICAL FOUNDATION

EIN: 95-0782640

Software ID: 12000229

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
TAXES - FEDERAL	29,418			
FOREIGN TAXES	1,377	1,377		

GOOD HOPE MEDICAL FOUNDATION

95-0782640

STATEMENT 17
FORM 990-PF, PART IV, LINES 1,a,b,c and d
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

Reported to the IRS is Sales Price of stocks, bonds etc. less commissions and option premiums

Cusip	Description (Box 8)	Stock or Other Syn	nbol <i>(Box 1d)</i>				
Quantity Sold	Date of Sale or Exchange	Date of Acquisition	Stocks Bonds, etc.	Cost or Other Basis	Wash Sale Loss Disallowed	Net Gain or Loss	Federal Income Tax Withheld	State Tax Withhel
(Box 1e)	(Box 1a)	(Box 1b)	(Box 2a)	(Box 3)	(Box 5)		(Box 4)	(Box 15
Short Term Sales 125509109	Reported on 10: CIGNA CORP	99-B	CI					
600.0000	01/20/2012	08/19/2011	27,559.51	25,180.32	0.00	2,379.19	0.00	0.0
354613101	FRANKLIN RE	S INC						
250.0000	01/20/2012	Various	25,369,01	24,792.62	0.00	576.39	. 0.00	0.0
751212101	RALPH LAUR	EN CORP	RL					
300.0000	02/10/2012	11/22/2011	51,743.87	42,855 00	0.00	8,888.87	0.00	0.0
806857108	SCHLUMBER	GER LTD	SLB					
300.0000	01/20/2012	Various	22,259,56	18,911.81	0.00	3,347.76	0.00	0.0
911312106	UNITED PARC	CEL SERVICE CL B	UPS					
300.0000	01/20/2012	. 09/29/2011	22,572.59	19,140.72	0.00	3,431.87	0.00	0.0
	Sales Reported on 8949, Part I, with	on 1099-B th Box A checked	149,504.54	130,880.47	0.00	18,624.08	0.00	0.0
ong Term Sales 655664100	Reported on 109		JWN					

Page 9 of 28

Payer's Name and Address: UNION BANK, N.A. PO BOX 45174 SAN FRANCISCO. CA 94145-0174

Account Number:
Recipient's Tax ID Number:
Payer's Federal ID Number:
Paver's State ID Number:

6701004200 XX-XXX2640 94-0304228

CA

Recipient's Name and Address: GOOD HOPE MEDICAL FOUNDATION 776 E. GREEN ST., STE 230 PASADENA, CA 91101

State:

Questions? (800)810-2207

Corrected 2nd TIN notice

Reported to the IRS is Sales Price of stocks, bonds etc., less commissions and option premiums. Covered (Box 6a is not checked)

Cusip	Description (Box 8)	Stock or Other Symbol (Box 1d)
Quantity Sold	Date of Sale or Date of Exchange Acquisition	Federal State Stocks Cost or Wash Sale Net Gain Income Tax Bonds, etc. Other Basis Loss Disallowed or Loss Tax Withheld Withheld
<i>(Box 1e)</i> 655664100	(Box 1a) (Box 1b) NORDSTROM INC	(Box 2a) (Box 3) (Box 5) (Box 4) (Box 15) JWN
1500.0000	05/02/2012 Various	85,249.22 62,305.30 0.00 22,943.92 0.00 0.00
655664100	NORDSTROM INC	JWN
990.0000	05/03/2012 Various	. 56,580.01 40,802.29
665859104	NORTHERN TR CORP	
500.0000	08/31/2012 Various	23,110,18 27,909 82 0.00 -4,799,64 0.00 0.00
748356102	QUESTAR CORP	STR
170.0000	09/06/2012 02/09/2011	3,418.01 2,973.22 0.00 444.79 0.00 0.00
748356102	QUESTAR CORP	STR
550.0000	09/07/2012 Various	11,081.10 9,596.49 0.00 1,484.61 0.00 0.00
748356102	QUESTAR CORP	STR
300.0000	09/10/2012 Various	6,053.29 <u>5,176.57</u> 0.00 876.72 0.00 0.00
748356102	QUESTAR CORP	STR
100.0000	09/11/2012 03/10/2011	2,020.44 1,712.07 0.00 308.37 0.00 0.00
748356102	QUESTAR CORP	STR
250.0000	09/13/2012 03/10/2011	5,023,81 4,280,18 0.00 743.63 0.00 0.00
748356102	QUESTAR CORP	STR
180.0000	09/14/2012 Various	3,628.64 3,978.71 0.00 549.93 0.00 0.00

Page 10 of 28

Payer's Name and Address: UNION BANK, N.A. PO BOX 45174 SAN FRANCISCO, CA 94145-0174 Account Number:
Recipient's Tax ID Number:
Payer's Federal ID Number:
Payer's State ID Number:

6701004200 XX-XXX2640 94-0304228

CA

Recipient's Name and Address: GOOD HOPE MEDICAL FOUNDATION 776 E. GREEN ST., STE 230 PASADENA, CA 91101

