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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.
ormation about Form 990-PF and its separate instructions is at www.irs.gov/form

Department of the Treasury

OMB No 1545-0052

_		Revenue Service Finformation about Form		/04 , 2013			06/30. 20 1 4
-		of foundation		, _ , ,	, 2.12 07.2	A Employer Identif	
	IHERB CHARITABLE FOUNDATION					46-434925	9
_		per and street (or P O box number if mail is not delivered	to street address)		Room/suite		er (see instructions)
			(95	61) 616-3600			
	178	25 INDIAN STREET	,,,,	,			
_		or town, state or province, country, and ZIP or foreign pos					
	•					C If exemption application pending, check here	ation is
	MOR	ENO VALLEY, CA 92551				pending, check here	· · · · · · · · · ·
ē		eck all that apply X Initial return	Initial return o	of a former r	ublic chari	tv	
٠	Cile	Final return	Amended ret	•	Jubile Chari		
		Address change	Name change			2 Foreign organiza 85% test, check	nere and attach
	Chr	eck type of organization X Section 501(computation •	
7					tion		n status was terminated
T	Section 4947(a)(1) nonexempt charitable trust		Other taxable pri			under section 507(t	o)(1)(A), check here .
•			unting method X Ca	asn Acc	ruai		in a 60-month termination
			ther (specify) column (d) must be on			under section 507(b)(1)(B), check here .
			Column (a) must be on	Casii basis.)			(d) Disbursements
L	art	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d)	(a) Revenue and	(b) Net inve	estment	(c) Adjusted net	for charitable
		may not necessarily equal the amounts in	expenses per books	incon	ne	ıncome	purposes
_	1	column (a) (see instructions))		2001 1			(cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)	650,615.	ATCH 1			
	2	Check ▶ attach Sch B					
	3	Interest on savings and temporary cash investments					
	4	Dividends and interest from securities					
	5 a	Gross rents					<u></u>
	1	Net rental income or (loss)			<u> </u>	·····	
9	6a b	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all					
Revenue	"	assets on line 6a					
á	7	Capital gain net income (from Part IV, line 2).			\rightarrow		
T	8	Net short-term capital gain			_/_	Ano.	
2015	9 10 a	Income modifications · · · · · · · · · · · · · · · · · · ·			12/		
00		and allowances · · · ·				120	
83	1	Less Cost of goods sold .	· · · · · · · · · · · · · · · · · · ·		/ 	MAY 2 55	
		Gross profit or (loss) (attach schedule)	-	 ,		26:7	r./
MAY	11	Other income (attach schedule)	650,615.		 O d\$	1700	
	12	Total. Add lines 1 through 11	030,013.			4-21-4-	\
	13	Compensation of officers, directors, trustees, etc				17.	/
Z 8	14	Other employee salaries and wages					
	15	Pension plans, employee benefits			+		
	16 a	Legal fees (attach schedule)					
ם פ	b	Accounting fees (attach schedule)	80,000.				80,000
Administrative	C	, , , , , , , , , , , , , , , , , , , ,	00,000.				00,000
÷	17	Interest			+		
<u> </u>	18	Taxes (attach schedule) (see instructions)			-		
Ę	19	Depreciation (attach schedule) and depletion.			-		
		Occupancy	4,330.		+		4,330
2	21	Travel, conferences, and meetings	4,330.				4,550
ğ	22	Printing and publications	700			·········	700
Operating and	23	Other expenses (attach schedule) ATCH .3 .	700.				700
2	24	Total operating and administrative expenses.	05 020				85,030
ć		Add lines 13 through 23	85,030.		-		565,585
	25	Contributions, gifts, grants paid	565,585.				650,615
-	26	Total expenses and disbursements Add lines 24 and 25	650,615.				630,613
	27	Subtract line 26 from line 12	_				
		Excess of revenue over expenses and disbursements	0		0		
		Net investment income (if negative, enter -0-)			٧	······································	
	1 0	: Adjusted net income (if negative, enter -0-)	i		l l		

JSA For Paperwork Reduction Act Notice, see instructions.

*ATCH 2

Form 990-PF (2013)

