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Form **990-PF** Department of the Treasury Internal Revenue Service

Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation

▶ Do not enter Social Security numbers on this form as it may be made public.

▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf

For calendar year 2013 or tax year beginning , and ending Name of foundation A Employer identification number BLOOMFIELD FAMILY FOUNDATION 20-6156014 Number and street (or P.O. box number if mail is not delivered to street address) B Telephone number P.O. BOX 2098 (310) 454-5571 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here MANHATTAN BEACH, CA G Check all that apply: Initial return Initial return of a former public charity D 1. Foreign organizations, check here Final return Amended return 2. Foreign organizations meeting the 85% test, check here and attach computation X Address change Name change X Section 501(c)(3) exempt private foundation H Check type of organization: E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end of year | J Accounting method; Accrual If the foundation is in a 60-month termination (from Part II, col. (c), line 16) Other (specify) under section 507(b)(1)(B), check here 64,923,308. (Part I, column (d) must be on cash basis) ▶\$ Part I Analysis of Revenue and Expenses (d) Disbursements (a) Revenue and (b) Net investment (c) Adjusted net (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) for charitable purpos (cash basis only) expenses per books ıncome 11,049,621 N/A Contributions, gifts, grants, etc., received 2 Check I if the foundation is not required to attach Sch. B Interest on savings and temporary cash investments 265,160. 265,160. STATEMENT 737,785. 737,785 STATEMENT 4 Dividends and interest from securities 5a Gross rents b Net rental income or (loss) 3,404,307 6a Net gain or (loss) from sale of assets not on line 10 SCANNED b Gross sales price for all assets on line 6a 3,404,307. 3,404,307. 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain Income modifications Gross sales less returns and allowances b Less Cost of goods sold c Gross profit or (loss) 1,037 1,037 STATEMENT 11 Other income 15,457,910. 4,408,289 12 Total. Add lines 1 through 11 0. 13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits Expenses 16a Legal fees 37,611. 18,806 STMT 4 18,806. **b** Accounting fees STMT 5 138,136. 138,136 c Other professional fees 17 Interest and Administrative STMT 6 285,965 14,45 <u> 160.</u> 18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications Operating 23 Other expenses 24 Total operating and administrative 461,712. 171,393. 18,966. expenses. Add lines 13 through 23 1,400,000. 25 Contributions, gifts, grants paid 1,400,000. 26 Total expenses and disbursements. 1,861,712. 171,393. 1,418,966. Add lines 24 and 25 27 Subtract line 26 from line 12: 13,596,198. 8 Excess of revenue over expenses and disbursements 4,236,896. b Net investment income (if negative, enter -0-) N/A C Adjusted net income (if negative, enter -0-)

LHA For Paperwork Reduction Act Notice, see instructions.

Page 2

Г	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year		d of year
<u></u>		Colonial Should be for end-or-year anitomis only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			
	2	Savings and temporary cash investments	987,356. 1,846,581.		1,846,581.
	3	Accounts receivable			
	İ	Less: allowance for doubtful accounts			
	4	Pledges receivable ►			
		Less: allowance for doubtful accounts ▶		* #400	***
	5	Grants receivable		-	
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable	. Zžita	3. 4	
		Less: allowance for doubtful accounts		Marionarion Mario	
Š	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
ğ	10a	Investments - U.S. and state government obligations STMT 8	8,074,007.	12,904,962	. 12,904,962.
	Ь	Investments - corporate stock STMT 9	28,018,993.	46,532,540	
	ء ا	Investments - corporate bonds STMT 10	2,081,166.	3,639,225	
	I	Investments - land, buildings, and equipment basis			
	İ	Less accumulated depreciation	. 830-28-8253- 104	·	x 2 '
	12	Investments - mortgage loans			
	ı	Investments - other			•
	14	Land, buildings, and equipment basis ▶	i à ri la		
		Less accumulated depreciation	* # 3.1 4.2	W.C	* * * * * * * * * * * * * * * * * * * *
	15	Other assets (describe >			
		Total assets (to be completed by all filers - see the			
		instructions. Also, see page 1, item 1)	39,161,522.	64,923,308	. 64,923,308.
_	17	Accounts payable and accrued expenses		239,623	* * * * * * .
	18	Grants payable			-
ç	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
ig	l	Mortgages and other notes payable			
Ξ		Other liabilities (describe)			T. `^ '%&
					
	23	Total liabilities (add lines 17 through 22)	0.	239,623	
		Foundations that follow SFAS 117, check here			
		and complete lines 24 through 26 and lines 30 and 31.			
nces	24	Unrestricted			
aŭ	25	Temporarily restricted			
Ba	26	Permanently restricted			
Ē		Foundations that do not follow SFAS 117, check here	,		
Ē,		and complete lines 27 through 31.			\$ \$
S	27	Capital stock, trust principal, or current funds	0.	0	•
set	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0	7
Net Assets or Fund Balaı	29	Retained earnings, accumulated income, endowment, or other funds	39,161,522.	64,683,685	7
Žet	30	Total net assets or fund balances	39,161,522.	64,683,685	.
_					7
	31	Total liabilities and net assets/fund balances	39,161,522.	64,923,308	
P	art	Analysis of Changes in Net Assets or Fund B	alances		-
Ξ		net assets or fund balances at beginning of year - Part II, column (a), line	30		<u> </u>
		t agree with end-of-year figure reported on prior year's return)		Ì	39,161,522.
		amount from Part I, line 27a		<u></u>	13,596,198.
		increases not included in line 2 (itemize)	SEE ST	- -	11,925,965.
		ines 1, 2, and 3			64,683,685.
		eases not included in line 2 (itemize)		<u> </u>	5 0.
		net assets or fund balances at end of year (line 4 minus line 5) - Part II, ci	olumn (b), line 30		64,683,685.
_		the state of the s			Form QQ0 - PF (2013)