State:

Questions? (800)810-2207

Corrected 2nd TIN notice

Reported to the IRS is Sales Price of stocks, bonds etc., less commissions and option premiums. Covered (Box 6a is not checked)

Cusip	Description (Box 8)	Stock or Other S	ymbol <i>(Box 1d)</i>		•	- g' -	
Quantity Sold	Date of Sale or Date of Exchange Acquisition	Stocks Bonds, etc.	Cost or Other Basis	Wash Sale Loss Disallowed	Net Gain or Loss	Federal Income Tax Withheld	State Tax Withheld
<i>(Box 1e)</i> 748356102	(Box 1a) (Box 1b) QUESTAR CORP	(Box 2a) STR	(Box 3)	(Box 5)		(Box 4)	(Box 15)
740.0000	09/24/2012 Various	14,831.78	12,473.23		2,358.55	<u>0</u> .00	0.00
748356102	QUESTAR CORP	STR					
490.0000	09/25/2012 Various		8,386.94	0.00	1,487.11	000	0.00
_	15% Sales Reported on 1099-B a 8949, Part II, with Box A checked	252,913.67	202,476.25	0.00	50,437.42	0.00	0.00

Page 11 of 28

Account Number: Recipient's Tax ID Number: Payer's Federal ID Number:

Corrected

6701004200 XX-XXX2640 94-0304228

Recipient's Name and Address: **GOOD HOPE MEDICAL FOUNDATION** 776 E. GREEN ST., STE 230

PASADENA, CA 91101

Payer's Name and Address: UNION BANK, N.A. PO BOX 45174 **SAN FRANCISCO, CA 94145-0174** Payer's State ID Number: State: CA Questions? (800)810-2207 2nd TIN notice

2012 Form 1099-B: Proceeds from Broker and Barter Exchange Transactions

OMB No. 1545-0715

Reported to the IRS is Sales Price of stocks, bonds, etc., less commissions and option premiums.

For noncovered securities (Box 6a is checked) shown on this statement, cost basis information including wash sale disallowed loss is not being reported to the IRS.

Cusip	Description (Box 8)	Stock or Other Syn	nbol (Box 1d)		,	-	
Quantity Sold	Date of Sale or Date of Exchange Acquisition	Stocks Bonds, etc.	Cost or Other Basis	Wash Sale Loss Disallowed	Net Gain or Loss	Federal Income Tax Withheld	State Tax Withheld
(Box 1e)	(Box 1a)	(Box 2a)				(Box 4)	(Box 15)
Long Term 15% \$ 037833100	Sales Reported on 1099-B APPLE COMPUTER INC	AAPL					
70.0000	01/20/2012 12/23/2003	29,723.31	695.10	0.00	29,028 21	0.00	, <u>0</u> .00
037833100	APPLE COMPUTER INC	AAPL					
230.0000	03/12/2012 12/23/2003	1,26,689.91	2,283.90	0.00	124,406.01	<u>0</u> .00	0.00
037833100	APPLE COMPUTER INC	AAPL					
40.0000	08/30/2012 12/23/2003	26,599.80	39,7.20	0.00	26,202.60	0.00	0.00
097023105	BOEING CO	ВА					
450.0000	01/20/2012 04/26/2002	34,083.39	18,823.95	0.00	15,259.44		0.00
244199105	DEERE & CO	DE					
450.0000	01/20/2012 04/11/2005	39,039.90	15,096.33	0.00	23,943,57	0 0.0	0.00
25243Q205	DIAGEO PLC SPON ADR NEW	DEO					
300.0000	01/20/2012 03/09/2005	25,895.26	17,222.70	0.00	8,672.56	0.00	0.00
260543103	DOW CHEM CO	DOW					
700.0000	01/20/2012 02/09/2010	23,137.71	19,100.90	0.00	4,03,6.8,1	0 00	0.00.

Page 12 of 28

Payer's Name and Address: UNION BANK, N.A. PO BOX 45174 SAN FRANCISCO, CA 94145-0174

Account Number:
Recipient's Tax ID Number
Payer's Federal ID Number
Payer's State ID Number:

6701004200 XX-XXX2640 94-0304228 Recipient's Name and Address:
GOOD HOPE MEDICAL FOUNDATION
776 E. GREEN ST., STE 230
PASADENA, CA 91101

State: CA
Questions? (800)810-2207

Corrected 2nd TIN notice

For noncovered securities (Box 6a is checked) shown on this statement, cost basis information including wash sale disallowed loss is not being reported to the IRS.

