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# SCANNED DEC 0 2 2014

Form **990-PF** 

# EXTENSION GRANTED TO 11/17/2014 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.

OMB No 1545-0052

Depar Intern	tment al Rev	of the Treasury renue Service					PF and its separate					90pf.	Open to Pub	lic Inspection
For c	alen	dar year 2013 o	r tax year	beginning				, and e	nding	,				
Nar	ne of	foundation								A Empl	oyer	identification	number	
J	ĮΚ	ES FOUN	DATIC	N						26	- 4	226214		
		nd street (or P 0 b		f mail is not d	elivered to street	address	)		Room/suite		hone	number 2) 400-	6599	
		own, state or pro		intry, and Z	IP or foreign p	ostal co	ode		<u> </u>	<del></del>		application is pe		re 🕨
		PORT BE			2660					]				
<b>G</b> 0	heck	all that apply:		Initial retur			Initial return of a f	ormer public	charity	<b>D</b> 1. Fo	reigi	organizations	, check here	
				Final returi	•	<u> </u>	Amended return			2. For	eign	organizations med ere and attach cor	eting the 85% tes	st,
<u></u>	hook	type of organiza		Address cl		omnt n	Name change rivate foundation			1				
, C	_	type of organiza ction 4947(a)(1)			· · · <u>- · · · - · · · · · · · · · · · ·</u>		axable private found	ation				foundation stat tion 507(b)(1)		
I Fa		rket value of all			J Account			Acc	rual	7		idation is in a 6		
(fr	om F	Part II, col (c),				ther (sp						tion 507(b)(1)		
	\$	1				mn (d)	must be on cash	basis )		ļ				
Pa	rt I	Analysis of Re (The total of amo necessarily equa	unts in colur	mns (b), (c), aı	nd (d) may not		ı) Revenue and penses per books		nvestment ome	(c)		usted net ome	(d) Disbui for charitable (cash bas	purposes
	1	Contributions,	gıfts, grant	ts, etc., rece	eived		57,281.							
	2	Check Interest on saving		n is not required	to attach Sch B					<u> </u>		RECE	-IVED	· · · · · · · · · · · · · · · · · · ·
	3	cash investments		-						<del> </del>	4			<del> </del>
	4 52	Dividends and i	interest iro	nn seconde	5			-		1	É	NOV 2	4 2014	1.
		Net rental income	or (loss)					_			۲			<u> </u>
ø	6a			assets not on	line 10					ļ	_	OGD	בוע, טוב	
eur	b	Gross sales price assets on line 6a	for all				·····			<u> </u>	<u></u>			
Revenue	7	Capital gain net in			)				0.					
	8 9	Net short-term Income modific		n		<del> </del>	<u>.</u>			-				
	10a	Gross sales less r												
	b	Less Cost of goo	ds sold											
	C	Gross profit or	(loss)											
	11	Other income				<u> </u>				<del>                                     </del>				
	12	Total. Add line				<del>                                     </del>	57,281. 0.		0.	+		0.		0.
	13 14	Other employer			s, etc					<u>'</u>		0.	-	
	15	Pension plans,		•										
ses	16a	Legal fees												
pen		Accounting fee								-				
Ä		Other profession	onal fees					-		-				
and Administrative Expenses	17 18	Interest Taxes		Q1	rmt 1	<u> </u>	67.	-	0 .	<del>                                     </del>		0.		0.
istra	19	Depreciation ar	nd depletio		IMI I		<u></u>			<del>'</del>		0.		
Ë	20	Occupancy												
Ρ	21	Travel, confere	nces, and	meetings										
and	22	Printing and pu			_	<u> </u>				<u> </u>				
ing	23	Other expenses			гмт 2	-	2,872.		48.	-		0.		<u>2,824.</u>
Operating	24	Total operating					2,939.		48.			0.		2,824.
Ö	25	Contributions,		-			22,200.	<del> </del>		+			2	2,200.
	26	Total expenses										- <u>-</u>		
_		Add lines 24 ar					25,139.		48			0.	2	<u>5,024.</u>
	27	Subtract line 20	6 from line	12:										
	l .	Excess of revenue	•			-	32,142.	-		<del> </del>				
	l .	Net investmen							0	+		0.		
	<u>ن</u>	Adjusted net in	incoming (ii ur	oganve, enter	-v-)			<b></b>					l	