323511 10-10-13

Part IV Capital Gains a	nd Losses for Tax on I	nvestmen	t Income					
	be the kınd(s) of property sold (e ç ehouse; or common stock, 200 sh			(b) H	ow acquired Purchase Donation		acquired day, yr.)	(d) Date sold (mo., day, yr)
12 PUBLICLY TRADEL	SECURITIES		-		P	VARI	OUS	VARIOUS
b								
С					•			
d								
е				Ь.,				
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale				Gain or (loss s (f) minus ((g)
a 3,404,307.								3,404,307.
b								
C		<u> </u>		-				
d								
Complete only for accets showing	r gain in column (h) and award by	the foundation	on 12/21/60			(1) (2)		
Complete only for assets showing	gain in column (h) and owned by				c		Col. (h) gaın not less thaı	
(i) F.M.V as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (1) col. (j), if any	ł	·	Losses	(from col. (h))
a								3,404,307.
b								
С								
d								
e								
2 Capital gain net income or (net cap	rtal loss) { If gain, also ente If (loss), enter -0	r ın Part I, line)- ın Part I, line	7 7	}	2			3,404,307.
3 Net short-term capital gain or (loss	•			ÍΓ				
If gain, also enter in Part I, line 8, c		(<i>0</i>).		λl				
If (loss), enter -0- in Part I, line 8	· ,			儿	3		N/A	
Part V Qualification Ur	ider Section 4940(e) for	r Reduced	Tax on Net	Inve	stment Ir	come		
If section 4940(d)(2) applies, leave this Was the foundation liable for the section of the secti	on 4942 tax on the distributable an y under section 4940(e). Do not co	omplete this pa	rt.					Yes X No
(a)		IISU UCUONS DE	iore making any er					(d)
Base period years Calendar year (or tax year beginning			Net value of no				Dıstrıb (col. (b) dıv	oùtión ratio ided by col. (c))
2012		5,628.			907,25			.046510
2011		3,175.			048,76			.018138
2010		5,334.			829,24			.090059
2009		2,036.			978,59			.060333
2008	48	3,612.		12,	026,80	3.		.040211
2 Total of line 1, column (d)						2		.255251
3 Average distribution ratio for the 5- the foundation has been in existence	•	on line 2 by 5,	or by the number	of yea	rs .	3		.051050
4 Enter the net value of noncharitable	-use assets for 2013 from Part X,	line 5				4	5	6,817,682.
5 Multiply line 4 by line 3	,					5		2,900,543.
6 Enter 1% of net investment income	(1% 01 Part I, line 2/b)					6		42,369.
7 Add lines 5 and 6						7		2,942,912.
8 Enter qualifying distributions from I If line 8 is equal to or greater than I.	•	e 1b, and comp	lete that part using	g a 1%	tax rate.	8		1,418,966.
See the Part VI instructions.	· · · · · · · · · · · · · · · · · · ·	<u> </u>						000 DE (0010)