Cusip	Description (Box 8)	Stock or Other Symb	ool (Box 1d)	ī.		•	
Quantity Sold	Date of Sale or Date of Exchange Acquisition	Stocks Bonds, etc.	Cost or Other Basis	Wash Sale Loss Disallowed	Net Gain or Loss	Federal Income Tax Withheld	State Tax Withheld
<i>(Box 1e)</i> 268648102	(Box 1a) E M C CORP MASS	<i>(Box 2a)</i> EMC				(Box 4)	(Box 15)
1700.0000	01/20/2012 Various	39,232.02	28,007.14	0.00	11,224.88	0.00	0.00
278642103	EBAY INC	EBAY					
800.0000	04/25/2012 08/27/2010	31,854.32	18,442.16	0.00	13,412.16	0.00	0.00
278642103	EBAY INC	EBAY					
1400.0000	04/25/2012 Various	55,756.69	32,335.22	0.00	23,421.47	0,00	0.00
278642103	EBAY INC	EBAY					
700.0000	04/26/2012 Various	28,186.96	16,199.07	. 0.00	11,987.89	0.00	0.00
437076102	HOME DEPOT INC	HD					
500,0000	01/20/2012 04/23/2007	22,469.87	19,619.05	0.00	2,850.82	0.00	0.00
437076102	HOME DEPOT INC	HD					
1100.0000	08/23/2012 04/23/2007	62,138 81	43,161.91	0.00	18,976.90	0.00	0.00
441060100	HOSPIRA INC COM	HSP					
1100.0000	01/20/2012 Various	37,233,40	40,889.63	0.00	-3,656.23	0.00	0.00
441060100	HOSPIRA INC COM	HSP					
1200.0000	08/01/2012 Various	44,022.93	44,554.78	0.00	-531.85	0,00	0.00
446413106	HUNTINGTON INGALLS INDS INC	HII					
700.0000	01/20/2012 Various	23,621.55	27,199.37		-3,577.82	0.00	0.00
459200101	INTERNATIONAL BUSINESS MACHS CORP	IBM					
200.0000	01/20/2012 06/18/2003	37,357.30	16,842.00	0.00	20,515.30	. 0.00	··· · · · · · · · · · · · · · · · · ·

Page 13 of 28

Payer's Name and Address: UNION BANK, N.A. PO BOX 45174 SAN FRANCISCO, CA 94145-0174

Account Number:
Recipient's Tax ID Number
Payer's Federal ID Number
Payer's State ID Number:

6701004200 XX-XXX2640 94-0304228 Recipient's Name and Address:
GOOD HOPE MEDICAL FOUNDATION
776 E. GREEN ST., STE 230
PASADENA, CA 91101

State: CA
Questions? (800)810-2207

Corrected 2nd TIN notice

For noncovered securities (Box 6a is checked) shown on this statement, cost basis information including wash sale disallowed loss is not being reported to the IRS.

Cusip	Description (Box 8)	Stock or Other Symbol (Box 1d)	7	• :	
Quantity Sold	Date of Sale or Date of Exchange Acquisition		Wash Sale oss Disallowed	Federal Net Gain Income or Loss Tax Withheld	State Tax Withheld
<i>(Box 1e)</i> 461202103	(Box 1a) INTUIT	(Box 2a) INTU		(Box 4)	(Box 15)
700.0000	01/20/2012 Various		0.00	19,142.85 0.00	0.00
46625H100	JPMORGAN CHASE & CO	JPM			
600.0000	01/20/201204/06/2004	22,169,57 24,903.90		-2,734.330.00	0.00
532457108	LILLY ELI & CO	LLY			
1200.0000	07/25/2012 07/19/2007	51,830.32 67,397.64	. 0.00	-15,567.32 0.00	0.00
532457108	LILLY ELI & CO	LLY			
500.0000	07/31/2012 07/20/2007	22,047.11 28,034.50	. 0.00	-5,987.39 0.00	0.00
532457108	LILLY ELI & CO	LLY			
800 0000	08/01/2012 07/20/2007	35,278,24 44,855.20	0.00	-9,576.96 0.00	
532457108	LILLY ELI & CO	LLY			
100 0000	08/02/2012 07/20/2007	4,325.55 5,606.90	0.00		
532457108	LILLY ELI & CO	LLY			
3200 0000	.08/24/2012 Various	139,437,19 180,584.18	0.00	-41,146.99 0.00	o oo
55261F104	M&T BK CORP COM				
400 0000	01/20/2012 Various	32,567.89 15,416.36	0.00	17,151.53 0.00	0.00
65339F101	NEXTERA ENERGY INC COM	NEE			
350.0000	08/30/2012 09/30/2008	23,598.47 17,644.93	0.00	5,953.54 0.00	0.00
655664100	NORDSTROM INC	NWL			
100.0000	02/07/2012 11/16/2010	5,096.23 4,041.58	0.00	1,054.65 0.00	o oo

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Payer's Name and Address: UNION BANK, N.A. PO BOX 45174 SAN FRANCISCO, CA 94145-0174

Account Number:
Recipient's Tax ID Number
Payer's Federal ID Number
Paver's State ID Number:

State:

6701004200 XX-XXX2640 94-0304228

CA

Recipient's Name and Address:
GOOD HOPE MEDICAL FOUNDATION
776 E. GREEN ST., STE 230
PASADENA, CA 91101

Questions? (800)810-2207

Corrected 2nd TIN notice

For noncovered securities (Box 6a is checked) shown on this statement, cost basis information including wash sale disallowed loss is not being reported to the IRS.