Pai	a fi	Attached schedules and amounts in the description column should be for end-of-	Beginning of year	End	l of year
Г а.		amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
•	1 C	Cash - non-interest-bearing			
		Savings and temporary cash investments			
		Accounts receivable			
	L	Less allowance for doubtful accounts ▶			
- .		Pledges receivable			
	· .	Less allowance for doubtful accounts ▶	[
		Grants receivable			
- 1					
		Receivables due from officers, directors, trustees, and ot		1	
		disqualified persons (attach schedule) (see instructions)			
- 1		Other notes and loans receivable (attach schedule)			
		Less allowance for doubtful accounts ▶			
ssets		Inventories for sale or use			
		Prepaid expenses and deferred charges			
4 1		Investments - U.S. and state government obligations (attach schedule)			
	b Ir	Investments - corporate stock (attach schedule)	• • •		
١.	c Ir	investments - corporate bonds (attach schedule)			
1	1 Ir a L	Investments - land, buildings, and equipment basis Less accumulated depreciation (attach schedule)			
	(a	(attach schedule)			
1		Investments - mortgage loans			
1	3 ir 4 L	Investments - other (attach schedule)	• •		
⊢,					į
ŀ	(8	equipment basis Less accumulated depreciation (attach schedule)			
1	5 C	Other assets (describe	_)		
1		Total assets (to be completed by all filers - see			
\bot	ır	instructions Also, see page 1, item l)		0	<u>o</u> o
1	7 A	Accounts payable and accrued expenses			
1	8 0	Grants payable			_
တ္က 1	9 [Deferred revenue			
∄ 2	0 L	Loans from officers, directors, trustees, and other disqualified persons			
Liabilities 7 2 2	1 N	Mortgages and other notes payable (attach schedule)			
تا ₂	2 (Other liabilities (describe	•		
2	3 T	Total liabilities (add lines 17 through 22)		0	o o
\top		Foundations that follow SFAS 117, check here			7
		and complete lines 24 through 26 and lines 30 and			
<u>ق</u> 2		Unrestricted			
alances			i i		7
B 2	5 I	Temporarily restricted	• •		7
Assets or Fund B	6 F	Permanently restricted	·xi		7
교	, r	Foundations that do not follow SFAS 117, ▶ check here and complete lines 27 through 31.			
ŏ		•			1
St.		Capital stock, trust principal, or current funds			╡
SSe 2		Paid-in or capital surplus, or land, bldg, and equipment fund			┦
¥ 2		Retained earnings, accumulated income, endowment, or other funds		0	긓
Net 3		Total net assets or fund balances (see instructions)		<u> </u>	- 4
_ 3		Total liabilities and net assets/fund balances			٦
	11	instructions)		<u> </u>	ч
		Analysis of Changes in Net Assets or Fu			
		l net assets or fund balances at beginning of year -		l l	
		of-year figure reported on prior year's return)			
2	Enter	er amount from Part I, line 27a	. , . ,		
3	Othe				
		lines 1, 2, and 3			
_	_	reases not included in line 2 (itemize) ▶		5	: I
Ð	Decr	I net assets or fund balances at end of year (line 4 m			

Page 3

(a) List and	and Losses for Tax on Inv d describe the kind(s) of property sold rick warehouse, or common stock, 200	(e g , real estate,	(b) How acquired P - Purchase D - Donation		(d) Date sold (mo , day, yr)
а			1		ļ
<u>b</u>			 		
<u>C</u>					
<u>d</u>			-		
e		1.00-1		L	Ł
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) min	
a			+		
<u>b</u>		 	 		
c d					
e			†		
 	showing gain in column (h) and own	ed by the foundation on 12/31/69		Gains (Col. (h) g	iain minus
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	col	(k), but not less Losses (from co	than -0-) or
a					
b			1		
C					
d					
е					
Capital gain net income or		f gain, also enter in Part I, line 7 f (loss), enter -0- in Part I, line 7	2		
Net short-term capital gair	، n or (loss) as defined in sections 1		'		
	rt I, line 8, column (c) (see ins		ıl l		
			3		
	Under Section 4940(e) for Re		Income		
	the section 4942 tax on the distr		base perio	d?	Yes N
	not qualify under section 4940(e)		an any ant		
(a)	ount in each column for each yea		ig any enti	(d)	
Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of nonchantable-use assets		Distribution i (col (b) divided b	
2012					
2011			 		
2010					
2009	 	 	 		
2008		<u>.l</u>	+	 	
• • • • • • • • • • • • • • • • • • •					
2 Total of line 1, column (d) for the 5-year base period - divid		. 2		
-	-				
number of years the foun	idation has been in existence if les	ss than 5 years	· 3		
Enter the net value of no	ncharitable-use assets for 2013 fi	rom Part X, line 5	4		
Multiply line 4 by line 3			. 5		
5 Enter 1% of net investme	ent income (1% of Part I, line 27b)		. 6		
7 Add lines 5 and 6			. 7		
8 Enter qualifying distribution of the street of the stree	ons from Part XII, line 4	c in Part VI, line 1b, and complete	8 that part	using a 1% ta	ax rate See t