Part VI Excise Tax Based on Investment Income (Section 4940(b), 4940(b), or 4948 - see instructions)	orm	990-P <u>F</u> (2						6156			Page 4
Date of furling or determination letter:						, or 4	948	- see i	nstru	ctio	ns)
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here ▶□ and enter 1% 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-) 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 3 8 44, 738. 3 8 44, 738. 4 0 0. 5 Tax based on investment in come. 6 Dischard payments: 6 Dischard payments: 6 Dischard payments: 7 Tax based on investment in come. 6 Dischard payments: 8 Dischard with application for extension of time to file form 8669) 6 Dischard payments: 6 Dischard payments: 6 Dischard payments: 7 Tax based on investment in come to set in file form 8669) 6 Dischard payments: 8 Dischard with application for extension of them to file form 8669) 6 Dischard payments: 8 Dischard with application for extension of them to file form 8669) 6 Dischard with application for extension of them to file form 8669) 7 Tax based on the second payments: 8 Dischard with application for extension of them to file form 8669) 7 Tax based on the second payments: 8 Dischard with payments and 2012 overpayment of second to file form 8669) 7 Tax based on the second payments: 8 Dischard with payments and 2012 overpayment of second to file form 8669) 7 Tax based on the file form 8669 8 Dischard with payments and 2012 overpayment of second 8669 9 Tax based on the file form 8669 10 Dischard payments and 2012 overpayment of second 8669 11 Dischard payments and 2012 overpayment of second 8669 12 Dischard payments and 2012 overpayment of second 8669 13 Dischard p	1a*	Exempt o									
of Part I, line 27. 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 line 1 and 2 5 Subtitue A (succome) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 5 Tax based on investment Income. Subtract line 4 from line 3. If zero or less, enter -0- 5 Tax based on investment Income. Subtract line 4 from line 3. If zero or less, enter -0- 5 Tax based on investment Income. Subtract line 4 from line 3. If zero or less, enter -0- 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- 5 Tax due. If the organizations is x withheld at source 6 B		Date of ru	uling or determination letter: (attach copy of letter if nec	cessary	-see instructions)						
a All other domestic foundations enter 2% of the 27h. Exempt foreign organizations enter 4% of Part I, line 12, col. (b). 2 Tax under section 511 (domestic section 4947(a)(1) trusts and faxable foundations only, Others enter -0-) 3 3 84,738. 4 Subtte A (income) tax (domestic section 4947(a)(1) trusts and traxable foundations only. Others enter -0-) 5 Tax based on investment is come. Subtract line 4 from line 3. It zero or less, enter -0- 5 Tax based on investment is come. Subtract line 4 from line 3. It zero or less, enter -0- 5 Tax based on investment cannow. Subtract line 4 from line 3. It zero or less, enter -0- 6 CredishPayments. 2 2013 estimated tax payments and 2012 overpayment credited to 2013 8 Exempt foreign organizations - tax withheld at source 6 Tax paid with application for extension of time to file (Form 8868) 8 Exter any peanty for underpayment or destinated tax. Check here □ if Form 2220 is attached 9 Tax dae. If the total of lines 5 and 8 is more than line 7, enter amount ower paid 1 Enter the amount of line 10 to be: Credited to 2014 estimated tax the amount overpaid 1 Enter the amount of line 10 to be: Credited to 2014 estimated tax the amount overpaid 1 Enter the amount of line 10 to be: Credited to 2014 estimated tax the line of the cannow of line of the condition of the activities and copies of any materials published or distributed by the foundation on tempt to influence any retional, state, or local legislation or did it participate or intervers in any optical campaign? 1 If the foundation (if any) of tax on political expenditures (section 4985) imposed during the year: 1 On the foundation (if any) of tax on political expenditures (section 4985) imposed during the year: 2 If the foundation name and any changes, not previously prepared to the IRS? 1 If Yes, "attach a detailed description of the activities and copies of any materials published or distributed by the foundation on during the year? 1 Yes, "attach a detailed description of the activities. 1 If the foundat	b	Domestic	c foundations that meet the section 4940(e) requirements in Part V, check here	▶ 📖	and enter 1%	} [1	<u> </u>	8	<u>4,7</u>	38.
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 3 Add lines 1 and 2 4 Subtilie A (income) bix (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 5 Tax based on investment lincome. Subtract line 4 from line 3. If zero or less, enter -0- 5 Tax based on investment lincome. Subtract line 4 from line 3. If zero or less, enter -0- 5 Tex based on investment lincome. Subtract line 4 from line 3. If zero or less, enter -0- 5 Tex based on investment lincome. Subtract line 4 from line 3. If zero or less, enter -0- 5 Tex based on investment lincome. Subtract line 4 from line 3. If zero or less, enter -0- 5 Tex based on investment lincome. Subtract line 4 from line 3. If zero or less, enter -0- 6 Tex discours or organizations: 1 the wind of the 10 trust organization or line 10 time 10 to 10 trust organization. 1 the wind line 10 time 10 to be: Credited to 2014 estimated tax. Part VII-A Statements Regarding Activities 1a During the tax year, did the 10 time 5 and 6, enter the amount organization or did it participate or interver in any potifical campaign? 1a During the tax year, did the 10 time		of Part I,	line 27b								
3 Add lines 1 and 2 Subtite A (income) tax (domesto section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- Tax based on investment income. Subtract line 4 from line 5. If zero or less, enter -0- Tax based on investment income. Subtract line 4 from line 5. If zero or less, enter -0- Tax based on population for extension of time to line (form 8888) Tax based on population for extension of time to line (form 8888) Tax based on population for extension of time to line (form 8888) Tax based on population for extension of time to line (form 8888) Tax based on population for extension of time to line (form 8888) Tax based on population for extension of time to line (form 8888) Tax based on population for extension of line 10 to be credited to 2014 estimated tax. Check here of the amount overpaid Tax based on the foundation of line 10 to be credited to 2014 estimated tax by the amount overpaid Tax based on the foundation of line 10 to be credited to 2014 estimated tax by the amount overpaid Tax based on the foundation of line form the subtract line and the amount overpaid Tax based on the foundation of line form the subtract line and the amount overpaid Tax based on the subtract line and the foundation and the population of line activities. Tax based on the foundation line Ferm 1120-POL for this year? Tax based on the foundation line Ferm 1120-POL for this year? Tax based on the foundation line Ferm 1120-POL for this year? Tax based on the foundation line ferm 1120-POL for this year? Tax based on the foundation many activities that have not pr	C	All other	domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4%	of Pari	t I, line 12, col. (b). 🗦						_
4 Subtilité A (norme) tax (domestic section 4947(s)(1) trusts and traxable foundations only, Others enter -0-) 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- 6 Credits/Paymonts: a 2013 estimated tax payments and 2012 overpayment credited to 2013 6 Exempt foreign organizations: -1 tax withheld at source 6 Tax paid with application for extension of time to file (Form 8988) 6 117,300. 6 Backup withhold 7 Total credits and payments. Add lines 6a through 6d 8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 9 Tax dee. If the total of lines 5 and 8 is more than line 7, enter amount owed 9 Tax dee. If the total of lines 5 and 8 is more than line 7, enter amount owed 9 Tax dee. If the total of lines 5 and 8, enter the amount overpaid 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 11 Overpayment. If line 7 is more than 100 during the tax estimated tax. Credited to 2014 test instead tax by 47, 562. Refunded 11 0. Part VIII-A Statements Regarding Activities 1a Dung the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participated for distributed by the foundation and the foundation and the foundation and the foundation and the foundation and the foundation and connection with the activities 1b Ut the enswers "Yes" to 1 ₂ or 1 ₀ , 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 is Form 1120 POL. for this year? 2 Did the foundation angaged in any activities that have not previously reported to the IRS? 2 If "Yes," attrach a detailed description of the activities 3 It as the foundation angaged in any activities that have not previously reported to the IRS? 4 If "Yes," attrach a detailed and any changes, not previously reported to the IRS? 4 If "Yes," attrach the statement required by General Instruction 7 of the Acti				thers en	iter -0-)	ļ	2	ļ			
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-6 Credits/Payments: a 2013 estimated ax payments and 2012 overpayment credited to 2013 b Exempt foreign organizations - tax withheld at source c Tax paid with application for extension of time to the (Form 8868) d Backup withholding erroneously withheld 7 Total credits and payments. Add lines 6a through 6d 8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 9 Tax dae. If the total of lines 5 and 8 is more than line 7, enter amount owed 10 Overpayment. Illine 7 is more than the total of lines 5 and 8, enter the amount overpaid 11 Enter the amount of line 10 to bit; Credited to 2014 estimated tax. Payment of line 10 to bit; Credi						ļ		ļ	8	4,7	38.
6 Credits/Payments: a 2013 estimated tax payments and 2012 overpayment credited to 2013 be Exempt foreign organizations - tax withheld at source c Tax paid with application for extension of time to file (Form 8868) 6				ithers e	nter -0-)			1			0.
a 2013 estimated bax payments and 2012 overpayment credited to 2013 b Exempt foreign organizations - tax withheld at source 6B 6C 7						ļ	5	ļ	8	4,7	<u> 38.</u>
b Exempt foreign organizations - tax withhelid at source c Tax paid with application for extension of time to file (Form 8868) d Backup withholding erroneously withhelid 7 Total credits and payments. Add lines 6a through 6d 8 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 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 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 11 0 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 12 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or interven in any political campaign? 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or interven in any political campaign? 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or interven in any political campaign? 1b D Ind it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)? 1b X X X X X X X X X X X X X X X X X X X				1.	1177	ا مما		1			
c Tax paid with application for extension of time to file (Form 8868) d Backup withholding erroneously withhold 8 Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 220 is attached 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 is more than the total of lines 5 and 8 is more than the total of lines 5 and 8 is more than the total of lines 5 and 8, enter the amount owed 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount owerpaid 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 11 Enter the amount of line 10 to be. Credited to 2014 estimated tax ▶ 47,562. Refunded ▶ 10 Q. PPart VII-A Statements Regarding Activities 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervere in any political campaign? 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervere in any political campaign? 1a During the tax year, did the foundation in expenditures (section 485) imposed during the year in the definition)? 1b Lix X 1f the answer is "Yes" to 19 or 19, attach a detailed description of the activities and copies of any materials published or distributed by the foundation. ▶ S O. • (20 in foundation managers. ▶ S O. • (21 In the foundation in Errone 19-0-10) term types year? 1c X 2 Lix W 1c X 1c X 2 Lix W 1c X 3 Lix He reimbursement (1 any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ S O. • (20 in found					11/,3	00.					
d Backup withholding erroneously withhold 7 Total credits and payments. Add lines 6a through 6d 8 Total credits and payments. Add lines 6a through 6d 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9 Total visit in the 10 to 10 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 11 Enter the amount of line 10 to be: Greditled to 2014 estimated tax ▶ 47 , 56 2 . Refunded ▶ 11 0 47,56 2. 11 Enter the amount of line 10 to be: Greditled to 2014 estimated tax ▶ 47 , 56 2 . Refunded ▶ 11 0 . Part VII-A Statements Regarding Activities 1 a burning the tax year, did the boundation aftempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)? If the answer is "Yes" to 7 ₁₀ or 10, attach a detailed description of the activities of Did the foundation file Form 1120-P0L for this year? If Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation N ≥ \$ 0 . (2) On foundation managers. ▶ \$ 0 . Enter the rembursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$ 0 . 2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," has the filed a fax return on Form 990-T for this year? A bill the individual 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 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? N/A 4b S Was three a liquidation, firermination		•	• •		15.0	00					
Total credits and payments. Add lines 6a through 6d 8 Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 s attached 8 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 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 11 Enter the amount of line 10 to be: Credited to 2014 estimated tax ► 12 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 13 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 14 Dud it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)? 15 If the answer is "Yes" to 1 ₈ or 1 ₀ , attach a defailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities and copies of any materials published or distributed by the foundation in Enter 1120-POL for this year? 16 Enter the amount (d any) of tax on political expenditures (section 4955) imposed during the year: 17 On the foundation. Ps. \$ 0. (2) On foundation managers. ► \$ 0. 18 Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ► \$ 0. 19 Esta the foundation engaged in any activities that have not previously been reported to the IRS? 10 The time the similar instruments? If "Yes," attach a conformed copy of the changes 11 Yes," attach a detailed description of the activities. 12 A Was there a liquidation, termination, dissolution, or substantial contraction during the year? 13 A We the requirements of section 508(e) (relianting to sections 4941 through 4945) satisfied either: 15 By language in the					15,0	00.		-			
8 Enter any penalty for underpayment of estimated tax. Check here		-	•	60	<u> </u>		_	ļ	1 2	າ	00
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b If "Yes," has it filed a tax return on Form 990-T for this year? 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? 6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: 8 By language in the governing instrument, or 8 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? 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 X 8a Enter the states to which the foundation reports or with which it is registered (see instructions) CA b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or 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) or 4942(j)(5) for calendar year 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? If "Yes," complete Part XIV 9 X 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses 10 X		bylaws, o	or other similar instruments? If "Yes," attach a conformed copy of the change	es					3		
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If "Yes," attach the statement required by General Instruction T 6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? 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 X 8a Enter the states to which the foundation reports or with which it is registered (see instructions) CA b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or 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) or 4942(j)(5) for calendar year 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? If "Yes," complete Part XIV 9 X 10 Did any persons become substantial contributors during the tax year? if "Yes," attach a schedule listing their names and addresses	b	If "Yes," h	as it filed a tax return on Form 990-T for this year?				N	I/A	4b		
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10 Did any persons become substantial contributors during the tax year? H "Yes," attach a schedule listing their names and addresses 10 X	3					ioi caiel	iual		ا ہ ا		x
	10			•					-		
		2.2 <u>3.17 p</u>	attach a science of the science of t	as nating	THE TRAINES BITO BOULESSES			For		·PF (