Cusip	Description (Box 8)	Stock or Other Symbol (Box 1d)	, γν *
Quantity Sold	Date of Sale or Date of Exchange Acquisition	Stocks Cost or Wash Sale Net Gain Bonds, etc. Other Basis Loss Disallowed or Loss Tax	Federal State Income Tax Withheld Withheld
<i>(Box 1e)</i> 655664100	(Box 1a) NORDSTROM INC	(Box 2a) JWN	(Box 4) (Box 15)
250.0000	02/08/2012 Various		0.00 0.00
655664100	NORDSTROM INC	JWN	
40.0000	02/09/2012 11/17/2010	2,040.08 1,656.43 0.00 383.65	0.00 0.00
655664100	NORDSTROM INC	JWL	
60 0000	02/09/2012 11/17/2010	3,064.58 2,484.64 0.00 579.94	0.00 0.00
655664100	NORDSTROM INC	JWN	
60.0000	04/26/2012 11/17/2010		.0.00 0.00
655664100	NORDSTROM INC	JWN	
700.000 <u>0</u>	04/27/2012 Various	39,278.28 29,413.74 0.00 9,864.54	0.00 0.00
655664100	NORDSTROM INC	JWN	
1000 0000	04/30/2012 Various	55,801.04 41,726.63 0.00 14,074.41	0.00 0.00
655664100	NORDSTROM INC	JWN	
30.0000	05/01/2012 12/15/2010	1,686.48 1,250.12 0.00 436.36	0.00 0.00
666807102	NORTHROP GRUMMAN CORP	NOC	
700.0000	01/20/2012 Various	42,953 20 43,990.61 0.00 -1,037 41	0.00 0.00
68389X105	ORACLE CORP	ORCL	
900.0000	01/20/2012 01/03/2006	25,712.60 11,214.99 0.00 14,497.61	0.00 0.00
74733V100	QEP RES INC COM	QEP	
800.0000	08/30/2012 01/23/2009		0.00

Page 15 of 28

Recipient's Name and Address:

776 E. GREEN ST., STE 230

PASADENA, CA 91101

GOOD HOPE MEDICAL FOUNDATION

Payer's Name and Address: UNION BANK, N.A. PO BOX 45174 SAN FRANCISCO, CA 94145-0174 **Account Number:** Recipient's Tax ID Number: Payer's Federal ID Number: Payer's State ID Number: State:

Questions?

CA

6701004200

XX-XXX2640

94-0304228

(800)810-2207

2nd TIN notice Corrected

For noncovered securities (Box 6a is checked) shown on this statement, cost basis information including wash sale disallowed loss is not being reported to the IRS.

Cusip	Description (Box 8)		Stock or Other S	ymbol (Box 1d)	•		•	~
Quantity Sold	Date of Sale or Date of Exchange Acquisition	•••	Stocks Bonds, etc.	Cost or Other Basis	Wash Sale Loss Disallowed	Net Gain or Loss	Federal Income Tax Withheld	State Tax Withheld
<i>(Box 1e)</i> 748356102	(Box 1a) QUESTAR CORP		(Box 2a) STR				(Box 4)	(Box 15)
250.0000	07/18/2012 01/23/2009		5,134.43	2,733.01	0.00	2,401.42	0.00	
748356102	QUESTAR CORP		STR					
600.0000	07/19/2012 01/23/2009		12,442.52	6,559.23		5,883.29	0.00	<u>0</u> .00
748356102	QUESTAR CORP		STR			-		
900.0000	07/20/2012 01/23/2009		18,856.28	9,838.84	0.00	9,017.44	0.00	0.00
748356102	QUESTAR CORP		STR					
500.0000	07/23/2012 01/23/2009		10,476.56	5,466.03	. 0.00	5,010.53	0.00	0.00.
748356102	QUESTAR CORP		STR					
200.0000	07/24/2012 01/23/2009		4,096.78	2,186.41	. <u>0</u> .00	1,910.37	0.00	0.00
748356102	QUESTAR CORP		STR					
150 0000	07/25/2012 01/23/2009		3,057.77	1,639,81	0.00	1,417.96	0.00	0.00
748356102	QUESTAR CORP		STR					
700.0000	07/26/2012 Various		14,328.74	8,006.81	0.00	6,321.93	000	0.00
748356102	QUESTAR CORP		STR					
400.0000	07/27/2012 01/26/2009		. 8,255.81	4,594.31		3,661.50	0.00	0.00
748356102	QUESTAR CORP		STR					
400.0000	07/30/2012 01/26/2009		8,237.29	4,594.31	0.00	3,642.98		0.00
748356102	QUESTAR CORP		STR					
100.0000	07/31/2012 01/26/2009		2,049.11	1,148.58	0.00	900.53	0.00	0.00

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Payer's Name and Address: UNION BANK, N.A. PO BOX 45174 SAN FRANCISCO, CA 94145-0174 Account Number: Recipient's Tax ID Number: Payer's Federal ID Number: Payer's State ID Number:

6701004200 XX-XXX2640 94-0304228 Recipient's Name and Address: GOOD HOPE MEDICAL FOUNDATION 776 E. GREEN ST., STE 230 PASADENA, CA 91101

State: CA
Questions? (800)810-2207

Corrected 2nd TIN notice

For noncovered securities (Box 6a is checked) shown on this statement, cost basis information including wash sale disallowed loss is not being reported to the IRS.