Form	990-PF (2013) IHERB CHARITABLE FOUNDATION 46-434			age 4
Par	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	instru	ctions	<u>s)</u>
1 a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1)			
•	Date of ruling or determination letter (attach copy of letter if necessary - see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			0
	here and enter 1% of Part I, line 27b			
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of $\mathcal J$			
	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			
3	Add lines 1 and 2			0
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0		-	
6	Credits/Payments			
	2013 estimated tax payments and 2012 overpayment credited to 2013 6a			
	Exempt foreign organizations - tax withheld at source			
	Tax paid with application for extension of time to file (Form 8868).			
	Backup withholding erroneously withheld 6d			0
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			0
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			
10 11	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
	t VII-A Statements Regarding Activities			
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate	П	Yes	No
ıa	or intervene in any political campaign?	1a		X
.	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the	'		
b	definition)?	1ь		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or			
	distributed by the foundation in connection with the activities	1 1		
c	Did the foundation file Form 1120-POL for this year?	1c		Х
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation ►\$ (2) On foundation managers ►\$	1 1		
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on			
	foundation managers ▶\$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		Х
	If "Yes," attach a detailed description of the activities			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation,			
	or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
4 a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		 ,,
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
	If "Yes," attach the statement required by General Instruction T			İ
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either	i !		
	By language in the governing instrument, or			ŀ
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict		х	
	with the state law 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," complete Part II, col (c), and Part XV	7		
8 a	Enter the states to which the foundation reports or with which it is registered (see instructions)			1
_	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)	8ь	Х	
_	of each state as required by General Instruction G ² If "No," attach explanation	100	 -	\vdash
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			ļ
	4942(j)(5) for calendar year 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? If "Yes," complete	9		x
	Part XIV	<u> </u>		
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and	10	х	
	addresses	Form 99	90-PF	(2013

Pai	t VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
•	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		<u>X</u>
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified	İ		
	person had advisory privileges? If "Yes," attach statement (see instructions)	12		<u> X</u>
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address ►N/A			
14	The books are in care of ►ALLEN EDGAR Located at ►17825 INDIAN STREET MORENO VALLEY, CA Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	<u> 401</u>	<u> </u>	
	Located at ▶17825 INDIAN STREET MORENO VALLEY, CA ZIP+4 ▶ 92551	-		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		. >	
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2013, did the foundation have an interest in or a signature or other authority		Yes	No
		16		<u>X</u>
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1. If "Yes," enter the name of			
	the foreign country			
Par	tVII-B Statements Regarding Activities for Which Form 4720 May Be Required	1	V	
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	NO
1 a	During the year did the foundation (either directly or indirectly) (1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No			
	(1, 2, 3, 3, 4, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?			
	and a sum of the sum o			
	T V			
	., , , , , , , , , , , , , , , , , , ,			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? Yes X No			
	the benefit or use of a disqualified person)? Yes No (6) Agree to pay money or property to a government official? (Exception. Check "No" if the			
	foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days)			
1	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
-	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		X
	Organizations relying on a current notice regarding disaster assistance check here			
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
	were not corrected before the first day of the tax year beginning in 2013?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
a	At the end of tax year 2013, did the foundation have any undistributed income (lines 6d and			
	6e, Part XIII) for tax year(s) beginning before 2013?			
	If "Yes," list the years ▶			
t	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer "No" and attach statement - see instructions)	2b		
ď	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	<u> </u>			
3 a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year			
ı	If "Yes," did it have excess business holdings in 2013 as a result of (1) any purchase by the foundation or			
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the			
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the			
	foundation had excess business holdings in 2013)	3b		
Α.	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		Х
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			
•	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2013?	4b		Х
			0-PF	(2013)

NONE ______

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Total number of other employees paid over \$50,000

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

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6

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

Forr	n 990-PF (2013)				Page 9
Pa	rt XIII Undistributed Income (see instruc	ctions)			
		(a)	(b)	(c)	(d)
1	Distributable amount for 2013 from Part XI,	Corpus	Years prior to 2012	2012	2013
	line 7				
2	Undistributed income, if any, as of the end of 2013				
	Enter amount for 2012 only				
b	Total for pnor years 20,2020				
3	Excess distributions carryover, if any, to 2013				
а	From 2008				
b	From 2009				
	From 2010				
d	From 2011		}		
е	From 2012				
f	Total of lines 3a through e				
	Qualifying distributions for 2013 from Part XII,				
	line 4 ▶ \$				
а	Applied to 2012, but not more than line 2a				
	Applied to undistributed income of prior years				
	(Election required - see instructions)				
С	Treated as distributions out of corpus (Election required - see instructions)				
d	Applied to 2013 distributable amount				
е	Remaining amount distributed out of corpus				
5					
	(If an amount appears in column (d), the same amount must be shown in column (a))				
6	Enter the net total of each column as				
	indicated below:				
a	Corpus Add lines 3f, 4c, and 4e Subtract line 5				
b	Prior years' undistributed income Subtract				
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)		!	II.	
	tax has been previously assessed				
d	Subtract line 6c from line 6b Taxable				
_	amount - see instructions				
·	4a from line 2a Taxable amount - see				
	instructions				
f	Undistributed income for 2013 Subtract lines				
	4d and 5 from line 1 This amount must be				
_	distributed in 2014				
7	Amounts treated as distributions out of corpus to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (see instructions)				
8	Excess distributions carryover from 2008 not applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2014.				
٠	Subtract lines 7 and 8 from line 6a				
10	Analysis of line 9				
	Excess from 2009				
	Excess from 2010				
	Excess from 2011				
	Excess from 2012				
	Excess from 2013				