orm 990-l	PF (2013) JIKES FOUNDATION	Beginning of year		1226214 Page 2
Part II	Balance Sheets Attached schedules and amounts in the description Column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
1 4 6	ask non-interest bearing	229,290.	262,601.	262,601.
	ash - non-interest-bearing	229,2900	202,001.	202,001.
l l	avings and temporary cash investments		<del></del> -	
	ccounts receivable		*	
1	ess; allowance for doubtful accounts			<u></u>
- 1	ledges receivable >		•	• •
I _	ess: allowance for doubtful accounts			
•	rants receivable			
- 1	eceivables due from officers, directors, trustees, and other			
	squalified persons			
	her notes and loans receivable		,	•
-	ess: allowance for doubtful accounts		<u> </u>	
ខ្លុំ 8 In	ventories for sale or use			
Q	repaid expenses and deferred charges			
102 11	vestments - U.S. and state government obligations			
b In	vestments - corporate stock			
€ In	vestments - corporate bonds			
11 Inv	vestments - land, buildings, and equipment basis			
Le	ss accumulated depreciation			
12 In	vestments - mortgage loans			·
13 ln	vestments - other			
14 La	and, buildings, and equipment: basis ►			
Le	ss accumulated depreciation			
15 0	ther assets (describe 🛌 )			
16 To	otal assets (to be completed by all filers - see the			
In	structions. Also, see page 1, item 1)	229,290.	262,601.	<u>262,601.</u>
17 A	ccounts payable and accrued expenses			
18 G	rants payable			
<b>ر 19</b> D	eferred revenue			
<b>20</b> ⊾⊲	pans from officers, directors, trustees, and other disqualified persons			
20 L	lortgages and other notes payable		·	
<b>22</b> 0	ther liabilities (describe $ ightharpoonup$ DUE TO AFFILIATE)	0.	1,169.	
				•
23 T	otal liabilities (add lines 17 through 22)	0.	1,169.	
F	oundations that follow SFAS 117, check here	_		
a	nd complete lines 24 through 26 and lines 30 and 31.			
8 24 U	Inrestricted			
25 T	emporarily restricted			
13   26 P	ermanently restricted			
-a I	oundations that do not follow SFAS 117, check here 🕒 🗶			
۲ a	nd complete lines 27 through 31			
27 C	apıtal stock, trust principal, or current funds	0.	0.	
28 P	aid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
Ž   29 R	letained earnings, accumulated income, endowment, or other funds	229,290.	261,432.	
₩ 30 T	otal net assets or fund balances	229,290.	261,432.	
-   -				
31 T	otal liabilities and net assets/fund balances	229,290.	262,601.	
		plancae	<u> </u>	
Part II	Milalysis of Offanges in Net Assets of Fund Da			
Total n	et assets or fund balances at beginning of year - Part II, column (a), line 3	30		
(must a	agree with end-of-year figure reported on prior year's return)		1	229,290.
Enter a	mount from Part I, line 27a		2	32,142.
	ncreases not included in line 2 (itemize)		3	0.
	es 1, 2, and 3		4	261,432.
-	ses not included in line 2 (itemize)		5	0.
	et assets or fund balances at end of year (line 4 minus line 5) - Part II, co	lumn (b), line 30	6	261,432.
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8 Enter qualifying distributions from Part XII, line 4
If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.

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7

0.

20,023.

25,024.