Cusip	Description (Box 8)	Stock or Other Symbol (Box 1d)	•	Ç.	,
Quantity Sold	Date of Sale or Date of Exchange Acquisition	Stocks Cost or Bonds, etc. Other Basis		Federal Net Gain Income or Loss Tax Withheld	State Tax Withheld
<i>(Box 1e)</i> 748356102	(Box 1a) QUESTAR CORP	(Box 2a) STR		(Box 4)	(Box 15)
150.0000	08/01/2012 01/26/2009	3,060,85 1,722,87	0.00	1,337.98 0.00	0.00
748356102	QUESTAR CORP	STR			
40.0000	08/06/2012 01/26/2009	815.32 459.43	0.00	355.89 0.00	0.00
748356102	QUESTAR CORP	STR			
500.0000	08/07/2012 01/26/2009	10,234.32	0.00	4,491.44 0 00	0 00
748356102	QUESTAR CORP	STR			
200 0000	08/08/2012 01/26/2009	4,075 62 2,297.15	0.00	1,778.47 0 00	0.00
748356102	QUESTAR CORP	STR			
150.0000	08/09/2012 01/26/2009	3,058.30 1,722.87	o.oo	1,335.43 0.00	0.00
748356102	QUESTAR CORP	STR			
600.0000	08/10/2012 Various	12,299.36 9,247.09	0.00	3,052,27	0.00
748356102	QUESTAR CORP	STR			
300.0000	08/13/2012 <u>Various</u>	6,114.44 5,035.82	0.00	1,078.62 0.00	0.00
748356102	QUESTAR CORP	STR			
200.0000	08/14/2012 11/30/2010	4,061.40 3,331.14	0.00	730.26 0.00	. 0.00
748356102	QUESTAR CORP	STR			
200.0000	08/15/2012 11/30/2010	4,055.80 3,331.14	0 00	724.66 0.00	.00 _.
748356102	QUESTAR CORP	STR			·
150.0000	08/16/2012 Various	3,045.47 2,515.65	<u>ö</u> .oo .	529.82 0.00	. 0.00

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Payer's Name and Address: UNION BANK, N.A. PO BOX 45174 SAN FRANCISCO, CA 94145-0174 Account Number: Recipient's Tax ID Number: Payer's Federal ID Number: Payer's State ID Number: 6701004200 XX-XXX2640 94-0304228 Recipient's Name and Address: GOOD HOPE MEDICAL FOUNDATION 776 E. GREEN ST., STE 230 PASADENA, CA 91101

State: CA
Questions? (800)810-2207

Corrected 2nd TIN notice

For noncovered securities (Box 6a is checked) shown on this statement, cost basis information including wash sale disallowed loss is not being reported to the IRS.

Cusip	Description (Box 8)	Stock or Other Sy	mbol (Box 1d)		
Quantity Sold	Date of Sale or Date of Exchange Acquisition	Stocks Bonds, etc.	Cost or Wash Sale Other Basis Loss Disallowed	Federal Net Gain Income or Loss Tax Withheld	State Tax Withheld
<i>(Box 1e)</i> 748356102	(Box 1a) QUESTAR CORP	<i>(Box 2a)</i> STR		(Box 4)	(Box 15)
230.0000	09/06/2012 12/01/2010	4,624.36	3,866.97 0.00	757.39 0.00	0.00
751212101	RALPH LAUREN CORP	RL			
1100.0000	02/08/2012 Various	189,327.70	48,213.14 0 00	141,114.560.00	0.00
751212101	RALPH LAUREN CORP	RL			
640.0000	02/09/2012 Various	110,813.55	30,316.20 0.00	80,497.35 0.00	0.00
751212101	RALPH LAUREN CORP	RL			
10.0000	02/10/2012 12/19/2008	1,724.80	469.32 0.00	1,255.48 0.00	0.00
786514208	SAFEWAY INC NEW	SWY			
1660,0000	09/06/2012 Various	27,343.23	55,189.71 0.00	-27,846.48 0.00	0.00
786514208	SAFEWAY INC NEW	SWY			
2110.0000	09/07/2012 Various	34,333.98	69,792.00 0.00	-35,458.02 0.00	0.00
786514208	SAFEWAY INC NEW	SWY			
1200,0000	09/10/2012 Various	19,603.24	39,814.26 0.00	-20,211.02 0.00	0.00
786514208	SAFEWAY INC NEW	SWY			
830.0000	09/11/2012 Various	13,593.26	27,491.14 0.00	-13,897.88 0.00	, 0.00
786514208	SAFEWAY INC NEW	SWY			
2340.0000	09/28/2012 Various	37,641.79	77,529.96 0.00	-39,888.17 0.00	0.00
786514208	SAFEWAY INC NEW	SWY			
1360.0000	10/01/2012 Various	21,989.34	45,014.24 0.00	-23,024.90 0.00	0.00