10-10-13

Form **990-PF** (2013)

Form 990-PF (2013) BLOOMFIELD FAMILY FOUN			20-61560	14	Page 6			
Part VII-B Statements Regarding Activities for White	ch Form 4720 May Be I	Required (contin	ued)					
5a During the year did the foundation pay or incur any amount to:		•	I		\top			
'(1) Carry on propaganda, or otherwise attempt to influence legislation (se	ection 4945(e))?	Y	es X No					
(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly,								
any voter registration drive?	,, , , ,		es X No					
(3) Provide a grant to an individual for travel, study, or other similar purp	oses?		es X No					
(4) Provide a grant to an organization other than a charitable, etc., organi				- 1				
509(a)(1), (2), or (3), or section 4940(d)(2)?	zation described in section		es X No					
(5) Provide for any purpose other than religious, charitable, scientific, lite	erant or adjugational nurnages or t		55 [22] 110					
	rary, or educational purposes, or i		es X No					
the prevention of cruelty to children or animals?			es Lal No		1			
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualif	·	in Regulations	NT / 3		-			
section 53.4945 or in a current notice regarding disaster assistance (see in	•		N/A	5b	+			
Organizations relying on a current notice regarding disaster assistance chi					1 '			
c If the answer is "Yes" to question 5a(4), does the foundation claim exempt								
expenditure responsibility for the grant?		I/A L Y	es L No					
If "Yes," attach the statement required by Regulations section 53	• •			- 1				
6a Did the foundation, during the year, receive any funds, directly or indirectly	y, to pay premiums on			- 1				
a personal benefit contract?		Y(es X No	_				
b Did the foundation, during the year, pay premiums, directly or indirectly, o	in a personal benefit contract?		L	6b	X			
If "Yes" to 6b, file Form 8870.								
7a At any time during the tax year, was the foundation a party to a prohibited	tax shelter transaction?	Yo	es 🗶 No 📙		ı			
b If "Yes," did the foundation receive any proceeds or have any net income a	ttributable to the transaction?		N/A	7b				
Part VIII Information About Officers, Directors, Tr	ustees, Foundation Ma	nagers, Highly	У					
Paid Employees, and Contractors								
1 List all officers, directors, trustees, foundation managers and t	heir compensation.							
() Name and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans and deferred	(e) E)	xpense nt, other			
(a) Name and address	to position	enter -0-)	and deferred compensation	allow	vances			
MARGARET BLOOMFIELD (DECEASED)	PRESIDENT/DIR	ECTOR						
1262 CORSICA DRIVE				l				
PACIFIC PALISADES, CA 90272	1.00	0.	0.		0.			
BILL BLOOMFIELD	CO-TRUSTEE							
940 1ST STREET				l				
MANHATTAN BEACH, CA 90266	1.00	0.	0.	l	0.			
JOANNE HUNTER	CO-TRUSTEE							
801 PACIFIC AVENUE								
MANHATTAN BEACH, CA 90266	1.00	0.	0.	l	0.			
2 Compensation of five highest-paid employees (other than those	e included on line 1). If none,	enter "NONE."						
	(b) Title, and average		(d) Contributions to	(e) E	xpense			
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	employee benefit plans and deferred		nt, other vances			
NONE	develor to position		compensation	<u> </u>	411000			
	-							
			-					
								
	 							
			<u> </u>					
Total number of other employees paid over \$50,000		<u> </u>			0			
Total number of other employees paid over \$50,000			<u> </u>	000 5				
			Form	990-PI	r (2013)			

10-10-13

Form **990-PF** (2013)

0.

Total. Add lines 1 through 3

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

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

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

Form **990-PF** (2013)

418.

966.

4

5

6

income. Enter 1% of Part I, line 27b

6 Adjusted qualifying distributions. Subtract line 5 from line 4

4940(e) reduction of tax in those years.