Form 990-PF (2013)

Рa	rt XIV Private Op	erating Foundations	s (see instructions a	nd Part VII-A, questi	on 9)		NOT F	APPLICABLE
1 a	If the foundation has				<u> </u>			
•	foundation, and the ruling	g is effective for 2013, e	nter the date of the ruling		•			
b	Check box to indicate wh	ether the foundation is a	private operating found	dation described in section		4942(j)	(3) or	4942(j)(5)
2 a	Enter the lesser of the ad-	Tax year		Prior 3 years				e) Total
	justed net income from Part	(a) 2013	(b) 2012	(c) 2011	(d) 20	010	.,,	
	I or the minimum investment return from Part X for each							
	year listed							
	85% of line 2a							
С	Qualifying distributions from Part XII line 4 for each year listed							
d	Amounts included in line 2c not							
	used directly for active conduct							
е	of exempt activities							
	directly for active conduct of							
	exempt activities Subtract line 2d from line 2c							
3	Complete 3a, b, or c for the							
а	"Assets" alternative test - enter							
_	(1) Value of all assets							
	(2) Value of assets qualifying							
	under section 4942(j)(3)(B)(i)							
þ	'Endowment" alternative test-							
	enter 2/3 of minimum invest-		•					
	ment return shown in Part X. line 8 for each year listed							
С	"Support" alternative test - enter							
	(1) Total support other than							
	gross investment income (interest, dividends, rents,							
	payments on secunties]			
	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 sup-							
	port from an exempt organization							
	(4) Gross investment income.							
Pa			Complete this par	t only if the found	lation had	\$5,000	or mor	e in assets
4		during the year - s						
1	Information Regardin List any managers of	•		ro than 2% of the tota	al contributi	one receiv	ad by th	e foundation
a	before the close of any	tax year (but only if the	ney have contributed in or	more than \$5,000) (Se	ee section 5	07(d)(2))	ed by in	e roundation
	N/A		•					
	List any managers of	the foundation who	own 10% or more o	of the stock of a corp	oration (or	an equally	large p	ortion of the
_	ownership of a partner						g- p	
	, ,			•				
	N/A							
2	Information Regardin	g Contribution, Grant	, Gift, Loan, Scholars	hip, etc., Programs:				
	Check here ► X if t	he foundation only	makes contributions	to preselected char	table organ	nizations a	nd does	not accept
	unsolicited requests for	or funds If the found	ation makes gifts, gr	ants, etc (see instruc	tions) to inc	dividuals of	r organiz	ations under
	other conditions, comp				•		_	
a	The name, address, a	nd telephone number	or e-mail address of	the person to whom ap	plications sh	ould be add	Iressed	
	The form in which are	lications should be	hmittad and informati	on and materials their	should isolic	de		
D	The form in which app	ncations should be SU	omited and informati	on and materials mey	anoulu IIICIU	45		
	Any submission deadle	ines:						
Ŭ	, capinionion acadi							
d	Any restrictions or li	mitations on awards	, such as by geogr	aphical areas, charita	ble fields,	kınds of ır	nstitution	s, or other
	factors							

JSA 3E1490 1 000

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Part XV Supplementary Information (continued)							
3 Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, show any relationship to any foundation manager or substantial contributor Purpose of grant or contribution Amount Name and address (home or business) Amount							
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount			
Name and address (home or business)	or substantial contributor	recipient	contribution				
a Paid during the year							
7.500.5							
ATCH 5							
		1					
Total			▶ 3a	565,585.			
b Approved for future payment							
		1					
		į					
		1					
Total							
	<u> </u>	<u> </u>					