7 Add lines 5 and 6

Enter 1% of net investment income (1% of Part I, line 27b)

orm	n 990-PF (2013) JIKES FOUNDATION		26	<u> 5 – 4 2</u>	226214	1	Page 4
Pa	art VI Excise Tax Based on Investment Income (Section 4940(a)	), 4940(b), 4940(e)	or 494	8 - s	ee instru	ctio	1S)
1a	Exempt operating foundations described in section 4940(d)(2), check here 🕨 🔲 and enter	'N/A' on line 1.		1			
	Date of ruling or determination letter: (attach copy of letter if necessa						
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕒 🔀	and enter 1%	·	1			0.
	of Part I, line 27b			İ			,
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of P	Part I, line 12, col. (b). 丿					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others	enter -0-)		2			<u>0.</u>
3	Add lines 1 and 2			3			0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others	s enter -0-)		4			0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-			5			0.
6	Credits/Payments:						
а	2013 estimated tax payments and 2012 overpayment credited to 2013	ia					
b	Exempt foreign organizations - tax withheld at source	ib					
C	: Tax paid with application for extension of time to file (Form 8868)	ic		- 1			
d	I Backup withholding erroneously withheld 6	id					
7	Total credits and payments. Add lines 6a through 6d			7			0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	1		8			
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		▶□	9			0.
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		▶ [	10			
	Enter the amount of line 10 to be: Credited to 2014 estimated tax	Refund	ed 🕨 📑	11	•		
	art VII-A Statements Regarding Activities		<del></del>				
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation	n or did it participate or in	tervene in			Yes	No
	any political campaign?				1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (	see instructions for the de	finition)?		1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and co			or			
	distributed by the foundation in connection with the activities.						
c	: Did the foundation file Form 1120-POL for this year?				10		X
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year	r:					
Ī	(1) On the foundation. $\blacktriangleright$ \$ (2) On foundation managers. $\blacktriangleright$		0.				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure						
	managers. ►\$ 0.						
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?				2		X
	If "Yes," attach a detailed description of the activities						
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instru	ument, articles of incorpor	ation, or				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes				3		X
4a	a Did the foundation have unrelated business gross income of \$1,000 or more during the year?				4a		X
	o If "Yes," has it filed a tax return on Form 990-T for this year?			N/2	A 4b		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?				5		X
	If "Yes," attach the statement required by General Instruction T.						
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:	•			ĺ		
	By language in the governing instrument, or						
	By state legislation that effectively amends the governing instrument so that no mandatory dir	ections that conflict with t	he state la	w			
	remain in the governing instrument?				6		X
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," comple	ete Part II, col. (c), and I	Part XV		7	X	
8a	a Enter the states to which the foundation reports or with which it is registered (see instructions)	<b>&gt;</b>					
	CA						
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorn	ney General (or designate)					
	of each state as required by General Instruction G? If "No," attach explanation				_8b	X	<u></u>
9	Is the foundation claiming status as a private operating foundation within the meaning of section	n 4942(j)(3) or 4942(j)(5)	for calend	ar			
	year 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? If "Yes," comp				9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule list		s		10		<u> </u>
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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)	′	
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."		
(a) Name and address of each person paid more than \$50,000 (b) Type of serving	ce	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services	<b>&gt;</b>	0
Part IX-A Summary of Direct Charitable Activities	· · ·	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.		Expenses
1 N/A		
2		
3		
4		
Part IX-B   Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.		Amount
1 N/A		
2		
All other program-related investments. See instructions.	-	
3		
Total, Add lines 1 through 3	<b>b</b>	0.
	Forn	9 <b>90-PF</b> (2013