Corpus Years prior to 2012 2012	
1 Distributable amount for 2013 from Part XI,	
· 1	2,756,146.
2 Undistributed income, if any, as of the end of 2013	· · · · · · · · · · · · · · · · · · ·
a Enter amount for 2012 only 999, 247.	
b Total for prior years:	
, , , 0.	
3 Excess distributions carryover, if any, to 2013:	
a From 2008	
b From 2009	
c From 2010	
d From 2011	
e From 2012	
f Total of lines 3a through e 0 .	
4 Qualifying distributions for 2013 from	
Part XII, line 4: ►\$ 1 , 418 , 966 .	
a Applied to 2012, but not more than line 2a	<u> </u>
b 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 2013 distributable amount	419,719.
e Remaining amount distributed out of corpus	<u>-</u>
5 Excess distributions carryover applied to 2013 (If an amount appears in column (d), the same amount must be shown in column (a))	0.
6 Enter the net total of each column as indicated below:	
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	
b Prior years' undistributed income. Subtract	
line 4b from line 2b	
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed 0 •	
d Subtract line 6c from line 6b. Taxable	
amount - see instructions	
e Undistributed income for 2012. Subtract line	
4a from line 2a. Taxable amount - see instr.	
f Undistributed income for 2013. Subtract	<u> </u>
lines 4d and 5 from line 1. This amount must	
be distributed in 2014	2,336,427.
7 Amounts treated as distributions out of	
corpus to satisfy requirements imposed by	
section 170(b)(1)(F) or 4942(g)(3)	
8 Excess distributions carryover from 2008	
not applied on line 5 or line 7	
9 Excess distributions carryover to 2014.	
Subtract lines 7 and 8 from line 6a 0 .	
10 Analysis of line 9:	
a Excess from 2009	
b Excess from 2010	
c Excess from 2011	
d Excess from 2012	
e Excess from 2013	Form QQQ-DE (2013)

323581 10-10-13

	ELD FAMILY			20-61	56014 Page 10
Part XIV Private Operating F			-A, question 9)	N/A	
1 at If the foundation has received a ruling of		· · · · · · ·			
foundation, and the ruling is effective fo		-	▶	T	
b Check box to indicate whether the found		ng foundation described i		4942(j)(3) or49	42(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	(b) 2012	Prior 3 years	(4) 2010	(a) Total
income from Part I or the minimum	(a) 2013	(b) 2012	(c) 2011	(d) 2010	(e) Total
investment return from Part X for					
each year listed				ļ	
b 85% of line 2a					
c Qualifying distributions from Part XII,	1	1			
line 4 for each year listed			<u>.</u>		
d Amounts included in line 2c not					
used directly for active conduct of	İ				
exempt activities					
e Qualifying distributions made directly	j				
for active conduct of exempt activities.					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon;					
a "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 c "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		<u> </u>		1 105 000	<u>.</u>
Part XV Supplementary Info			it the foundation	n nad \$5,000 or mo	ore in assets
1 Information Regarding Foundation	n Managers:				
a List any managers of the foundation wh		than 2% of the total conti	ributions received by th	e foundation before the clos	e of any tax
year (but only if they have contributed r					•
MARGARET BLOOMFIELD	(DECEASED)				
b List any managers of the foundation who ther entity) of which the foundation ha			or an equally large port	ion of the ownership of a pa	rtnership or
NONE	•				
2 Information Regarding Contribut	ion Grant Gift Loan	Scholarship etc. Pr	ograme:		
Check here ► X if the foundation of				not accept unsolicited requ	ests for funds. If
the foundation makes gifts, grants, etc.	(see instructions) to indiv	riduals or organizations u	nder other conditions, o	complete items 2a, b, c, and	d.
a The name, address, and telephone num	ber or e-mail address of t	he person to whom apple	cations should be addre	essed.	
		La santa man when	wv madii	· 	
b The form in which applications should b	e submitted and informa	tion and materials they sh	ould include:		
c Any submission deadlines:					<u> </u>
d Any restrictions or limitations on award	e cuch ac hy coograchia	al aroan, chardable fields	kindo of inotitutions	other factors	
d Any restrictions or limitations on award	s, such as by geographica	n areas, charitable fields,	KINUS OF INSTITUTIONS, OF	omer factors;	

Part XV Supplementary Informa				
3 Grants and Contributions Paid During Recipient	If recipient is an individual,	Payment		
Name and address (home or business)	show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
a Paid during the year				
AIDS STILL REQUIRED	NONE	₽C	FUND REBUILDING	
P.O. BOX 7353			COMMUNITIES	10.000
SANTA MONICA, CA 90406				10,000
AMERICAN HEART ASSOCIATION	NONE	PC	FUND BUILDING	
7272 GREENVILLE AVE			HEALTHIER LIVES	25 000
DALLAS, TX 75231	 			25,000
APDA PARKINSON PLAZA 135	NONE	PC	FUND TO PROMOTE RESEARCH FOR THE CURE	
STATEN ISLAND, NY 10305			AND ALLEVATION	1,500.
,				
CHILDRENS HOSPITAL LA	NONE	PC	FUND RESEARCH PROGRAMS	
DEPARTMENT #7924	10112		TOND RESERVED TROGRESS	
LOS ANGELES, CA 90084-7924				25,000.
				······································
CITY OF HOPE	NONE	PC	EINID DECENDOU	
1500 E DUARTE RD	NONE	FC	FUND RESEARCH, TREATEMENT AND	
DUARTE, CA 91010			EDUCATIONAL	
			INSTITUTION	10,000.
	CONTINUATION SHEE	T(S)	▶ 3a	1,400,000.
b Approved for future payment				
NONE				
		<u> </u>	1	
Total			▶ 3b	0.

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelate	d business income		ed by section 512, 513, or 514	(e)
•	(a)	(b)	(C) Exclu-	(d)	Related or exempt
1 Program service revenue:	Business code	Amount	sion	Amount	function income
a					
b			+ +		
C	_		1 1		
d	_		1 1		
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments			1 1		
3 Interest on savings and temporary cash					
investments			14	265,160.	
4 Dividends and interest from securities			14	737,785.	
5 Net rental income or (loss) from real estate:					· -
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income			18	1,037.	
8 Gain or (loss) from sales of assets other than inventory			18	3,404,307.	
9 Net income or (loss) from special events					
O Gross profit or (loss) from sales of inventory					
1 Other revenue:					
a					
b					-
C	_ [
d					
е					
12 Subtotal. Add columns (b), (d), and (e)		0	•	4,408,289.	
13 Total. Add line 12, columns (b), (d), and (e)				13	4,408,289

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).
3621 -10-13	Form 990-PF (