Page **12**

Part XVI-A Analysis of Income	·				1
nter gross amounts unless otherwise indi	(a)	ated business income (b)	(c)	y section 512, 513, or 514 (d)	(e) Related or exempt function income
Program service revenue	Business code	Amount	Exclusion code	Amount	(See instructions)
a					
ь c					
cd					
e					
f					
g Fees and contracts from government a	agencies				
Membership dues and assessments					
Interest on savings and temporary cash inves					
Dividends and interest from securities			_		
Net rental income or (loss) from real es					
a Debt-financed property	• • • • • • • • • • • • • • • • • • • •		-		
 Not debt-financed property Net rental income or (loss) from personal pro 					
Other investment income					
Gain or (loss) from sales of assets other than			1		
Net income or (loss) from special event	•				
Gross profit or (loss) from sales of inver	· ·				
Other revenue a	-				
b					
c					
d					
e					
Total. Add line 12, columns (b), (d), and e worksheet in line 13 instructions to vart XVI-B Relationship of Ad	ed (e)	complishment of E	xempt Purp	oses	
Total. Add line 12, columns (b), (d), and the worksheet in line 13 instructions to vart XVI-B Relationship of Add	d (e)	complishment of E	xempt Purp	oses e) of Part XVI-A contrib	uted importantly to
Total. Add line 12, columns (b), (d), and the worksheet in line 13 instructions to vart XVI-B Relationship of Additional Relation	d (e)	complishment of E	xempt Purp	oses e) of Part XVI-A contrib	uted importantly to
Total. Add line 12, columns (b), (d), and the worksheet in line 13 instructions to vart XVI-B Relationship of Additional Relation	d (e)	complishment of E	xempt Purp	oses e) of Part XVI-A contrib	uted importantly to
Total. Add line 12, columns (b), (d), and e worksheet in line 13 instructions to vart XVI-B Relationship of Adne No. Explain below how each	d (e)	complishment of E	xempt Purp	oses e) of Part XVI-A contrib	uted importantly to
Total. Add line 12, columns (b), (d), and e worksheet in line 13 instructions to vart XVI-B Relationship of Adne No. Explain below how each	d (e)	complishment of E	xempt Purp	oses e) of Part XVI-A contrib	uted importantly to
Total. Add line 12, columns (b), (d), and e worksheet in line 13 instructions to vart XVI-B Relationship of Additional Relationsh	d (e)	complishment of E	xempt Purp	oses e) of Part XVI-A contrib	uted importantly to
Total. Add line 12, columns (b), (d), and e worksheet in line 13 instructions to vart XVI-B Relationship of Additional Relationsh	d (e)	complishment of E	xempt Purp	oses e) of Part XVI-A contrib	uted importantly to
Total. Add line 12, columns (b), (d), and e worksheet in line 13 instructions to vart XVI-B Relationship of Additional Relationsh	d (e)	complishment of E	xempt Purp	oses e) of Part XVI-A contrib	uted importantly to
Total. Add line 12, columns (b), (d), and e worksheet in line 13 instructions to vart XVI-B Relationship of Additional Relationsh	d (e)	complishment of E	xempt Purp	oses e) of Part XVI-A contrib	uted importantly to
Total. Add line 12, columns (b), (d), and e worksheet in line 13 instructions to vart XVI-B Relationship of Additional Relationsh	d (e)	complishment of E	xempt Purp	oses e) of Part XVI-A contrib	uted importantly to
Total. Add line 12, columns (b), (d), and e worksheet in line 13 instructions to vart XVI-B Relationship of Additional Relationsh	d (e)	complishment of E	xempt Purp	oses e) of Part XVI-A contrib	uted importantly to
Total. Add line 12, columns (b), (d), and e worksheet in line 13 instructions to vart XVI-B Relationship of Address Relationsh	d (e)	complishment of E	xempt Purp	oses e) of Part XVI-A contrib	uted importantly to
Total. Add line 12, columns (b), (d), and e worksheet in line 13 instructions to virt XVI-B Relationship of Additional Relationsh	d (e)	complishment of E	xempt Purp	oses e) of Part XVI-A contrib	uted importantly to
Total. Add line 12, columns (b), (d), and e worksheet in line 13 instructions to vart XVI-B Relationship of Address Relationsh	d (e)	complishment of E	xempt Purp	oses e) of Part XVI-A contrib	uted importantly to
Total. Add line 12, columns (b), (d), and e worksheet in line 13 instructions to vart XVI-B Relationship of Additional Relationsh	d (e)	complishment of E	xempt Purp	oses e) of Part XVI-A contrib	uted importantly to
Total. Add line 12, columns (b), (d), and e worksheet in line 13 instructions to vart XVI-B Relationship of Additional Relationsh	d (e)	complishment of E	xempt Purp	oses e) of Part XVI-A contrib	uted importantly to
Total. Add line 12, columns (b), (d), and e worksheet in line 13 instructions to vart XVI-B Relationship of Adne No. Explain below how each	d (e)	complishment of E	xempt Purp	oses e) of Part XVI-A contrib	uted importantly to
Total. Add line 12, columns (b), (d), and e worksheet in line 13 instructions to vart XVI-B Relationship of Adne No. Explain below how each	d (e)	complishment of E	xempt Purp	oses e) of Part XVI-A contrib	uted importantly to
Total. Add line 12, columns (b), (d), and e worksheet in line 13 instructions to vart XVI-B Relationship of Additional Relationsh	d (e)	complishment of E	xempt Purp	oses e) of Part XVI-A contrib	uted importantly to
Total. Add line 12, columns (b), (d), and the worksheet in line 13 instructions to vart XVI-B Relationship of Additional Relation	d (e)	complishment of E	xempt Purp	oses e) of Part XVI-A contrib	uted importantly to
ine No. Explain below how each	d (e)	complishment of E	xempt Purp	oses e) of Part XVI-A contrib	uted importantly to