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Payer's Name and Address: UNION BANK, N.A. PO BOX 45174 SAN FRANCISCO, CA 94145-0174

Account Number:								
Recip	oient'	s Tax	ID	Number:				
Paye	r's Fe	deral	ID	Number:				
Paye	r's St	ate IC	N	umber:				

6701004200 XX-XXX2640 94-0304228 Recipient's Name and Address:
GOOD HOPE MEDICAL FOUNDATION
776 E. GREEN ST., STE 230
PASADENA, CA 91101

State: CA
Questions? (800)810-2207

Corrected 2nd TIN notice

For noncovered securities (Box 6a is checked) shown on this statement, cost basis information including wash sale disallowed loss is not being reported to the IRS.

Cusip	Description (Box 8)		Stock or Other Sy	mbol (Box 1d)		•		,
Quantity Sold	Date of Sale or Date of Exchange Acquisition	- , n	Stocks Bonds, etc.	Cost or Other Basis Los	Wash Sale s Disallowed	Net Gain or Loss T	Federal Income ax Withheld	State Tax Withheld
<i>(Box 1e)</i> 808513105	(Box 1a) SCHWAB CHARLES CORP	P NEW	<i>(Box 2a)</i> SCHW				(Box 4)	(Box 15)
3500.0000	01/20/2012 Various		 44,050.15	34,248.90	0.00	9,801.25	0.00	0.00
784635104	SPX CORP							
350.0000	08/30/2012 Various		22,168.74	18,785.73	0.00	3,383,01	. 0.00	0.00
882508104	TEXAS INSTRS INC		TXN					
1200.0000	01/20/2012 09/27/20	0,4	40,141,75	25,600.32	. 0.00	14,541.43	0.00	0.00
427866108	THE HERSHEY COMPANY	1						
400.0000	01/20/2012 Various		 24,566.53	13,905,79	0.00	10,660.74	0.00	0.00
887317303	TIME WARNER INC		TWX					
1000.0000	01/20/2012 01/26/20	10	37,559.28	27,247.70	0.00	10,311.58	0.00	0.00
909283AD5	UNITED AIR (DFLT) 10.12	25% 3/22/15						
6427.6000	01/01/2012 10/29/19	91	 6,427.60	6,419.57	0,00	8.03	0.00	0.00
909283AD5	UNITED AIR (DFLT) 10.12	25% 3/22/15						
6427.6000	04/03/2012 10/29/19	91	 6,427.60	6,419.56	0.00	8.04	0.00	0.00
909283AD5	UNITED AIR (DFLT) 10.12	25% 3/22/15						
6427.5900	07/02/2012 10/29/19	91	 6,427.59	6,419.56	0.00	8.03	0.00	0,00
909283AD5	UNITED AIR (DFLT) 10.12	25% 3/22/15						
6427.6000	10/01/2012 10/29/19	91	 6,427.60	6,419.56	0.00	8.04	0.00	0.00
92857W209	VODAFONE GROUP SPON	N ADR	VOD					
800.0000	08/30/2012 07/16/20	03	 23,175.96	17,635,20	0.00	5,540.76	0.00	0.00

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Payer's Name and Address: UNION BANK, N.A. PO BOX 45174 SAN FRANCISCO, CA 94145-0174 Account Number: Recipient's Tax ID Number: Payer's Federal ID Number:

6701004200 XX-XXX2640 94-0304228

CA

Recipient's Name and Address:
GOOD HOPE MEDICAL FOUNDATION
776 E. GREEN ST., STE 230
PASADENA, CA 91101

Payer's State ID Number: State:

Questions? (800)810-2207

Corrected 2nd TIN notice

For noncovered securities (Box 6a is checked) shown on this statement, cost basis information including wash sale disallowed loss is not being reported to the IRS.