Pa	Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations, se	e instructions )
1	air market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	0.
b	Average of monthly cash balances	1b	0. _245,946.
c	Fair market value of all other assets	1c	
ď	Total (add lines 1a, b, and c)	1d	245,946.
e	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0 •		
2 /	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	245,946.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	3,689.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	242,257.
3	Minimum investment return. Enter 5% of line 5	6	12,113.
Pa	<b>rt XI</b> Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations an foreign organizations check here and do not complete this part.)	id certain	-
1	Minimum investment return from Part X, line 6	1	12,113.
	Tax on investment income for 2013 from Part VI, line 5		<u> </u>
	Income tax for 2013. (This does not include the tax from Part VI.)		
	Add lines 2a and 2b	2c	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	12,113.
	Recoveries of amounts treated as qualifying distributions	4	0.
	Add lines 3 and 4	5	12,113.
6	Deduction from distributable amount (see instructions)	6	0.
	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	12,113.
Pa	rt XII 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	25,024.
b	Program-related investments - total from Part IX-B	1b	0.
2 .	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	25,024.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income, Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	25,024.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of 4940(e) reduction of tax in those years.	qualifies for th	e section

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Part XIII Undistributed Income (see instructions)

	(a)	(b)	(c)	(d)
	Corpus	Years prior to 2012	2012	2013
1 Distributable amount for 2013 from Part XI, line 7				12,113.
2 Undistributed income, if any, as of the end of 2013				
a Enter amount for 2012 only			0.	
b Total for prior years:				
		0.		
3 Excess distributions carryover, if any, to 2013:				
a From 2008				
6,915.				
e From 2010 1,856.				
d From 2011 1,589.				
e From 2012 10,696.	01 056			:
f Total of lines 3a through e	21,056.			
4 Qualifying distributions for 2013 from Part XII, line 4: ► \$ 25,024.				
a Applied to 2012, but not more than line 2a			0.	
b Applied to undistributed income of prior			0.	
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2013 distributable amount				12,113.
e Remaining amount distributed out of corpus	12,911.			
5 Excess distributions carryover applied to 2013 (If an amount appears in column (d), the same amount	0.			0.
must be shown in column (a))  6 Enter the net total of each column as				
indicated below:	22 067			
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	33,967.			
b Prior years' undistributed income. Subtract line 4b from line 2b		0.		
c Enter the amount of prior years'	+			
undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2012. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2013. Subtract	į			
lines 4d and 5 from line 1. This amount must	İ			
be distributed in 2014				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2008	0.			
not applied on line 5 or line 7	<u> </u>			
9 Excess distributions carryover to 2014. Subtract lines 7 and 8 from line 6a	33,967.			
10 Analysis of line 9:	33,307.			
a Excess from 2009 6,915.				
b Excess from 2010 1,856.	ļ			
c Excess from 2011 1,589.				
d Excess from 2012 10,696.				
e Excess from 2013 12,911.				
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	OUNDATION				26214 Page 1
Part XIV Private Operating F			A, question 9)	N/A	
1 a If the foundation has received a ruling of	: determination letter that	t it is a private operating			
foundation, and the ruling is effective for	2013, enter the date of	the ruling	<b>▶</b> L		
b Check box to indicate whether the found		ng foundation described i		4942(j)(3) or 49	)42(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years	· · · · · · · · · · · · · · · · · · ·	
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					
<b>b</b> 85% of line 2a	<u> </u>				<u>_</u> .
c 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					
e 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: a "Assets" alternative test - enter:					
(1) Value of all assets	_				
(2) Value of assets qualifying					
under section 4942(j)(3)(B)(i)	l				
b "Endowment" alternative test - enter			_		
2/3 of minimum investment return shown in Part X, line 6 for each year	į				
listed					
c "Support" alternative test - enter:					
(1) Total support other than gross	<b>;</b>				
investment income (interest,	}				
dividends, rents, payments on	İ				
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	<u> </u>				
an exempt organization					
(4) Gross investment income					
Part XV Supplementary Info	rmation (Comple	te this part only	f the foundation	had \$5,000 or me	ore in assets
at any time during t			i tilo louridation	<del>40,000 01 111</del>	)
1 Information Regarding Foundatio	<del>-</del>				
a List any managers of the foundation who	•	than 2% of the total contr	hutions received by the	foundation before the ele-	co of any tay
year (but only if they have contributed m	iore than \$5,000). (See s	ection 507(d)(2).)	ibutions received by the	Touridation before the cio	se of any lax
NONE	, , ,	. ( // //			
b List any managers of the foundation who	o own 10% or more of th	ne stock of a corporation (	or an equally large porty	on of the ownership of a n	artnerebin or
other entity) of which the foundation has			or arrequally large portion	on or the ownership or a p	arthership or
NONE	· ·				
2 Information Regarding Contributi	on Grant Cift Loon	Scholarchia etc. Dr		<del>_</del>	
Check here X if the foundation o				ent annual concellected room	acts for funds. If
the foundation makes gifts, grants, etc. (					
a The name, address, and telephone number	·		<del></del>	<del></del>	
a The hame, address, and telephone hum	Jei oi e-iliali audiess oi i	пе регооп то мпош арри	Salions Should be addres	558u.	
<b>b</b> The form in which applications should b	a cubmitted and informa	tion and materials they sh	only toolings.	<del>-</del> · · · · ·	
u The form in which applications should b	e Suumilleu anu miorma	HOH AND MALERIAIS LIEV SI	ould iliciade.		
c Any submission deadlines:	<del></del>		<del></del>		
• Any submission deadiffes.					
d Any restrictions or limitations on awards	e cuch ac hy negoranhio	al areas charitable fields	kinds of institutions or	other factore:	
d Any restrictions or limitations on awards	, such as by geographics	ai ai cas, chai naoid lidios,	หแนง บา แเงแนนเบแร, Of (	טוווט ומטוטוא.	
323601 10-10-13	<del></del>	· · · · · · · · · · · · · · · · · · ·			Form <b>990-PF</b> (2013