Form	990-PF (20	13)	IHERB	CHARITABLE	FOUNDATION		4 6	5-4349	259	Pa	age 13
Pai	rt XVII	Information Re Exempt Organ		Transfers To	and Transact	ions and Relat	ionships With	None	chari	table	е
4		organization direct	-	•	•	-	•			Yes	No
	in section organization	on 501(c) of the Co ations?	de (other th	nan section 501	(c)(3) organization	s) or in section 52	27, relating to po	olitical	:		
а	Transfe	rs from the reportin	g foundatio	n to a noncharit	able exempt orgar	ization of					
	(1) Cash	١							1a(1)		Х
		er assets							1a(2)		Х
b	Other tr										
	(1) Sale	s of assets to a no	ncharitable	exempt organiza	tion		<i></i>		1b(1)		Х
	(2) Purc	hases of assets fro	m a nonch	arıtable exempt d	organization				1b(2)		Х
		tal of facilities, equi							1b(3)		Х
		nbursement arrange							1b(4)		Х
	(5) Loai	ns or loan guarantee	s						1b(5)		Х
		ormance of service									Х
С		of facilities, equipm									Х
d	If the a	nswer to any of the the goods, other	e above is	"Yes," complete	e the following so	chedule Column ((b) should alway	s show	the 1		
		any transaction or									
(a) L	ine no	(b) Amount involved		e of noncharitable ex		1	ransfers, transactions,				
		N/A	· · · · · ·			N/A					
									••		

	• • • • • • • • • • • • • • • • • • • •		1 ***/	* * *	
			-		
				•	
d	•	r indirectly affiliated with, of the Code (other than sections schedule		· -	
	(a) Name of organization		ype of organization	(c) Desc	cription of relationship
			,		
	Under penalties of perjury, I declar	e that I have examined this return, inc	cluding accompanying schedules	s and statements, and to the be	est of my knowledge and belief, it is true,
Sign	X WIN	<i></i>	5-15	CFO	May the IRS discuss this return with the preparer shown below
Here	Signature of officer or trustee	Date	Title		(see instructions)? X Yes No
Paid	Print/Type preparer's nan	1/0.1	gnature /	Date	Check PTIN
- 414	CARL DIDRIKSON		Nul XX	<i>בווכו</i> ב ו	self-employed P01072811

Form **990-PF** (2013)

Firm's EIN ▶ 13-5381590

Phone no

714-957-3200

92626

Preparer

Use Only

Firm's address ▶ 3200 BRISTOL ST., 4TH FLOOR COSTA MESA, CA

▶ BDO USA, LLP

Firm's name

Schedule B

(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service

Name of the organization

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

Employer identification number

IHERB CHARITABLE FOU	JNDATION	46-4349259
Organization type (check one	9)	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private for	oundation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private found	ation
	501(c)(3) taxable private foundation	
	n filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 one contributor. Complete Parts I and II) or more (in money or
Special Rules		
under sections 509	c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3 % support (a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during to 5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form III	the year, a contribution of
during the year, tot	c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from all contributions of more than \$1,000 for use <i>exclusively</i> for religious, charifuses, or the prevention of cruelty to children or animals. Complete Parts I,	table, scientific, literary,
during the year, co not total to more th year for an exclusiv applies to this orga	c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from ntributions for use <i>exclusively</i> for religious, charitable, etc., purposes, but then \$1,000 of this box is checked, enter here the total contributions that we rely religious, charitable, etc., purpose Do not complete any of the parts unlianization because it received <i>nonexclusively</i> religious, charitable, etc., contributions.	hese contributions did ere received during the less the General Rule butions of \$5,000 or
990-EZ, or 990-PF), but it mu	t is not covered by the General Rule and/or the Special Rules does not file ust answer "No" on Part IV, line 2, of its Form 990, or check the box on line to certify that it does not meet the filing requirements of Schedule B (Form 9).	H of its Form 990-EZ or on its
For Panerwork Reduction Act Notice	ce. see the instructions for Form 990, 990-EZ, or 990-PF. Schedul	e B (Form 990, 990-EZ, or 990-PF) (2013)

JSA

3E1251 1 000

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

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PAGE 14

Part I	Contributors (see instructions). Use duplicate copies of Par	t I if additional space is nee	ded
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1-	REZA FRAEE 17825 INDIAN STREET MORENO VALLEY, CA 92551	\$650,615.	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)

JSA

Employer identification number

46-4349259

Part II	Noncash Property (see instructions). Use duplicate copies of Part 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 Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received				
		\$					
							