Cusip	Description (Box 8)	Stock or Other Sy	mbol (Box 1d)	•	· ·				
Quantity Sold	Date of Sale or Date of Exchange Acquisition	Stocks Bonds, etc.	Cost or Other Basis	Wash Sale Loss Disallowed	Net Gain or Loss	Federal Income Tax Withheld	State Tax Withheld		
(Box 1e) 989701107	(Box 1a) ZIONS BANCORPORATION	(Box 2a)				(Box 4)	(Box 15)		
1500.0000	01/20/2012 Various	28,101.37	83,135.74	. 0.00	-55,034.37	0.00			
_	15% Sales Reported on 1099-B n 8949, Part II, with Box B checked	2,116,782.46	1,658,706.58	0.00	458,075.88	0.00	0.00		

GOOD HOPE MEDICAL FOUNDATION

TATEMENT 17
ORM 990-PF PART IV LINES 1,a,b c and d
APITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

95 0782640

NG-TERM TÎ	RANSACTIONS							
830 00	DIAGEO P L CSPNSRD ADR NEW 25243Q205	1	03/09/05	11/29/12	99 610 21	47 649 47	0 00	51 960
150 00		1	03/09/05	11/30/12	17 947 77	8 611 35	0 00	9 336
20 00		_ 1	03/09/05	12/03/12	2 393 12	1 148 18	0 00	1 244
100 00		1	03/10/05	12/03/12	11 965 59	5 794 61	0 00	6 170
Security	Total				131 916 69	63 203 61	0 00	68 713
120 00	DOW CHEM COCOM 260543103	1	02/09/10	11/12/12	3 464 03	3 274 44	0 00	189
1050 00		1	02/10/10	11/12/12	30 310 30	28 810 95	0 00	1 499
550 00		1	02/10/10	11/13/12	16 012 18	15 091 45	0 00	920
660 00		1	02/18/10	11/13/12	19 214 61	19 264 87	0 00	-50
830 00		1	02/22/10	11/13/12	24 163 83	24 403 00	0 00	~239
850 00		1	02/12/10	11/13/12	24 746 09	23 367 01	0 00	1 379
900 00		1	02/19/10	11/13/12	26 201 74	26 331 75	0 00	-130
1090 00		1	02/11/10	11/13/12	31 733 22	30 182 86	0 00	1 550
1250 00		1	02/17/10	11/13/12	36 391 30	35 822 13	0 00	569
Security !	Total				212 237 30	206 548 46	0 00	5 688
450 00	EBAY INCCOM 278642103	1	08/31/10	11/26/12	23 157 20	10 409 67	0 00	12 747
1550 00		1	09/01/10	11/26/12	79 763 69	36 954 17	0 00	42 809
Security '	Fotal -				102 920 89	47 363 84	0 00	55 557
40 00	HERSHEY COCOM 427866108	1	03/19/09	11/30/12	2 922 28	1 390 51	0 00	1 531
80 00		1	03/24/09	11/30/12	5 844 56	2 834 02	0 00	3 010
90 00		1	03/20/09	11/30/12	6 575 13	3 152 76	0 00	3 422
390 00		1	03/25/09	11/30/12	28 492 21	13 514 75	0 00	14 977
240 00		1	03/25/09	12/03/12	17 489 20	8 316 77	0 00	9 172

The Whittier Trust Company Account No 005134 2012 Tax Information Statement Page 8 of

2012 Realized Capital Gains/Losses (continued)

Quantity	Security	Reg D	ate Acquired	Date Sold	Sale Proceeds	Investment Cost Basis	Wash Sale Loss Disallowed	Gaın/Loss
NG-TERM TR	ANSACTIONS							
90 00	HERSHEY COCOM(Con t) 427866108	1	03/26/09	12/04/12	6 515 <u>0</u> 7	3 118 44	0 00	3 396 63
150 00		1	03/25/09	12/04/12	10 858 45	5 197 98	0 00	5 660 47
120 00		1	03/26/09	12/05/12	8 700 34	4 157 91	0 00	4 542 43
Security T	őt à l				87 397 24	41 683 14	0 00	45 714 10
387 50	VODAFONE GROUP PLC NEWSPONS ADR NEW 92857W209	1	07/16/03	12/05/12	9 908 46	8 542 05	0 00	1 366 41
1312 50		1	04/20/04	12/05/12	33 560 92	37 277 10	0 00	-3 716 18
3000 00		1	01/27/09	12/05/12	76 710 68	57 055 80	0 00	19 654 88
3500 00		1	09/04/03	12/05/12	89 495 79	74 947 20	0 00	14 548 59
Security T	otal				209 675 85	177 822 15	0 00	31 853 70
Total LONG	-TERM TRANSACTIONS				744 147 97	536 621 20	0 00	207 526 77
Grand Tota	1				744 147 97	536 621 20	0 00	207 526 77