Supplementary Information (continued) 3 · Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to any foundation manager Foundation Purpose of grant or Amount contribution status of Name and address (home or business) or substantial contributor recipient a Paid during the year FOUNDATION FOR EARLY CHILDHOOD 501(C)3 TO SUPPORT EARLY CHILDREN'S EDUCATION EDUCATION 3360 FLAIR DR, STE 100 THROUGH SOCIAL AND EL MONTE, CA 91731 EMOTIONAL DEVELOPMENT EARLY LANGUAGE 3,400. TO SUPPORT FUNDING FOR PTA CALIFORNIA CONGRESS OF PARENTS 501(C)3 SUPPORTING CHILDREN TEACHERS & STUDENTS INC 2627 VISTA DEL ORO AND FAMILIES 500. NEWPORT BEACH, CA 92660 TO SUPPORT FUNDING FOR 501(C)3 CORONA DEL MAR MIDDLE & HIGH SCHOOL BOOSTER CLUB ACADEMICS, ACTIVITIES, ARTS AND ATHLETICS AT P.O. BOX 7724 CORONA DEL MAR HIGH NEWPORT BEACH, CA 92658 SCHOOL 10,300. TO SUPPORT ACADEMIC USC VITERBI SCHOOL OF ENGINEERING 501(C)3 3551 TROUSDALE PARKWAY, STE 160 ENDEAVORS OF THE LOS ANGELES, CA 90089 UNIVERSITY 3 000. SEMPER FI FUND 501(C)3 TO SUPPORT INJURED SERVICE MEMBERS AND 825 COLLEGE BLVD, STE 102, PMB 609 5 000 OCEANSIDE CA 92057 THEIR FAMILIES ▶ 3a 22,200, Total b Approved for future payment NONE **▶** 3b Total

323811 10-10-13 Form 990-PF (2013)
\*\* SEE PURPOSE OF GRANT CONTINUATIONS

(b) Amount	Excluded to (c) Exclusion code	y section 512, 513, or 514 (d) Amount	(e) Related or exemply function income
	sion		
	1 1		
	+ +		
	+		
	<del>                                     </del>		
	1 1		
	+		
	+ +		
	+		<del></del>
0.		0.	
	<del>,</del>	13	
_			

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).
323621	Form <b>990-PF</b> (20

323822

**Paid** 

**Preparer** 

**Use Only** 

Preparer's signature

CANYON

926

CA

Form **990-PF** (2013)

P00066920

Firm's EIN ▶ 95-3288054

Phone no. (949)910-2727

Check [

self- employed

Print/Type preparer's name

C.P.A., M.S.T.