Schedule B (Form 990, 990-EZ, or 990-PF) (2013) Page 4 Name of organization IHERB CHARITABLE FOUNDATION Employer identification number 46-4349259 Part III Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations that total more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc , contributions of \$1,000 or less for the year (Enter this information once. See instructions) \blacktriangleright \$ Use duplicate copies of Part III if additional space is needed (a) No. from Part (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and 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 (e) Transfer of gift Transferee's name, address, and 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 (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

e)	i ranster of gift	

Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

(c) Use of gift

(d) Description of how gift is held

(a) No. from Part I

(b) Purpose of gift

5/15/2015

ATTACHMENT 1

FOUNDATION	
IHERB CHARITABLE	

	DIRECT PUBLIC SUPPORT	650, 615.
PART I - CONTRIBUTIONS, GIFTS AND GRANTS RECEIVED	DATE	VAR
FORM 990PF, PART I - CONTRIBU	NAME AND ADDRESS	REZA FRAEE 17825 INDIAN STREET MORENO VALLEY, CA 92551

TOTAL CONTRIBUTION AMOUNTS

5/15/2015 12:42:31 PM

ATTACHMENT

FEES	
PROFESSIONAL	
OTHER	
1	
Н	
PART	
990PF,	
FORM	

DESCRIPTION

REVENUE AND EXPENSES PER BOOKS

80,000.

80,000.

TOTALS

NON EMPLOYEE CONSULTING

CHARITABLE PURPOSES

80,000.

80,000.

ATTACHMENT 2 PAGE 19

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FORM 990PF, PART I - OTHER EXPENSES

DESCRIPTION MEALS AND ENTERTAINMENT

REVENUE AND EXPENSES PER BOOKS 700.

TOTALS

CHARITABLE <u>PURPOSES</u> 700.

700.

ATTACHMENT 4

AND TRUSTEES	
DIRECTORS,	
IST OF OFFICERS,	
- LIST OF	
PART VIII -	
990PF, PA	
FORM	

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
REZA FARAEE 17825 INDIAN STREET MORENO VALLEY, CA 92551	CHAIRPERSON 1.00	0	0	0
KENNEITH ROSE 17825 INDIAN STREET MORENO VALLEY, CA 92551	TREASURER 1.00	0	0	0
EIMAN ZABIHI 17825 INDIAN STREET MORENO VALLEY, CA 92551	SECRETARY 1.00	0	0	0
	GRAND TOTALS	0	0	0

ATTACHMENT 5

PAGE 22 ATTACHMENT 5

565, 585

TOTAL CONTRIBUTIONS PAID

INDIA

FEDERAL FOOTNOTES

PART 7-A LINE 10: REZA FRAEE BECAME A SUBSTANTIAL CONTRIBUTOR DURING THE YEAR SEE SCHEDULE B.

_{5....} 8868

(Rev January 2014)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

► File a separate application for each return.
► Information about Form 8868 and its instructions is at www.irs.gov/form8868.

Internal Revenue	Service Information about Form 8	868 and its	nstructions is at www.irs.	.gov/rorm8868.	
	filing for an Automatic 3-Month Extension,				
	filing for an Additional (Not Automatic) 3-M		•	• • •	•
Do not comp	<i>lete Part II unless</i> you have already been gra	inted an au	tomatic 3-month extens	sion on a previously filed	d Form 8868
Electronic fil	ling (e-file). You can electronically file Form	8868 if yo	u need a 3-month auto	omatic extension of time	e to file (6 months for
	required to file Form 990-T), or an additio				
	uest an extension of time to file any of the				
	Fransfers Associated With Certain Persona For more details on the electronic filing of t				
					illes à Noripronis
	tomatic 3-Month Extension of Time. On n required to file Form 990-T and requesting				1-1-
All other core			Co. and trusts must use		ovtonovon of tymo
to file income		iips, KEIVIIC	os, and trusts must use i	•	ng number, see Instructions
to me mcome	Name of exempt organization or other filer, see instructions Employer identification our				
Type or	Traine or exempt organization of other mar, and m	1511 45115115		Employer identification no	amber (Env) or
print	IHERB CHARITABLE FOUNDATION			46-434925	Q.
File by the	Number, street, and room or suite no. If a P.O. box, see instructions Social security number (SS)				
due date for filing your	17825 INDIAN STREET	,		Coolar Sociality Hamison (Co	J.,
return See	City, town or post office, state, and ZIP code Fo	r a foreign ad	dress, see instructions	l	
instructions	MORENO VALLEY, CA 92551				
Enter the Re	turn code for the return that this application	is for (file a	separate application fo	or each return)	0 4
Application		Return	Application		Return
ls For		Code	ls For		Code
Form 990 or	Form 990-EZ	01	Form 990-T (corporat	tion)	07
Form 990-BL	-	02	Form 1041-A		08
Form 4720 (ındıvıdual)	03	Form 4720 (other than individual)		09
Form 990-PF		04	Form 5227		10
Form 990-T	(sec 401(a) or 408(a) trust)	05	Form 6069		11
Form 990-T	(trust other than above)	06	Form 8870		12
Telephone If the orga If this is for the whole a list with the 1	s are in the care of ►ALLEN EDGAR, 178 a No ► _951 999-4011 anization does not have an office or place of or a Group Return, enter the organization's for a group, check this box ►	business in our digit Ground digit Ground for the second for the s	FAX No ▶ 951 616 In the United States, che pup Exemption Number of the group, check to the group, check to the group of the ganization return for the ganization return for the control of the tension of the control	ck this box	If this is and attach bove The extension is and and are and and and and are and and and and and and and and
	undable credits. See instructions application is for Form 990-PF, 990-T,	4720 0	6069 enter any re	efundable credits and	3a \$ 0
	ted tax payments made Include any prior year		· ·		3b \$ O
c Balanc	e due. Subtract line 3b from line 3a Include	your paym			
	onic Federal Tax Payment System) See instru		A) with this Face 0000	00 Form 0452 FO and F	3c \$ 0
	are going to make an electronic funds withdrawa	ai (airect aeb	ii) with this Form 8868, S	ee Form 6403-EU and Form	ii oora-co ioi payment
For Privacy A	ct and Paperwork Reduction Act Notice, see inst	tructions.			Form 8868 (Rev 1-2014)