Form 99			FIELD FA				20-615			age 13
Part :	XVII	Information Re Exempt Organ		nsfers To	and Transactions	and Relations	ships With Noncha	ıritable	9	
1 Dic	the or			y of the following	ng with any other organizat	ion described in sec	tion 501(c) of	\Box	Yes	No
					27, relating to political orga		, ,			
		from the reporting found								
	Cash				-			1a(1)		X
	Other	assets						1a(2)		X
b Oth	ner tran	sactions:								
(1)	Sales	of assets to a noncharita	ible exempt organiz	ation				1b(1)		Х
(2)	Purch	ases of assets from a no	ncharitable exempt	organization				1b(2)		Х
(3)	Renta	l of facilities, equipment,	or other assets					1b(3)		X
(4)	Reiml	bursement arrangements	3					1b(4)		X
(5)	Loans	s or loan guarantees						1b(5)		X
(6)	Perfo	rmance of services or me	embership or fundra	aising solicitatio	ons			1b(6)		Х
	-	f facilities, equipment, ma	•					1c		X
							market value of the goods,		ets,	
						ue in any transactio	n or sharing arrangement, s	show in		
	<u>`</u>) the value of the goods,				1 (4)				
(a)Line n	10	(b) Amount involved	(c) warne o		e exempt organization	(0) Description	on of transfers, transactions, and	sharing arr	angeme	nts
	_			N/A						
	_									
	+				 -	 	 			
	+		 							
	+		<u> </u>							
						 -	-			
	1									
							- · · ·			
	i									
							•			
					••				-	
2a Ist	he four	idation directly or indirec	tly affiliated with, or	related to, one	or more tax-exempt organ	izations described				
		501(c) of the Code (othe	,	c)(3)) or in sect	tion 527?			Yes	X	No
<u>b</u> If "	Yes, co	mplete the following sch			1					
		(a) Name of org	ganization		(b) Type of organization	<u> </u>	(c) Description of relations	hib		
		N/A				ļ				
							-			
	Under	penalties of periury. I declare	that I have examined the	his return, includir	ng accompanying schedules and	statements and to the	e hest of my knowledge			
Sign					n taxpayer) is based on all infor		Ma	y the IRS our urn with the		
Here		111/4	(d) 10 1		19-1374	- Trus	top sho	wn below	(see inst	7
	Sen	ature of officer or treatee		·	Date	Title	//	<u>X</u> Yes		J No
		Print/Type preparer's na		Preparer's s	ignature	Date	Check if PTIN			
			-	1 '			self- employed			
Paid		JOAN S. MC	MAHON	()az	menal.	8/9/14	· • I	0966	494	
Prepa	arer	JOAN S. MC	OITTE TAX	X LLP	<i>,,</i> , , , , , , , , , , , , , , , , , ,	-1	Firm's EIN ▶ 86-1			
Hea (Only	-		V			1			

Form **990-PF** (2013)

Phone no. (415) 783-4000

Firm's address ▶ 555 MISSION STREET

SAN FRANCISCO, CA 94105

BLOOMFIELD FAMILY FOUNDATION

Part XV Supplementary Information 3 Grants and Contributions Paid During the				
Recipient	If recipient is an individual,	Famadata	Durnana of ave-4	
Name and address (home or business)	show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
COMMON CAUSE EDUCATION FUND	NONE	PC	RESTORING THE CORE	
1133 19TH STREET NW NINTH FLOOR			VALUES OF AMERICAN	
WASHINGTON, DC 20036		<u> </u>	DEMOCRACY	4,000
CONCERN FOUNDATION	NONE	₽C	FUND EDUCATIONAL AND	
1026 S ROBERTSON BLVD STE 300			RESEARCH PROGRAMS	50 000
LOS ANGELES, CA 90035				50,000
CRIMINAL THORICE LEGAL ECONOMICA	NOVE	nc.	EINE EDUCATIONAL AND	
CRIMINAL JUSTICE LEGAL FOUNDATION	NONE	PC	FUND EDUCATIONAL AND	
2131 L STREET			RESEARCH PROGRAMS	E0 000
SACRAMENTO, CA 95812				50,000
EDUCAMOR A PACELLENCE	NONE	nc.	FUND EDUCATION	
EDUCATORS 4 EXCELLENCE 333 WEST 39TH STREET SUITE 703	NONE	PC	PROGRAMS	
NEW YORK, NY 10018			PROGRAMS	25,000
NEW TORK, NI TOOTO		 		23,000
DEFENSE FOR DEMOCRACY	NONE	PC	FUND EDUCATION	
1020 19TH STREET	10112		PROGRAMS	
WASHINGTON, DC 20036			I nooidans	5,750
,	-			
FRIENDS FOR CASA HOGAR	NONE	PC	SUPPORT ORPHANAGE	
2711 N SEPULVEDA BLVD				
MANHATTAN BEACH, CA 90266				26,000
GOODWILL SOUTHERN CA	NONE	₽C	FUND EDUCATION	
342 N SAN FERNANDO ROAD			PROGRAMS	
LOS ANGELES, CA 90031		<u> </u>		750
HEALING HANDS OF JOY	NONE	₽C	FUND EDUCATION	
294 CLINTON ST # 2		1	PROGRAMS	
BROOKLIN, NY 11201	+	1		52,000
TONGGON GANGER GRAMBER POINTERNATION	YOUE		GUDDODE GANGED	
JONSSON CANCER CENTER FOUNDATION	NONE	PC	SUPPORT CANCER	
8-950 FACTOR BUILDING, BOX 951780			RESEARCH AT UCLA	1 000
LOS ANGELES, CA 90095	1			1,000
JUNIOR ACHIEVEMENT	NONE	PC	SUPPORT YOUNG PEOPLE	
ONE EDUCATION WAY	[10112	[TO OWN THEIR ECONOMIC	
COLORADO SPRINGS, CO 80906			SUCCESS	10,000
Total from continuation sheets			- 	1,328,500

BLOOMFIELD FAMILY FOUNDATION

3 Grants and Contributions Paid During the Y	ear (Continuation)			
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	oonal ballon	
LA BIOMED	NONE	PC	TO ENGAGE IN	
11124 W CARSON ST BLDG N -14			BIOMEDICAL RESEARCH	
TORRANCE, CA 90502				20,00
MEALS ON WHEELS	NONE	PC	TO PROMOTE PHYSICAL	
700 JEWEL AVE	1,01,2		SOCIAL, EMOTIONAL WELL	
PACIFIC GROVE, CA 93950			BEING AND INDEPENDENCE	
			OF SENIORS.	500
MIND RESEARCH INSTITUTE	NONE	PC	FUND EDUCATIONAL	
111 ACADEMY SUITE 100			PROGRAMS	
IRVINE, CA 92617				263,50
NATIONAL PARKINSONS FOUNDATION	NONE	₽C	FUND RESEARCH PROGRAMS	
1501 N.W. 9TH AVE/BOB HOPE ROAD				
MIAMI, FL 33136				25,000
NATURAL HISTORY MUSEUM	NONE	PC	MUSEUM INSPIRES A	
2559 PUESTA DEL SOL	1012		THIRST FOR DISCOVERY	
SANTA BARBARA, CA 93105			AND PASSION FOR THE	
			NATURAL WORLD.	1,000
OCCIDENTAL COLLEGE	NONE	PC	FUND EDUCATIONAL	
1600 CAMPUS RD			PROGRAMS	
LOS ANGELES, CA 90041				1,000
PACIFIC RESEARCH INSTITUTE	NONE	PC	FUND RESEARCH PROGRAMS	
ONE EMBARCADERO CENTER STE 350				
SAN FRANCISCO, CA 94111				10,000
PEOPLE FOR COMMUNITY IMPROVEMENT	NONE	PC	FUND RESEARCH PROGRAMS	
13008 S FIGUEROA ST LOS ANGELES, CA 90503				20.000
LOS ANGENES, CA 30303			· · ·	30,000
PROVIDENCE LCM HEALTH FOUNDATION	NONE	PC	FUND RESEARCH PROGRAMS	
4101 TORRANCE BLVD				25 000
TORRANCE, CA 90061	-	<u> </u>		25,000
RONALD REAGAN PRESIDENTIAL FOUNDATION	NONE	₽C	SUPPORT CHARITABLE	
40 PRESIDENTIAL DRIVE			ACTIVITIES	
SIMI VALLEY, CA 93065 Total from continuation sheets	1			1,000