FEDERAL STATEMENTS

GOOD HOPE MEDICAL FOUNDATION

95-0782640

STATEMENT 16 FORM 990-PF, PART II, LINES 10b INVESTMENT - CORPORATE STOCK

	IJ	п		

US LARGE CAP EQUITIES

5,500	ABBOTT LABS	65.500	267,896.03	360,250.00	3,080	0.85	
2,470	AIR PRODS & CHEMS INC	84.020	198,251 61	207,529.40	6,323	3.05	
560	APPLE COMPUTER INC	532.173	60,152 94	298,016.82	5,936	1.99	
4,500	BAXTER INTL INC	66.660	155,020 95	299,970.00	8,100	2.70	
3,850	BÓEING CO	75.360	146,151 95	290,136.00	7,469	2.57	
7,000	CIGNA CORP	53.460	303,995.30	374,220.00	28 0	0.07	
3,200	DEERE & CO	86.420	118,091.44	276,544.00	5,888	2.13	
6,300	DISNEY WALT CO COM DISNEY	49.790	296,624.79	313,677.00	4,725	1.51	
13,300	E M C CORP MASS	25.300	173,196.85	336,490.00	0	0.00	
4,100	EBAY INC	50.998	98,523.06	209,090.57	0	0.00	
2,050	FRANKLIN RES INC	125.700	205,024.75	257,685.00	2,378	0.92	
4,900	HEINZ H J CO	57.680	227,617.41	282,632.00	10,094	3.57	
3,800	HERSHEY CO	72.220	149,696.49	274,436.00	6,384	2.33	
5,700	HESS CORP	52 960	319,014 01	301,872 00	2,280	0.76	
6,500	HOME DEPOT INC	61.850	230,581.30	402,025.00	7,540	1 88	
1,700	INTERNATIONAL BUSINESS MACHS	191.550	141,815 55	325,635.00	5,780	1 77	
5,500	INTUIT	59.475	163,622.34	327,114.70	3,740	1.14	
7,300	J P MORGAN CHASE & CO	43.969	264,126.62	320,974.43	8,760	2.73	

FEDERAL STATEMENTS

GOOD HOPE MEDICAL FOUNDATION

95-0782640

STATEMENT 16 (CONT)
FORM 990-PF, PART II, LINES 10b
INVESTMENT - CORPORATE STOCK

Shares or Par Value		Unit Market	Investment Cost Basis	Total Market Value	Est. Annual Income	Current Yield
5,400	NEXTERA ENERGY INC	69.190	282,435.59	373,626 00	12,960	3 47
6,100	NORTHERN TR CORP	50.160	314,371.06	305,976 00	7,320	2.39
4,800	NORTHROP GRUMMAN CORP	67.580	269,712.98	324,384 00	10,560	3 26
4,300	OCCIDENTAL PETE CORP DEL	76.610	354,388.98	329,423.00	9,288	2.82
10,500	ORACLE CORP	33.320	130,841 55	349,860.00	2,520	0.72
5,100	PEPSICO INC	68.430	337,170.07	348,993.00	10,965	3 14
4,500	QUALCOMM INC	61 860	238,272 22	278,368.20	4,500	1.62
3,500	SCHLUMBERGER LTD	69 299	226,814 54	242,545 10	3,850	1.59
22,000	SCHWAB CHARLES CORP NEW	14.360	290,447.36	315,920 00	5,280	1.67
10,600	SUNTRUST BKS INC	28.350	253,058 79	300,510.00	2,120	0.71
7,300	TEXAS INSTRS INC	30.890	176,070.14	225,497 00	6,132	2 72
8,400	TIME WARNER INC COM NEW	47.830	229,536.23	401,772.00	8,736	2 17
3,900	UNITED PARCEL SERVICE INC CL B	73.730	256,695.69	287,547.00	8,892	3.09
	TOTAL US LARGE CAP EQUITIES		6,879,218.59	9,542,719.22	181,880	1.91
	US SMALL AND MID-CAP EQUITIES					
4,300	HOSPIRA INC	31.240	173,034.53	134,332.00	0	0 00
3,000	HUNTINGTON INGALLS INDS INC	43.340	108,070.17	130,020 00	1,200	0 92
3,000	M & T BK CORP	98.470	166,095.58	295,410.00	8,400	2.84
3,100	NORTHEAST UTILS	39.080	121,233.80	121,148.00	4,253	3 51
6,200	QEP RES INC	30.270	167,801.11	187,674.00	496	0 26
3,150	SPX CORP	70 150	174,469 86	220,972.50	3,150	1.43
6,000	TRW AUTOMOTIVE HLDGS CORP	53.610	244,423 62	321,660 00	0	0 00
1,900	TIFFANY & CO NEW	57 340	110,384.39	108,946 00	2,432	2 23
16,800	ZIONS BANCORPORATION	21 400	423,202.85	359,520.00	672	0 19
	TOTAL US SMALL AND MID-CAP EQUITIES		1,688,715.91	1,879,682.50	20,603	1.10

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FEDERAL STATEMENTS

GOOD HOPE MEDICAL FOUNDATION

95-0782640

STATEMENT 16 (CONT)
FORM 990-PF, PART II, LINES 10b
INVESTMENT - CORPORATE STOCK

Shares or Par Value		Unit Market	Investment Cost Basis	Total Market Value	Est. Annual Income	Current Yield
	FOREIGN EQUITIES					
2,400	DIAGEO P L C SPNSRD ADR NEW	116.580	151,690 38	279,792.00	6,658	2.38
8,900	UNILEVER N V N Y SHS NEW	38.300	241,226 73	340,870 00	9,274	2.72
	TOTAL FOREIGN EQUITIES		392,917.11	620,662.00	15,932	2.57
	TOTAL EQUITIES		8,960,851.61	12,043,063.72	218,415	1.81