Form 88	168 (Rev. 1-2014)				Page 2
	ou are filing for an Additional (Not Automatic) 3-M	onth Exten	sion, complete only Part II	and check this box	
	Only complete Part II if you have already been gra				
	ou are filing for an Automatic 3-Month Extension,			, ,	
Part				ınal (no copies needed).	
			Er	nter filer's identifying number, see	instructions
	Name of exempt organization or other filer, see in	nstructions		Employer identification number (El	N) or
Type ·	or				
print	IHERB CHARITABLE FOUNDATION			46-4349259	
File by th	Number, street, and room or suite no. If a P.O. bo	ox, see instruc	ctions	Social security number (SSN)	
due date	e for 17825 INDIAN STREET				
filing you return S	City, town or post office, state, and ZIP code For	r a foreign ad	dress, see instructions		
instruction					
Enter t	the Return code for the return that this application	is for (file a	separate application for ea	nch return)	0 4
Appli	cation	Return	Application	·	Return
Is For		Code	ls For		Code
Form	990 or Form 990-EZ	01	1. 26 学年 1. 产品流量	《大学》,"一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个	
Form 990-BL 02 Form 1041-A			08		
Form 4720 (individual)		03	Form 4720 (other than individual)		09
Form	990-PF	04	Form 5227		10
Form	990-T (sec 401(a) or 408(a) trust)	05	Form 6069		11
Form	990-T (trust other than above)	06	Form 8870		12
STOP!	Do not complete Part II if you were not already	granted ar	automatic 3-month exten	sion on a previously filed Forn	n 8868.
• The	books are in the care of ►ALLEN EDGAR, 178	325 INDI	AN STREET MORENO VA	ALLEY. CA 92551	
	ephone No ▶ 951 999-4011		Fax No ▶ 951 616-:		
• If th	e organization does not have an office or place of	business in	the United States, check th	nis box	▶ 🔲
• If th	is is for a Group Return, enter the organization's fo	ur digit Gro	oup Exemption Number (GEI	N) If thi	s is
for the	whole group, check this box ▶ 🔲 📑	if it is for pa	art of the group, check this t	oox▶ and atta	ach a
list wit	h the names and EINs of all members the extension	n is for			
	request an additional 3-month extension of time u			5/15 , 20 15_	
5 F	or calendar year, or other tax year beginn	ing	12/04 , 20 13 , an	d endi <u>ng 06/30</u> , 2	20 <u>14</u>
6 I	the tax year entered in line 5 is for less than 12 m	nonths, ched	ck reason X Initial ref	turn Final return	
	Change in accounting period				
7 8	State in detail why you need the extension <u>INFOR</u>	RMATION	NECESSARY TO PREPAR	RE A COMPLETE	
A	ND ACCURATE TAX RETURN HAS NOT YET	BEEN R	ECEIVED FROM THIRD	PARTIES.	
_					
	f this application is for Forms 990-BL, 990-PF, 9	90-T, 4720	D, or 6069, enter the tent		
_	onrefundable credits. See instructions			8a \$	0
	this application is for Forms 990-PF, 990-T,		_	15 I	
	stimated tax payments made. Include any pr	or year o	overpayment allowed as	a credit and any	
_	mount paid previously with Form 8868			8b \$	0
	Balance Due. Subtract line 8b from line 8a Include		ent with this form, if require	ed, by using EFTPS	
(Electronic Federal Tax Payment System) See instru			8c \$	0
	Signature and Verification	ation mu	st be completed for P	art II only.	
	penalties of perjury, I declare that I have examined t dge and belief, it is true, correct, and comp <u>le</u> te, and that I			ules and statements, and to the	best of my
	1111-11		· ·		
Signatur			Title ▶ CFO	Date ▶ 5-15	-18
			<u> </u>	5 0000	(D=:: 4 0044)