BLOOMFIELD FAMILY FOUNDATION

Part XV Supplementary Information 3 Grants and Contributions Paid During the Y				
· Recipient	If recipient is an individual,			
Name and address (home or business)	show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
<u> </u>	or substantial contributor	recipient	<u> </u>	
SANDPIPERS SOUTH BAY COMM FUND	NONE	PC	TO RAISE FUNDS FOR AND PROVIDE ASSISTANCE TO	
P.O. BOX 72 HERMOSA BEACH, CA 90254			THE NEEDY	50,000.
IIII DENGLI, CR 30234			THE NEBDI	30,000.
STEP UP WOMEN'S NETWORK	NONE	PC	SUPPORTING WOMEN AND	
510 S. HEWITT STREET SUITE 111	HONE	[GIRLS TO FULFILL THEIR	
LOS ANGELES, CA 90013			POTENTIAL	10,000.
,				
STUDENTS FIRST INSTITUTE	NONE	PC	FUND EDUCATION	
825 K ST. 2ND FLOOR	10.12		PROGRAMS	
SACRAMENTO, CA 95814				250,000.
STUDENTS MATTER	NONE	PC	FUND EDUCATION	
325 SHARON PARK DRIVE #521			PROGRAMS	
MENLO PARK, CA 94025		ļ		100,000.
THE ROTARY FOUNDATION	NONE	PC	FUND EDUCATION	
P.O. BOX 324			PROGRAMS	
SUN VALLEY, CA 91352				1,000.
UCLA DEPT OF NEUROONCOLOGY	NONE	₽C	FUND RESEARCH PROGRAMS	
10920 WILSHIRE BLVD, SUITE 1400				
LOS ANGELES, CA 90024				250,000.
UCLA FOUNDATION	NONE	₽C	FUND RESEARCH PROGRAMS	
10920 WILSHIRE BLVD, SUITE 1400 LOS ANGELES, CA 90013				20,000.
		1		<u> </u>
UNITED WAY OF LOS ANGELES	NONE	PC	TO IMPROVE QUALITY OF	
1150 S. OLIVE STREET T500	NON2	ſ	LIFE FOR EVERYONE IN	
LOS ANGELES, CA 90015			GREATER LOS ANGELES	1,000.
VANDERBILT UNIVERSITY	NONE	PC	FUND EDUCATION	
GIFT PROCESSING, VU STATION B #357727		1	PROGRAMS	
2301 NASHVILLE, TN 37235				10,000.
KCET	NONE	PC	FUND RESEARCH PROGRAMS	
2900 WEST ALAMEDA AVE.				40.000
BURBANK, CA 91505 Total from continuation sheets	<u> </u>			10,000.

Part XV Supplementary Information 3 Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to Foundation status of recipient Purpose of grant or contribution Amount any foundation manager Name and address (home or business) or substantial contributor KIPP FOUNDATION NONE ÞС FUND EDUCATION 135 MAIN STREET PROGRAMS SAN FRANCISCO, CA 94105 25,000. Total from continuation sheets

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.
 ▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www irs qov/form990 ·

OMB No 1545-0047

2013

Name of the organization

Employer identification number

I	BLOOMFIELD FAMILY FOUNDATION	20-6156014
Organization type (check	cone):	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt chantable trust not treated as a private foundation	
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
	n is covered by the General Rule or a Special Rule. (c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Ri	ule See instructions
General Rule		
	ion filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in maplete Parts I and II.	noney or property) from any one
Special Rules		
509(a)(1) and 17	1(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the rec 0(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the n (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.	
total contribution	1(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contr ns of more than \$1,000 for use <i>exclusively</i> for religious, chantable, scientific, literary, or ed f cruelty to children or animals Complete Parts I, II, and III.	
contributions for If this box is che purpose. Do not	1(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one control use exclusively for religious, charitable, etc., purposes, but these contributions did not to cked, enter here the total contributions that were received during the year for an exclusive complete any of the parts unless the General Rule applies to this organization because the ble, etc., contributions of \$5,000 or more during the year	tal to more than \$1,000 ely religious, charitable, etc.,
_	that is not covered by the General Rule and/or the Special Rules does not file Schedule	• • • • • • • • • • • • • • • • • • • •

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2013)

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

Name of organization

Employer identification number

BLOOMFIELD FAMILY FOUNDATION

20-6156014

Part I	Contributors (see instructions) Use duplicate copies of Part I if addit	tional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	ESTATE OF MARGARET BLOOMFIELD 1262 CORSICA DRIVE PACIFIC PALISADES, CA 90272		Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- \$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

BLOOMFIELD FAMILY FOUNDATION

20-6156014

Part II	Noncash Property (see instructions). Use duplicate copies of P.	art II if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(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	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		_	
_			
3453 10-24-	<u> </u>		990, 990-EZ, or 990-PF)

Name of organization **Employer identification number** BLOOMFIELD FAMILY FOUNDATION 20-6156014 religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations that total more than \$1,000 for the Part III Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations that 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. (Enter this information once) Use duplicate copies of Part III if additional space is needed. (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

FORM 990-PF INTERE	ST ON SAVINO	S AND TEMP	ORARY	CASH IN	VESTMENTS	STATEMENT 1
SOURCE		(A) REVEN PER BO			(B) VESTMENT ICOME	(C) ADJUSTED NET INCOME
MERRILL LYNCH - #37	544	265	,160.		265,160.	
TOTAL TO PART I, LI	NE 3	265	,160.		265,160.	
FORM 990-PF	DIVIDENDS	AND INTERE	ST FR	OM SECUR	ITIES	STATEMENT 2
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS		(A) EVENUE R BOOKS	(B) NET INVES MENT INCO	
MERRILL LYNCH - #37544 MERRILL LYNCH -	617,062.	0		617,062.	617,06	52.
#37672	120,723.	0	•	120,723.	120,72	23.
TO PART I, LINE 4	737,785.	0	•	737,785.	737,78	35.
FORM 990-PF		OTHER IN	COME		- 102	STATEMENT 3
DESCRIPTION			(A) REVENT ER BO		(B) ET INVEST- ENT INCOME	
OTHER INCOME				1,037.	1,037	7.

1,037. 1,037.