CHERYL J. SCHAFFER

Firm's name ► WRIGHT FORD

Firm's address ► 16140 SAND

IRVINE,

### 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.gov/form990.

OMB No 1545-0047

**2013** 

Name of the organizat	Employer identification numbe						
	JIKES FOUNDATION	26-4226214					
Organization type (chec	ck one):						
Filers of:	Section:						
Form 990 or 990-EZ	501(c)( ) (enter number) organization						
	4947(a)(1) nonexempt charitable trust not treated as a private foundation						
	527 political organization						
Form 990-PF	X 501(c)(3) exempt private foundation						
	4947(a)(1) nonexempt charitable trust treated as a private foundation						
	501(c)(3) taxable private foundation						
	ation filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in n Implete Parts I and II	noney or property) from any one					
Special Rules							
509(a)(1) and 1	01(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the re 70(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II.	•					
For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals Complete Parts I, II, and III.							
contributions for If this box is ch purpose. Do no	01(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 lecked, enter here the total contributions that were received during the year for an exclusive of complete any of the parts unless the General Rule applies to this organization because table, etc., contributions of \$5,000 or more during the year	otal to more than \$1,000. vely religious, charitable, etc.					
	on that is not covered by the General Rule and/or the Special Rules does not file Schedule on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its F						

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule 8 (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

<b>JIKES</b>	FOUN	DAT	ľ	ON
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26-4226214

Part I	Contributors (see instructions). Use duplicate copies of Part I if	additional space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	STEVE SELLINGER  21 BEACON BAY  NEWPORT BEACH, CA 92660	\$57,281.	Person X Payroll
(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

### JIKES FOUNDATION

26-4226214

ÔTVED	FOUNDATION	20	4220214
Part II	Noncash Property (see instructions). Use duplicate copies of Pa	rt II if additional space is needed.	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(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
		<b></b>	
(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
		**************************************	00 000.E7 or 000.BE) /2012)

me of organiza	tuon		Employer (dentification number		
IKES FO	OUNDATION Exclusively religious, charitable, etc., indiv	vidual contributions to section 501(c)(	7), (8), or (10) organizations that total more than \$1,000 for the scompleting Part III, enter		
t	rear. Complete columns (a) through (e) and to the total of exclusively religious, charitable, et Use duplicate copies of Part III if addition	c., contributions of <b>\$1,000 or less</b> for t	is completing Part III, enter the year. (Enter this information once )		
a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
		(e) Transfer of gift			
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee		
a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
	Transferee's name, address, a	(e) Transfer of gift	Relationship of transferor to transferee		
a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
	(e) Transfer o		gift  Relationship of transferor to transferee		
I) No.	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
	(e) Transfer of gift				
	Transferee's name, address, a	110 AIF T T	Relationship of transferor to transferee		

FORM 990-PF	TAXES		STATEMENT 1		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
FRANCHISE TAX BOARD	67.	0.	0.	0.	
TO FORM 990-PF, PG 1, LN 18	67.	0.	0.	0.	
FORM 990-PF	OTHER E	XPENSES	Sī	CATEMENT 2	
	(A) EXPENSES	(B) NET INVEST-	(C) ADJUSTED	(D) CHARITABLE	
FORM 990-PF DESCRIPTION	(A)	(B) NET INVEST- MENT INCOME	(C)	(D) CHARITABLE PURPOSES	
	(A) EXPENSES	(B) NET INVEST- MENT INCOME	(C) ADJUSTED	(D) CHARITABLE	