TOTAL TO FORM 990-PF, PART I, LINE 11

FORM 990-PF	ACCOUNTI	NG FEES		STATEMENT 4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING FEES	37,611.	18,806.		18,806.
TO FORM 990-PF, PG 1, LN 16B	37,611.	18,806.		18,806.
FORM 990-PF O	THER PROFES	SIONAL FEES		STATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
INVESTMENT MANAGEMENT FEES	138,136.	138,136.		0.
TO FORM 990-PF, PG 1, LN 16C	138,136.	138,136.		0.
FORM 990-PF	TAX	ES	· · · · · · · · · · · · · · · · · · ·	STATEMENT 6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
EXCISE TAXES FOREIGN TAXES FILING FEES	271,354. 14,451. 160.	0. 14,451. 0.		0. 0. 160.
TO FORM 990-PF, PG 1, LN 18 =	285,965.	14,451.		160.
		FTC OR FINID BA	LANCES	STATEMENT 7
FORM 990-PF OTHER INCREASES	IN NET ASS	EID ON FOND DA		
FORM 990-PF OTHER INCREASES DESCRIPTION	IN NET ASS	EID ON FOND BA		AMOUNT
	IN NET ASS	EID ON FOND BA	_	AMOUNT 6,083,106. 5,842,859.

FORM 990-PF U.S. AND STATE	CITY GOV	ERNMENT	OBLIGATIONS	STATEMENT	8
DESCRIPTION	U.S. GOV'T	OTHER GOV'T	BOOK VALUE	FAIR MARKE' VALUE	r
US GOVERNMENT OBLIGATIONS	<u> </u>		12,904,962.	12,904,9	62.
TOTAL U.S. GOVERNMENT OBLIGATIONS		-	12,904,962.	12,904,9	62.
TOTAL STATE AND MUNICIPAL GOVERNME	ENT OBLIG	ATIONS			
TOTAL TO FORM 990-PF, PART II, LIN	NE 10A	=	12,904,962.	12,904,9	62.
FORM 990-PF CO	ORPORATE :	STOCK		STATEMENT	9
DESCRIPTION			BOOK VALUE	FAIR MARKE	г
EQUITIES MUTUAL FUNDS		-	45,253,614. 1,278,926.	45,253,6 1,278,9	
TOTAL TO FORM 990-PF, PART II, LIN	NE 10B	=	46,532,540.	46,532,5	40.
FORM 990-PF CO	ORPORATE 1	BONDS		STATEMENT	10
DESCRIPTION			BOOK VALUE	FAIR MARKE	r
CORPORATE BONDS		-	3,639,225.	3,639,2	25.
TOTAL TO FORM 990-PF, PART II, LIN	TT 100	-	3,639,225.	3,639,2	2.5

Form **8868**

(Rev. January 2014)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return.

▶ Information about Form 8868 and its instructions is at www.irs.gov/form8868 ⋅

OMB No 1545-1709

• If you	are filing for an Automatic 3-Month Extension, comple	to only Dr	art Land chack this hov			X
-	are filing for an Additional (Not Automatic) 3-Month Ex	-	·	thic form)		<u> </u>
-	• • • • • • • • • • • • • • • • • • • •	-				
	complete Part II unless you have already been granted a					aration
	nic filing (e-file). You can electronically file Form 8868 if y					
	d to file Form 990-T), or an additional (not automatic) 3-mon					
	to file any of the forms listed in Part I or Part II with the exc	-				
	al Benefit Contracts, which must be sent to the IRS in pap		(see instructions). For more details (on the elec	ctronic filing of this f	torm,
_	w irs gov/efile and click on e-file for Charities & Nonprofits		1 1	-i - n		
Part						
	oration required to file Form 990-T and requesting an autor	natic 6-mo	onth extension - check this box and	complete	_	
Part I o	•				•	
	r corporations (including 1120-C filers), partnerships, REM come tax returns	ICs, and t	rusts must use Form 7004 to reques	t an exten	ision of time	
to me n	Come tax returns			Enter file	er's identifying nun	nber
Type o	Name of exempt organization or other filer, see instru	ctions.		Employe	r identification numl	oer (EIN) or
print						
File by the	BLOOMFIELD FAMILY FOUNDATION	ON			20-615601	. 4
due date	or Number, street, and room or suite no. If a P.O. box, s	ee instruc	tions.	Social se	curity number (SSN	1)
return Se instruction	•	oreign add	tress see instructions	<u> </u>		
	MANHATTAN BEACH, CA 90266	oronger duc				
Enter th	e Return code for the return that this application is for (file	a senara	te application for each return)			0 4
Linco, ti	to retain code for the retain that this application is for the	a separa	ac application for each return)			
Applica	ation	Return	Application			Return
Is For		Code	Is For			Code
	90 or Form 990-EZ	01	Form 990-T (corporation)			07
Form 9		02	Form 1041-A			
						08
	720 (individual)	03	Form 4720 (other than individual)			09
Form 9	· · · · · · · · · · · · · · · · · · ·	04	Form 5227			10
	90-T (sec 401(a) or 408(a) trust)	05	Form 6069			11
Form 9	90-T (trust other than above) WILLIAM E. BLOO	METE:	Form 8870			12
	books are in the care of P.O. BOX 2098			0267		
	books are in the care of \triangleright F.O. BOX 2096 - bhone No \triangleright (310) 454-5571	- MATA		0207		
			Fax No 🕨			
	e organization does not have an office or place of business					
_	s is for a Group Return, enter the organization's four digit	1				
box 🕨			ch a list with the names and EINs of		ers the extension is	for
1	request an automatic 3-month (6 months for a corporation AUGUST 15, 2014, to file the exemp	•	to file Form 990-T) extension of time tion return for the organization name		The extension	
IS	for the organization's return for					
•	X calendar year 2013 or					
•	tax year beginning	, an	ed ending			
			<u> </u>		_	
2 If	the tax year entered in line 1 is for less than 12 months, c	heck reas	on· Initial return	Fınal retur	'n	
	Change in accounting period				Γ	
	this application is for Forms 990-BL, 990-PF, 990-T, 4720,	or 6069,	enter the tentative tax, less any		120	000
_	onrefundable credits. See instructions.			3a	\$ 130	0,000.
	this application is for Forms 990-PF, 990-T, 4720, or 6069				. 116	- 000
_	stimated tax payments made. Include any prior year overp			3b	\$ 115	5,000.
	alance due. Subtract line 3b from line 3a. Include your pa					- 000
	y using EFTPS (Electronic Federal Tax Payment System).			3c		<u>,000.</u>
Caution Instruct	 If you are going to make an electronic funds withdrawal ions. 	(direct de	bit) with this Form 8868, see Form 8	453-EO ar	nd Form 8879-EO fo	or payment
LHA 323841	For Privacy Act and Paperwork Reduction Act Notice,	see instr	uctions.	· ·	Form 8868 (R	ev. 1-2014)
12-31-13						