Form 8868 (Rev 1-2014)						Page 2	
If you are filing for an Additional (Not Automatic) 3-Month E	xtension,	complete only Part II and check this	s box		<b></b>	X	
Note. Only complete Part II if you have already been granted an	automatic	3-month extension on a previously f	iled Form	8868.			
<ul> <li>If you are filing for an Automatic 3-Month Extension, compl</li> </ul>							
Part II Additional (Not Automatic) 3-Month	<u>Extensio</u>	n of Time. Only file the origin	ıal (no c	opies ne	eeded).		
		Enter filer's	identifyir	<u>ıg numbe</u>	r, see ins	tructions	
Type or Name of exempt organization or other filer, see instr	ructions		Employer identification number (EIN) or				
print							
File by the JIKES FOUNDATION			26-4226214				
due date for filing your return See 21 BEACON BAY	Our Old DEACON DAY		Social security number (SSN)				
Instructions City, town or post office, state, and ZIP code. For a	foreign add	dress, see instructions.					
NEWPORT BEACH, CA 92660							
Enter the Return code for the return that this application is for (f	ile a separa	ate application for each return)				0 4	
Application	Return	Application				Return	
ls For	Code	Is For				Code	
Form 990 or Form 990-EZ	01	† · · · · · · · · · · · · · · · · · · ·	5101				
Form 990·BL	02	Form 1041-A				08	
Form 4720 (individual)		Form 4720 (other than individual)	n 4720 (other than individual)			09	
Form 990-PF		Form 5227				10	
Form 990-T (sec_401(a) or 408(a) trust)		Form 6069				11	
Form 990-T (trust other than above)		Form 8870			12		
STOP! Do not complete Part II if you were not already grante		matic 3-month extension on a prev	iously file	d Form 8	868.		
STEVE SELLINGE							
• The books are in the care of ▶ 21 BEACON BAY	_ NEW		60				
Telephone No ▶ <u>(562) 997-9465</u>		Fax No. 🕨			_		
If the organization does not have an office or place of busine							
If this is for a Group Return, enter the organization's four digital to the control of the		· · · · · · · · · · · · · · · · · · ·			-		
box If it is for part of the group, check this box		ach a list with the names and EINs of	all memb	ers the ex	tension is	tor	
	NOVEM	BER 15, 2014.	_				
<ul> <li>For calendar year 2013, or other tax year beginning</li> <li>If the tax year entered in line 5 is for less than 12 months,</li> </ul>	ob o els rocc	, and endin					
Change in accounting period  State in detail why you need the extension							
ADDITIONAL TIME IS NEEDED TO GATHER THE INFORMATION NECESSARY TO FILE A						T.E. A	
COMPLETE AND ACCURATE RETURN.							
		<del></del>					
8a If this application is for Forms 990-BL, 990-PF, 990-T, 472	0, or 6069,	enter the tentative tax, less any					
nonrefundable credits. See instructions.			8a	\$		0.	
b If this application is for Forms 990-PF, 990-T, 4720, or 606	69, enter an	y refundable credits and estimated		_			
tax payments made. Include any prior year overpayment a	ayment allowed as a credit and any amount paid			j			
previously with Form 8868			8b	\$		0.	
C Balance due. Subtract line 8b from line 8a Include your p	payment wi	th this form, if required, by using		l			
EFTPS (Electronic Federal Tax Payment System). See inst			8c_	\$		0.	
		st be completed for Part II o	-				
Under penalties of perjury, I declare that I have examined this form, incluit is true, correct, and complete, and that I am authorized to prepare this	iding accom form.	panying schedules and statements, and to	o the best o	f my knowl	ledge and b	elief,	
Signature Title	PRESI	DENT	Date	•			
					n <b>8868</b> (Re	ev. 1-2014)	
				1 011	•••• (110	2014)	

323842 12-31-13